

memorandum

WM DOCKET CONTROL
CENTER

DATE: SEP 30 1986

REPLY TO: RW-24
ATTN OF:

'86 OCT -3 11:12

SUBJECT: Report of Carl Newton's Participation in SRPO's Audit of Fluor

TO: Jim Knight, RW-24

From August 26-28, 1986, I participated in an audit of Fluor conducted by the Salt Repository Project Office. Attached are some comments of mine on the audit. Also attached are some comments I had on the conduct of the Audit. I would be happy to discuss any of my comments with you.

Carl Newton
Carl Newton
Quality Assurance Manager

cc w/att: Jake Lefman, Battelle

8610220308 860930
PDR WASTE PDR
WM-16

WM Record File 106
WM Project 16
Docket No. _____
PDR
LPDR

Distribution:
SKennedy Delligatti JJL
SBilbarn DHedges RDM
(Return to WM, 623-SS) Ankum Sac

1447

Comments from Carl Newton on the QA Audit of Fluor
August 26 - 28, 1986

1. TRAINING

- a) Training requirements are not really being determined by line management and line managers are not sufficiently involved in the establishment of training objectives and requirements for individual employees. The current practice of having the QA manager establish requirements and then circulate these to the line manager for comment is not sufficient involvement.
- b) The training records now indicate that training has been received by the employees based on a questionnaire sent to them by the QA manager. In some instances there is no documentation that the training has actually been received. There are no files for individual training records which makes retrieval difficult.
- c) People who have not been trained are permitted to continue working on activities important to quality. The training requirements have no "teeth" in them.
- d) Training requirements are not clear in that sometimes portions of a document or procedure ("E" for "excerpt") are identified as being needed, yet the required portions are not identified.

2. Qualification of Personnel

For this project, Fluor has not established requirements for personnel performing activities important to quality, nor have personnel been evaluated to determine their suitability to perform work assigned to them.

Fluor does have corporate requirements for personnel (i.e., engineers must have engineering degrees, etc), but these are not for this project. Also, access to these records would have to be through the Fluor personnel department and such records may be confidential. Fluor does not, as a condition of employment, require potential employees to sign a form permitting release of their qualifications to other parties (such as DOE and NRC).

3. Management Assessments

A management assessment has been performed, however there is no evidence of the involvement of management in taking corrective action and closing out findings. Rather, it appears the QA manager has tracked findings and closed them without management involvement.

4. Document Control

- a) Return of the forms acknowledging receipt of controlled documents is frequently not done by the recipients. A "reminder" notice is supposed to be sent, but also is not sent in a timely fashion. No other action is taken to close out this matter (such as a phone call to the recipient or a note to his supervisor).
- b) No attempt to recover notebooks which may be out of date has been made. In fact, updates continue to be sent indefinitely. This makes it impossible to identify which notebooks are out of date. An effort to correct this is underway.

5. Records

- a) The records system is not capturing all quality records. The master correspondence log has many entries that the document control coordinator's records do not have. It is intended to try to track down missing documents by seeking out the originator, or confirming that the document was never completed/mailed, and thus be able to mark "void" by the document number.
- b) The key word field for identifying records is only 16 characters long, which is too short. Also, the key word is assigned by the originator but there is no approved, acceptable list of key words for him to select from. This will make the retrieval of records difficult especially as time goes on.
- c) The records (20 thousand of them) are being kept on a micro computer with very limited (slow) search capability. Additional data fields (for additional key words, author, recipient, etc) would require a bigger, better computer.
- d) The records system appears primitive and simplistic compared with systems in place by others doing similar work. [It is suggested to Fluor send the record coordinator to Battelle for a briefing on their system

and to Rockwell for a briefing on theirs].

- e) There are no written requirements for microfilming activities or for the microfilm or for the quality of the final product.
- f) There was no evidence of training or of training requirements for the individuals doing the microfilming.
- g) There was no commitment to a national consensus standard for the quality of the film used, the type of equipment used to do the filming, or the qualification and training of the operator.

Comments from Carl Newton on the Conduct of the
Audit of Fluor by SRPO
August 26-28, 1986

1. Pre-audit Team Briefing

The audit team leader did an excellent job briefing the audit team. The role of auditors, technical observers, and the NRC observers was described well. The scope of the audit was explained and the method of the conduct of the audit. The areas to be covered on the first day were agreed upon.

NRC's opinions on the audit plan were solicited and listened to. Many of the NRC comments were good, but the time taken to receive them was extensive.

2. Entrance Meeting

The audit team leader introduced the team and covered the general scope of the audit. Details on what was to be covered was not explained.

Fluor introduced their staff. Top Fluor management was present and exhibited a positive attitude toward the audit. Fluor also presented an overview of their scope of work. The presentation was very short and lacking in detail.

The Fluor QA manager also presented a very brief overview of the Fluor QA program. Once again the presentation was too short and lacking in detail. Especially lacking was a description of the Fluor organization and organizational responsibilities.

3. Conduct of Audit

On the first day the auditors were divided into two teams. Team A, headed by Jake Lefman, examined checklist questions 5, 6, 10, 11, 12 and 13. The two technical observers, Keith Robinette and Jim Berg, accompanied Jake as well as one NRC observer, Craig Walenga. Team B, headed by Clarence Williams, examined checklist questions 1, 2, 3, and 4. Two auditors, Carl Newton and Dennis Anderson, accompanied Clarence as well as one NRC observer, Tilak Verma. A meeting of the audit team was held in the morning, at lunch, and following the day's activities. Areas of concern were discussed and NRC's views solicited. Once again, considerable audit team time was taken listening to NRC's observations. The NRC observers, however, had several good observations. Almost all of NRC's comments were directed at the conduct of the audit, not at

Fluor's QA program.

On the second and third days the auditors were divided into three teams. Team A, headed by Clarence Williams examined checklist questions number 11, 12, 13, 21 and 22. Technical Observer Jim Berg and NRC observer Tilak Verma accompanied Clarence. Team B, headed by Jake Lefman, examined checklist questions number 7, 8, 9, 18, 26, 27 and 28. Technical Observer Keith Robinette and NRC observer Craig Walenga accompanied Jake. Team C, headed by Dennis Anderson, examined checklist questions 14, 15, 16, 17, and 19. Auditor Carl Newton accompanied Dennis.

Audit team meetings were conducted each morning, during lunch, and at the close of each day. NRC's comments were always solicited and patiently listened to.

4. Post Audit Meeting

5. Areas of Potential Improvement

Some areas which could be improved for future audits are:

- a) Perform more planning prior to the audit. Had the audit team members been more familiar with the details of the Fluor procedures, and with the Fluor reports that were examined, a more efficient and thorough audit would have resulted.
- b) Improve and Strengthen details of the Checklist. The checklist could have had more questions, especially in the areas of the technical reports that were examined. Also more questions based on the NRC QA review plan should have been on the checklist.
- c) Checklist Review and Timeliness. The checklist had little review prior to issuance. The checklist was not widely reviewed nor was it furnished to HQ or the NRC observers until the pre-audit team meeting.
- d) Auditing for Effectiveness. More checklist questions concerned with end-products, or looking for specific examples/evidence of system failure should have been included as opposed to the "compliance with procedures" questions that typified the checklist.

- e) Audit Team Composition. More technical specialists in specific disciplines needed might have proved useful, especially if "world-class" experts could be recruited.
- f) NRC Observers. Time taken listening to NRC comments almost impacted on DOE's ability to complete the audit on the assigned schedule. In the future some time limits for NRC comments may need to be set. We were fortunate on this audit to have a strong audit team leader~~f~~; others might have been intimidated or discouraged as some of NRC ~~is~~'s comments were highly critical.
- g) Entrance Meeting. More detail on the scope of the audit should have been provided. Also, a more complete briefing by the auditee on his organization and work products would have been useful.

FOR OCRWM DISTRIBUTION

SUBJECT: C. Newton's Participation in SRPO Audit of Fluor

ADDRESSEE: Jim Knight

OCRWM Distribution:

M. E. Langston, RW-40
H. Steinberg, RW-33

BCC:

D. Siefken, Weston
L. Skoblar, Weston
L. Ibe, Weston
J. Kennedy, NRC

Originator's Chron: Newton
OCRWM CCRU, RW-13 (5)
OGR Reading File
L&R Div. Chron
L&R Div. File # 6510.903.9.2

RW-24:CNewton:KMA:252-5059:typed 9/29/86
PC Code: CN30

CONCURRENCES:

Carl Newton 9/30/86
C. Newton, RW-24