



UNITED STATES
NUCLEAR REGULATORY COMMISSION
WASHINGTON, D. C. 20555

Reply to:
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Las Vegas, Nevada 89119
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FTS: 598-6125

TO: Mr. James E. Kennedy

FROM: Paul T. Prestholt, Sr. On-Site Licensing Representative

DATE: October 28, 1987

SUBJECT: WMPO EVALUATION OF SNL RESPONSES TO THE QA SDRS
RESULTING FROM AUDIT 87-5 OF SNL; WMPO QA SDR RESULTING
FROM SURVEILLANCE SR-87-022 OF LOS ALAMOS TECHNICAL
ACTIVITIES

Please find the above-referenced information for your
files.

PTP:nan

88127165

WM Project: WM-11

PDR w/encl

(Return to WM, 623-SS)

WM Record File: 102.7

LPDR w/encl

8712090295 871028

PDR WASTE
WM-11

PDR



Department of Energy

Post Office Box 98518
Las Vegas, NV 89193-8518

OCT 22 1987


Thomas O. Hunter
Technical Project Officer for NNWSI
Sandia National Laboratories
Organization 6310
P.O. Box 5800
Albuquerque, NM 87185

WASTE MANAGEMENT PROJECT OFFICE (WMPO) EVALUATION OF SANDIA NATIONAL LABORATORIES (SNL) RESPONSES TO THE QUALITY ASSURANCE (QA) STANDARD DEFICIENCY REPORTS (SDRS) RESULTING FROM AUDIT 87-5 OF SNL

The WMPO has evaluated the SNL responses to the eight SDRs (NOs. 025 - 032) which were generated as a result of WMPO QA Audit 87-5. Each of the responses provided has been accepted without comment. SDRs 025 - 032 will be closed upon verification of committed corrective actions. Copies of the annotated SDRs listed above are included herein for your information and retention.

Based upon your latest date for completion of corrective action (October 31, 1987), we are planning a supplemental visit to SNL to verify/close the subject SDRs. At present, this visit should occur during the week of November 16, 1987. Please advise if your schedule cannot accommodate this visit.

If you have any questions, please contact me at FTS 575-8913.


For James Blaylock
Project Quality Manager
Waste management Project Office

WMPO:JB-208

Enclosures:
SDRs 025-032

cc w/encls:

V. J. Cassella, HQ (RW-222) FORS
J. P. Knight, HQ (RW-24) FORS
R. R. Richards, SNL, Albuquerque, NM
S. H. Klein, SAIC, Las Vegas, NV
W. R. Kazor, SAIC, Las Vegas, NV
H. H. Caldwell, SAIC, Las Vegas, NV
B. A. Wozniak, SAIC, Las Vegas, NV
J. J. Brogan, SAIC, Las Vegas, NV
P. T. Prestholt, NRC, Las Vegas, NV
S. J. Guidice, QED, AL
A. L. Gonzales, MSD, AL
R. W. Gray, MED, NV
J. R. Rinaldi, QAD, NV
M. A. Kunich, WMPO, NV



WMPO STANDARD DEFICIENCY REPORT

N-0A-038
3/87

Completed by Originating QA Organization	1 Date 6/5/87		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page 1 of 2	
	3 Discovered During WMPO Audit 87-5		3a Identified By G. Heaney		3b Branch Chief Concurrence Date N/A	
	4 SDR No. 032		Rev. 0			
	5 Organization SNL		6 Person(s) Contacted R. Richards		7 Response Due Date is 20 Working Days from Date of Transmittal	
Completed by Organization in Block 5	8 Requirement (Audit Checklist Reference, if Applicable) 1. SNL NNWSI QAPP, Rev. A, para. 5.1, states in part "all activities affecting quality on the NNWSI Project will be performed utilizing approved (cont'd)"					
	9 Deficiency Contrary to the above requirements, the Calibration Lab at SNL does not utilize calibration procedures which are reviewed or approved by SNL NNWSI (cont'd)					
	10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input checked="" type="checkbox"/> Investigative <input type="checkbox"/> Corrective 1. Review to determine if SNL has performed Quality Level I and II work with calibrated instruments for which traceability to the National (cont'd)					
	11 QAE/Lead Auditor Date JUN 24 1987		12 Branch Manager Date 7/5/87		13 Project Quality Mgr. Date 7/15/87	
Completed by Organization in Block 5	14 Remedial/Investigative Action(s) Past and current work will be reviewed to determine if any Q Level I or II work has been done wherein measurements have been taken and data recorded using SNL-calibrated devices. If so, an evaluation will be completed to determine the impact of this situation. Issuance of NCRs which document individual data or types of data which have resulted from SNL-calibrated devices will complete this action. Responsible party is T. E. Blejwas					
	15 Effective Date 10/15/87					
	16 Cause of the Condition & Corrective Action to Prevent Recurrence The cause of this situation lies in the DOE decision to utilize the same assets - the National Laboratories - to perform work on both the OCRWM Program, which requires open public and project access to records because of licensability concerns, and the nuclear weapons program, which precludes public access to records due to security needs. This dilemma, which in fact affects areas (cont'd)					
	17 Effective Date TBD					
Comp. by Orig. QA Org.	18 Signature/Date Thomas O. Hunter, Manager NNWSI Project Department					
	19 Response <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Amended Response		QAE/Lead Auditor/Date 15 Sept 87		Branch Manager/Date 9/16/87	
	20 Amended Response <input type="checkbox"/> Accept <input type="checkbox"/> Reject		QAE/Lead Auditor/Date		Branch Manager/Date	
	21 Verification <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory		QAE/Lead Auditor/Date		Branch Manager/Date	
Comp. by Orig. QA Org.	22 Remarks					
	23 QA CLOSURE		QAE/Lead Auditor/Date		Branch Manager/Date	



WMPO STANDARD DEFICIENCY REPORT
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N-QA-038
10/86

SDR No. 032

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Requirement (cont'd)

written procedures."

2. SNL NNWSI OAPP, Rev. A, Para. 12.2, requires that "all measuring and test equipment calibration will be accomplished using written procedures and will be traceable either to the National Bureau of Standards or to other nationally recognized physical standards."

Deficiency (cont'd)

personnel in accordance with the SNL NNWSI OAPP, Rev. A, and implementing procedures. Additionally, records indicating traceability to the National Bureau of Standards or other nationally recognized physical standards are not available for review and audit by NNWSI OA personnel. Therefore, the calibration status of measuring and testing instruments is indeterminant.

Recommended Action (cont'd)

Bureau of Standards or to other nationally recognized physical standards cannot be determined.

2. Provide a corrective action plan to resolve above deficiencies.

Condition & Corrective Action (cont'd)

beyond calibration control, cannot be fully resolved at the SNL level. Upon receipt of guidance concerning calibration control from the WMPO, SNL will pursue a course of action consistent with that guidance.

WMPO STANDARD DEFICIENCY REPORT

N-OA-03E
3/87

Completed by Originating QA Organization

Apr 1

Completed by Organization in Block 5

Comp. by Orig. QA Org.

1 Date 6/5/87		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page 1 of 2	
3 Discovered During WMPO Audit 87-5		3a Identified By R. Klemens		3b Branch Chief Concurrence Date N/A	
4 SDR No 031		Rev. 0			
5 Organization SNL		6 Person(s) Contacted R. Richards		7 Response Due Date is 20 Working Days from Date of Transmittal	
8 Requirement (Audit Checklist Reference, if Applicable) SNL QAPP, Para. 2.5.4, requires that audit personnel be trained and qualified in accordance with a QAP which is consistent with the requirements (cont'd)					
9 Deficiency Contrary to this requirement SNL does not have a procedure which covers the requirements for certification, qualification, and training of (cont'd)					
10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Investigative <input checked="" type="checkbox"/> Corrective Develop and issue procedure QAP 2-7 covering SOP-02-01, Rev. 1 - Appendix D requirements for the certification, qualification, and training of auditors. (cont'd)					
11 QAE/Lead Auditor Date 4/24/87		12 Branch Manager Date 7/15/87		13 Project Quality Mgr. Date 7/15/87	
14 Remedial/Investigative Action(s) Develop and issue QAP 2-7 covering NVO 196-17, Rev. 5, Appendix F. Responsible party: R. Richards or R. Baehr					
15 Effective Date 9/4/87					
16 Cause of the Condition & Corrective Action to Prevent Recurrence Adhere to above-mentioned QAP 2-7 for future audit personnel qualification and certification.					
17 Effective Date ongoing					
18 Signature/Date Thomas O. Hunter 8-28-87 Thomas O. Hunter, Manager NNWSI Project Department					
19 Response <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Amended Response		QAE/Lead Auditor/Date 7/15/87		Branch Manager/Date 9/16/87	
20 Amended Response <input type="checkbox"/> Accept <input type="checkbox"/> Reject		QAE/Lead Auditor/Date		Branch Manager/Date	
21 Verification <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory		QAE/Lead Auditor/Date		Branch Manager/Date	
22 Remarks					
23 QA CLOSURE		QAE/Lead Auditor/Date		Branch Manager/Date	
PQM/Date					



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Requirement (cont'd)

of Appendix D of NNWSI SOP-02-01.

Audit Item No. D-1

Deficiency (cont'd)

auditors and lead auditors to SOP-02-01, Rev. 1 - Appendix D.

Recommended Action (cont'd)

Establish auditor training status board or other mechanism to monitor certification and qualification currency of auditors. These records should be accessible to all auditors and QA coordinators to facilitate self monitoring.

Note: Although procedures were not in place for qualifying audit personnel, no adverse impact occurred since SNL did not perform QA audits for the time period covered by this audit.

WMPO STANDARD DEFICIENCY REPORT

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Completed by Originating QA Organization	1 Date <u>6/5/87</u>		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page <u>1</u> of <u>2</u>	
	3 Discovered During <u>WMPO Audit 87-5</u>		3a Identified By <u>T. Vetter</u>		3b Branch Chief Concurrence Date <u>N/A</u>	
	4 SDR No. <u>030</u>		Rev. <u>0</u>			
	5 Organization <u>SNL</u>		6 Person(s) Contacted <u>Project Quality Coordinator for SNL</u>		7 Response Due Date is <u>20 Working Days from</u> Date of Transmittal	
Completed by Organization in Block 5	8 Requirement (Audit Checklist Reference, if Applicable) <u>SNL NNWSI OAPP, Rev. 0 (SLTR86-0001), para. 2.3, page 13, requires written procedures to implement the OAPP. Para. 2.8, page 18, states that (cont'd)</u>					
	9 Deficiency <u>Quality Level I and II activities are currently being implemented within the WRS elements and purchasing activities. To assure compliance with the (cont'd)</u>					
	10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input checked="" type="checkbox"/> Investigative <input checked="" type="checkbox"/> Corrective <u>Complete and implement the procedures on surveillances, nonconformances, and corrective actions. (cont'd)</u>					
	11 QAE/Lead Auditor Date <u>JUN 24 1987</u>					
Completed by Organization in Block 5	12 Branch Manager Date <u>7/15/87</u>		13 Project Quality Mgr. Date <u>7/15/87</u>			
	14 Remedial/Investigative Action(s) <ul style="list-style-type: none"> - QAP 10-1, "Surveillance Requirements," was issued <u>9/30/87</u> on July 29, 1987. - QAP 16-1, "Corrective Action Reporting," was approved for issue on August 24, 1987. - QAP 15-1, "Nonconformance Reporting and Controls," is in preparation, to be issued by September 30, 1987. (cont'd) 					
	15 Cause of the Condition & Corrective Action to Prevent Recurrence <u>The cause of this situation was prioritization of SNL NNWSI QA activities. Issuance of the subject procedures will prevent recurrence.</u>					
	16 Signature/Date <u>for TON 8/27/87</u> <div style="text-align: right;">Thomas O. Hunter, Manager NNWSI Project Department</div>					
Comp. by Orig. QA Org.	19 Response <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Amended Response <input type="checkbox"/> Reject		QAE/Lead Auditor/Date <u>7/15/87</u>		Branch Manager/Date <u>9/16/87</u>	
	20 Amended Response <input type="checkbox"/> Accept <input type="checkbox"/> Reject		QAE/Lead Auditor/Date		Branch Manager/Date	
	21 Veri- fication <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory		QAE/Lead Auditor/Date		Branch Manager/Date	
	22 Remarks					
23 QA CLOSURE		QAE/Lead Auditor/Date		Branch Manager/Date		PQM/Date



WMPO STANDARD DEFICIENCY REPORT CONTINUATION SHEET

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Requirement (cont'd)

a system for surveillances will be established.

Deficiency

quality program, surveillances are required to be performed in accordance with written procedures. In the event that reportable conditions are found during surveillances, nonconformances, and corrective action request procedures would be necessary to assure that these conditions are reported and processed in accordance with the controls identified in the quality program. The surveillance, nonconformance, and corrective action procedures have not been approved and implemented at this time. The nonconformance procedure OAP 15-1 and corrective action reports are in "draft" form being circulated for review.

Recommended Action (cont'd)

Once implemented, conduct a review of all Project areas governed by these procedures to determine if technical or procurement activities were performed. If performed without benefit of procedures, determine and report to WMPO the impact.

Establish a program of initial and recurrent training on these procedures for cognizant project personnel.

Remedial/Investigative Action (cont'd)

Investigative actions: Lack of the surveillance and corrective action procedures has had no impact on technical work performed by or for the SNL NNWSI Project Department. Nonconformance reporting and control has been conducted in accordance with NNWSI-SOP-15-01, which is itself a procedure, in the absence of an SNL NNWSI QA procedure.

WMFO STANDARD DEFICIENCY REPORT

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3/87

Completed by Originating QA Organization in Block 5
Completed by Org. QA Org.

1 Date 6/5/87	2 Severity Level <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	Page 1 of 2
3 Discovered During WMPD Audit R7-5	4 Identified By G. Heaney	5 Branch Chief Concurrence Date N/A
6 Organization SHL	7 Person(s) Contacted R. Stinebaugh	8 Response Due Date is 20 Working Days from Date of Transmittal

9 Requirement (Audit Checklist Reference, If Applicable)
SNP-N2-N2, "Assignment of QA Levels to NNHSI Activities and Items," Rev. 1,
Sec. 5.1.2, requires in part that once assigned, the QA level for a (cont'd)

10 Deficiency
Contrary to this requirement WRS subtask 1.2, "Emplacement Orientations," was
approved by Design Investigation Memo (DIM) 102 (2/19/87) as a QA (cont'd)

11 Recommended Action(s): ☐ Remedial ☐ Investigative ☒ Corrective
1. Review all DIMs issued and determine if QA level is consistent with level
assigned to related WRS or Modified Work Plan. (cont'd)

12 QAE/Lead Auditor Date 8/1/87	13 Branch Manager Date 7/15/87	14 Project Quality Mgr. Date 7/15/87
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15 Remedial/Investigative Action(s)
A request to revise the QA Level Assignment will be submitted to redesignate the work specified by DIM 102 as QA Level 3 by
September 11, 1987. Responsible party: R. E. Stinebaugh.

16 Cause of the Condition & Corrective Action to Prevent Recurrence (Rev. 1)
a. All DIMs will be reviewed for consistency of QA levels in the DIMS, with QA level assignments (QA Coordinator, by
September 11, 1987).
b. Based on result of a., revise other DIMs, if necessary (responsible Task
Leaders).

17 Signature/Date
Thomas O. Hunter, Manager
NNHSI Project Department

18 Response <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Amend <input type="checkbox"/> Reject	19 QAE/Lead Auditor/Date 8-28-87	20 Branch Manager/Date 9/13/87
21 Amended Response <input type="checkbox"/> Accept <input type="checkbox"/> Reject	22 QAE/Lead Auditor/Date	23 Branch Manager/Date
24 Verification <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory	25 QAE/Lead Auditor/Date	26 Branch Manager/Date

27 Remarks

28 QA CLOSURE	29 QAE/Lead Auditor/Date	30 Branch Manager/Date	31 POM/Date
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Requirement (cont'd)

particular activity or item will be applied by all NNWSI Project participating organizations and any NTS support contractors who are involved in the activity. (Refer to audit checklist Item No. T-8)

Deficiency (cont'd)

Level III activity. This is inconsistent with the QA Level II designation given to the parent WBS 1.2.4.3.

Recommended Actions (cont'd)

2. Revise DIM 102 under approved procedures to the required QA Level II.
3. SNL to verify with subcontractors that work will be completed to QA Level II as specified by revised DIM 102.
4. Revise any other DIMs identified by the above review as being inconsistent.
5. Determine and report impact (if any) on both inhouse and subcontractor activities
6. Determine root cause for inconsistent assignment of QA Levels to DIMs. Provide and document training given to preclude recurrence.

Condition & Corrective Action (cont'd) (Rev. 1)

- c. Based on result of a., determine impact of inconsistent QA levels (responsible Task Leaders and QA).
- d. The cause of this condition was lack of understanding on the part of the DIM author of the requirement stated in 8, above, and his confusion about how to control preliminary, scoping activities (based on a policy statement by the Project Quality Manager). This has all been clarified to the individual involved. If the result of 16a, above, indicates the need, more widespread training will be conducted.

WA 0 STANDARD DEFICIENCY REPORT

N-04-038
3/87

Completed by Originating QA Organization	1 Date <u>6/5/87</u>		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page <u>1</u> of <u>2</u>	
	3 Discovered During <u>WMPD Audit 87-5</u>		3a Identified By <u>G. Hymmet / G. Heaney</u>		3b Branch Chief Concurrence Date <u>N/A</u>	
	4 Organization <u>SNL</u>		5 Person(s) Contacted <u>R. Stinebaugh, R. Hill, C. Subramanian</u>		6 SDR No. <u>028</u> Rev. <u>0</u>	
	7 Response Due Date is <u>20 Working Days from Date of Transmittal</u>					
Completed by Organization in Block 5	8 Requirement (Audit Checklist Reference, if Applicable) <u>Sandia National Laboratories NNWSI Quality Assurance Program Plan Rev. A, Para. 5.1.2, states in part "Detailed technical documents will be (cont'd)"</u>					
	9 Deficiency <u>Contrary to the above requirement, SNL Department Operating Procedures (DOP) 3-6 "Design Change Control" and DOP 3-9 "Interface Control of NNWSI (cont'd)"</u>					
	10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Investigative <input checked="" type="checkbox"/> Corrective <u>1. Revise DOPs 3-6 and 3-9 to reference and include the processing of SOP-03-05 generated documents. (cont'd)</u>					
	11 QAE/Lead Auditor Date <u>7/1/87 JUN 24 1987</u>		12 Branch Manager <u>[Signature]</u> Date <u>7/15/87</u>		13 Project Quality Mgr. Date <u>James Blaylock 7/15/87</u>	
Completed by Orig. QA Org.	14 Remedial/Investigative Action(s) <u>NNWSI SOP 03-05 will be evaluated for its impact on SNL NNWSI QA implementing procedures related to design and interface control. The affected procedures will be appropriately revised, if necessary. Responsible party is R. R. Hill</u>					
	15 Effective Date <u>9/30/87</u>					
	16 Cause of the Condition & Corrective Action to Prevent Recurrence (Rev. 1) <u>If required due to possible revisions to procedures, the effects and details of those revisions will be disseminated to personnel involved with ESF design via a training vehicle to be determined. The cause of this situation was simply that, between receipt of SOP-03-05 and the audit visit, this organization had not evaluated the SOP for its impact on our procedures, due to work on the CDR and other activities.</u>					
	17 Effective Date <u>10/30/87</u>					
Comp. by Orig. QA Org.	18 Signature/Date <u>[Signature] 8/27/87 for TOH</u> Thomas O. Hunter, Manager NNWSI Project Department					
	19 Response <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Amended Response <input type="checkbox"/> Reject		QAE/Lead Auditor/Date <u>[Signature] 15 Sept 87</u>		Branch Manager/Date <u>[Signature] 9/16/87</u>	
	20 Amended Response <input type="checkbox"/> Accept <input type="checkbox"/> Reject		QAE/Lead Auditor/Date		Branch Manager/Date	
	21 Verification <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory		QAE/Lead Auditor/Date		Branch Manager/Date	
	22 Remarks					
23 QA CLOSURE		QAE/Lead Auditor/Date		Branch Manager/Date		PQM/Date



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Requirement (cont'd)

developed and contain instructions for the actual performance of activities that include but are not limited to design, testing, experiments, and analysis (refer to audit checklist item T-4).

Deficiency (cont'd)

Engineering Design" do not make reference to the NNWSI Standard Operations Procedure SOP-03-05 "ESF Project Interface Control Procedure." The DOPs do not address the processing and approvals within SNL of ESF Engineering Change Requests which are generated in accordance with SOP-03-05.

The SOP-03-05 is a procedure used by the ESF Project group to establish and implement interface control of ESF design changes between NNWSI Project participants. SNL would be sent ESF Engineering Change Requests for evaluation and review for impact on SNL surface and subsurface designs.

Recommended Actions (cont'd)

2. Reinstruct appropriate personnel to the revised procedures.

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3/87

Completed by Originating QA Organization	1 Date 6/5/87		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page 1 of 2	
	3 Discovered During WMPO Audit 87-5		3a Identified By R. Klemens		3b Branch Chief Concurrence Date N/A	
	4 SDR No. 027		Rev. 0			
	5 Organization SNL		6 Person(s) Contacted D. Brockman, R. Richards		7 Response Due Date is 20 Working Days from Date of Transmittal	
Completed by Organization in Block 5	8 Requirement (Audit Checklist Reference, if Applicable) SNL QAPP, para. 4.1 and para. 4.1.3 require written procedure and policies to be established by SNL for the preparation, review, and approval of (cont'd)					
	9 Deficiency Contrary to the above requirement, SNL has no written procedures covering "changes to procurement documents."					
	10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Investigative <input checked="" type="checkbox"/> Corrective Write and issue procedure DOP 4-2 to include how all changes to procurement documents are handled by SNL for the NNWSI Project. (cont'd)					
	11 QAE/Lead Auditor Date <i>J. W. [Signature]</i> JUN 24 1987		12 Branch Manager Date <i>[Signature]</i> 7/15/87		13 Project Quality Mgr. Date <i>James Blaylock</i> 7/15/87	
Comp. by Orig. QA Org.	14 Remedial/Investigative Action(s) A major change to DOP 4-1, "Procurement Document Requirements," was approved and issued on August 21, 1987. This procedure change specifies methods for initiating and processing changes to procurement documents.					
	15 Effective Date <u>Complete</u>					
	16 Cause of the Condition & Corrective Action to Prevent Recurrence Training of SNL NNWSI Project Department personnel on the content of the above-mentioned procedure change will be conducted (and documented) by September 30, 1987. Responsible Parties: R. Richards and D. Brockman					
	17 Effective Date <u>10/16/87</u> * <u>9/30/87</u> *					
Comp. by Orig. QA Org.	18 Signature/Date <i>Joe R. [Signature]</i> 8/27/87 per TOH Thomas O. Hunter, Manager NNWSI Project Department					
	19 Response <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Amended Response <input type="checkbox"/> Reject		QAE/Lead Auditor/Date <i>[Signature]</i> 15 Sept 87		Branch Manager/Date <i>[Signature]</i> 9/15/87	
	20 Amended Response <input type="checkbox"/> Accept <input type="checkbox"/> Reject		QAE/Lead Auditor/Date		Branch Manager/Date	
	21 Verification <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory		QAE/Lead Auditor/Date		Branch Manager/Date	
	22 Remarks Block 17 amended per SNL ltr of 2 Sept 87. <i>[Signature]</i> 3 Sept 87					
23 QA CLOSURE		QAE/Lead Auditor/Date		Branch Manager/Date		PQM/Date



WMPPO STANDARD DEFICIENCY REPORT
CONTINUATION SHEET

N-QA-031
10/86

SDR No. 027

Rev. 0

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Requirement (cont'd)

procurement documents and procurement document changes.

Audit Item No. 4.0-4

Recommended Action (cont'd)

All changes to procurement documents, including negotiated changes, should be included in DOP 4-2.

Develop and conduct DOP 4-2 specific training for all cognizant SNL personnel and document same.

WMPO STANDARD DEFICIENCY REPORT

N-QA-03E
3/87

Completed by Originating QA Organization	1 Date 6/5/87		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page 1 of 2
	3 Discovered During WMPN Audit 87-5		3a Identified By R. Klemens		3b Branch Chief Concurrence Date N/A
	4 SDR No. 026		Rev. 0		
	5 Organization SNL		6 Person(s) Contacted R. Richards, R. Prindle, D. Brockman		7 Response Due Date is 20 Working Days from Date of Transmittal
Completed by Organization in Block 5	8 Requirement (Audit Checklist Reference, if Applicable) NNWSI SOP-02-01, Rev. 1, para. 7.2.7, and SNL OAPP, para. 7.2.2.3, require that methods shall be established for the acceptance of an item or service (cont'd)				
	9 Deficiency SNL does not have a procedure covering the methods for the acceptance of purchased items and services. DOP 7-2 has been drafted but not issued.				
	10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input checked="" type="checkbox"/> Investigative <input checked="" type="checkbox"/> Corrective Develop and issue procedure DOP 7-2 covering SOP-02-01, Rev. 1, "Requirements for Evaluation for Acceptance of Purchased Items and Services." (cont'd)				
	11 GAE/Lead Auditor Date 7/24/1987		12 Branch Manager [Signature] 7/15/87		13 Project Quality Mgr. Date Jane Blyford 7/15/87
Completed by Organization in Block 5	14 Remedial/Investigative Action(s) Issue DOP 7-2. Responsible party is J. T. George, designated author.				
	15 Effective Date 9/18/87				
	16 Cause of the Condition & Corrective Action to Prevent Recurrence The deficiency, as stated above, is not quite accurate; at the time of the audit there was no NNWSI-specific procedure for acceptance of purchased items and services. However, there was an SNL procedure covering this activity which was, and is, being observed. The cause of the deficiency was prioritization of SNL NNWSI QA activities in (cont'd)				
	17 Effective Date Complete				
Comp. by Orig. QA Org.	18 Signature/Date [Signature] 8/27/87 for TOH Thomas O. Hunter, Manager NNWSI Project Department				
	19 Response <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Amended Response <input type="checkbox"/> Reject		QAE/Lead Auditor/Date [Signature] 15 Sept 87		Branch Manager/Date [Signature] 9/15/87
	20 Amended Response <input type="checkbox"/> Accept <input type="checkbox"/> Reject		QAE/Lead Auditor/Date		Branch Manager/Date
	21 Verification <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory		QAE/Lead Auditor/Date		Branch Manager/Date
Comp. by Orig. QA Org.	22 Remarks				
	23 QA CLOSURE		QAE/Lead Auditor/Date		Branch Manager/Date



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of

2

Requirement (cont'd)

being furnished by a supplier, including certificate of conformance, source verification, receiving inspection, or post installation test at the facility site.

Audit Item No. 7.0-2

Recommended Action (cont'd)

Perform a review of all NNWSI specific procurements to determine:

1. if any items or services were purchased.
- 2) impact (if any) of procuring these items or services without methods for evaluating acceptance of same.

Provide and document training given to cognizant personnel on Procedure DOP 7-2.

Condition & Corrective Action (cont'd)

light of the existing SNL-wide procedure.

Corrective action has consisted of conducting an evaluation of the SNL NNWSI procurement process to determine the impact of this deficiency. This evaluation is complete; no specific corrective actions were determined to be necessary.

Recurrence of this situation will be prevented by issuance of DOP 7-2, as stated above.

WMPO STANDARD DEFICIENCY REPORT

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Completed by Originating QA Organization	1 Date	6/5/87		2 Severity Level	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3		Page	1 of 2	
	3 Discovered During	3a Identified By		3b Branch Chief Concurrency Date		4 SDR No.	Rev.		
	WMPO Audit 87-5	R. Clark		N/A		025	0		
	5 Organization	6 Person(s) Contacted		7 Response Due Date is 20 Working Days from Date of Transmittal					
	SNL	R. Richards							
Completed by Organization in Block 5	8 Requirement (Audit Checklist Reference, if Applicable) SOP-02-01, Rev. 1, Section 17.0, 17.2.2 SNL QAPP Section 2.1.5 (cont'd)								
	9 Deficiency SOP-02-01, Rev. 1, requires that QA records be reproducible and microfilmable. (cont'd)								
	10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Investigative <input type="checkbox"/> Corrective Determine extent of identified condition and document baseline. Conduct indoctrination of all Project personnel on use of (cont'd)								
	11 QAE/Lead Auditor Date	12 Branch Manager Date		13 Project Quality Mgr. Date					
APR 24 1987	JUN 24 1987		JAMES BLANCHARD 7/15/87						
Completed by Organization in Block 5	14 Remedial/Investigative Action(s) (Rev. 1) The documents reviewed during the audit, while illustrating the implementation of our training and familiarization efforts, had not been processed by our Records Management System (RMS) so had not as yet been inspected for acceptability by RMS personnel. Remedial action (cont'd)								
	15 Effective Date 10/1/87								
	16 Cause of the Condition & Corrective Action to Prevent Recurrence N/A								
Comp. by Orig. QA Org.	17 Effective Date N/A								
	18 Signature/Date William W. Bingham for T.O. Hunter 9/2/87 Thomas O. Hunter, Manager NNWSI Project Department								
	19 Response	<input checked="" type="checkbox"/> Accept <input type="checkbox"/> Amended Response	QAE/Lead Auditor/Date		Branch Manager/Date				
	20 Amended Response	<input type="checkbox"/> Accept <input type="checkbox"/> Reject	QAE/Lead Auditor/Date		Branch Manager/Date				
	21 Verification	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory	QAE/Lead Auditor/Date		Branch Manager/Date				
22 Remarks									
23 QA CLOSURE									
QAE/Lead Auditor/Date		Branch Manager/Date		PQM/Date					



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Requirement (cont'd)

Audit Checklist No. 87-5-1, Audit Item No. 17.0-2

SNL QAPP SLTR86-0001, Rev. A, requires, as part of receipt inspection of records, that records be completed in indelible media.

Deficiency (cont'd)

Review of all existing indoctrination and training records, "Familiarization Programs Document" and Form QAP 2.-5 (1), revealed that a number of these documents had entries in pencil, as well as entries in multi-colored ink, i.e., red, green, blue.

Recommended Action (cont'd)

indelible media for QA records as outlined in existing SNL procedures. Conduct and document periodic inspection of QA records to determine compliance to procedures.

Remedial/Investigative Action(s) (cont'd)

to address the problem at its source will consist of:

- Information concerning the "black ink" requirement contained in QA and records management procedures and its rationale will be redisseminated to Project personnel (QA Coordinator by 9/2/87).
- As a part of the process of revising the SNL NNWSI QA Program Plan to be consistent with Rev. 5 of the NNWSI QA Plan, this "black ink" requirement will be changed to simply require that completed records be microfilmable and reproducible (QA Coordinator, by 10/1/87).
- Correction of the specific documents identified as unacceptable during the audit will occur during the implementation of the "records retrofit plan" carried out by SNL to properly integrate documents generated prior to December 24, 1986, into the SNL NNWSI RMS. A schedule for implementation of the retrofit plan will be developed and, with the actions stated above, will serve to close out this SDR (M. A. Tang, by 9/30/87).



Department of Energy

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OCT 22 1987

Donald T. Oakley
Technical Project Officer
for NNWSI
Los Alamos National Laboratory
University of California
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P.O. Box 1663
Los Alamos, NM 87545

WASTE MANAGEMENT PROJECT OFFICE (WMPO) QUALITY ASSURANCE (QA) STANDARD
DEFICIENCY REPORT (SDR) RESULTING FROM SURVEILLANCE SR-87-022 OF LOS ALAMOS
NATIONAL LABORATORY (LOS ALAMOS) TECHNICAL ACTIVITIES (WMPO ACTION ITEM #88-212)

Enclosed is SDR (No. 089), which was generated on October 6, 1987, during the course of WMPO QA Surveillance SR-87-022 of Los Alamos technical activities "Biological Sorption and Transport" (WBS 1.2.3.4.1.9.A) and "Tectonics and Volcanism" (WBS 1.2.3.2.3.1.A). Please note that you are required to provide response to the SDR by completing blocks 14 through 18 on the first page of the SDR. A copy of the SDR with your response is due back to this office 20 working days from the date of this letter. The original SDR with your response shall concurrently be transmitted to Nita J. Brogan of Science Applications International Corporation (SAIC), Las Vegas, Nevada.

If you have any questions, please contact Jerry Heaney of SAIC at FTS 575-8739.

James Blaylock
Project Quality Manager
Waste Management Project Office

WMPO:JB-205

Enclosure:
SDR NO. 089



WMPO STANDARD DEFICIENCY REPORT

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3/87

35000

Completed by Originating QA Organization

Apvrl.

Completed by Organization in Block 5

Comp. by Orig. QA Org.

1 Date 9/30/87		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page 1 of 2	
3 Discovered During WMPO Surveillance SR-87-022		3a Identified By G. Heaney		3b Branch Chief Concurrence Date N/A	
5 Organization Los Alamos		6 Person(s) Contacted P. Guthals, H. Nunes, A. Pendergrass		4 SDR No. 089 Rev. 0	
7 Response Due Date is 20 Working Days from Date of Transmittal					
8 Requirement (Audit Checklist Reference, if Applicable) NNWSI Project QA Plan NVO-196-17, Rev. 5, Section III, "Scientific Investigation Control and Design Control," Para. 1.1.1 states (cont'd)					
9 Deficiency Contrary to the above requirements, some Los Alamos Scientific Investigation Plans (SIP) no longer accurately describe planned work activities (cont'd)					
10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input checked="" type="checkbox"/> Investigative <input checked="" type="checkbox"/> Corrective 1. Perform investigation of all presently approved SIPs and indicate which tasks have been revised by NNWSI Project Cost/Schedule Change (cont'd)					
11 QAE/Lead Auditor Date <i>Gerard Heaney</i> 10/6/87		12 Branch Manager <i>W. R. Kagan</i> 10/7/87		13 Project Quality Mgr. Date <i>James B. Layton</i> 10/13/87	
14 Remedial/Investigative Action(s)					
15 Effective Date _____					
16 Cause of the Condition & Corrective Action to Prevent Recurrence					
17 Effective Date _____					
18 Signature/Date					
19 Response <input type="checkbox"/> Accept <input type="checkbox"/> Amended <input type="checkbox"/> Reject <input type="checkbox"/> Response		QAE/Lead Auditor/Date		Branch Manager/Date	
20 Amended Response <input type="checkbox"/> Accept <input type="checkbox"/> Reject		QAE/Lead Auditor/Date		Branch Manager/Date	
21 Verifi- cation <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory		QAE/Lead Auditor/Date		Branch Manager/Date	
22 Remarks					
23 QA CLOSURE		QAE/Lead Auditor/Date		Branch Manager/Date	
PQM/Date					



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Block 8 - Requirement (cont'd)

In part "The responsible Principal Investigator (PI) shall develop a study plan for that investigation. Such plans shall contain or shall reference the following:

Para. 1.1.1.1 Description of Work to be Performed

A description of the work to be performed in the scientific investigation including a discussion of the overall purpose of the work. References to any applicable regulations, requirements, performance criteria, key issues, information needs, higher level scientific investigation planning documents or Work Breakdown Structure (WBS) items, for which the work is to be performed shall also be provided.

Block 9 - Deficiency (cont'd)

due to the fact that some of these tasks have been further divided since the original issue of the SIPs by changes to the WBS descriptions of these tasks.

Examples:

1. "Biological Sorption and Transport" (WBS Element 1.2.3.4.1.9.A) is controlled per SIP "Sorption and Precipitation" (WBS Element 1.2.3.4.1.5.A). NNWSI Project Cost/Schedule Change Request (C/SCR) No. 87/088 separated the Biological Sorption and Transport task from the Sorption and Precipitation task because microbiology work is not clearly related to other subtasks in "Sorption and Precipitation" (WBS Element 1.2.3.4.1.5.A). A new SIP for the Biological Sorption and Transport task has not been developed nor has the Sorption and Precipitation SIP been revised to delete the new task activities.

2. Per C/SCR No. 87/154 the "Sorption and Precipitation" (WBS Element 1.2.3.4.1.5.A) has been retitled to "Sorption" as precipitation work is now being accomplished under the solubility task area and described in the "Solubility Determination" (WBS Element 1.2.3.4.1.4.A). The SIPs for these two tasks have not been revised to reflect these changes.

3. The Microbiology SIP (WBS Element 1.2.3.4.1.5.A), Rev. 0, is the current SIP in effect for that activity. However, according to the latest WBS Dictionary update, Microbiology now is described as WBS Element 1.2.3.4.3.A. Once again the SIP has not been revised to show this change.

Block 10 - Recommended Action (cont'd)

Requests (C/SCR). Initiate new SIPs and QALAS and revise existing SIPs and QALAS where required by NVO-196-17, Rev. 5.

2. Determine if work has been performed without an approved SIP and QALAS. Initiate appropriate corrective action.

3. Reinstruct all PIs to NNWSI Project requirements.

4. Determine if the C/SCR system presently in place within Los Alamos considers impacts on other NNWSI Project documents (i.e., SIPs, Study Plans, QALAS) and how such impacts are addressed.

PDR-1
LPDR WM-11(a)

WM DOCKET CONTROL
CENTER

'87 NOV -2 A10:Q8

WM Record File	WM Project
<u>102.1</u>	<u>11</u>
	Docket No. _____
	PDR <input checked="" type="checkbox"/>
	XLPDR <input checked="" type="checkbox"/> (M)
Distribution:	<u>DeHanna</u>
<u>Kennedy</u>	<u>Donnelly</u> <u>Belke</u>
<u>RDM</u>	<u>Riddle</u>
(Return to WM. 623-SS)	<u>Youngblood</u> <u>of</u>