Department of Energy
Nevada Operations Office
P. O. Box 98518
Las Vegas, NV 89193-8518

WBS 1.2.9.3
QA

OCT 03 1989

Richard J. Herbst
Technical Project Officer for Yucca Mountain Project
Los Alamos National Laboratory
University of California
N-5, Mail Stop J521
P.O. Box 1663
Los Alamos, NM 87545

CLOSURE OF STANDARD DEFICIENCY REPORT (SDR) 206, REVISION 0, RESULTING FROM YUCCA MOUNTAIN PROJECT OFFICE QUALITY ASSURANCE AUDIT 88-08 OF LOS ALAMOS NATIONAL LABORATORY

SDR 206, Revision 0, has been closed based on satisfactory verification of completed corrective actions. A copy of the SDR is enclosed for your files.

If you have any questions, please contact James Blaylock of my staff at (702) 794-7913 or FTS 544-7913, or William H. Camp of Science Applications International Corporation at (702) 794-7166 or FTS 544-7166.

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

YMP:JB-6107

Enclosure:
SDR 206, Revision 0

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PDR WASTE
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FULL TEXT ASCII SCAN
ADD: JEKennedy

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WMPO STANDARD DEFICIENCY REPORT

N-QA-038
3/87

Completed by Originating QA Organization

1 Date 10/6/88 | 2 Severity Level ☐ 1 ☒ 2 ☐ 3 | Page 1 of 3

3 Discovered During	3a Identified By	3b Branch Chief Concurrence Date	4 SDR No.
Audit 88-08	J. Friend/D. Chesnut		206 Rev. 0

5 Organization	6 Person(s) Contacted	7 Response Due Date is 20 Working Days from Date of Transmittal
LANL	H. Nunes/S. Dye	

8 Requirement (Audit Checklist Reference, if Applicable)
(Audit Checklist Item No. 8-8A) LANL NNWSI QAPP R.2, Section 8.0, Para. 1, Identification and control of data. "The identifcation of NNWSI Project Data includes a reference to the origin of the data."

9 Deficiency
Milestone Report No. R718, 10/7/87 "Formation, Characterization, and Stability of Plutonium (IV)-Colloid" is not traceable to the source of primary data. The report contains no references to the laboratory notebooks (or other

10 Recommended Action(s): ☒ Remedial ☒ Investigative ☒ Corrective

1. A review of existing Los Alamos Milestone Schedules and other reports to ensure the location and identification of the appropriate laboratory and

Aprvl.

11 QAE/Lead Auditor Date	12 Branch Manager Date	13 Project Quality Mgr. Date
William H. Camp 11/4/88	[signature] 9 Nov 88	James Blaylock 11/14/88

Completed by Organization in Block 5

14 Remedial/Investigative Action(s)

15 Effective Date 4/27/89

Refer to Page 3 of 3

16 Cause of the Condition & Corrective Action to Prevent Recurrence

17 Effective Date 1/27/89

Refer to Page 3 of 3

18 Signature/Date
HP Nunes 12/21/88

Comp. by Orig. QA Org.

		QAE/Lead Auditor/Date	Branch Manager/Date
19 Response	☐ Accept ☒ Amended Response ☐ Reject	William H. Camp 2-10-89	[signature] 10 Feb 89
20 Amended Response	☒ Accept ☐ Reject	William H. Camp 4-19-89	[signature] 20 Apr 89
21 Verification	☒ Satisfactory ☐ Unsatisfactory	CC Wan / Wm H. Camp 9-21-89	[signature] for 9/21/89

22 Remarks THIS QAS-QP-3.2, R0 WAS REVIEWED WITHOUT COMMENT ON 5-22-89 (SEE SAIC REPORT YMP-SR-89-164). VERIFICATION OF PERSONNEL TRAINING TO THIS PROCEDURE WAS PERFORMED ON 8-9-89. BECAUSE IMPLEMENTATION OF THIS QAS-QP-3.2 IS NOT EXPECTED IN THE FORESEEABLE FUTURE, IMPLEMENTATION CANNOT BE VERIFIED AT THIS TIME. HOWEVER, THIS PROCEDURE WILL BE SUBJECT TO EVALUATION BY VARIOUS ORGANIZATIONS WHEN IMPLEMENTED.

23 QA CLOSURE	QAE/Lead Auditor/Date	Branch Manager/Date	PQM/Date
	CC Wan / Wm H. Camp 9-21-89	[signature] for 9/21/89	James Blaylock 9/21/89

9 Deficiency (continued)

documents) used for applicable experiments.

10 Recommended Actions (continued)

field notebooks is clear, with the issuance of addenda to affected reports with the additional data; and

2. addition of review criteria to internal reviews of new milestone reports to insure that such links are clearly spelled out.

14. Remedial/Investigative Action(s)

The audit finding incorrectly references Section 8.0, Paragraph 1, of the LANL QAPP, Rev. 2 (effective 4/25/88). Section 8.3, Paragraph 1, contains the cited stipulation. The LANL QAPP, Rev. 1 (effective 5/11/87), did not contain such a stipulation.

Reports issued after 4/25/88 will be reviewed and added as appropriate.

The technical review procedure (TWS-QAS-QP-03.2, R0), currently undergoing revision, will include review criteria pertaining to the referencing of YMP data sources.

16. Cause of Condition and Corrective Action to Prevent Recurrence

Cause: Inadequate procedural direction. The applicable procedure (TWS-QAS-QP-07, R2) was not properly revised to reflect changes in the QAPP.

Corrective Action: Implement and train personnel to revised procedure by 1/27/89.

14. Remedial/Investigative Action(s)

The audit finding incorrectly references Section 8.0, Paragraph 1, of the LANL QAPP, Rev. 2 (effective 4/25/88). Section 8.3, Paragraph 1, contains the cited stipulation. The LANL QAPP, Rev. 1 (effective 5/11/87), did not contain such a stipulation.

Reports issued after 4/25/88 will be reviewed and addended as appropriate.

The technical review procedure (TWS-QAS-QP-07, R2) is being revised and will be issued as TWS-QAS-QP-03.2, R0. This procedure will include review criteria pertaining to the referencing of YMP data sources.

16. Cause of Condition and Corrective Action to Prevent Recurrence

Cause: Inadequate procedural direction. The applicable procedure (TWS-QAS-QP-07, R2) was not properly revised from earlier revisions to reflect changes in the QAPP.

Corrective Action: Implement and train personnel to QP-03.2, R0, by 4/15/89.

cc w/encl:
Ralph Stein, HQ (RW-30) FORS
Dwight Shelor, HQ (RW-3) FORS
H. P. Nunes, LANL, Los Alamos, NM
J. J. Brogan, SAIC, Las Vegas, NV, 517/T-12
W. H. Camp, SAIC, Las Vegas, NV, 517/T-06
J. H. Nelson, SAIC, Las Vegas, NV, 517/T-04
S. W. Zimmerman, NWPO, Carson City, NV
J. E. Kennedy, NRC, Washington, DC

cc w/o encl:
H. E. Valencia, LAAO
J. W. Hines, NWQA, AL
A. R. Chernoff, MSD, AL
G. P. Fehr, SAIC, Las Vegas, NV, 517/T-12
V. D. Hedges, SAIC, Las Vegas, NV, 517/T-06
A. L. Temple, SAIC, Las Vegas, NV, 517/T-38
R. J. Bahorich, W, Las Vegas, NV, 517/T-12
J. W. Gilray, NRC, Las Vegas, NV