



Department of Energy
Office of Civilian Radioactive Waste Management
Yucca Mountain Site Characterization Office
P.O. Box 98608
Las Vegas, NV 89193-8608

MAY 03 1996

L. Dale Foust
Technical Project Officer
for Yucca Mountain
Site Characterization Project
TRW Environmental Safety Systems, Inc.
Bank of America Center, Suite P-110
101 Convention Center Drive
Las Vegas, NV 89109

ISSUANCE OF DEFICIENCY REPORT (DR) YMQAD-96-D053 RESULTING FROM
OFFICE OF QUALITY ASSURANCE (OQA) SUPPLIER AUDIT OQA-SA-96-014 OF
SOKKIA CORPORATION (SCPB: N/A)

Enclosed is DR YMQAD-96-D053 generated as a result of OQA Supplier
Audit OQA-SA-96-014.

Please identify the corrective action to be taken and implemented
to correct the deficiency. A DR Continuation Page has been provided.
Send the original of your response to Deborah Sult, YMQAD/QATSS,
101 Convention Center Drive, Suite 640, Las Vegas, Nevada 89109.
Response to the DR is due 20 working days from the date of this
letter. Any extension to the due date must be requested in writing,
with appropriate justification, prior to the due date.

If you have any questions, please contact either Robert B. Constable
at 794-5580 or Richard L. Maudlin at 794-1302.

Richard E. Spence, Director
Yucca Mountain Quality Assurance Division

YMQAD:RBC-1652

Enclosures:

1. DR YMQAD-96-D053
2. PR/DR Continuation Page

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L. Dale Foust

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cc w/encls:

T. A. Wood, HQ (RW-14) FORS
J. G. Spraul, NRC, Washington, DC
S. W. Zimmerman, NWPO, Carson City, NV
R. L. Strickler, M&O, Vienna, VA
R. E. Armstrong, M&O, Las Vegas, NV
D. S. Haas, M&O, Las Vegas, NV
R. P. Ruth, M&O, Las Vegas, NV
Records Processing Center

cc w/o encls:

W. L. Belke, NRC, Las Vegas, NV
R. L. Maudlin, YMQAD/QATSS, Las Vegas, NV
D. G. Sult, YMQAD/QATSS, Las Vegas, NV

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RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.**

⁸ Performance Report
 Deficiency Report
NO. YMQAD-96-D053
PAGE 1 OF 3
QA: L

PERFORMANCE/DEFICIENCY REPORT

1 Controlling Document: QARD, DOE/RW-0333P, Revision 5	2 Related Report No. OQA-SA-96-014
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3 Responsible Organization: Kiewit/PB / SOKKIA Corp.	4 Discussed With: D. Haas / Al Kesselring
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5 Requirement/Measurement Criteria:
QARD, Section 4.0, Subsection 4.2.1 states in part: " Procurement Document Preparation:

Procurement documents issued by each Affected Organization shall include the following provisions, as applicable to the item or service being procured:....

C. Quality Assurance Program Requirements including:

1. A requirement for the supplier to have a documented Quality Assurance (QA) program that implements applicable *Quality Assurance Requirements and Description*, (QARD) requirements prior to the initiation of work."

(Cont'd on Page 3)

6 Description of Condition:
Contrary to the above:

(1) K/PB has not incorporated in their procurement documents requirements for SOKKIA Corporation to have a documented QA program that implements the applicable requirements of the QARD.

(2) SOKKIA Corporation does not have a documented QA Program which addresses the applicable portions of the QARD. Examples of QARD Elements not addressed by SOKKIA include but are not limited to: Organization, Procurement Document Control, Implementing Documents, Document Control, Control of Purchased Items and Services, Control of Measuring and Test Equipment, Nonconformance Control, Corrective Action, and QA Records.

(Cont'd on Page 3)

7 Initiator Richard L. Maudlin <i>R. Maudlin</i> Date 04/22/96	9 QA Review QAR <i>R. Maudlin</i> Date 4/22/96
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10 Response Due Date: 20 Working Days From Issuance	11 QA Issuance Approval QAR (PR)/AOQAM (DR) <i>AC Spina</i> Date 5/2/96
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12 Remedial Actions:

13 Remedial Actions Response By: Date	14 Remedial Action Due Date Date
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15 Remedial Action Response Acceptance QAR Date	16 PR Verification /Closure QAR Date
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8

DR NO. YMOAD-96-D053

PAGE 2 OF 3

QA: L

DEFICIENCY REPORT

17 Recommended Actions:

1. Take immediate action to incorporate QA requirements in present and future POs with SOKKIA
2. SOKKIA to develop a QA Manual to address applicable requirements of QARD. Kiewit/PB to review and accept SOKKIA QA Manual.
3. SOKKIA to develop implementing procedures to implement QA Manual as appropriate.
4. Kiewit/PB to investigate any possible impact of work by SOKKIA in the absence of an acceptable QA program, determine root cause as to why QA requirements were not included in POs, and identify action to preclude recurrence.
5. Resolve specific items referenced in this DR.

18 Investigative Actions:

19 Root Cause Determination:

20 Action to Preclude Recurrence:

<p>21 Response By</p> <p style="text-align: right;">Date</p>	<p>22 Corrective Action Completion Due Date</p>
<p>23 Response Accepted</p> <p>QAR Date</p>	<p>24 Response Accepted</p> <p>AOQAM Date</p>
<p>25 Amended Response Accepted</p> <p>QAR Date</p>	<p>26 Amended Response Accepted</p> <p>AOQAM Date</p>
<p>27 Corrective Action Verified</p> <p>QAR Date</p>	<p>28 Closure Approved by:</p> <p>AOQAM Date</p>

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⁸ Performance Report
 Deficiency Report
NO. YMOAD-96-D053
PAGE 3 OF 3
QA: L

PERFORMANCE/DEFICIENCY REPORT

Block 5, Requirement/Measurement Criteria, cont'd

QARD, Section 2.0, Subsection 2.2.1 states in part: "Quality Assurance Program Documents:

B.....Organizations shall establish implementing documents applicable to their scope of work that translate *Quality Assurance Requirements and Description (QARD)* requirements into work processes."

QARD Section 17.0, Subsection 17.2.11 states in part: "Temporary Storage Facility:

....Organizations shall provide for temporary storage of QA records during processing, review, or use until turnover to the OCRWM for disposition, according to the following requirements:

- A. QA records shall be temporarily stored in a container or facility with a fire rating of 1-hour, or dual storage shall be provided."

Block 6, Description of Condition, cont'd

- (3) Due to fact that no QA program document exists, activities affecting quality have not been appropriately documented. Examples include:

No documented evidence of qualification and training of personnel performing calibrations.

No documented evidence of evaluation and qualification of suppliers used to calibrate SOKKIA standards.

SOKKIA calibration documentation did not provide for documenting equipment that was found to be out of calibration or nonconforming.

There was no revision control on the electronic calibration test procedures.

No documented evidence exists of review and/or approval of NET2 manuals or electronic test procedures.

- (4) Calibration records are not being stored in either a 1-hour fire rated cabinets or in dual storage an no time limits for maintenance of records has been specified.

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WASHINGTON, D.C.

8 Performance Report
 Deficiency Report

NO.
PAGE - OF
QA: L

PR/DR CONTINUATION PAGE