

WMPO QUALITY ASSURANCE AUDIT REPORT
NNWSI AUDIT OF HOLMES & NARVER, INC.
LAS VEGAS, NEVADA

AUDIT NUMBER 88-2
conducted on
March 28 - April 1, 1988

Prepared By:

W. R. Kason
Lead Auditor

Date:

4/13/88

Approved By:

[Signature]
Manager, Audits & Surveillances

Date:

4/13/88

Approved By:

Royce S. Munk
Project Quality Manager
DOE/WMPO

Date:

4/20/88

1.0 Introduction

This report contains the results of the Quality Assurance audit of Holmes & Narver, Inc. (H&N), Las Vegas, Nevada. The audit was conducted on March 28 - April 1, 1988, in accordance with the WMPO Quality Assurance Program Plan, NVO-196-18, Rev. 2 and Quality Management Procedure (QMP) 18-01, Rev. 1.

2.0 Audit Purpose and Scope

The purpose of the audit was to evaluate the effectiveness of the H&N Quality Assurance Program with respect to the requirements of the NNWSI Project Quality Assurance Plan, NVO-196-17, Revision 5, and to verify implementation of the H&N QA Program as it relates to activities on the NNWSI Project.

3.0 Audit Team Personnel

Walter R. Kazor, Lead Auditor, SAIC
Robert H. Klemens, Auditor, SAIC
Frederick J. Ruth, Auditor, SAIC
Gerard Heaney, Auditor, SAIC
Peter J. Karnoski, Technical Specialist, SAIC
Royce E. Monks, Observer, DOE/WMPO
Anthony Baca, Observer, DOE/WMPO
William L. Belke, Observer, NRC/HQ
Joseph J. Holonich, Observer, NRC/HQ
W. R. Marchand, Observer, DOE/HQ Weston

4.0 Summary of Audit Results

An evaluation of the H&N Quality Assurance Program and NNWSI Project Procedures Manual indicates that H&N must improve implementation of certain phases of its program before it can be in full compliance with the NNWSI Project Quality Assurance Plan, NVO-196-17, Revision 5. H&N failed to meet certain commitments made as a result of WMPO Audit 87-2 which was conducted on September 8-11, 1987. These commitments were basically related to the completion of procedures required for design control activities. H&N also failed to respond to a DOE/WMPO directive (WMPO letter JB-1158, dated 3/20/87) requiring that implementing procedures be issued at the time of WMPO approval of the H&N QAPP.

The number and types of deficiencies disclosed by this audit could have been identified and corrected by an increased internal audit and surveillance effort on the part of H&N. However, a study of the H&N organization indicates that only one full-time individual is dedicated to NNWSI Project work, with the QA manager and an additional individual assigned on a part-time basis. The audit team recommends that H&N evaluate the adequacy of the number of QA personnel assigned as dedicated individuals to the NNWSI Project.

The audit team also encountered problems in distinguishing NNWSI Project activities and equipment from ongoing work being done at the Nevada Test Site. In order to preclude commingling of activities and the inadvertent use of non-NNWSI Project equipment, H&N must establish a clear distinction between the NNWSI Project and other work for which they are responsible. This could involve the use of color coding and/or tagging of equipment.

The audit team issued 13 Standard Deficiency Reports (SDRs), Nos. 117-129, and five Observations during the course of the audit. Subsequent to the audit an additional three Observations were written, including one which had been previously identified as draft SDR No. 126 at the postaudit conference. Accordingly, a total of 12 SDRs (Nos. 117-125 and 127-129) and eight Observations have been issued as a result of this audit. The action copies of the SDRs were transmitted to you by the WMPO letter JB 1799, on April 12, 1988. Copies of the SDRs are also enclosed with this report for your information.

The SDRs were qualified by the application of severity levels, which are related to the significance of the finding. A discussion of the SDR severity levels is provided in Attachment 1. Ten of the SDRs are classified as severity level 2 and the remaining two are classified as severity level 3.

The Observations identify conditions that are presently not a violation of procedural requirements, but, in the opinion of the audit team, could lead to a violation of requirements in the future. The Observations were in the programmatic areas of document control, design review, procurement, audits, nonconformance control, and corrective action.

5.0 Audit Meetings

5.1 Preaudit Conference

A preaudit conference was held on March 28, 1988 at 10:00 a.m. in the H&N conference room. The purpose, scope and agenda for the audit were reviewed with the H&N Project Management staff. The audit team members and their assigned counterparts were identified, and the lines of communication were established. The attendees at this meeting are listed in Attachment 2 of this report.

5.2 Postaudit Conference

The postaudit conference was held on April 1, 1988, at 10:00 a.m. in the H&N conference room. A brief summary of the results of the audit, including the SDRS and Observations identified during the course of the audit, was presented to the H&N staff. Draft copies of the SDRS and Observations were provided to H&N management. Emphasis was placed on the items highlighted in the summary of this report and notification was given to H&N management that a surveillance of certain phases of their program would be conducted by the WMPO approximately one month from the date of the postaudit conference.

6.0 Standard Deficiency Reports/Observations

6.1 Standard Deficiency Reports

1) SDR No. 117 - Severity Level 3

Contrary to requirements, there are no position descriptions for personnel performing union surveying activities. In addition, several position descriptions do not specify the minimum educational requirements.

2) SDR No. 118 - Severity Level 2

"Effective Dates" are not listed on H&N procedures NNWSI-004, Rev. 1, NNWSI-005, Rev. 0, NNWSI-011, Rev. 0, NNWSI-002, Rev. 0, and ICN No. 001, which is contrary to requirements. Several revised procedures did not incorporate vertical bars in the right-hand margin, denoting changes.

3) SDR No. 119 - Severity Level 2

Contrary to requirements, a QA review is not being performed on Work Initiation Packages.

4) SDR No. 120 - Severity Level 2

H&N design procedures do not address the required interdisciplinary design reviews.

5) SDR No. 121 - Severity Level 2

The annual procedure review required by NNWSI-001 has not been accomplished by H&N.

6) SDR No. 122 - Severity Level 2

The file maintained in the vault by the Records Coordinator does not have an index. This is contrary to requirements.

7) SDR No. 123 - Severity Level 2

The "Cause of Condition" has not been identified in Corrective Action Reports (CARs) issued by H&N.

8) SDR. No. 124 - Severity Level 2

H&N issued Purchase Order POJC-412A to Heleco without the required QA review of the purchase order. In addition, there is no documented evidence that H&N implemented the required measures for the evaluation and selection of Heleco as an approved supplier.

9) SDR No. 125 - Severity Level 2

Contrary to requirements, there are no indoctrination and training records in the training file located in the NDE Lab.

10) SDR No. 127 - Severity Level 2

H&N did not issue a required audit schedule for 1988 prior to this audit.

11) SDR No. 128 - Severity Level 2

Contrary to requirements, there is no procedure for issuing and controlling revisions to the H&N QAPP.

12) SDR No. 129 - Severity Level 3

Several forms used in surveying need to be revised to include information relative to verification by the party chief. (Direct Optical Survey Form and Tunnel X-Section Form.)

6.2 Observations

Observation No. 1

The scope of NNWSI-029, Rev. 0 "applies to work performed by Holmes & Narver, Inc., in support of the NNWSI ESF ICWG." The purpose states that the procedure outlines the requirements for generating and controlling design interface documents.

Neither the purpose nor the scope excludes the H&N interdiscipline reviews of H&N design documents, but the procedure does not describe how H&N performs internal, interdiscipline reviews.

Action is required by H&N to revise NNWSI-029 to correct this deficiency by either including instructions for interdiscipline review in NNWSI-029 or in another NNWSI Project procedure which would be referenced in NNWSI-029.

Observation No. 2

H&N procedure NNWSI-001 "Generation and Control of NNWSI Procedures," Rev. 0, Paragraph 6.1.1 requires that a history file of all procedures and revisions be established. A review of these files indicated that they were still being worked on to present a clear and concise history for each NNWSI Project procedure. The audit team requests that H&N QA schedule an audit/surveillance of this activity once the history files are completed to ensure a clear and concise history file is established. The WMPO PQM is to be notified of this scheduled date.

Observation No. 3

Survey Department party chiefs use as reference a "Horizontal and Vertical Control Index." This document contains pencil corrections and uncontrolled revisions to coordinates of control points. Because of the reference importance of this document, its use on the NNWSI Project should be controlled so that all data and changes thereto are standardized for all users.

Observation No. 4

NNWSI-031, Audits, Rev. 0, Paragraph 6.5.6, states "Auditors shall record the results of their review of each item audited as 'N' (not audited), 'S' (satisfactory), or 'U' (unsatisfactory) in the Result section of the checklist. If the result is unsatisfactory, the CAR or NCR issued for the deficiency shall also be identified."

A review of the audit checklists for Audit No. 87-10 indicated that three CARs were identified as "U". Two of the three CAR numbers were not identified on the checklist. During the course of the WMPO audit the lead auditor for 87-10 recorded the CAR numbers on the checklist and initialed and dated the entries.

Observation No. 5

The purchase requisition and calibration records were reviewed for the Ultrasonic Flaw Detector, Serial Number 05110E, located in Area 6.

The purchase requisition indicated recalibration would be on an annual basis, yet the calibration sticker indicates calibration is due in six months. If this piece of equipment was needed for NNWSI Project activities the available records would not meet the Project requirements. It was also noted that there was no QA review of the purchase requisition before it was placed with REECO.

The calibration records were reviewed and found to be satisfactory.

Observation No. 6

1.) H&N Procedure NNWSI-011, "NNWSI Nonconformance Control," Rev. 0, Para. 6.1.5, states "QA shall review H&N/ESD initiated NCRs on a quarterly basis to determine if any adverse trends exist, as prescribed by Reference 3.1." Reference 3.1 is H&N/ESD QA Guideline 16.2, entitled "Review of Nonconformance Documentation."

An H&N response to WMPO Audit 87-02, Observation No. 2, stated that all QA guidelines would be replaced by NNWSI Project Procedures. Procedure NNWSI-011 has not as yet been revised.

2.) H&N Procedure NNWSI-012, "Corrective Action," Rev. 0, Para. 6.4, states "Corrective action reports shall be analyzed by QA at least twice each year to show quality trends. Results shall be reported to upper management."

The same procedure, Attachment 8.1, "Instructions for Completion of the CAR Form," states, "Block 4: Unusual Occurrence - Report Required? - Check the appropriate box based on the preliminary evaluation for potential reportability in accordance with Reference 3.3 and 3.4." Reference 3.3 is DOE Order 5000.3 "Unusual Occurrence Reporting System," Paragraph N of DOE Order NV 5000.3-2, dated March 31, 1986, states "Each organization's UOR System will include written procedures that define responsibility for preparation, review, distribution, and follow-up of UORs."

Reference 3.4, "H&N/ESD-1706 Notification, Investigation and Reporting of Occurrences," is not an NNWSI Project procedure.

The above examples in 1 and 2 indicate where H&N does not have an NNWSI Project procedure in place for the performance and reporting of trend analysis activities or for the evaluation and reporting of unusual occurrences. H&N is requested to provide a schedule for these procedures to be put in place for NNWSI Project activities.

Observation No. 7

Reference: WMPO letter JB-1158, dated 3/20/87, Vieth to TPOs. Page 2, last paragraph, requires H&N to issue revised procedures upon receipt of WMPO approval of the H&N QAPP. The H&N QAPP has an effective date of 3/1/88. As of the date of this audit, H&N has not issued a procedure covering procurement of QA Level I or II activities. Action is required of H&N for the following:

1. Prepare and implement a procurement procedure for NNWSI Project QA Level I or II activities.
2. Prepare and implement any additional procedures applicable to the NNWSI Project.
3. Provide a schedule for the issuance of any required procedures.

Observation No. 8

NNWSI-019, Rev. 0, Para. 6.3.8, requires that "All test data sheets be documented as a part of the test records."

Contrary to the above, raw test data is missing from the test records for WBS No. 1.2.3.5.2H (a hardness test of two set screws made for the NNWSI Project).

Action is required of H&N to locate the missing data and include it in the test records. This requirement is considered to be good engineering practice and H&N should instruct laboratory personnel to implement this requirement in future work.

7.0 Required Action

A written response is required for each Standard Deficiency Report and Observation delineated in Section 6.0. Responses to SDRs are due 20 working days from the date of the SDR transmittal letter, while responses to Observations are due within 20 working days of the date of the audit report transmittal letter. The original SDRs were sent via WMPO letter JB-1799. In addition, copies of these SDRs are included with this report for your information and use. Upon response, acceptance, and satisfactory completion and verification of all remedial and corrective actions, the SDRs will be closed and H&N will be notified by letter of the SDR closure.

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.

MEETING PARTICIPANT LIST (88-02)

<u>NAME</u>	<u>ORGANIZATION</u>	<u>LOCATION</u>	<u>TITLE</u>	<u>PREAUDIT CONFERENCE</u>	<u>POSTAUDIT CONFERENCE</u>
J. Adams	H&N	NTS	H&N SQCO	X	
Carolyn Aiello	H&N	Las Vegas	Training Coordinator	X	X
Anthony Baca	DOE/WMPO	Las Vegas	General Engineer	X	X
Catherine Bautista	H&N	Las Vegas	Clerk/Records	X	X
Bill Belke	NRC	Wash., DC	Project Mgr. QA	X	
Joe Calovini	H&N	Las Vegas	Tech. Project Officer	X	X
Helen Hall	H&N	Las Vegas/NTS	Engineer	X	X
Jerry Heaney	SAIC	Las Vegas	QA Engineer	X	X
Joe Holonich	NRC	Wash., DC	Project Manager	X	
Pam Jackson	H&N	Las Vegas	Clerk II	X	X
W. R. Kazor	SAIC	Las Vegas	Act. Mgr. ASD	X	X
R. H. Klemens	SAIC	Las Vegas	QA Engineer	X	X
P. J. Karnoski	SAIC	Las Vegas	QA Engineer	X	X
Joanne Kane-Ledbetter	H&N	Las Vegas	Proj. Coord.	X	X
A. MacIntosh	H&N	NTS	Supv. Mat. Testing	X	
W. R. Marchand	DOE/HQ	Wash., DC	QA Engineer	X	
Royce Monks	DOE/WMPO	Las Vegas	QA Engineer	X	X
E. R. Mouser	H&N	NTS	QA	X	X
Ralph Musick	H&N	Las Vegas	Proj. Engr.	X	X
Larry O'Laughlin	H&N	Mercury	Mgr. Field Svcs.		X
Jim Replogle	H&N	Las Vegas	Chief Project Engr.	X	X
F. J. Ruth	SAIC	Las Vegas	QA Engineer	X	X
R. P. Sabol	H&N	NTS	QA Engineer	X	X
R. L. Schreiner	H&N	Las Vegas	Engr. Sect. Chief	X	
V. Thummala	H&N	NTS	Sr. Engineer	X	X
Jan Verden	H&N	Las Vegas	Admin. Sec. Chief	X	X
T. A. Wanniski	H&N	Las Vegas	Op. Mgr.	X	
Terri Ware	H&N	Las Vegas	Exec. Secretary	X	
S. H. Williams	H&N	Las Vegas	Proj. Eng.	X	
Jade Woodruff	H&N	NTS	H&N	X	X
C. O. Wright	H&N	NTS	Chief, QA	X	X
T. W. Yelvington	H&N	NTS	Mgr. Tech. Svcs.	X	

WMPO STANDARD DEFICIENCY REPORT

N-QA-03E
3/87

Completed by Originating QA Organization

1 Date 4/1/88	2 Severity Level <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3		Page 1 of 2
3 Discovered During WMPO Audit 88-2	3a Identified By F. J. Ruth	3b Branch Chief Concurrence Date N/A	4 SDR No. 117 Rev. 0
5 Organization Holmes & Narver		6 Person(s) Contacted Carl Wright/Carolyn Aiello	
7 Response Due Date is 20 Working Days from Date of Transmittal			
8 Requirement (Audit Checklist Reference, if Applicable) Audit Item No. 1a-3, Page 2 of 18 NVO-196-17, Rev. 5, Section 11 Quality Assurance Program, Subparagraph 5.1 Establishment of Requirements "The requirements shall establish position descriptions that set forth minimum personnel qualifications (cont'd)			
9 Deficiency 1) There are no position descriptions for personnel performing union surveying activities; 2) The following position descriptions do not specify what the minimum education requirements are A) Technician I, II, III B) Principal Technician C) Senior Technician D) Technician Aide E) Inspectors I, II, III, (cont'			
10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Investigative <input type="checkbox"/> Corrective Review all position descriptions/job description and identify the education required for that position. Review all position descriptions/job descriptions and establish what the equivalency will be to a degree. (cont'd)			

Completed by Organization in Block 5

11 QAE/Lead Auditor Date <i>UR Kay 4/5/88</i>	12 Branch Manager <i>John Wright</i>	Date 4/5/88	13 Project Quality Mgr. Date <i>Roger Moberg 4/6/88</i>
14 Remedial/Investigative Action(s)		15 Effective Date _____	
16 Cause of the Condition & Corrective Action to Prevent Recurrence		17 Effective Date _____	
18 Signature/Date			

Comp. by Orig. QA Org.

19 Response	<input type="checkbox"/> Accept <input type="checkbox"/> Reject	<input type="checkbox"/> Amended <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	



**WMPO STANDARD DEFICIENCY REPORT
CONTINUATION SHEET**

N-QA-0:
10/86

SDR No. 117

Rev. 0

Page 2 of 2

Block 8 Requirement (cont'd)

and provide for appropriate indoctrination or training or both, prior to initiation of activities that affect quality.

- 2) NVO-196-17, Rev. 5, Paragraph 5.1.1 Position Description. "Minimum education and experience requirements shall be established and documented in position descriptor for each position involved in the performance of activities affecting quality."
- 3) H&N, Inc. QAPP, Subject Quality Assurance Program, Section 2, Paragraph IIID.1 "Position Descriptions shall establish minimum personnel qualifications, including education and experience."

Block 9 Deficiency (cont'd)

F) Principal Inspector

- 3) Several position descriptions state the minimum education requirements or equivalent but do not spell out what the equivalency might be if there is no degree

Block 10 Recommended Action(s) (cont'd)

Prepare position descriptions/job descriptions for individuals performing surveys.

WMPO STANDARD DEFICIENCY REPORT

N-QA-03E
3/87

Completed by Originating QA Organization

1 Date 4/1/88 2 Severity Level 1 2 3 Page 1 of 2

3 Discovered During WMPO Audit 88-2 3a Identified By G. Heaney 3b Branch Chief Concurrence Date N/A 4 SDR No. 118 Rev. 0

5 Organization Holmes & Narver 6 Person(s) Contacted R. Sabol 7 Response Due Date is 20 Working Days from Date of Transmittal

8 Requirement (Audit Checklist Reference, if Applicable) Holmes & Narver NNWSI Procedure NNWSI-001, Rev. 0 states: 1) Para. 5.2.3 - "The initial issue of a procedure shall be 'Rev. 0' with the appropriate date of approval and effective date. (cont'd)

9 Deficiency Contrary to the above requirements: 1) Effective dates are not listed on the following H&N NNWSI procedures: Table of contents, Rev. 15, NNWSI-004, Rev. 1, NNWSI-005, Rev. 0, NNWSI-011, Rev. 0, and NNWSI-002, Rev. 0, ICN No. 001. (cont'd)

10 Recommended Action(s): Remedial Investigative Corrective
 1) Correct the deficiencies noted in Block 9.
 2) Reinstruct personnel to procedural requirements. Provide objective evidence with response to the SDR.

Completed by Organization in Block 5

11 QAE/Lead Auditor Date 4/1/88 12 Branch Manager Date 4/1/88 13 Project Quality Mgr. Date 4/1/88

14 Remedial/Investigative Action(s) _____
 15 Effective Date _____

16 Cause of the Condition & Corrective Action to Prevent Recurrence _____
 17 Effective Date _____

18 Signature/Date _____

Comp. by Orig. QA Org.

19 Response	<input type="checkbox"/> Accept <input type="checkbox"/> Amended Response <input type="checkbox"/> Reject	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



**WMPO STANDARD DEFICIENCY REPORT
CONTINUATION SHEET**

N-QA-038
10/86

SDR No. 118

Rev. 0

Page 2 of 2

- 2) Para. 5.5.1.1 - "All revised words, sentences, and paragraphs shall be noted by a vertical bar in the right hand margin adjacent to the change with the exception of correction of typographical errors." (Refer to Audit Checklist Item No. 1-14)

Block 9 Deficiency (cont'd)

- 2) NNWSI-004, Rev. 1 and NNWSI-008, Rev. 1 were revised and distributed without vertical bars in the right hand margin denoting changes. The procedures do not indicate that the revisions were complete rewrites.

Note: Procedure NNWSI-029 does not indicate the procedure number on pages 2, 3, 4, and 5.

WMPO STANDARD DEFICIENCY REPORT

N-QA-03E
3/87

Completed by Originating QA Organization

1 Date <u>4/1/88</u>	2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page 1 of 2
3 Discovered During <u>WMPO Audit 88-2</u>	3a Identified By <u>P. Karnoski G. Heaney</u>	3b Branch Chief Concurrence Date <u>N/A</u>	4 SDR No. <u>119</u> Rev. <u>0</u>
5 Organization <u>Holmes & Narver</u>	6 Person(s) Contacted <u>C. Wright, R. Schreiner, L. O'Laughlin</u>		7 Response Due Date is <u>20 Working Days from Date of Transmittal</u>
8 Requirement (Audit Checklist Reference, if Applicable) <u>H&N Procedure NNWSI-007 "Work Initiation, Criteria Gathering and Reporting", Rev. 0 paragraph 6.2.3.3 states in part: "QA shall review the Work Initiation package to ensure that the appropriate documents were prepared, reviewed, approved, or accepted in accordance (cont'd)</u>			
9 Deficiency <u>Contrary to the above requirement, the QA review is not being performed. Examples of discrepancies observed during the audit that emphasize the need for this review are:</u> <p style="text-align: right;">(cont'd)</p>			
10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input checked="" type="checkbox"/> Investigative <input checked="" type="checkbox"/> Corrective			
1) <u>Revise the work initiation forms to indicate appropriate references and quality assignment levels.</u> <p style="text-align: right;">(cont'd)</p>			

Aprvl.

11 QAE/Lead Auditor Date <u>8/4/88</u>	12 Branch Manager <u>[Signature]</u>	Date <u>4/5/88</u>	13 Project Quality Mgr. Date <u>[Signature] 4/6/88</u>
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Completed by Organization in Block 5

14 Remedial/Investigative Action(s)	15 Effective Date _____
16 Cause of the Condition & Corrective Action to Prevent Recurrence	
17 Effective Date _____	
18 Signature/Date	

Comp. by Orig. QA Org.

19 Response	<input type="checkbox"/> Accept <input type="checkbox"/> Reject	<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	PGM/Date	



WMPO STANDARD DEFICIENCY REPORT CONTINUATION SHEET

N-QA-C
10/86

SDR No.

119

Rev. 0

Page 2

of 2

Block 8 Requirement (cont'd)

with documented procedures and QA requirements. If all documents were processed correctly they shall annotate their acceptance on the Work Initiation Form." (Refer to Audit Checklist Item No. 1-53, 1-54, 1-57, 1-58)

Block 9 Deficiency (cont'd)

- 1) Work initiation forms for the ESF Utility Power System, ESF UPS Power System and the ESF Standby Power System do not reference the NNWSI/ESF Title 1 "Scope and Planning Basis Document", Rev. 2, which was used as the source of criteria in determining the quality level assignment of the work task.
- 2) The work initiation 87-021, Rev. 0, for "Aerial Mapping Effort in Support of the NNWSI Project" indicates the QA level to be N/A. However, the task for which the work was performed is a Quality Level I activity (refer to Los Alamos National Laboratory Scientific Investigation Plan "Tectonics and Volcanism", No. 86/2.3.1.-TV, Rev. 0, and its associated Quality Level Assignment Sheet).

Block 10 Recommended Action(s) (cont'd)

- 2) Revise the work Initiation Form to include a QA signature block.
- 3) Reinstruct personnel to procedural requirements. Provide objective evidence with response to the SDR.

WMPO STANDARD DEFICIENCY REPORT

N-QA-03
3/87

152ano
 Completed by Originating QA Organization
 Completed by Organization in Block 5
 Comp. by Orig. QA Org.

1 Date 4/1/88		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 88-2		3a Identified By P. Karnoski G. Heaney	3b Branch Chief Concurrence Date N/A	4 SDR No. 120 Rev. 0	
5 Organization Holmes & Narver		6 Person(s) Contacted C. Wright		7 Response Due Date is 20 Working Days from Date of Transmittal	
8 Requirement (Audit Checklist Reference, if Applicable) H&N QAPP, Rev. 0, Section 3 "Design Control", Para. III-F-1 states, "Internal and external design interfaces shall be identified and controlled and design efforts shall be coordinated among and within responsible design organizations. Interface controls shall include (cont'd)					
9 Deficiency Contrary to the above requirement, H&N design procedures do not address interdiscipline design reviews. This deficiency was previously identified in WMPO Audit 87-2, Observation No. 4. H&N committed to revising the appropriate design procedures to address this issue. (cont'd)					
10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input checked="" type="checkbox"/> Investigative <input checked="" type="checkbox"/> Corrective					
1) Revise the procedures as required.					
2) Perform a review to determine if the lack of procedural control for interdiscipline reviews has any adverse impact on currently on-going design (cont'd)					
11 QAE/Lead Auditor Date 4/1/88		12 Branch Manager Date 4/5/88		13 Project Quality Mgr. Date 9/1/88	
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"/> Reject	<input type="checkbox"/> Amended <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 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	



**WMPO STANDARD DEFICIENCY REPORT
CONTINUATION SHEET**

N-GA-C
10/86

SDR No. 120

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Block 8 Requirement (cont'd)

the assignment of responsibility and the establishment of procedures among and within responsible design organizations for the review, approval, release, distribution, and revision of documents involving design interfaces." (Refer to Audit Checklist Item No. 3-1D, 4-1D)

Block 9 Deficiency (cont'd)

Additionally, the H&N response to WMPO Audit 87-2, Observation No. 3 committed to revising procedure NNWSI-014 "Design Verification", Rev. 0, to include a section on modeling. At the time of the audit, this action was not complete.

Block 10 Recommended Action(s) (cont'd)

activities.

WMPO STANDARD DEFICIENCY REPORT

N-QA-03
3/87

32520
Completed by Originating QA Organization
Aprvl
Completed by Organization in Block 5
Comp. by Orig. QA Org.

1 Date 4/1/88 2 Severity Level 1 2 3 Page 1 of 1

3 Discovered During WMPO Audit 88-2 3a Identified By R. Klemens 3b Branch Chief Concurrency Date N/A 4 SDR No. 121 Rev. 0

5 Organization Holmes & Narver 6 Person(s) Contacted J. Calovini 7 Response Due Date i 20 Working Days fr
Date of Transmittal

8 Requirement (Audit Checklist Reference, if Applicable) NNWSI-001, Rev. 0, Para. 5.3.5; The TPO shall ensure that procedures are reviewed annually for content, clarity, an applicability. The annual review of procedures shall be documented via an ROI or memo to the Chief, QA. (Refer to Audit Checklist Item No. 1-5)

9 Deficiency
The annual procedure review required by Para. 5.3.5 has not been done by H&N.

10 Recommended Action(s): Remedial Investigative Corrective
Establish why procedures review has not been done. Perform review.

11 QAE/Lead Auditor Date RHK / [Signature] 4/4/88 12 Branch Manager Date [Signature] for 4/5/88 13 Project Quality Mgr. Date [Signature] 4/5/88

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 Response	QAE/Lead Auditor/Date	Branch Manager/Date
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20 Amended Response	<input type="checkbox"/> Accept <input type="checkbox"/> Reject	QAE/Lead Auditor/Date	Branch Manager/Date
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21 Verifi- cation	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory	QAE/Lead Auditor/Date	Branch Manager/Date
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22 Remarks _____

23 QA CLOSURE	QAE/Lead Auditor/Date	Branch Manager/Date	PGM/Date
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WMPO STANDARD DEFICIENCY REPORT

N-QA-03:
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1 Date 4/1/88	2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3			Page 1 of 1
3 Discovered During WMPO Audit 88-2	3a Identified By R. Klemens	3b Branch Chief Concurrence Date N/A	4 SDR No. 122 Rev. 0	
5 Organization Holmes & Narver		6 Person(s) Contacted Cathy Bautista		7 Response Due Date is 20 Working Days from Date of Transmittal
8 Requirement (Audit Checklist Reference, if Applicable) NNWSI-027, Rev. 0, Para. 6.2; Each file shall have an index or log sheet attachment 8.2, which identifies all the documents contained in that file. (Refer to Audit Checklist No. 1-240)				
9 Deficiency The file maintained in the vault by the Records Coordinator does not have an index. There is no way of knowing what is in the file.				
10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input checked="" type="checkbox"/> Investigative <input checked="" type="checkbox"/> Corrective Establish the required file. Determine cause of omission.				

Completed by Organization in Block 5

11 QAE/Lead Auditor Date <i>W. Klemens</i> 4/4/88	12 Branch Manager Date <i>[Signature]</i> 4/5/88	13 Project Quality Mgr. Date <i>Roy S. Monds</i> 4/5/88
14 Remedial/Investigative Action(s)		15 Effective Date _____
16 Cause of the Condition & Corrective Action to Prevent Recurrence		17 Effective Date _____
18 Signature/Date		

Comp. by Orig. QA Org.

19 Response	<input type="checkbox"/> Accept <input type="checkbox"/> Reject	<input type="checkbox"/> Amended Response <input type="checkbox"/> Reject	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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1 Date 4/1/88 2 Severity Level 1 2 3 Page 1 of 2

3 Discovered During WMPO Audit 88-2 3a Identified By G. Heaney 3b Branch Chief Concurrence Date N/A 4 SDR No. 123 Rev. 0

5 Organization Holmes & Narver 6 Person(s) Contacted C. Wright 7 Response Due Date is 20 Working Days from Date of Transmittal

8 Requirement (Audit Checklist Reference, if Applicable) H&N Procedure NNWSI-012 "Corrective Action", Rev. 0, Para. 6.2.3.1.3 states: "The corrective action to prevent recurrence appropriately identifies the cause of the deficiency and that the action(s) taken or proposed will prevent recurrence." (Refer to Audit Checklist Item No. 1-93, 1-95)

9 Deficiency Contrary to the above requirement, a review of H&N generated corrective action reports (CARS) indicates that the cause of condition has not been identified by the personnel responsible for resolving the deficiency identified. Additionally, QA personnel have evaluated and closed some of the CARS without identifying the fact (cont'd)

10 Recommended Action(s): Remedial Investigative Corrective
 1) Review to determine if the lack of identifying the cause of the deficiency identified has resulted in inadequate or inappropriate corrective action to prevent recurrence. (cont'd)

Aprvl.

11 QAE/Lead Auditor Date [Signature] 4/1/88 12 Branch Manager Date [Signature] 4/5/88 13 Project Quality Mgr. Date [Signature] 4/5/88

Completed by Organization in Block 5

14 Remedial/Investigative Action(s) _____ 15 Effective Date _____

16 Cause of the Condition & Corrective Action to Prevent Recurrence _____ 17 Effective Date _____

18 Signature/Date _____

Comp. by Orig. QA Org.

19 Response Accept Amended Response QAE/Lead Auditor/Date Branch Manager/Date

20 Amended Response Accept Reject QAE/Lead Auditor/Date Branch Manager/Date

21 Verifi- cation Satisfactory 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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Block 9 Deficiency (cont'd)

that the cause of the condition was not identified.

Block 10 Recommended Action(s) (cont'd)

- 2) Reinstruct personnel to procedural requirements. Provide objective evidence with response to the SDR. Reinstruction should include management personnel responsible for correcting the deficiencies in addition to the QA staff.

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Comp. by Orig. QA Org.

1 Date 4/1/88		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page 1 of 2	
3 Discovered During WMPO Audit88-2		3a Identified By R. Klemens/ P. Karnoski	3b Branch Chief Concurrence Date N/A		4 SDR No. 124 Rev. 0
5 Organization Holmes & Narver		6 Person(s) Contacted Dale Herrington		7 Response Due Date: 20 Working Days from Date of Transmittal	
8 Requirement (Audit Checklist Reference, if Applicable) H&N NNWSI QAPP, Rev. 0, Section I. states "H&N/ESD QA Manual (H&N-10471-1115) applies to QA Level III activities": 1) Section 4, paragraph IIIK of the H&N/ESD QA Manual, which covers Procurement Document Control, states "QA personnel will review procurement documents for (cont					
9 Deficiency 1) Contrary to requirement 1 above, H&N issued PO JC-412A to Heleco for calibration services on 2/1/88 without the required QA review. 2) Contrary to requirement 2 above, there is no documented evidence that H&N took the required measures for evaluation and selection of Heleco to perform the required calibration.					
10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Investigative <input checked="" type="checkbox"/> Corrective Assure that procurement documents are controlled and processed in accordance with H& requirements. Conduct necessary training of applicable personnel in the review of purchase orders and evaluation of procurement sources stated in the (cont'd)					
11 QAE/Lead Auditor Date <i>WR Kays</i> 4-6-88		12 Branch Manager <i>John Lewis</i>		Date 4/6/88	13 Project Quality Mgr. Date <i>John Lewis</i> 4/6/88
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 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)

compliance with Project QA requirements. Both Technical and QA reviews will be documented."

2) Section 7, Paragraph IIIB3 states "Measures for evaluation and selection of procurement sources shall be documented."

Block 10 Recommended Action(s) (cont'd)

requirements in Section 8 above.

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Completed by Originating QA Organization

1 Date 4/1/88	2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page 1 of 1
3 Discovered During WMPO Audit 88-2	3a Identified By F. Ruth	3b Branch Chief Concurrence Date N/A	4 SDR No. 125 Rev. 0
5 Organization Holmes & Narver	6 Person(s) Contacted H. MacIntosh		7 Response Due Date i 20 Working Days fro Date of Transmittal
8 Requirement (Audit Checklist Reference, if Applicable) H&N QAPP, Rev. 0, Section 9, Para. IIIB requires that "personnel implementing these processes are appropriately indoctrinated and trained as required by Section 2 of this QAPP." (Refer to Audit Checklist Item No. 1CS-17)			
9 Deficiency Contrary to the above, no indoctrination and training records are in th training file in the NDE laboratory.			
10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input checked="" type="checkbox"/> Investigative <input checked="" type="checkbox"/> Corrective Perform indoctrination of NDE personnel, document that indoctrination and place thes records in the training file. Explain reason for omission.			

Aprvl.

11 QAE/Lead Auditor Date <i>W. K. ...</i> 4/4/88	12 Branch Manager <i>H. MacIntosh</i>	Date 4/5/88	13 Project Quality Mgr. Date <i>Roger S. ...</i> 4/5/88
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Completed by Organization in Block 5

14 Remedial/Investigative Action(s)	15 Effective Date _____
16 Cause of the Condition & Corrective Action to Prevent Recurrence	
17 Effective Date _____	
18 Signature/Date	

Comp. by Orig. QA Org.

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 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

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Completed by Originating QA Organization

1 Date 4/1/88	2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page 1 of 1
3 Discovered During WMPO Audit 88-2	3a Identified By F. Ruth	3b Branch Chief Concurrence Date N/A	4 SDR No. 127 Rev. 0
5 Organization Holmes & Narver	6 Person(s) Contacted C. Wright		7 Response Due Date is 20 Working Days from Date of Transmittal
8 Requirement (Audit Checklist Reference, if Applicable) NNWSI-031, Rev. 0, Para. 6.1.1 requires that the Chief QA establish an audit schedule. (Refer to Audit Checklist Item No. 1-265)			
9 Deficiency Contrary to the above, the audit schedule had not been issued prior to the audit.			

10 Recommended Action(s): Remedial Investigative Corrective
Issue audit schedule. Explain reason for omission. Note: Prior to the postaudit meeting on 4/1/88 an audit schedule for all H&N contractors was presented to the Lead Auditor. WMPO requires that a schedule unique to NNWSI activities be prepared and submitted.

Completed by Organization in Block 5

11 QAE/Lead Auditor Date <i>[Signature]</i> 4-6-88	12 Branch Manager Date <i>[Signature]</i> 4-6-88	13 Project Quality Mgr. Date <i>[Signature]</i> 4/6/88
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14 Remedial/Investigative Action(s)

15 Effective Date _____

16 Cause of the Condition & Corrective Action to Prevent Recurrence

17 Effective Date _____

18 Signature/Date

Comp. by Orig. QA Org.

19 Response	<input type="checkbox"/> Accept <input type="checkbox"/> Reject	<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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Completed by Originating QA Organization	1 Date <u>4/1/88</u>		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page <u>1</u> of <u>1</u>
	3 Discovered During <u>WMPO Audit 88-2</u>	3a Identified By <u>F. Ruth</u>	3b Branch Chief Concurrence Date <u>N/A</u>		4 SDR No. <u>128</u> Rev. <u>0</u>
	5 Organization <u>Holmes & Narver</u>		6 Person(s) Contacted <u>C. Wright</u>		7 Response Due Date is <u>20 Working Days from</u> Date of Transmittal
	8 Requirement (Audit Checklist Reference, if Applicable) <u>H&N QAPP Section 2, Para. IIIa requires that the Chief QA will issue and control the QAPP. (Refer to Audit Checklist Item No. 1a-1)</u>				
9 Deficiency <u>Contrary to the above requirement, there is no procedure for issuing and controlling revisions to the QAPP.</u>					
10 Recommended Action(s) <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Investigative <input checked="" type="checkbox"/> Corrective <u>Prepare and implement required procedure. Determine and explain cause.</u>					
Completed by Organization in Block 5	11 QAE/Lead Auditor Date <u>W. K. [Signature] 4/4/88</u>	12 Branch Manager <u>[Signature]</u>	Date <u>4/5/88</u>	13 Project Quality Mgr. Date <u>[Signature] 4/5/88</u>	
	14 Remedial/Investigative Action(s) <u>[Signature]</u>				15 Effective Date _____
16 Cause of the Condition & Corrective Action to Prevent Recurrence				17 Effective Date _____	
18 Signature/Date					
Comp. by Orig. QA Org.	19 Response <input type="checkbox"/> Accept <input type="checkbox"/> Amended Response <input type="checkbox"/> Reject		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	

