

Department of Energy

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WBS #1.2.9.3 "QA"

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CLOSURE OF STANDARD DEFICIENCY REPORT (SDR) 216, REVISION 0, RESULTING FROM YUCCA MOUNTAIN PROJECT OFFICE QUALITY ASSURANCE AUDIT 88-08 OF LOS ALAMOS NATIONAL LABORATORY

SDR 216, Revision 0, has been closed based on satisfactory verification of completed corrective action. A copy of the SDR is enclosed for your files.

If you have any questions, please contact 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-5599

Enclosure: SDR 216, Revision 0

cc w/encl:

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3	WMPO STANDARD DEFICIENCY REPORT N-QA-038					
	1 Date 10/4/88 2 Severity Level X 1 □ 2 □ 3 Page 1 of 2 3					
Organization	3 Discovered During 30 Identified By Audit 88-08		36 Branch Chief Concurrence Date	4 SDR No. 216	Rev. <u>0</u>	
	5 Organization LANL	6 Person(s) Co H. Nunes	ontacted	20 Work	7 Response Due Date is 20 Working Days from Date of Transmittal	
Originating QA	8 Requirement (Audit Checklist Reference, if Applicable) (Audit Checklist Item 2-5) LANL-NNWSI-QAPP, Rev. 2, Section 2.0, Quality Assurance Program, Para. 2.1.1, Verification of the Quality Assurance Program Plan (QAPP) states: *The QAPL or his appointee will conduct internal audits					
à	In evaluating the LANL Audit Schedule, the activities identified were all technical in matter. There is no objective evidence that the applicable					
Completed						
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ι 5	14 Remedial/Investigative Action(s)					
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by Orig	22 Remarks DERIFIED BY REVIEW OF AHAINED LANK YULCA MOUNTAIN PROTEIT AUG.T SCHEDULE					
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	ENCLOSURE					

WMPO STANDARD DEFICIENCY REPORT CONTINUATION SHEET

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8 Requirement (continued)

of all phases of the application of this QAPP for all LANL NNWSI activities affecting quality. These internal audits will assess the continuing implementation, effectiven ess, compliance, and adequacy of the QA Program.

- 10 Recommended Actions (continued)
- 2. Implement an effective internal audit schedule.

14. Remedial/Investigative Action(s)

The scope of an audit is not indicated on the Audit Schedule. Rather, before each audit, notification is provided to the audited group (samples attached) of the scope of the audit.

The audit report (samples attached) addresses each of the 18 QA criteria and provides justification for those criteria that were not within the audit scope.

These documents, present in the QAS files, demonstrate that all applicable elements of the QAPP are reviewed during internal audits.

16. Cause of Condition and Corrective Action to Prevent Recurrence

Cause: No violation of procedures occurred.

Corrective Action: None; however, the FY 89 Audit Schedule has been reviewed to verify that all groups participating in the Project are included on the schedule. All groups will be audited against all applicable criteria, and this fact will be documented in the audit reports.