PROJECT OFFICE QUALITY ASSURANCE AUDIT REPORT FOR

THE YUCCA MOUNTAIN PROJECT OFFICE AUDIT OF

FENIX & SCISSON, INC.

AUDIT NO. 89-1

Conducted: April 10 - 14, 1989

Prepared By:

C. Friend, Auditor lead

89 Date: 271

Approved By:

dwell, Henry H. Ca.

28 der 89 Date:

Division Manager, Audits

Date: 4/28/89

Approved By: James Blaylock 0 Project Quality Manager

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ELCLOSURE

#### EXECUTIVE SUMMARY

#### PROJECT OFFICE AUDIT REPORT NO. 89-1

FENIX & SCISSON, INC. (F&S)

LAS VEGAS, NEVADA

APRIL 10 - 14, 1989

In the opinion of the Project Office Audit Team, the effectiveness of the Quality Assurance (QA) Program at F&S cannot be determined at this time. However, based on the results of the audit, the F&S QA Program appears adequate to support the initiation of Title II design. This is based upon the fact that staffing appears adequate, training is satisfactory, most required procedures are in place, and there are no major outstanding deficiencies.

It should be noted that the F&S QA Program, at this point, is not in total compliance with NAWSI QA Plan 88-9, Revision 2. The areas not in compliance are Procurement and the Software QA Program. In addition, the 19 Observations identified should be an indication that the full program is not yet totally complete. If quality related work governed by the program had been in progress, some of the Observations would have been documented as deficiencies. These Observations should be closely scrutinized and actions taken where necessary.

The effectiveness of the QA program cannot be determined until such time as the program is completed and objective evidence to demonstrate technical adequacy and program implementation can be reviewed.

#### 1.0 Introduction

This report contains the results of a QA Audit of F&S Yucca Mountain Project activities. The audit was conducted at the F&S facilities in Las Vegas, NV, April 10 through 14, 1989. The audit was conducted in accordance with the requirements of QMP-18-01, Revision 3, "Audit System for the Waste Management Project Office." The QA Program requirements to be verified were taken from NNWSI QA Plan 88-9, Revision 2.

#### 2.0 Audit Scope

The purpose of this audit was to evaluate the F&S Quality Assurance Program through verification of implementation of the F&S QAPP, Revision 6 (2/13/89) and its implementing procedures. Additionally, a technical review was performed to determine readiness to start Title II design activities.

#### 3.0 Audit Team Personnel

| John Friend<br>Stephen Hans | Audit Team Leader/Lead Auditor<br>Auditor | SAIC,  | Las Vegas | , NV      |
|-----------------------------|---|--------|-----------|-----------|
| Stephen Dana                | Auditor                                   | W      | at a      | <b>st</b> |
| James Clark                 | Auditor                                   | Ħ      |           |           |
| Sydney Crawford             | Auditor                                   |        | #         | 90        |
| Neil Cox                    | Auditor-In-Training                       | ĸ      |           |           |
| Thomas Watson               | Technical Specialist                      | HARZA  | *         | 61        |
| Thomas Ricketts             | Technical Specialist                      | SAIC,  |           | ••        |
| Arthur Watkins              | Technical Specialist                      | Ħ      | <b>W</b>  | M         |
| John Gilray                 | Observer                                  |        | as Vegas, |           |
| John Peshel                 | Observer                                  | NRC, W | ashington | , D.C.    |
| Michael Gonzalez            | Observer                                  | NRC,   | Ħ         | n         |
| Susan Zimmerman             |   | State  | of Nevada |           |
| Gary Faust                  | Surveillant                               |        | ) Weston  |           |
| Vic Montenyohl              | Surveillant                               |        | Weston    |           |
| Wendell Mansel              | Observer                                  |        | as Vegas, |           |
| Ram Murthy                  | Observer                                  | -      | as Vegas, |           |
| Edward Cikanek              | Observer                                  | HARZA, | Las Vega  | s, NV     |
|                             |   |        |           |           |

#### 4.0 Summary of Audit Results

#### 4.1 Statement of Program Effectiveness

In the opinion of the Project Office Audit Team, the effectiveness of the Quality Assurance Program at F4S cannot be determined at this time. Until such time as the program is completed and objective evidence to demonstrate technical adequacy and program implementation can be reviewed, the effectiveness will remain indeterminate. However, based on the results of the audit, the F&S QA Program appears to be adequate to support the initiation of Title II design. This is based upon the fact that staffing appears adequate, training is satisfactory, most required procedures are in place, and there are no major outstanding deficiencies.

#### 4.2 Summary of Technical Evaluation

Based upon the responses to the technical questions that the technical specialists asked of Fenix & Scisson, Inc. during the audit, it was concluded that the F&S Quality Assurance program is technically adequate. The F&S design control procedures were reviewed and found to be technically adequate for the performance of Title II design. The F&S design personnel appeared to be well qualified in the specific areas for which they have been assigned design responsibility and had an adequate understanding of their design control procedures. In summation, the technical specialists found no reason to impede F&S from starting Title II design.

#### 4.3 Summary

A total of two Standard Deficiency Reports (SDRs)/(Enclosure 3), and 19 Observations (Enclosure 4) were identified as a result of this audit. In addition, the audit team generated seven Recommendations for consideration by F&S. A synopsis of each SDR and Observation, and the complete Recommendations, are contained in Section 6.0 of this report.

Deficiencies identified by the Project Office are qualified by Severity Level, which is related to the significance of the deficiency. A discussion of Severity Levels is provided in Enclosure 1.

At the time of the audit, one SDR (No. 267) remained open from previous Project Office surveillances and audits. The corrective actions to this SDR could not be verified during the audit. The SDR involves the use of commercial computer software; however, Fenix & Scisson's software QA Program has not yet been approved or implemented.

The following program elements were deemed to meet the requirements of NNWSI/88-9, Revision 2; and F&S QAPP, Revision 6:

- 1.0 Organization 2.0 - QA Program 5.0 - Instructions, Procedures, Plans and Drawings 6.0 - Document Control 15.0 - Control of Nonconforming Items 16.0 - Corrective Action 17.0 - Quality Assurance Records
- 18.0 Audits

Program elements that are not in total compliance with program requirements are:

3.0 - Scientific Investigation and Design Control

Program elements or portions of elements that are not in compliance with program requirements are:

4.0 - Procurement Document Control 7.0 - Control of Purchased Software OA Program

The following program elements were reviewed during the audit; however, no activities had taken place that would have required these elements to be controlled:

10.0 - Inspection 12.0 - Control of Measuring and Test Equipment

The following program elements were not audited during this audit because they are not currently an F&S responsibility and have been explained in the F&S QAPP:

8.0 - Identification and Control of Items, Samples and Data
9.0 - Control of Processes
11.0 - Test Control
13.0 - Handling, Shipping, and Storage
14.0 - Inspection, Test, and Operating Status

Technical review was limited during this audit to the following:

o Technical Qualifications of Design Personnel o Understanding of the Design Control Process and Procedural Requirements o Procedural Adequacy from a Technical Standpoint

#### 5.0 Audit Meetings

#### 5.1 Preaudit Conference

A preaudit conference was held with the F&S Technical Project Officer (TPO) and his staff at 10:00 a.m. on April 10, 1989. The purpose, scope, and proposed agenda for the audit were presented and the audit team was introduced. A list of attendees for this meeting is provided in Enclosure 2.

#### 5.2 Audit Status Meetings

Audit Status Meetings were held with the F&S TPO and his key staff at 8:30 a.m. on April 11, 12, and 14, 1989. A status of how the audit was progressing and identification of discrepancies were discussed daily.

#### 5.3 Postaudit Conference

The postaudit conference was held at 10:00 a.m. on April 14, 1989. A synopsis of the preliminary SDRs and Observations identified during the course of the audit was presented to the TPO and his staff. A list of attendees of this meeting is provided in Enclosure 2.

- 6.0 Synopsis of SDRs, Observations, and Complete Recommendations
- 6.1 Standard Deficiency Reports (SDRs)
  - 1. F&S is logging the receipt of transmittals rather than document type as required. Severity Level 2, SDR No. 313.
  - 2. F&S Procedure DC-14, Rev. 7, was issued before all documented reviews were obtained. Severity Level 3, SDR No. 314.

#### 6.2 Observations

- 1. Channels have not been established at F4S to elevate disputes progressively to the Project Quality Manager. Observation No. 89-1-01.
- 2. A carefully designed and detailed plan needs to be implemented during shaft and drift blasting that integrates blast design and blast damage assessment activities. The efforts of J. McKenzie (Senior Mining Engineer) and M. Mrugala (Senior Mining Engineer/ Specialist) must be closely integrated in a definite plan. These individuals must work together in the planning and during the blasting operations.

After operations begin, there must be some flexibility to modify blast design when needed during day-to-day operations without going through a lengthy design process that would not change the overall design basis. Observation No. 89-1-02.

- 3. A documented policy is needed to establish a hierarchy among the implementing procedures, along with a delineation of the purpose and applicability of each type of procedure. Observation No. 89-1-03.
- 4. There is no centralized system at F4S to control the preparation and issuance of documents affecting quality. Observation No. 89-1-04.
- 5. The Subsystem Design Requirements Document (SDRD) draft review versions have been used by F&S as a primary input source for the Basis for Design (BFD). Observation No. 89-1-05.
- 6. The work authorization and planning process resulting in "Design Scope and Planning Documents" is not procedurally described, and does not require F&S QA review. Observation No. 89-1-06.
- 7. The BFD, Issue 2, cover sheet does not include provisions for the QA representative's approval signature. Observation No. 89-1-07.
- 8. Many codes and standards listed in the BFD are not identified by specific year/edition. Observation No. 89-1-08.
- 9. Reviews of the BFD, Issue 2, which were performed to F&S procedure DC-09, Interdiscipline Review, were not totally conducted as DC-09 requires. The BFD has not received final approval. Observation No. 89-1-09.

- 10. Fis procedure DC-15, "Basis for Design" program, does not describe the specific format and content for the BFD. Observation No. 89-1-10.
- Fis procedures DC-14, "Technical Studies," and DC-09 discuss design verification as occurring before interdiscipline review; interdiscipline review occurs prior to design verification. Observation No. 89-1-11.
- F&S procedure DC-07 does not clearly describe comment documentation and resolution at the check and initial review points for F&S Technical Specifications. Observation No. 89-1-12.
- 13. FLS performed reviews of the SDRD to DC-09. However, DC-09 does not specifically address the review of the SDRD, and some portions of the procedure are not applicable. Observation No. 89-1-13.
- 14. F&S Procedure DC-11 does not adequately define responsibilities and control of the Project Control Log. Observation No. 89-1-14.
- 15. Fis Discrepancy Report DR-10 (6/2/88) does not show independence in that the DR was written against, dispositioned, and verified by virtually the same QA organization. Observation 89-1-15.
- 16. Trend analysis should be performed on a more timely basis and future Trend Analysis Reports should provide for additional justification as to whether a trend is or is not adverse to quality. Observation No. 89-1-16.
- FLS has not developed a method to identify what training is required for each person. Current practice is to train personnel in all procedures. Observation No. 89-1-17.
- 18. Subcontract SC-TS-88-269 did not contain technical requirements as required. This work was done for Title I; however, the contract does require Title II work and must be revised. Observation No. 89-1-18.
- 19. F&S does not currently have in place sufficient implementing procedures to meet the requirements of Criteria 7, "Control of Purchased Items and Services." Observation 89-1-19.
- 6.3 Recommendations

Recommendation No. 1

There is a requirement in QAPP-002, Rev. 6, Section 6.0, para. 6.2.2 that a reviewing organization have access to pertinent background data or information upon which to base approval of documents. The required access is difficult to prove by objective evidence; however, it was noted that no information was sent with revised procedures to explain why changes were necessary or the rationale for the approach taken in the revision. It is recommended that in the future, document review coordinators provide such basic information to assist the reviewers in their evaluation of changed documents.

#### Recommendation No. 2

In F&S Procedure PP 50-01, Rev. 3, para. 6.8, the F&S Records Coordinator (RC) takes the responsibility for ensuring records have been correctly filmed, despite the verification activities performed by the Microfilm and Archival Storage Sérvices Facility (MASSF). If the F&S RC wishes to confirm microfilming accuracy and/or completeness, the procedure should reflect this activity as a voluntary action rather than a procedural requirement.

#### Recommendation No. 3

The statements of cause on Corrective Action Reports associated with the deficiency reports examined during the audit were often not clear with respect to the underlying root cause. The statements were often not to the point. For example, a statement implying the "Press of Business" is not as clear as stating "insufficient time Between <u>Release of the YMP</u> <u>Procedure</u> and the <u>Surveillance Date</u> for the available people to update the internal procedure."

The cause statement should be to the point and should serve as the basis for preventing recurrences.

#### Recommendation No. 4

Design Control procedure DC-03 defines the methods to be used by Fenix and Scisson personnel in performing and documenting Design Analyses. Design Analysis Form LV-308, first sheet, has nine instructions for the originator/discipline engineer (DE) to accomplish. This completed, the discipline engineer is at liberty to proceed with the design based on all of the input required by Form LV-308.

It is suggested changing the procedure such that the Lead Discipline Engineer (LDE) should be required to review and accept the criteria written by the DE. This would ensure that any omissions of codes/ regulations, or any unreasonable assumptions that may have been included, can be assessed for impact to the design by the LDE, rather than the DE completing his calculations and waiting till the interdiscipline review.

#### Recommendation No. 5

The education requirements for the LDE are less stringent than those of subordinate leads and senior engineer/specialists. It is the opinion of the Technical Specialists that two years of engineering education and four years of engineering field experience do not provide an adequate educational background for the job responsibilities. To lend additional credibility to the technical decisions, judgments, and approvals of the LDE, it is recommended that the educational requirement for the position be changed to a B.S. in Civil, Mechanical, Structural, or Mining Engineering.

#### Recommendation No. 6

Based on responses to questions in the Technical Checklist, certain areas are considered to be lacking in personnel knowledge, which would justify the recommendation that refresher training be provided prior to the commencement of Title II design work. These areas are interface control and configuration management. Due to the importance of the subject matter that these procedures control, it is recommended that such training be provided to all design personnel for the following procedures: DC-05, DC-25, DC-26, DC-27, and DC-28.

#### Recommendation No. 7

In DC-04, Design Verification, the following two sentences should be deleted: "In those cases, where this timing cannot be met, the portion or portions of design which have not been verified shall be identified and controlled. In all cases, the verification shall be completed prior to relying on the component, system, or structure to perform its function." The reasons for this deletion are (1) to remove the contradiction with the Section 2.0, Applicability, and (2) to avoid the possibility of compromising the site's ability to meet its site characterization or repository performance requirements and objectives. This compromise could occur by prematurely or improperly performing construction activities at the site in accordance with the unverified designs. This change would not violate the QAP, since the deletion of these two sentences makes the verification requirements more stringent, not less.

### 7.0 <u>Required Action</u>

A written response is required for each SDR delineated in Section 6.0. Responses to each SDR are due 20 working days from the date of the SDR transmittal letter. Upon response, acceptance, and satisfactory verification of all remedial and corrective actions, the SDRs will be closed and F&S will be notified by letter of closure.

A written response is required for the 19 Observations contained in Enclosure 4 of this report. Responses are due 20 working days after the transmittal letter of this report.

Written responses are not required for the recommendations contained in this report. The recommendations were generated by the audit team for the F&S staff to consider during implementation of its QA Program.

#### Severity Levels

#### Severity Level 1

Significant deficiencies considered of major importance. These deficiencies require remedial, investigative, and corrective actions to prevent recurrence.

#### Severity Level 2

A deficiency which is not of major importance, but may also require remedial, investigative, and/or corrective action to prevent recurrence.

#### Severity Level 3

A minor deficiency in that only remedial action is required. These deficiencies are generally isolated in nature or have a very limited scope. In addition, the integrity of the end result of the activity is not affected nor does the deficiency affect the ability to achieve those results.

## ENCLOSURE 2

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## ATTENDEES

## AUDIT REPORT 589-1

# ENCLOSURE 2

| NAME               | TITLE                  | ORGANIZATION | PREAUDIT   | DURING<br>AUDIT | POSTAUDIT |
|--------------------|------------------------|--------------|------------|-----------------|-----------|
| Arshad, Ali        | Sr. QA Engineer        | F&S          | X          | x               | X         |
| Blaylock, Jim      | Project QA Manager     | DOE/YMP      | X          | ••              | X         |
| Bolling, Pat       | Div./H. Resources      | F&S          | X          | X               | X         |
| Booth, Henry W.    | Sr. QA Proc. Spec.     | F&S          | X          | X               | X         |
| Bullock, R. L.     | Sr. Project Manager    | F&S          | X          | X.<br>X         | X         |
| Burns, Allan       | Observer               | SAIC         |            | ••              | X (       |
| Caldwell, Henry H. | Manager, Audit Div.    | SAIC         | X          |                 | . (       |
| Chytrowski, B. R.  | Project Design Manager | F&S          | X          | X               | X         |
| Cikanek, Edward    | Observer               | HARZA        | X          |                 | X         |
| Clark, James E.    | QA Auditor             | SAIC         | X          |                 | x         |
| Cocoros, A. E.     | Sr. QA Engineer        | F&S          | Ϋ́ Χ       |                 |           |
| Cox, Neil D.       | AIT                    | SAIC         | X          |                 | X         |
| Crawford, Sidney   | QA Auditor             | SAIC         | X          |                 | X         |
| Cross, Jack A.     | General Manager        | F&S          | X          |                 | X         |
| Dana, Stephen      | QA Auditor             | SAIC         | X z        |                 | X         |
| Edwards, Roxanne   | Engineer               | DOE          |            |                 | X         |
| Faust, Gary L.     | HQ Surv. Lead          | Weston       | X          |                 | X         |
| Furguson, J. E.    | Sr. Rec. Spec.         | F&S          | . <b>X</b> | X               | X         |
| Garms, Bill        | Sr. Project Engineer   | F&S          | X          | X<br>X          |           |
| Gelinger, T. H.    | Chief Comp. Serv.      | F&S          |            | X               | X         |
| Gilray, John       | On-Site Rep., Observer | NRC          | X          |                 | X         |
| Gonzales, M. R.    | Observer               | NRC          | X          | •               | X (       |
| Graves, B. J.      | Manager Administration | F&S          | X          | X               | X \       |
| Grenis, James D.   | Lead Design            | F&S/PB       | X          | X               | X         |
| Hale, Paul B.      | QA Specialist          | F&S          | X          | X               | X         |
| Hampton, Catherine | QA Specialist          | DOE          |            |                 | X         |
| Hans, Stephen      | QA Auditor             | SAIC         | X          |                 | X         |
| Jacocks, Harry L.  | Dir. Procurement       | F&S          | X          | X.<br>X         |           |
| Johnson, Janet     | Sr. QA Engineer        | F&S          |            | X               | X         |
| Kratzinger, Frank  | Observer               | SAIC         |            |                 | X         |
| Mansel, Wendell B. | Observer               | DOE/YMP      | X          |                 | X         |
| McConville, James  | Tech. Spec. Trainee    | HARZA        | X          |                 |           |
| Metta, Stephen     | QA                     | SAIC         | X          |                 | X         |
| Mika, Deborah L.   | Personnel Admin.       | F&S          | X          | X               | X         |
| -                  |                        |              |            |                 |           |

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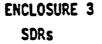
# AUDIT REPORT S89-1

ENCLOSURE 2

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(Continued)

| NAME   | TITLE   | ORGANIZATION   | PREAUDIT  | DURING<br>AUDIT                 | POSTAUDIT   |  |
|--|---|--|---|---------------------------------|---|--|
| Mirza, Mahmood B.<br>Montenyohl, Vic<br>Morrison, Gary L.<br>Murthy, Ram B.<br>Pershel, John<br>Prestholt, Paul<br>Regenda, Michael<br>Ricketts, Tom<br>Rue, Joseph L.<br>Ruth, Frederick J.<br>Sanchez, Nickie<br>Tunney, D. J.<br>Walkins, Arthur<br>Watson, Tom<br>Wilson, Matt<br>Zimmerman, Susan | Config. Cont. Manager<br>Surveillant<br>Cont./Proc. Specialist<br>Observer<br>On-Site Representative<br>Manager QA<br>Technical Specialist<br>QA Coordinator<br>QA Engineer<br>Personnel Specialist<br>Director QA Engineer<br>Technical Specialist<br>Technical Specialist<br>YMP Admin. Manager<br>QA Manager | F&S<br>Weston<br>F&S<br>DOE<br>NRC<br>NRC<br>F&S<br>SAIC<br>F&S<br>SAIC<br>F&S<br>SAIC<br>F&S<br>SAIC<br>HARZA<br>F&S<br>State of Nevada | X<br>X<br>X<br>X<br>X<br>X<br>X<br>X<br>X<br>X<br>X | X<br>X<br>X<br>X<br>X<br>X<br>X | X<br>X<br>X<br>X<br>X<br>X<br>X<br>X<br>X<br>X<br>X<br>X<br>X<br>X<br>X<br>X<br>X<br>X<br>X |  |



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ENCLOSURE 3

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|-------------------|--|--|---|---|
|                   | 1 Date 4/11/89   | 2 Sev                                  | erity Level 01 02                             | DIS Page 1 of 1   |
| Organization      | 3 Discovered During<br>Audit 89-1  | Sa identified By<br>J. E. Clark        | So Branch Chief<br>Concurrence Date           | 4 SDR No.<br>314 Rev. 0   |
|                   | 5 Organization<br>Fenix 6 Scisson  | - 6 Persons(s)<br>J. May, J.           |   | 7 Response Due Date is<br>20 Working Days from<br>Date of Transmittal |
| Originating QA    | S Requirement (Audit<br>Checklist Item<br>to documents si<br>performed the operations of the operation of the oper | 6-4, NNWSI 88-9,                       | Rev. 2, Sec. 6, Par.<br>and approved by the s | 2.1, states, "Changes<br>ame organization that                        |
| Completed by Orl  | before a docume<br>above requirement   | ented review by a<br>ent was therefore | violated.                                     | revious revision. The   |
| Comple            | 10 Recommended Act<br>1. Assure that<br>recurring.   |  | I Investigative I C rained to prevent thi     | orrective<br>s condition from   |
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| 10<br>¥           | A Remedial/Investigati   |  | •   | ifiective Date  |
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| Completed by (    |  |  |   |   |
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|                          | 1 Date 4/13/89                    | 2 Se   | everity Level                  |                                  | 3 Page 1  | of 2                 |
| <b>OA Organization</b>   | S Discovered During<br>Audit 89-1 | Sa Identified By<br>J. E. Clark                          | Sb Branch<br>Concu             | n Chief<br>mence Date            | 4 SDR No.<br>313 Re   | w0                   |
| A Orga                   | 5 Organization<br>Fenix & Scisson | · · ·  | s) Contacted<br>guson, Y. Re   | ndricks                          | 7 Response D<br>20 Working<br>Date of Trat                  | Davs from            |
|                          | receipt, the F                    | 17-1, F&S Proce<br>&S Records Cente                      | edures PP-50-<br>er Coordinato | -01, Rev. 3, a<br>or performs th | states in part "I<br>be following rece<br>ed record per the | ipt/                 |
| Completed by Originating |                                   | e above requirer<br>cument type as a                     |                                |                                  | receipt of transm   | littals              |
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| Block 5                  | 1 Remedial/Investigat             | ve Actions(s)  |                                | 15 Effe                          | ctive Date  |                      |
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| QA O                     | 20 Amended Acce<br>Response Reje  | à  | QAELead Au                     |                                  | Branch Manager  |                      |
| Ofg.                     | 21 Vertil- Satis<br>cation Unsi   | sfactory<br>atisfactory                                  | QAE/Lead AL                    | Janor/Date                       | Branch Manager  | / Date               |
| 3                        |                                   |  |                                |                                  |   |                      |
| Comp.                    | 23<br>QA CLOSURE                  | Lead Auditor/Date  | Branch Ma                      | nager/Date                       | PQM/Date  |                      |
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|--|--------------------------------|---------------|------------------------|--------|-----------------|
| SDR No. 313  | Rev. 0                         |               |                        | Page   | 2 of 2          |
| 5 Persons contacted  | ( continued                    | )             |                        |        | ·<br>·          |
| B Requirement ( cons<br>document type list<br>10 Recommended Actio | t and logs in<br>ons ( continu | ued)          |                        |        |                 |
| 3. Train personne  | el in more st                  | ringent recei | pt control mea         | sures. | •               |
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# ENCLÓSURE 4 OBSERVATIONS

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| Ŧ                               | WMI_DB                           | SERVATION               | <b>10.</b> 89-1-01   | N-QA-012<br>8/88  |
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| s                               | Noted During:<br>.QA Audit 89-1  | identified<br>Stephen i | -  | Dete:<br>4/14/89  |
|                                 | Organization:<br>Fenix & Scisson | Person(s)<br>Dan Tunne  | Contacted:<br>2y   | Response Due Date Is<br>30 Days from Date of<br>Transmitted |
| Completed by Originating OA Org | disputes progre                  | ssively to the          | ished at F & S to elevate<br>MP, PQM.<br>2, Sec. 1, Par. 2.2 | £<br>   |
| 8                               | Cherland Aughtor                 | Octo<br>4/25/89         | Branch Manager   | Dete<br>250pr 89  |
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|                                | Fenix & Scisson   | J. McKenz   | tie and M. Mrugala                                     | Transmittel                                  |
| Completed by Originating QA On | Discussion:<br>A major concern of<br>underground opening<br>This can create may<br>flow and the possil<br>in the environment<br>blast damage effect<br>controlled in order<br>can also affect the<br>if it is not done<br>understood. | gs produced<br>n-made pref<br>ble transpo<br>. Once the<br>ts remain,<br>r to not co<br>e results o | ation.<br>Id<br>clides<br>the<br>ing<br>esting<br>well |  |
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Thus, it is necessary that a carefully designed and detailed plan be implemented during shaft and drift blasting that integrates blast design and blast damage assessment activities. This plan basically consists of conducting a blast(s), performing blast damage assessment measurements and then using these damage zone results to modify the blast design before the next round(s) are conducted. This process should be done on a frequent basis to insure damage is not being produced as rock properties or other site conditions change. In addition, a strict quality control program should be implemented on the drill/blast process, as well as, the explosives and detonators.

This concern translates to the fact that the efforts of J. McKenzie and M. Mrugala must be closely integrated, not only by words, but in a definite plan and by areas of responsibility defined by management. These individuals must work together both in the planning and during the blasting operations for the plan to be successful. F4S may choose to set up a working group of experts to help formulate and review the planning phase and even evaluate the results of blast damage measurements during operations. The identification of a damage assessment method or a correlation of damage zone to peak particle velocity will be difficult and suggests the use of a highly qualified and somewhat diverse working group.

Once operations commence, there is the additional concern that the blasting engineer will not have the flexibility to modify the blasting design without going through what could be a timely change control process. This needs to be thought out so that shaft sinking operations are not brought to a standstill. This concern is, at least partly, tied to the blasting specifications which need to be very carefully formulated to allow some latitude of minor design changes during day-to-day operations without going through the change control process, and would not change the overall design basis. The specifications also need to reflect the blast damage assessment issue so a blast design change will be required when a certain blast damage parameter value is exceeded. N~\_ 8/88

| •                             | WMPC  | BSERVATION  | NO. 89-1-03              | N-QA-012<br>8/88                   |
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| 5                             | QA Audit 89-1   | J. E. CI  | lark                     | 4/14/89                            |
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|                               | Fenix & Scisson   | J. Rue,   | J. May, D. Tunney        | M Days from Date of<br>Transmitted |
| Completed by Originating QA ( | personnel rega<br>of QAPs, PPs,<br>QA Program imp<br>consistent exp<br>procedure appl<br>establish a hi | ions drawn among F&S QA<br>tive purposes and applicate<br>procedures constitute to<br>ments, yet there was no<br>how and to whom each type<br>inted policy is needed to<br>the implementing procedure<br>the purpose and applicable | the FLS<br>pe of<br>res, |                                    |
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| • •                            | WMP_BS  | ERVATION   | <b>10.</b> <u>89-1-04</u>   | N-QA-012<br>8/88                    |
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|                                | QA Audit 89-1   | J. E. C1   | ark   | 4/14/89                             |
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|                                | Fenix & Scisson   |  | J. May, B. Chytrowski   | 80 Days from Dale of<br>Transmitted |
| δ                              | Discussion:   |  |   |                                     |
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|                                | OAE/Load Auditor  | Date   | Branch Manager  | Date                                |
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| •                               | WMP DESERVATION NO. 89-1-05 NOA-012  |                           |                |  |  |  |  |
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|                                 | Organization:<br>Fenix & Scisson   | Person(s) Contacted:      |                | Response Due Date la<br>30 Days from Date of<br>Transmissi |  |  |  |
| Completed by Originating OA Org | Fenix & ScissonJ. Grenia/B. ChytrowskiDiscussion:The Subsystem Design Requirements Document (SDRD) has be<br>prepared in draft review versions, but has not been form<br>received by F&S as Design Basis Information (logged,<br>controlled QA record, etc.) because the SDRD had not been<br>approved by the Project Office. Nonetheless, F&S has us<br>the SDRD, Benchmark 3 (1/23/89) as a primary input source<br>for the Basis for Design (BFD), Issue 2 document.<br>Furthermore, SDRD, Benchmark 4 (1/31/89) has been used by<br>F&S to update the BFD. |                           |                | ;<br>been<br>cormally<br>been<br>; used<br>ource           |  |  |  |
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| l s                             | Audit 89-1  | S. Crawfo   | ord  | 4/14/89   |
| Particular                      | Organization:<br>Fenix & Scisson  | Person(s) (<br>J. Grenia  | Contected:<br>a/A. Ali/B. Chytrowski   | Response Due Date Is<br>30 Days from Date of<br>Transmittel |
| Completed by Originating OA Org | "Design Scope and E<br>described, and does<br>Scope and Planning<br>Levels may be deter<br>Dictionary, QA Lev<br>Document, etc., the<br>subject to QA revie | Planning Do<br>s not requi<br>Documents.<br>mined by o<br>vel Assignm<br>scoping a<br>tw. | anning process, resulting<br>cuments", is not procedure<br>re F&S QA review of the De<br>Although work scope and<br>other documents including to<br>bent Sheets, Basis for Desi<br>and planning documents show | ally<br>esign<br>Qa<br>MBS<br>Ign                           |
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|                                 | Fenix & Scisson   | J. Grenia     | a/A. Ali/B. Chytrowski          | 80 Days from Date of<br>Transmitted |  |  |
| Completed by Originating OA Ori | Discussion:<br>The Basis for Design Document, Issue 2, Cover Sheet (draft)<br>does not include provision for QAR approval signature, a<br>procedurally required action. |               |                                 |                                     |  |  |
| 0                               | QAE/Load Auditor  | Date<br>25 89 | Branch Manager<br>RA Calbuell 2 | Dete<br>5 & 21 8 9                  |  |  |
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| OAEFbaad Auditor     Date     Branch Manager     Date       HARLE     4125189     At A Culturell     25 April 89       Response:     At A Culture     Date       Bignature:     Date     Date:       Response Receipt Vertiled/Closed     D       QAE/Leed Auditor     Date     Branch Manager  | ÷ 7  | WM( )   |   | NO. 89-1-08  |                                 | N-QA-012<br>8/88                             |
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| Organization:<br>Fenix & Scisson       Person(s) Contacted:<br>J. Grenia/B. Chytrowski       Response Due Date &<br>Stopp from Date of<br>Transfer         Discussion:       Many codes and standards listed in the BFD are not<br>identified by specific year/edition, although a few (notably<br>ACT standards) have been listed with specific year. The BFD<br>should reflect actual editions of codes and standards to be<br>used for design basis.         CAEPbaad Auchter       Date       Branch Manager       Date         CAEPbaad Auchter       Date       Branch Manager       Date         Response       Response       Date:       Response         Bignature:       Date       Date:       Date:         Response       Response       Date       Branch Manager       Date   |  |   |   | ÷  |                                 | -  |
| Discussion:       Nany codes and standards listed in the BFD are not identified by specific year/edition, although a few (notably ACI standards) have been listed with specific year. The BFD should reflect actual editions of codes and standards to be used for design basis.         CAEPtand Auchor       Date         Branch Manager       Date         CAEPtand Auchor       Date         Branch Manager       Date         CAEPtand Auchor       Date         Branch Manager       Date | Organization:<br>Fenix & Scisson                     |   | Person(s  | ) Conlacted:   |                                 | Response Due Date Is<br>20 Days from Date of |
| Higher     Ales 189       Response:     Bignature:       Bignature:     Dete:       Response Receipt Vertified/Closed     Dete:       QAE/Leed Auditor     Dete   |  | identified<br>ACI standar<br>should refl<br>used for de | by specific y<br>rds) have been<br>lect actual ed<br>esign basis. | ear/edition, althou<br>listed with specif<br>itions of codes and | gh <b>a few (</b> )<br>ic year. | The Brn                                      |
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| QA Audít 89-1   | S. Crawfo  | ord  | 4/14/89   |
| Organization:<br>Fenix & Scisson  |  |  | Response Due Dete la<br>80 Days from Date of<br>Transmittal   |
| SDRD Benchmark 4; t<br>of DC-09, Interdisc<br>using a Review Comm<br>the Document Review<br>DC-09. The reviews<br>Logs, either the Re<br>Document Review Not<br>approved, the revie<br>the quality record | he review with the review with the record when the record were not a with the record with the record of the record | was performed to the provisitiew. The review was docume<br>(RCR), Form LV-317 instead<br>RN), form LV-316, identifier<br>logged in the Project Contr<br>Int Record Log or on the<br>Although the BFD is not fir<br>and resolution are a part<br>he BFD and should be logged  | ions :<br>ented<br>l of<br>ed in<br>col<br>mally<br>of  |
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|   | QA Audit 89-1<br>Organization:<br>Fenix & Scisson<br>Discussion: BTD (Issue 2) was r<br>SDRD Benchmark 4; t<br>of DC-09, Interdisc<br>using a Review Comm<br>the Document Review<br>DC-09. The reviews<br>Logs, either the Re<br>Document Review Not<br>approved, the review<br>the quality record<br>the Project Control<br>CAEAred AugRor.<br>Response:<br>Bignature:<br>Response Receipt VertHed/Closed<br>QAEAead AugRor   | QA Audit 89-1       S. Crawfo         Organization:       Fenix & Scisson         Discussion:       BFD (Issue 2) was reviewed by SDRD Benchmark 4; the review of DC-09, Interdiscipline Review Comment Record the Document Review Notice (DDC-09. The reviews were not Logs, either the Review Comments the Quality record base for the Project Control Logs.         OAEAred Audior.       Oate         Response       Oate         Bignature:       Response Receipt Verthed/Closed       D         QAEAred Audior       Date | QA Audit 89-1       S. Crawford         Organization:       Person(a) Contacted:         Fenix & Scisson       J. Grenia/B. Chytrowski         Discussion:       BFD (Issue 2) was reviewed by FaS for updates resulting<br>SDRD Benchmark 4; the review was performed to the provisi<br>of DC-09, Interdiscipline Review. The review was docume<br>using a Review Comment Record (RCR), Form LV-317 instead<br>the Document Review Notice (DRN), form LV-316, identifie<br>DC-09. The review were not logged in the Project Contri<br>Logs, either the Review Comments Record Log or on the<br>Document Review Notice Log. Although the BFD is not fir<br>approved, the review comments and resolution are a part<br>the guality record base for the BFD and should be logged<br>the Project Control Logs.         OAE/Lead Auditor       Date         Branch Manager         Al25/86       The Herdelling         Response Receipt Vertfied/Closed       D         QAE/Lead Auditor       Date         Branch Manager |

| 1                              | WMF_J   | <b>BSERVATION</b>  | <b>+0.</b> 89-1-10  | N-QA-012<br>8/88                         |
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|                                | Fenix & Scisson   | J. Greni   | a/B. Chytrowski   | 80 Days from Date of                     |
| Completed by Originating OA Or | Discussion:<br>Design procedur<br>program and pro-<br>control of the<br>describe specifies, boundaries<br>standards, and<br>performance crip<br>preliminary BFI | Dvides adminis<br>BFD document.<br>fic format and<br>as and interfa<br>regulations;<br>teria; constr | ibes the "Basis for Designation provisions for the<br>However, DC-15 does not<br>content provisions for<br>ces; applicable codes,<br>functional requirements;<br>aints; and assumptions.<br>d contain the above infor | he<br>the BFD,<br>The<br>mation.<br>Date |
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|  |                                      | ERVATION NO. 89-1-11   |   |  |
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| Noted During:<br>QA Audit 89-1                                     |                                      | Identified By:<br>S. Crawford  |   |  |
| Organization:<br>Fenix & Scisson                                   | Person(s)<br>J. Greni                | Contacted:<br>a/B. Chytrowski  | Response Due Date to<br>30 Days from Date of<br>Transmitted |  |
| Interdiscipli<br>verification                                      | ine Review (Par.<br>as occurring be: | r. 6.5.2 and 6.5.4) and 1<br>6.1.2) discuss design<br>fore interdiscipline revi<br>s prior to design verific | lew;  |  |
| QAE/Load Auditor .   | <b>Date</b><br>4   25   89           | Branch Manager   | Date<br>25 08-1 89  |  |
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|                                | QA Audit 89-1   | identified B<br>S. Crawfo  | •                             | Dete:<br>4/14/89  |  |  |  |
| Perfect of                     | Organization:<br>Fenix & Scisson  | Person(s) C<br>J. Grenia   | Contacted:<br>A/B. Chytrowski | Response Due Date Is<br>80 Days from Date of<br>Transmitted |  |  |  |
| Completed by Onlyneting QA Ory | Discussion:<br>Design Procedure Di<br>review, and approvi<br>(Construction and 1<br>describe comment de<br>check and initial<br>review comments and<br>Specification Engin<br>procedure is not de | al for F4S<br>Performance<br>ocumentation<br>review point<br>d resolution<br>neer signoff<br>escribed in | the<br>ed;<br>the             |   |  |  |  |
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| WMPO OBSERVATION NO. 89-1-13 NOA-012 |                                  |               |                                       |                                     |  |  |
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| •                                    | WMPO OBSE                        | RVATION N     | 0. 89-1-13                            | 4/34                                |  |  |
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| e                                    | QA Audit 89-1                    | S. Crawfo     | ord                                   | 4/14/89                             |  |  |
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| 1                                    | Fenix & Scisson                  | D. Bulloc     | : <b>k</b>                            | St Days from Date of<br>Transmitted |  |  |
| 8                                    | Discussion:                      |               | · · · · · · · · · · · · · · · · · · · |                                     |  |  |
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| ð                                    | CAELAND AUGITOR.                 | Date ,        | Branch Manager m M                    | Date                                |  |  |
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|                                      | QAELead Auditor                  | Dete          | Branch Manager                        |                                     |  |  |
| Concisted By OA On.                  | Remarks:                         |               |                                       | •                                   |  |  |
|                                      |                                  |               |                                       |                                     |  |  |

WM OBSERVATION NO. 89-1-13 INTINUATION PAGE N-QA-012

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OF

The definition for a technical work product does not include or reference the SDRD. In addition, sections of this procedure would not be applicable for review of the SDRD: For example: (1) Par. 6.1.2 states that, "All technical work products shall be complete and checked in accordance with the requirements of DC-03 before beginning the interdiscipline review process; (2) Par. 6.2.2, 2nd paragraph, states, "If interdiscipline review is not necessary...". If FaS intends to continue use of DC-09 for review of the SDRD, the procedure definition for a technical work product should be revised to include the SDRD; and, the procedure should be revised (e.g., Section 6.1, "General") to exclude those portions of the procedure that are not applicable to review of the SDRD.

|                                | WMPO OBSE  | RVATION N  | 0. 89-1-14                       | N-QA-012<br>8/58   |
|--------------------------------|--|--|----------------------------------|--|
|                                | Noted During:<br>QA Audit 89-1   | identified B<br>S. Dana  | <b>y</b> .                       | Dete:  |
|                                | Organization:<br>Fenix & Scisson   | Person(a) C<br>A. Ali/J.   |                                  | 4/14/89<br>Response Due Date to<br>the Days from Date of |
| ompheted by Orighnshing OA Org | Discussion:<br>F4S Procedure DC-1:<br>external source Re-<br>in the Project Con-<br>his designee for an<br>transmittals are bo<br>Correspondence Log<br>Project Control Log<br>Document Review Not | 1, Rev. 6,<br>view and Co<br>trol Log Bo<br>ction." Th<br>eing record<br>, not the P<br>g contains | or                               |  |
| 8                              |  | <b>Date</b><br>+ 25 89   | Branch Manager Report Calquell 3 | Deto<br>2508189  |
| Campieted By Respondee         | Response   |  |                                  | •  |
|                                | Signatura:   |  | Dete:                            |  |
|                                | Response Receipt Vertiled/Closed<br>QAE/Leed Auditor   | C)<br>Date   | Branch Manager                   | Dete   |
| Completed By OA Orp.           | Remarks:   |  |                                  |  |

WM. OBSERVATION NO. 89-1-14 CONTINUATION PAGE

Review Comment Log, Design Sheet Log, Review Comment Record Log, Design Interface Control Log, Specification Log), which some of the logs (identified above) are designated as QA records. If F&S intends for the Project Control Log to incorporate the logs mentioned above within a single binder, the procedure should be revised to reflect the intended usage of the Log. In addition, no procedure was found that identified responsibilities for control of the Project Control Log. N-QA-012

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|                               | WMLOBSE  | RVATION N  | 0. 89-1-15  | N-QA-012<br>8/85  |
|-------------------------------|--|--|---|---|
| Ĩ                             | Noted During:  | Identified By  | 6   | Deter   |
| <b>اء</b> ا                   | QA Audit 89-1  | S. Dana  |   | 4/14/89   |
| ł                             | Organization:<br>Fenix & Scisson   | Person(s) C<br>D. Tunney   | onlacted:<br>/J. Johnson  | Response Due Date is<br>St Days from Date of<br>Transmitted |
| Completed by Ortpheting OA On | PP-60-01 presentat:<br>Manager, Technical<br>and training class<br>M. Regenda, an amer<br>(for M. Regenda), a<br>(3/6/89). All indi<br>response to, and cl | ion of the<br>Support di<br>The init<br>nded respon<br>and the DR<br>ividuals in<br>losure of D<br>he DR, QAPP | J. Johnson, documents, (1<br>F4S QAPP, REV. 3, and (2)<br>d not attend the indoctrin<br>ial DR response was provid<br>se was provided by D. Tunn<br>was closed by D. Tunney<br>volved in the initiation,<br>R-010 are QA personnel, ev<br>training, was and still i | the<br>ation<br>ed by<br>ey<br>en                           |
| Ĭ                             | OAEA and Auditor   | 0#0<br>4/25/89   | Branch Manager  | 0 <b>eto</b><br>505-18-9                                    |
| Completed By Respondee        | Response:  | •  |   | •   |
|                               | Signature:   |  | Dete:   |   |
|                               | Response Receipt Verified/Closed   | ٥  |   |   |
| Completed By OA Org.          | QAEA.eed Auditor<br>Remarks:   | Date   | Branch Manager  | Dete  |
|                               |  |  |   |   |

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# WMP OBSERVATION NO. 89-1-15

N-QA-012 8/68

To assure independence of areas for which QA has direct: responsibility, F&S should detail how it plans to handle audits/surveillances relative to QAPP training in the future and resolution of DRs in areas for which they have responsibility.

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| . 7                           | WMPC BSEF   | RVATION N   | 0   | N-QA-012<br>8/06                   |
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|                               | Noted During:   | identified B  | Y.  | Deter                              |
|                               | QA Audit 89-1   | S. Dana   |   | 4/14/89                            |
| . 1                           | Organization:   | Person(s) C   | contacted   | Response Due Date to               |
|                               | Fenix & Scisson   | D. Tunney   |   | M Days from Date of<br>Transmitted |
| Completed by Orlpheting OA Or | Discussion:<br>1. Fas Procedure QAP-<br>trend analysis sha<br>recommended that the<br>analysis can be pe<br>This will ensure i<br>immediate actions<br>Considering the main<br>would be advantage<br>is allowed to cont | 16.3(N), "<br>11 be perf<br>he procedu<br>rformed mo<br>f an adver<br>can be tak<br>ny tasks i<br>ous to ide<br>inue from | i<br>at<br>It is<br>d<br>erly).<br>n.<br>, it<br>ore it |                                    |
|                               |   | Dete<br>25/89   | Branch Manager  | 000<br>5 99 99                     |
| Completed By Respondee        | Response  |   |   | •                                  |
|                               | Signatura:  |   | Dete:   |                                    |
|                               |   | D   |   |                                    |
| Completed By OA Org.          | QAE/Leed Auditor<br>Remarks:  | Date  | Branch Manager  | Dete                               |
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WM. OBSERVATION NO. 89-1-16 CONTINUATION PAGE

2. The F4S Trend Analysis Report, dtd. 3/28/89, does not go into sufficient detail explaining why the trends identified are not adverse to quality. The report stated that, "A , Corrective Action Request is not required for these since this is the first analysis...". The analysis covered the period from 5/86 - 2/89 with a sample-size (population) of 143 (deficiency reports). Two areas were identified as comprising 29% (procedure violation) and 31% (Inadequate/ incomplete procedures) of the total population. The above would indicate that 2 1/2 years with a sample-size of 143 is sufficient data to conclude whether the trends are adverse to quality or not.

It is recommended that future Trend Analysis Reports provide additional justification whether a trend is or is not adverse to quality. -

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N-0A-012

8/38

|                                  | WMPC BSE   | AVATION N   | <b>10.</b> <u>89-1-17</u>         | N-QA-012                                    |
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|                                  | Noted During:  | 6 bellünebi   | Y:                                | Dele:                                       |
|                                  | QA Audit 89-1  | Stephen I   | P. Hans                           | 4/14/89                                     |
|                                  | Organization:  | Person(s) C   | contactad:                        | Response Due Date to                        |
|                                  | Fenix & Scisson  | Joe Rue   |                                   | 80 Days from Date of Transmitted            |
| oripitated by Originating QA Org | Discussion:<br>FES has not develop<br>needs of personnel<br>performing quality<br>to train all engine<br>does not address in | to gain th<br>affecting<br>ers to all<br>iteraction<br>personnel, |                                   | or to<br>e is                               |
| ð                                |  | Date  | Branch Manaper<br>RAA Calquell 2. | Date  |
|                                  | - Koni 4   | 25/89   | Roft/Calquell 3                   | 5 921 89                                    |
| Completed By Respondee           | Response:  |   |                                   |   |
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|                                  |  | Dete  | Branch Manager                    | Dete  |
| Completed By QA Orp.             | Remarks:   |   |                                   |   |
|                                  |  |   |                                   |   |

|                                | WMI-OBSERVATION NO. 89-1-18 NOA-012  |   |   |  |  |  |
|--------------------------------|--|---|---|--|--|--|
|                                | Noted During:<br>QA Audit 89-1   |   | Kenulled by:<br>Stephen P. Hans   |  |  |  |
| ĺ                              | Organization:<br>Fenix & Scisson   | Person(a) C<br>H. Jacock  |   | Response Due Date is<br>80 Days from Date of<br>December |  |  |
| Completed by Originating OA Or | Inc., revealed tha<br>Access or Document<br>referenced in the<br>during Title I; th<br>However, the subco<br>scope of work. Sh<br>accomplished in Ti<br>subcontract, a vio | tract SC-TS-<br>t no technic<br>ation Requir<br>subcontract,<br>erefore, an<br>ntract does<br>ould the spe<br>tle II with | -88-269, Arthur D. Little,<br>cal requirements, Right of<br>rements had been established<br>This work was accomplish<br>SDR is not appropriate.<br>include a specific Title 1<br>ecific scope of work be<br>out a modification of the<br>ne requirements would result | d or<br>wed  |  |  |
|                                | CAEA and Auditor   | Date<br>4 25 89   | Branch Managor Duell 2  | <b>Deto</b><br>5 Apr 89                                  |  |  |
| Completed By Respondee         | Responde   |   |   | •  |  |  |
|                                | Signature:   |   | Dete:   |  |  |  |
|                                | Response Receipt Verified/Closed<br>QAE/Lead Auditor   | Date  | Branch Manager  | Dete   |  |  |
| Completed By OA Org.           | Remarks:   |   |   |  |  |  |
|                                |  |   |   |  |  |  |

| WMP6_BSERVATION NO. 89-1-19 8/38  |   |                                    |                      |   |
|-----------------------------------|---|------------------------------------|----------------------|---|
|                                   | Noted During:   | identified by                      | r.                   | Dets:   |
|                                   | QA Audit 89-1   | Stephen P                          | . Hans               | 4/14/89   |
|                                   | Organization:<br>Fenix & Scisson  | Person(s) Contected:<br>Dan Tunney |                      | Response Due Date Is<br>30 Days from Date of<br>Transmittel |
| Completed by Originating OA Organ | Discussion:<br>Fas does not currently have in place sufficient implementing<br>procedures to meet the requirements of Criteria F; "Control<br>of Purchased Items and Services." This fact is established<br>in Fas letter: YMP 1238, dtd: 3/24/89, J. A. Cross to<br>K. Gertz. Since no QA Level I or II procurement activity<br>has taken place to date, a SDR is not appropriate. However,<br>if QA Level I or II procurements are processed without a<br>modification to current implementing procedures, a violation<br>of the requirement would result. This problem has been<br>previously identifed on Fas DR-044. |                                    |                      |   |
| 0                                 |   | Date<br>-/25/89                    | Branch Manager Quell | 0sto<br>95 Gri 89   |
| Completed By Respondee            | Responé   |                                    |                      |   |
|                                   | Signature:  | Dete:                              |                      |   |
|                                   | Response Receipt Vertfled/Closed  |                                    |                      |   |
|                                   | QAEA and Auditor  | Date                               | Branch Manager       | Dete  |
| Completed By OA Org.              | Remarka:  |                                    |                      | ·   |



## Department of Energy

Nevada Operations Office P. O. Box 98518 Las Vegas, NV 89193-8518 APR 24 1989

WBS #1.2.9.3 "QA"

## OA RECENTED

Richard L. Bullock Technical Project Officer for Yucca Mountain Project Fenix & Scisson, Inc. 101 Convention Center Drive Phase II, Suite P-250 M/S 403 Las Vegas, NV 89109

ISSUANCE OF STANDARD DEFICIENCY REPORTS (SDRs) 313 AND 314, RESULTING FROM YUCCA MOUNTAIN PROJECT OFFICE (PROJECT OFFICE) QUALITY ASSURANCE (QA) AUDIT 89-1 OF FENIX & SCISSON, INC. (F&S) (NN1-1989-2018)

Enclosed are SDRs 313 and 314, generated as a result of Project Office QA Audit 89-1 of F45.

Please identify the corrective actions to be taken and implemented to correct the deficiencies by completing blocks 14 through 18, as appropriate, on each SDR.

Responses to the SDRs are due within 20 working days of the date of this letter. Any extension to these due dates must be requested in writing with appropriate justification prior to the due date. Please send the original of your responses to Nita Brogan, Science Applications International Corporation, 101 Convention Center Drive, Las Vegas, Nevada, 89109, and a copy to Ralph Gray, U.S. Department of Energy, P. O. Box 98518, Las Vegas, Nevada, 89193.

Your cooperation and timely response is appreciated. If you have any questions, please contact Wendell B. Mansel of my staff at 794-7945, or John C. Friend of Science Applications International Corporation at 794-7164.

James Blaylock Project Quality Manager Yucca Mountain Project Office

YMP:WBM-3442

Enclosure: SDRs 313 and 314

APR 24 1989

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#### Richard L. Bullock

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cc w/encl: J. J. Brogan, SAIC, Las Vegas, NV L. G. Scherr, SAIC, Las Vegas, NV J. C. Friend, SAIC, Las Vegas, NV

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cc w/o encl: Ralph Stein, HQ (RW-30) FORS Dwight Shelor, HQ (RW-3) FORS M. J. Regenda, F&S, Las Vegas, NV H. H. Caldwell, SAIC, Las Vegas, NV E. P. Ripley, SAIC, Las Vegas, NV J. W. Gilray, NRC, Las Vegas, NV