



Department of Energy

Nevada Operations Office

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WBS #1.2.9.3

"QA"

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Technical Project Officer for Yucca Mountain Project
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P.O. Box 98521
Las Vegas, NV 89193-8521

CLOSURE OF STANDARD DEFICIENCY REPORT (SDR) 190, REVISION 0, RESULTING FROM YUCCA MOUNTAIN PROJECT OFFICE QUALITY ASSURANCE AUDIT 88-7 OF REYNOLDS ELECTRICAL & ENGINEERING CO., INC.

SDR 190, Revision 0, has been closed based on satisfactory verification of completed corrective action. A copy of the SDR is enclosed for your files.

If you have any questions, please contact Wendell B. Mansel of my staff at 794-7945, or Stephen P. Hans of Science Applications International Corporation at 794-7165.

Edwin L. Wilmot, Acting Director
Quality Assurance Division
Yucca Mountain Project Office

YMP:WBM-4526

Enclosure:
SDR 190, Revision 0

cc w/encl:

- Ralph Stein, HQ (RW-30) FORS
- Dwight Shelor, HQ (RW-3) FORS
- J. E. Kennedy, NRC, Washington, DC
- M. A. Fox, REECo, Las Vegas, NV
- N. J. Brogan, SAIC, Las Vegas, NV
- L. G. Scherr, SAIC, Las Vegas, NV
- S. W. Zimmerman, NWPO, Carson City, NV

cc w/o encl:

- Stephen Metta, SAIC, Las Vegas, NV
- H. H. Caldwell, SAIC, Las Vegas, NV
- T. W. Noland, W, Las Vegas, NV
- J. W. Gilray, NRC, Las Vegas, NV

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WMPO STANDARD DEFICIENCY REPORT

N-QA-038
3/87

Completed by Originating QA Organization	1 Date		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page 1 of 2		
	3 Discovered During AUDIT 88-7		3a Identified By S. Dana		3b Branch Chief Concurrence Date		
	5 Organization REECO		6 Person(s) Contacted M. Fox		4 SDR No. 190 Rev. 0		
Completed by Organization in Block 5	7 Response Due Date is 20 Working Days from Date of Transmittal						
	8 Requirement (Audit Checklist Reference, if Applicable) (Audit Checklist Item 5-5) REECO NNWSI QA Program Plan, 568-DOC-115, Rev. 5, Section V, "Instructions, Procedures, and Drawings", states in part, "Instructions, procedures, and plans shall include a section which identifies						
	9 Deficiency Contrary to the above requirement, REECO NNWSI Quality Procedures (NQPs) do not identify the QA records generated during implementation of the procedure. The procedures have incorporated a section entitled "QA Records"; however, the						
	10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input checked="" type="checkbox"/> Investigative <input checked="" type="checkbox"/> Corrective 1) Revise applicable NQPs to identify all QA records generated during implementation of the procedures.						
Completed by Organization in Block 5	11 QAE/Lead Auditor Date <i>Steve Dan</i> 7/4/88		12 Branch Manager Date <i>Steve Dan</i> SEP 06 1988		13 Project Quality Mgr. Date <i>Roye Monds</i> 9/9/88		
	14 Remedial/Investigative Action(s) 15 Effective Date _____						
Completed by Organization in Block 5	16 Cause of the Condition & Corrective Action to Prevent Recurrence Recommended Actions (1), (4) 17 Effective Date <u>1 Dec 1988</u> The applicable Quality Procedures and other REECO implementing procedures will be revised to show the QA records generated during implementation of the procedure. All QA records are processed and maintained in accordance with Section XVII of the REECO QAPP. (see attached sheet)						
	18 Signature/Date <i>Monds</i> 11/5/88						
Comp. by Orig. QA Org.	19 Response <input type="checkbox"/> Accept, <input checked="" type="checkbox"/> Amended <input checked="" type="checkbox"/> Reject, <input type="checkbox"/> Response		QAE/Lead Auditor/Date <i>Steve Dan</i> 12/5/88		Branch Manager/Date <i>F. Blum</i> 5/2/88		
	20 Amended Response <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Reject		QAE/Lead Auditor/Date <i>Steve Dan</i> 2/27/89		Branch Manager/Date <i>F. Blum</i> 28 Feb 89		
	21 Verification <input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory		QAE/Lead Auditor/Date <i>Steve Dan</i> 7/89		Branch Manager/Date <i>F. Blum</i> 6/7/89		
	22 Remarks REECO procedures QP-5.1 Rev. 1, QP-5.2 Rev. 1, QP-5.3 Rev. 0, control the writing of Quality procedures, work procedures and implementing procedures. These three procedures all have a "QA Records" section. Further the procedures require that						
23 QA CLOSURE		QAE/Lead Auditor/Date <i>Steve Dan</i>		Branch Manager/Date <i>Steve Dan</i> 6-7-89		PQM/Date <i>James Blum</i> 6/8/89	

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ENCLOSURE



WMPO STANDARD DEFICIENCY REPORT
CONTINUATION SHEET

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8 Requirement (continued)

the QA records which are generated during implementation of the document."

9 Deficiency (continued)

section does not identify the specific QA Records:

10 Recommended Actions (continued)

- 2) Review all other implementing procedures applicable to NNWSI Project activities to determine whether QA records have been identified. If a similar problem as described in Block 8 is found, revise the procedures accordingly.
- 3) After identifying the QA records in items 1 and 2 above, assure that completed QA records are processed and maintained in accordance with the REECo QAPP; Section XVII.
- 4) Instruct appropriate personnel to revised procedural requirements. Provide objective evidence of the reinstruction with response to this SDR.

16 Cause of the Condition & Corrective Action (continued)

Personnel have been instructed as to the procedural requirements.

22 Remarks (continued)

lower-tier procedures conform to a format that includes a QA records section. QPs 1.0 through QP-18.0 at their current revision have been reviewed by the Surveillance Team and found to have a QA records section identifying the QA records generated by implementation of the procedures. Further, a sample of implementing procedures were reviewed (i.e., a Quality Assurance calibration procedures of M&TE a total of 53 procedures). The procedures reviewed included a section on QA records.

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Continued from Block 16

Personnel have been instructed as to the procedural requirements.

YMP/AUDIT 88-07
AMENDED RESPONSE

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Block 16 - The "cause" for the proposed corrective action was the lack of a REECo training plan/procedure. REECo has issued Procedure AP2.0, Training, in accordance with the DOE/YMP Training Plan 88-16.

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Block 14 - AP1.0, Procedure Preparation has been developed.

Block 15 - 1/3/89

Block 16 - Lack of a procedure governing the preparation, review, and appearance of procedures was the "cause" for the required corrective action.

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Block 15 - 10/5/88

Block 16 - The cause for required corrective action was the lack of QA staff or others qualified within the organization which precluded an independent review of the Quality Assurance Administrative Procedures (NQPs). The current increase in QA staff has resolved this problem within REECo. A review of all NQPs was made during revision to meet the requirements of YMP/88-9, Rev. 2, and their change to YMP QPs. A review of other REECo implementing procedures has been conducted and it was found that departmental implementing procedures pass through various stages of review, but for in all cases has this review been documented. Direction has been given to all departments of the need for objective evidence of procedure review. This will be assessed in future surveillances and audits.

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When NQPs were revised to QPs, the requirement was addressed that QPs and implementing procedures do identify which QA records are generated. There have been no QA Level I or II records to be processed except for the procurement package of the Mine Hoist for ES-2, which has been done.

Block 16 - Cause was due to lack of understanding of the requirement which the audit teams clarified.

Block 15 - 1/13/89 - Issuance of QPs to YMP/88-9, Rev. 2.