



UNITED STATES
NUCLEAR REGULATORY COMMISSION
WASHINGTON, D. C. 20555

Reply to:
1050 East Flamingo Rd.
Suite 319
Las Vegas, Nevada 89119
Tel: (702) 388-6125
FTS: 598-6125

TO: Mr. James E. Kennedy

FROM: Paul T. Prestholt, Sr. On-Site Licensing Representative

DATE: February 19, 1988

SUBJECT: REVISION TO CORRECTIVE ACTION COMPLETION DATES FOR OPEN WMPO AUDIT FINDINGS; WMPO RESPONSE TO QA SDR NO. 102; NNWSI PROJECT/WMPO SURVEILLANCE REPORT NUMBER WMPO-SR-88-005; WMPO QA SDRs (NOS. 062, 063, 064, AND 067) RESULTING FROM AUDIT 87-8 OF F&S, INC., OF THE NNWSI PROJECT; WMPO QA AUDIT 88-01 OF F&S, INC. SUPPORT OF THE NNWSI PROJECT; WMPO QA SDRs NOS. 058 AND 061 RESULTING FROM AUDIT 87-9 OF F&S, INC., OF THE NNWSI PROJECT; WMPO QA SDR NOS. 083 AND 085 RESULTING FROM AUDIT 87-2 OF HOLMES & NARVER, INC., IN SUPPORT OF THE NNWSI PROJECT; WMPO QUALITY LEVEL SDRs RESULTING FROM AUDIT 87-3 OF LLNL SUPPORT OF THE NNWSI PROJECT; WMPO CLOSURE OF NONCONFORMANCE REPORT WMPO-10; WMPO SDR RESULTING FROM AUDIT 87-4 OF SAIC; WMPO EVALUATION OF USGS RESPONSES TO THE QA SDRs RESULTING FROM AUDIT 87-6/87-7 OF USGS

Please find the above-referenced information for your files.

FTP:nan

8802250016 880219
PDR WASTE
WM-11 DCD

NH3



Department of Energy

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

FEB 16 1988

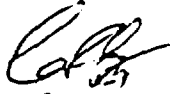
James Blaylock, WMPO, NV

REVISION TO CORRECTIVE ACTION COMPLETION DATES FOR OPEN WASTE MANAGEMENT PROJECT OFFICE (WMPO) AUDIT FINDINGS

The completion of the corrective action for several WMPO audit findings requires the revision of the WMPO Quality Assurance Program Plan (QAPP), NVO-196-18, and several Quality Management Procedures (QMPs). The anticipated schedule for the issue of these documents has been extended due to continuing delays in the review cycle and the availability of personnel to process the revisions and resolve reviewer comments. Listed below is the present schedule for completing the WMPO QAPP and the QMPs, which are directly related to the open WMPO audit findings.

<u>Audit Finding No.</u>	<u>Related Procedure</u>	<u>Anticipated Issue Date</u>
853-1	Issue QMP for Procurement	3/31/88
866-2	Issue AP for Management Assessment	TBD
866-3	Revise QMP-06-03	3/31/88
866-4	Revise QMP-03-01	3/31/88
866-5	Issue QMP-17-01	3/31/88
866-6	Revise QMP-02-02	3/31/88
866-11	Revise QMP-02-02	3/31/88
866-13	Revise QMP-02-02	3/31/88
866-14	Revise NVO-196-18, QMP-01-01, QMP-15-01 Issue QMP-01-02	3/31/88
866-18	Revise QMP-06-03	3/31/88
866-20	Revise QMP-02-01	3/31/88
866-22	Revise QMP-02-02	3/31/88
866-23	Revise NVO-196-18, QMP-06-03, QMP-03-01	3/31/88
866-24	Revise NVO-196-18, Issue QMP-17-01	3/31/88
866-25	Revise NVO-196-18, Issue QMP-06-02	3/31/88
866-29	Revise NVO-196-18, Revise QMP-02-01	3/31/88

If you have any questions, please contact me at 295-8920.


Carl P. Gertz, Project Manager
Waste Management Project Office

WMPO:CPG-1176



Department of Energy

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Las Vegas, NV 89193-8518

FEB 11 1988

Stanley H. Klein, Manager
Quality Assurance Department
Science Applications
International Corporation
101 Convention Center Drive
Suite 407
Las Vegas, NV 89109

WASTE MANAGEMENT PROJECT OFFICE (WMPO) RESPONSE TO QUALITY ASSURANCE STANDARD DEFICIENCY REPORT (SDR) NO. 102

Enclosed is the WMPO response to SDR No. 102 which was generated to formally identify, on the project office level, the inability of the Nevada Nuclear Waste Storage Investigations (NNWSI) Project quality assurance personnel to verify that calibration records for NNWSI Project instruments calibrated at the Sandia National Laboratories Primary Standards Lab are traceable to the National Bureau of Standards or other nationally recognized standards.

If you have any questions, please contact me at 295-8913.

A handwritten signature in cursive script that reads "James Blaylock".

James Blaylock
Project Quality Manager
Waste Management Project Office

WMPO:JB-1157

Enclosure:
SDR No. 102

WIAPO STANDARD DEFICIENCY REPORT

N-CA-038
3/87

Completed by Organization in Block 5

1 Date 12/23/87 | 2 Severity Level 1 2 3 Page 1 of 2

3 Discovered During N/A | 3a Identified By G. Heaney | 3b Branch Chief Concurrence Date N/A | 4 SDR No. 102 Rev. 0

5 Organization WMPO | 6 Person(s) Contacted J. Blaylock, S. Metta | 7 Response Due Date is 20 Working Days from Date of Transmittal

8 Requirement (Audit Checklist Reference, if Applicable)
The NNWSI Project QA Plan NVO-196-17, Rev. 5, Section XII "Control of Measuring and Test Equipment", Paragraph 2.2 states "Measuring and test equipment shall be calibrated against certified equipment having known relationships (cont'd)"

9 Deficiency NNWSI Project QA personnel cannot verify that: 1) calibration records are traceable to the NBS or other nationally recognized standards for instruments calibrated at the Sandia Primary Standards Lab (PSL); 2) the PSL operates under a QAPP which meets NNWSI Project QAP, NVO-196-17 requirements. (cont'd)

10 Recommended Action(s): Remedial Investigative Corrective
1) Review to determine if the NNWSI Project Participants have performed Quality Level I and II work with calibrated instruments calibrated at the Sandia Primary Standards Laboratory for which calibration (cont'd)

11 QAE/Lead Auditor Date Leonard Heaney 12/23/87 | 12 Branch Manager Date D.W. Estelle 12/23/87 | 13 Project Quality Mgr. Date James Blaylock 12/23/87

14 Remedial/Investigative Action(s)
See attached. | 15 Effective Date 6/30/88

16 Cause of the Condition & Corrective Action to Prevent Recurrence
See attached. | 17 Effective Date 6/30/88

18 Signature/Date
James Blaylock 2/2/88

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



WMPO STANDARD DEFICIENCY REPORT
CONTINUATION SHEET

WMPO-038
10 86

SDR No. 102

Rev. 0

Page 2 of 2

Block 8 Requirement (cont'd)

to the National Bureau of Standards (NBS) or other nationally recognized standards and shall be calibrated, adjusted, and maintained at prescribed intervals. If no nationally recognized standards exist, the basis of calibration shall be documented.

In addition, Section I "Organization", Paragraph 3.0 states "A Quality Assurance Program Plan (QAPP) shall apply to all items and activities of an organization affecting quality." The calibration services of the PSL is one such activity of an organization affecting quality. This requires that the PSL perform NNWSI activities under a QAPP which meets NNWSI Project QAP, NVO-196-17 QA requirements and that Project QA personnel verify the implementation of the QAPP.

Block 9 Deficiency (cont'd)

Note: This deficiency has been previously identified by the Project Office and a solution to the problem is currently being pursued. Refer to the following WMPO letters which were generated as a result of this deficiency:

- Letter, C. P. Gertz to TPOs, dated September 1, 1987, "Review of Quality Level I and II Work Performed Utilizing Instruments Calibrated at the Primary Standards Lab (PSL) at Sandia National Laboratories (SNL)."
WMPO Action Item #87-2368, WMPO:JB-2593.
- Letter, C. P. Gertz to TPOs, dated September 17, 1987, "Calibration Traceability Through the Primary Standards Laboratory (PSL) at Sandia National Laboratories," WMPO:JB-2752.

This SDR will serve to formally identify and track the deficiency for resolution on the Project Office level within the SDR system.

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

records cannot be verified by NNWSI Project QA personnel for traceability to the NBS or other nationally recognized standard.

- 2) Provide a corrective action plan to resolve the above deficiency.

RESPONSE TO SDR NO. 102, REV. 0

Block 14 Remedial/Investigative Actions

WMPO has requested all NNWSI Project participants to perform a review to determine if the calibration traceability of instruments used for any Quality Level I or II work includes the PSL in that chain. Any data derived from the use of such instruments is to be identified in the NNWSI Project participants nonconformance reporting (NCR) system (refer to WMPO letter JB-2593 referenced in Block 9 of this SDR). These actions are anticipated to be completed June 30, 1988.

Block 16 Cause of the Condition and Corrective Action to Prevent Recurrence

Cause

The PSL has chosen not to allow NNWSI Project QA personnel to audit PSL calibration records to ensure traceability to the NBS or other nationally recognized standards. In addition, the PSL operates under a program which has not been approved by the WMPO to ensure that the program meets NNWSI Project QAP, NVO-196-17 requirements.

Corrective Action to Prevent Recurrence

NNWSI Project participants have been requested to use calibration services for NNWSI Project activities for which traceability to the NBS or other nationally recognized standards does not pass through the PSL (refer to WMPO letter JB:2752 referenced in Block 9 of this SDR). These actions are anticipated to be completed June 30, 1988.



Department of Energy

Nevada Operations Office

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13119

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Technical Project Officer for NNWSI
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Las Vegas, NV 89193-3265

NEVADA NUCLEAR WASTE STORAGE INVESTIGATIONS PROJECT/WASTE MANAGEMENT PROJECT
OFFICE SURVEILLANCE REPORT NUMBER WMPO-SR-88-005

Reference: Letter, Blaylock to Bullock, dtd. 1/8/88

The copy of Surveillance Report WMPO-SR-88-005, which was forwarded to you with the referenced transmittal letter, was not signed and approved by the undersigned. Please remove the unsigned copy from your files and replace it with the enclosed signed copy.

If you have any questions related to this report, please contact me at 295-8913.

James Blaylock
James Blaylock
Project Quality Manager
Waste Management Project Office

WMPO:JB-1020

Enclosure:
Surveillance Report
WMPO-SR-88-005

SURVEILLANCE

NEVADA NUCLEAR WASTE STORAGE INVESTIGATIONS (NWSI)
PROJECT/ WASTE MANAGEMENT PROJECT OFFICE (WMPO)

SURVEILLANCE REPORT NUMBER WMPO-SR-88-005

CONDUCTED ON NOVEMBER 16-19, 1987

SURVEILLANCE OF FENIX & SCISSON, INC. TULSA, OKLAHOMA

ACTIVITY OBSERVED/SURVEILLED: CLOSEOUT OF AUDIT FINDINGS

PREPARED BY: Frederick J. Kitch DATE: 12-22-87

APPROVED BY: James Blaylock DATE: 1/8/88

1.0 INTRODUCTION

This report contains the results of the Nevada Nuclear Waste Storage Investigations (NNWSI) Project/Waste Management Project Office (WMPO) Surveillance Report Number WMPO-SR-88-005 of F&S conducted on November 16-19, 1987.

The surveillance was conducted to verify implementation of corrective actions being taken on seven SDRs by F&S. Based on the objective evidence that was reviewed, a recommendation will be made to close SDR numbers 062, 063, 064, and 067.

2.0 SURVEILLANCE PERSONNEL

Frederick J. Ruth

3.0 SUMMARY OF SURVEILLANCE RESULTS

The surveillance commenced on November 16 and concluded on November 19, 1987, at the F&S facilities in Tulsa, Oklahoma. The surveillance consisted of discussions with F&S personnel and reviewing and obtaining copies of documents.

During the surveillance, the status of the implementation of approved corrective actions for four of the open audit findings from the WMPO Audit 87-8 of F&S were reviewed and discussed as follows:

SDR NO.062

Part A identified that F&S had made corrections to NNWSI Project design calculations without being initialed and dated by the person making the corrections. Examples of calculations corrected and not initialed and dated were:

S-6-004

S-6-005

Part B identified calculation sheets that were not assigned a calculation number.

The approved response to Part A stated a review will be done of all calculations and the person that made the correction will initial, date, and annotate that the correction was made per WMPO Audit 87-8 and SDR No. 062.

The approved response to Part B stated that a review will be performed of Design Sheets that have been used for calculations in each of the studies to identify any corrections necessary to ensure each calculation is assigned a calculation number. When a calculation number is added or revised, it will be dated and annotated that the correction was made per WMPO Audit 87-8 and SDR

Review of Objective Evidence

Part A: A review of NNWSI Project design calculations, S-6-004 and S-6-005 was done and all corrections have been initialed, dated and annotated that the correction was made per WMPO Audit 87-8 and SDR No. 062.

Part B: A review was done of Design Sheets and all have a calculation number. If a calculation number was added or revised it was dated and annotated that the correction was made per WMPO Audit 87-8 and SDR No. 062.

Based on the objective evidence that was reviewed, a recommendation will be made to close the SDR.

SDR No. 063

The deficiency stated that "...the Design Verification Record (Form 508-TUL-12) for F&S Study No.4, 'ESF Controlled Blasting,'" was not in the project file nor could the record be located during the audit."

The accepted response stated that a review has been conducted to see if verification has been performed. It was determined that the design verification was conducted but evidence was placed on an incorrect form. A Design Verification Record will be completed with the annotation indicating the above condition and that the Design Verification was completed as a result of WMPO Audit 87-8, SDR No. 063.

Review of Objective Evidence

A review of the Project file indicated that a NNWSI Project Design Verification Record (Form 508-TUL-12) was prepared for Study No. 4, titled "ESF Controlled Blasting Study." An annotation has been made on the record stating it was made to verify Design Verification was conducted but not documented on the proper form as identified in WMPO Audit 87-8, SDR No. 063.

A training session was conducted by Loren Weyland, Project Design Manager, on November 11, 1987, reinstucting personnel on procedural requirements.

Based on the objective evidence that was reviewed, a recommendation will be made to close the SDR.

SDR NO. 064

The deficiency stated the "F&S Design Study files show that comments are not included in Block 5 of the NNWSI Design Verification Record" (Form 508-TUL-12). During review of F&S Design Study No. 6, "ESF Ventilation Study" it was observed that corrections were made on calculation sheet S-6-005. This calculation sheet was originated by a private consultant and the corrections were made by an F&S design engineer after conversations with the consultant. However, these conversations and reasons for the corrections were not documented on the DVR as required.

The accepted response stated that "each of the designs verified by 'NWSI Design Verification Record' Form 508-TUL-12 will be reviewed to document the verification results including reconciled and/or resolved comments. For the specific observation regarding calculation sheet S-6-005 the engineer responsible for the change will document the reasons on Form 508-TUL-12 with the annotation that the correction was a result of WMPO Audit 87-8, SDR No. 064."

Review of Objective Evidence

A review of the F&S Design Study files was performed and comments and their resolution in Block 5 of the NWSI Project Design Verification Record have been documented and resolved.

For the specific observation regarding calculation sheet S-6-005, the engineer that was responsible for the change has documented the reasons on Form 508-TUL-12 with an annotation that the correction was a result of WMPO Audit 87-8, SDR No. 064.

Based on the objective evidence that was reviewed, a recommendation will be made to close the SDR.

SDR No. 067

The deficiency stated that incoming correspondence in file 2.2.3 entitled "Subcontractors" do not indicate objective evidence of a review by the PM or his designee and Form No.508-TUL-19 was not attached. The following are examples:

Edward J. Cording Letter, March 30, 1987, to R. Mudd
Edward J. Cording Letter, March 25, 1987, to R. Mudd
Edward J. Cording Letter, March 25, 1987, to R. Mudd
Floyd C. Bossard & Assoc. Letter, March 6, 1987, to D. Coppage
Floyd C. Bossard & Assoc. Letter, January 23, 1987, to D.Coppage
Floyd C. Bossard & Assoc. Letter, January 22, 1987, to D.Coppage

The approved response stated that the documents listed above will be routed to the Project Design Manager (PDM) with an attached Internal Routing Form No.508-TUL-19. The routing form will be annotated to show the action was a result of WMPO Audit 87-8, SDR No. 067.

Review of Objective Evidence

Internal Routing Slips have been prepared for all letters identified in this SDR and have been initialed and dated by the PDM. The routing slips have been annotated to show action was a result of WMPO Audit 87-8, SDR No. 067.

Based on the objective evidence that was reviewed, a recommendation will be made to close the SDR.



Department of Energy

Nevada Operations Office

P. O. Box 98518

Las Vegas, NV 89193-8518

JAN 29 1988

Richard L. Bullock
Technical Project Officer for NNVSI
Fenix & Scisson, Inc.
Mail Stop 514
P.O. Box 93625
Las Vegas, NV 89193-3265

WASTE MANAGEMENT PROJECT OFFICE (VMPO) QUALITY ASSURANCE STANDARD DEFICIENCY REPORTS (SDR NOS. 062, 063, 064, AND 067) RESULTING FROM AUDIT 87-8 OF FENIX & SCISSON, INC., OF THE NEVADA NUCLEAR WASTE STORAGE INVESTIGATIONS PROJECT

Reference: Letter, Blaylock to Bullock, dtd. 1/8/88

Standard Deficiency Report Nos. 062, 063, 064, and 067, which were identified during VMPO Audit Number 87-8, are considered closed, based on the recommendations of Surveillance Report No. VMPO-SR-005, which was transmitted to you by the above referenced letter.

The remaining SDR Nos. 065, 066, and 068, generated on Audit Number 87-8, cannot be closed until the corrective actions are satisfactorily verified.

If you have any questions, please contact me at 295-8913.

James Blaylock
James Blaylock
Project Quality Manager
Waste Management Project Office

VMPO:JB-1018

Enclosure:
SDR Nos. 062, 063, 064, 067

WMPO STANDARD DEFICIENCY REPORT

N-QA-038
3/87

12/87
 Completed by Originaling OA Organization
 Completed by Organization in Block 5
 Comp. by Orig. OA Org.

1 Date 7/31/87		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 87-8		3a Identified By T. Vetter	3b Branch Chief Concurrence Date N/A		4 SDR No. 1157 Rev. 0
5 Organization Fenix & Scisson		6 Person(s) Contacted Project Secretary		7 Response Due Date is 20 Working Days from Date of Transmittal	
8 Requirement (Audit Checklist Reference, if Applicable) NNWSI Project/Design Control Procedure NNWSI-DC-16, Rev. 2, Paragraph 6.5, requires that all incoming correspondence be reviewed by the PM or his (cont'd)					
9 Deficiency Contrary to the above requirement, the following examples of incoming correspondence in file 2.2.3 entitled "Subcontractors" do not indicate (cont'd)					
10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Investigative <input type="checkbox"/> Corrective Implement procedure and instruct appropriate F&S personnel in procedure requirements.					
11 QAE/Lead Auditor Date <i>R.H. Klemens 8/17/87</i>		12 Branch Manager Date <i>W.R. Kays 8/2/87</i>		13 Project Quality Mgr. Date <i>J. Blaylock 8/2/87</i>	
14 Remedial/Investigative Action(s) The documents described in block 9 will be routed to 15 Effective Date <u>10/15/87</u> the Project Design Manager (PDM) with an attached Internal Routing Form, No. 508-TUL- 19. The routing form will be annotated to show the action was a result of WMPO Audit 87-8, SDR No. 067.					
16 Cause of the Condition & Corrective Action to Prevent Recurrence The cause of the condition was that personnel did 17 Effective Date <u>10/15/87</u> not follow prescribed procedures. Corrective action to prevent recurrence will be to revise the procedure to delete the requirement for the Project Manager or his designee to review <u>all</u> incoming correspondence.					
18 Signature/Date <i>W.R. Kays (PDM) 9-15-87</i> <i>J.L. Bullock (PM) 9-16-87</i>					
19 Response <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Amended <input type="checkbox"/> Reject <input type="checkbox"/> Response		QAE/Lead Auditor/Date <i>R.H. Klemens 11/2/87</i>		Branch Manager/Date <i>W.R. Kays 11-2-87</i>	
20 Amended Response <input type="checkbox"/> Accept <input type="checkbox"/> Reject		QAE/Lead Auditor/Date		Branch Manager/Date	
21 Verifi- cation <input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory		QAE/Lead Auditor/Date <i>R.H. Klemens 12/28/87</i>		Branch Manager/Date <i>W.R. Kays 12/28/87</i>	
22 Remarks Verification based on results of Surveillance WMPO-SR-88-005.					
23 QA CLOSURE		QAE/Lead Auditor/Date <i>R.H. Klemens 1/4/88</i>		Branch Manager/Date <i>W.R. Kays 1-13-88</i>	
				POM/Date <i>J. Blaylock 1/13/88</i>	



WMPO STANDARD DEFICIENCY REPORT
CONTINUATION SHEET

N-QA-038
10/86

SDR No 062

Rev. 0

Page 2 of 2

Block 8 Requirement (cont'd)

Part A by erasure or other methods of obliteration." Incorrect data is crossed out and the correct information added, initialed, and dated by the person making the correction.

Part B F&S Design Control Procedure NNWSI-DC-16, "Document Control," Rev. 2, Para. 6.7.4, states "Design sheets, used for calculations, shall be assigned a calculation number by the initiator..."

(Audit Checklist 87-8-2, Item T-24)

Block 9 Deficiency (cont'd)

Part A by the person making the corrections. Examples of calculations corrected and not initialed and dated are:

S-6-004

S-6-005

Part B Contrary to the above requirement (Part B), design sheets used for calculations in F&S Study No. 4, "ESF Controlled Blasting Study Report," Appendix B, "Time Cycle Estimates for Control Blasting Methods," were not assigned a calculation number.

F&S Internal Audit, QA(N) 87-01, Observation No. 7 identified a similar problem with the numbering of design sheets used for calculations for F&S Study No. 6, "Ventilation."

Block 10 Recommended Action (cont'd)

Part A-1 initialed and dated by the person who made the corrections. WMPO Audit 87-8 and SDR No. 062 shall be referenced as the basis for this corrective action.

Part A-2 Instruct personnel to procedural requirements.

Part B-1 Review design sheets used for calculations on all 11 studies and assign calculation numbers, as required, to the original documents. WMPO Audit 87-8 and SDR No. 062 shall be referenced as the basis for this corrective action.

Part B-2 Instruct personnel to procedural requirements.

Block 14 Remedial/Investigative Action(s) (cont.)

Part B - of the studies to identify any corrections necessary to ensure each calculation is assigned a calculation number in accordance with the relevant revision of NNWSI-DC-16. When a calculation number is added or revised, it will be dated and annotated that the correction was made per WMPO Audit 87-8 and SDR No. 062.

FENIX & SCISSON, INC.
P. O. BOX 93285
LAS VEGAS, NEVADA 89153-3285
(702) 295-3627

RRR-870918-0016

ADDRESS REPLY TO: FS-NNWSI-0347

September 17, 1987

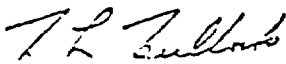
SAIC/TSMSS
SEP 18 1987
CCF RECEIVED

James Blaylock
Project Quality Manager
Waste Management Project Office
U. S. Department of Energy
Post Office Box 98518
Las Vegas, Nevada 89193-8518

WASTE MANAGEMENT PROJECT OFFICE (WMPO) QUALITY ASSURANCE (QA) STANDARD
DEFICIENCY REPORTS (SDRs) RESULTING FROM AUDIT 87-8 OF FENIX & SCISSON, INC.
(FZS), TULSA, OKLAHOMA, SUPPORT OF THE NEVADA NUCLEAR WASTE STORAGE
INVESTIGATIONS (NNWSI) PROJECT (WMPO ACTION ITEM #87-2303)

In response to your letter, WMPO:J3-2572 dated August 21, 1987, concerning the
seven SDRs (Nos. 062 - 066) which were generated as the result of the WMPO QA
Audit 87-8, we have completed each SDR, Blocks 14 through 18. The seven SDRs
are attached to this letter.

If you have questions or need additional information, please contact me at
295-2220.



R. L. Bullock
Project Manager

Attachment

cc w/attachments:

- M. J. Brogan
- R. B. Williams
- J. A. Cross
- M. J. Regenda
- L. Meylan
- A. Sisco
- Central Files - 1.2.9

WMPO STANDARD DEFICIENCY REPORT

HQA-038
3/87

1 Date <u>7/31/87</u>		2 Severity Level <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3		Page <u>1</u> of <u>2</u>	
3 Discovered During <u>WMPO Audit 87-8</u>		3a Identified By <u>J. Karnoski</u> <u>G. Heaney</u>		3b Branch Chief Concurrence Date <u>N/A</u>	
4 SDR No. <u>063</u>		Rev. <u>0</u>			
5 Organization <u>Fenix & Scisson</u>		6 Person(s) Contacted <u>F. Holbrook</u>		7 Response Due Date is <u>20 Working Days from</u> <u>Date of Transmittal</u>	

8 Requirement (Audit Checklist Reference, if Applicable)
 F&S Design Control Procedure NNWSI-DC-04, "Design Verification," Rev. 3, Paragraph 6.3, states "After the PM, or his designee, signs and dates (cont'd)"

9 Deficiency
 Contrary to the above, the Design Verification Record (Form SDR-TUL-12) for F&S Study No. 4, "ESF Controlled Blasting," was not in the project file, (cont'd)

10 Recommended Action(s) Remedial Investigative Corrective
 1. Review to determine if this design verification was performed as required by procedural requirements. (cont'd)

11 GAE/Lead Auditor Date <u>Robert H. Klemens 8/17/87</u>	12 Branch Manager Date <u>W. R. Kuzon 8/17/87</u>	13 Project Quality Mgr. Date <u>James Blaylock 8/17/87</u>
--	--	---

14 Remedial/Investigative Action(s)
0

15 Effective Date 10/15/87
 A review has been conducted to see if verification has been performed. It has been determined that the design verification was conducted but evidence was placed on an incorrect form. A Design Verification Record will be completed with the annotation indicating the above condition and that the Design Verification Record was completed as a result of WMPO Audit 87-8, SDR No. 063.

16 Cause of the Condition & Corrective Action to Prevent Recurrence
 17 Effective Date 10/15/87
 "Review Verification" placed on the incorrect form. Recurrence will be prevented by re-instructing personnel on procedural requirements.

18 Signature/Date
Surveillance (PDM) 9-15-87 W. R. Kuzon (PM) 9/16/87

19 Response <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Amended Response <input type="checkbox"/> Reject	QAE/Lead Auditor/Date <u>Robert H. Klemens 11/4/87</u>	Branch Manager/Date <u>W. R. Kuzon 11-4-87</u>
20 Amended Response <input type="checkbox"/> Accept <input type="checkbox"/> Reject	QAE/Lead Auditor/Date	Branch Manager/Date
21 Verification <input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory	QAE/Lead Auditor/Date <u>RHKlemens 12/28/87</u>	Branch Manager/Date <u>WRKuzon 12-28-87</u>

22 Remarks
 Verification based on results of Surveillance WMPO-SR-88-005.

23 QAE/Lead Auditor/Date	Branch Manager/Date	PQM/Date
--------------------------	---------------------	----------



WMI STANDARD DEFICIENCY REPORT
CONTINUATION SHEET

N-DA-038
10/86

SOR No

063

Rev

0

Page 2 of 2

Block 8 Requirement (cont'd)

the NNWSI Design Verification Record as accepted for release for an interdisciplinary review, the record shall be filed in the project file.

(Checklist 87-8-2, Item T-10, T-22, and T-27)
(Checklist 87-8-1, Item 3.0-10)

Block 9 Deficiency (cont'd)

nor could the record be located during the audit.

Block 10 Recommended Action (cont'd)

2. Review to determine adverse impacts on the study if the required design verification was not performed.
3. Reinstruct personnel to procedural requirements.

FENIX & SCISSON, INC.
P. O. BOX 83265
LAS VEGAS, NEVADA 89193-3265
(702) 295-3627

ADDRESS REPLY TO: FS-NNWSI-0347

September 17, 1987

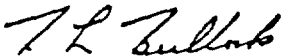
James Blaylock
Project Quality Manager
Waste Management Project Office
U. S. Department of Energy
Post Office Box 98518
Las Vegas, Nevada 89193-8518

SAIC/T&MSS
SEP 18 1987
CCF RECEIVED

WASTE MANAGEMENT PROJECT OFFICE (WMPO) QUALITY ASSURANCE (QA) STANDARD DEFICIENCY REPORTS (SDRs) RESULTING FROM AUDIT 87-8 OF FENIX & SCISSON, INC. (F&S), TULSA, OKLAHOMA, SUPPORT OF THE NEVADA NUCLEAR WASTE STORAGE INVESTIGATIONS (NNWSI) PROJECT (WMPO ACTION ITEM #87-2303)

In response to your letter, WMPO:JB-2572 dated August 21, 1987, concerning the seven SDRs (Nos. 062 - 068) which were generated as the result of the WMPO QA Audit 87-8, we have completed each SDR, Blocks 14 through 18. The seven SDRs are attached to this letter.

If you have questions or need additional information, please contact me at 295-2220.



R. L. Bullock
Project Manager

Attachment

cc w/attachment:

N. J. Brogan
~~R. H. Klemens~~
J. A. Cross
M. J. Regenda
L. Weyand
A. Sacco
Central Files - 1.2.9

0100*H1607X*VMS

WMPO STANDARD DEFICIENCY REPORT

M-0A-038
3/87

Completed by Originaling QA Organization

1 Date <u>7/31/87</u>	2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page <u>1</u> of <u>2</u>
3 Discovered During <u>WMPO Audit 87-R</u>	3a Identified By <u>P. Karnoski G. Heaney</u>	3b Branch Chief Concurrence Date <u>N/A</u>	4 SDR No <u>064</u> Rev. <u>0</u>
5 Organization <u>Fenix & Scisson</u>	6 Person(s) Contacted <u>F. Holbrook, R. Coppage</u>	7 Response Due Date is 20 Working Days from Date of Transmittal	
8 Requirement (Audit Checklist Reference, if Applicable) <u>F&S Design Control Procedure NNWSI-DC-04, "Design Verification," Rev. 3, Paragraph 6.1.4.e, states in block 5 (referring to block 5 of the (cont'd))</u>			
9 Deficiency <u>Contrary to the above, review of F&S Design Study files show that comments are not included in block 5 of the NNWSI Design Verification Record (cont'd)</u>			
10 Recommended Action(s) <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Investigative <input checked="" type="checkbox"/> Corrective <u>1. Reinstruct personnel to procedural requirements for the documenting of comments and the resolution of comments. (cont'd)</u>			

Aprvl

11 QAE/Lead Auditor Date <u>Robert H. Klemens 7/1/87</u>	12 Branch Manager Date <u>W.R. Kagan 8/7/87</u>	13 Project Quality Mgr. Date <u>James Blaylock 8/7/87</u>
---	--	--

Completed by Organization in Block 5

14 Remedial/Investigative Action(s) <u>Each of the designs verified by "NNWSI Design Verifi-</u>	15 Effective Date <u>10/15/87</u>
16 Cause of the Condition & Corrective Action to Prevent Recurrence <u>Failure to follow procedure requirements was the cause of this deficiency. Corrective action to avoid recurrence will be re-instructing personnel on procedural requirements.</u>	
17 Effective Date <u>10/15/87</u>	
18 Signature/Date <u>Lee Weiland (PDM) 9-15-87 T L Bellak (PM) 9-16-87</u>	

Comp. by Orig. QA Org

19 Response	<input checked="" type="checkbox"/> Accept <input type="checkbox"/> Reject	<input checked="" type="checkbox"/> Amended <input type="checkbox"/> Response	QAE/Lead Auditor/Date <u>R.H. Klemens 11/4/87</u>	Branch Manager/Date <u>W.R. Kagan 11-4-87</u>
20 Amended Response	<input type="checkbox"/> Accept <input type="checkbox"/> Reject		QAE/Lead Auditor/Date	Branch Manager/Date
21 Verifi- cation	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory		QAE/Lead Auditor/Date <u>R.H. Klemens 12/28/87</u>	Branch Manager/Date <u>W.R. Kagan 12-28-87</u>
22 Remarks <u>Verification based on results of Surveillance WMPO-SR-88-005.</u>				
23 QA CLOSURE	QAE/Lead Auditor/Date <u>R.H. Klemens 1/4/88</u>	Branch Manager/Date <u>W.R. Kagan 1-18-88</u>	PQM/Date <u>J. Blaylock 1/13/88</u>	



WMPO STANDARD DEFICIENCY REPORT
CONTINUATION SHEET

N-QA-038
10/86

SDR No 064

Rev. 0

Page 2 of 2

Block 8 Requirement (cont'd)

NNWSI Design Verification Record, Form 508-TUL-12), "The verifier shall document the verification results in this block. The results shall include reconciled and/or resolved comments, from consultation with the originator..."

(Checklist 87-8-2, Item T-1)

Block 9 Deficiency (cont'd)

(Form 508-TUL-12). During review of F&S Design Study No. 6, "ESF Ventilation Study," it was observed that corrections were made on calculation sheet S-6-005. This calculation sheet was originated by a private consultant and the corrections were made by an F&S design engineer after conversations with the consultant. However, these conversations and reasons for the corrections were not documented on the DVR as required.

Block 10 Recommended Action (cont'd)

2. Review Design Verification Records for the F&S Design Studies and document the verification results, including reconciled and/or resolved comments in block 5 of the Design Verification Record, or on an attached sheet if more practical.

FENIX & SCISSON, INC.
P. O. BOX 93265
LAS VEGAS, NEVADA 89193-3265
(702) 295-3627

ADDRESS REPLY TO:
FS-NNWSI-0347

September 17, 1987

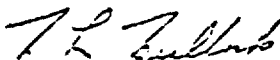
James Blaylock
Project Quality Manager
Waste Management Project Office
U. S. Department of Energy
Post Office Box 98518
Las Vegas, Nevada 89193-8518

SAIC/ITEMS
SEP 18 1987
CCF RECEIVED

WASTE MANAGEMENT PROJECT OFFICE (WMPO) QUALITY ASSURANCE (QA) STANDARD
DEFICIENCY REPORTS (SDRs) RESULTING FROM AUDIT 87-2 OF FENIX & SCISSON, INC.
(F&S), TULSA, OKLAHOMA, SUPPORT OF THE NEVADA NUCLEAR WASTE STORAGE
INVESTIGATIONS (NNWSI) PROJECT (WMPO ACTION ITEM #87-2303)

In response to your letter, WMPO:JB-2572 dated August 21, 1987, concerning the
seven SDRs (Nos. 062 - 069) which were generated as the result of the WMPO QA
audit 87-2, we have completed each SDR, Blocks 14 through 18. The seven SDRs
are attached to this letter.

If you have questions or need additional information, please contact me at
295-2229.



R. L. Bullock
Project Manager

Attachment

cc w/attachment:

V. J. Brogan
M. J. Lawrence
J. A. Cross
M. J. Repanda
L. Weyand
A. Sisco

Central Files - 1.2.9

WMPO STANDARD DEFICIENCY REPORT

M-OA-038
3/87

12/22/87

Completed by Originating QA Organization

Approved

Completed by Organization in Block 5

Completed by Orig. QA Org.

1 Date <u>7/31/87</u>		2 Severity Level <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3		Page <u>1</u> of <u>2</u>	
3 Discovered During <u>WMPO Audit 87-8</u>		3a Identified By <u>T. Vetter</u>		3b Branch Chief Concurrence Date <u>N/A</u>	
4 Organization <u>Fenix & Scisson</u>		5 Person(s) Contacted <u>Project Secretary</u>		6 Response Due Date is <u>20 Working Days from</u> Date of Transmittal	
7 Requirement (Audit Checklist Reference, if Applicable) <u>NWWSI Project/Design Control Procedure NWWSI-DC-16, Rev. 2, Paragraph 6.5, requires that all incoming correspondence be reviewed by the PM or his (cont'd)</u>					
8 Deficiency <u>Contrary to the above requirement, the following examples of incoming correspondence in file 2.2.3 entitled "Subcontractors" do not indicate (cont'd)</u>					
9 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Investigative <input type="checkbox"/> Corrective <u>Implement procedure and instruct appropriate F&S personnel in procedure requirements.</u>					
11 QAE/Lead Auditor Date <u>R.H. Klemens 5/17/87</u>		12 Branch Manager Date <u>W. R. Kray 8/7/87</u>		13 Project Quality Mgr. Date <u>J. Blaylock 8/7/87</u>	
14 Remedial/Investigative Action(s) <u>The documents described in block 9 will be routed to the Project Design Manager (PDM) with an attached Internal Routing Form, No. 508-TUL-19. The routing form will be annotated to show the action was a result of WMPO Audit 87-8, SDR No. 067.</u>					
15 Effective Date <u>10/15/87</u>					
16 Cause of the Condition & Corrective Action to Prevent Recurrence <u>The cause of the condition was that personnel did not follow prescribed procedures. Corrective action to prevent recurrence will be to revise the procedure to delete the requirement for the Project Manager or his designee to review <u>all</u> incoming correspondence.</u>					
17 Effective Date <u>10/15/87</u>					
18 Signature/Date <u>Steve Weiland (PDM) 9-15-87 T.L. Belluck (PM) 9-16-87</u>					
19 Response		<input checked="" type="checkbox"/> Accept <input type="checkbox"/> Amended Response		QAE/Lead Auditor/Date	
		<input type="checkbox"/> Reject		<u>R.H. Klemens 11/2/87</u>	
20 Amended Response		<input type="checkbox"/> Accept <input type="checkbox"/> Reject		QAE/Lead Auditor/Date	
				<u>W. R. Kray 11-2-87</u>	
21 Verification		<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory		QAE/Lead Auditor/Date	
				<u>R.H. Klemens 12/28/87</u>	
22 Remarks		Branch Manager/Date			
<u>Verification based on results of Surveillance WMPO-SR-88-005.</u>		<u>W. R. Kray 12/28/87</u>			
23 QA CLOSURE		QAE/Lead Auditor/Date		Branch Manager/Date	
		<u>R.H. Klemens 1/4/88</u>		<u>W. R. Kray 1-13-88</u>	
				POM/Date	
				<u>J. Blaylock 1/13/88</u>	

ENCLOSURE

WMPU STANDARD DEFICIENCY REPORT
CONTINUATION SHEET

N-GA-038
10/86

DR No 067

Rev. 0

Page 2 of 2

Block 8 Requirement (cont'd)

designee and Paragraph 6.5.1 requires that Internal Routing Form No. 508-TUL-19 be used.

(Checklist 87-8-2, Item T-29, Item T-90)

Block 9 Deficiency (cont'd)

objective evidence of a review by the PM or his designee and Form No. 508-TUL-19 was not attached:

Edward J. Cording Letter, March 30, 1987, to R. Mudd
Edward J. Cording Letter, March 25, 1987, to R. Mudd
Edward J. Cording Letter, March 25, 1987, to R. Mudd (telecopy)
Floyd C. Bossard & Assoc. Letter, March 6, 1987, to D. Coppage
Floyd C. Bossard & Assoc. Letter, January 23, 1987, to D. Coppage
Floyd C. Bossard & Assoc. Letter, January 22, 1987, to D. Coppage

FENIX & SCISSON, INC.
P. O. BOX 83223
LAS VEGAS, NEVADA 89193-3265
(702) 295-3627

ADDRESS REPLY TO: FS-NNWSI-0347

September 17, 1987

James Blaylock
Project Quality Manager
Waste Management Project Office
U. S. Department of Energy
Post Office Box 98518
Las Vegas, Nevada 89193-8518

SAIC/TBMS
SEP 18 1987
CCF RECEIVED

WASTE MANAGEMENT PROJECT OFFICE (WMPO) QUALITY ASSURANCE (QA) STANDARD DEFICIENCY REPORTS (SDRs) RESULTING FROM AUDIT 87-8 OF FENIX & SCISSON, INC. (F&S), TULSA, OKLAHOMA, SUPPORT OF THE NEVADA NUCLEAR WASTE STORAGE INVESTIGATIONS (NNWSI) PROJECT (WMPO ACTION ITEM #87-2303)

In response to your letter, WMPO:JS-2572 dated August 21, 1987, concerning the seven SDRs (Nos. 062 - 066) which were generated as the result of the WMPO QA Audit 87-8, we have completed each SDR, Blocks 14 through 18. The seven SDRs are attached to this letter.

If you have questions or need additional information, please contact me at 295-2220.

R. L. Bullock
R. L. Bullock
Project Manager

Attachment

cc w/attachment:
K. J. Bragan
R. M. [unclear]
J. A. Cross
H. J. Regenda
L. Meylan
A. Sacco
Central Files - 1.2.9

9100*816/8*V:R



Department of Energy

Nevada Operations Office

P. O. Box 98518

Las Vegas, NV 89193-8518

FEB 02 1988

Richard L. Bullock
Technical Project Officer for NNWSI
Fenix & Scission, Inc.
Mail Stop 514
P.O. Box 93265
Las Vegas, NV 89193-3265

WASTE MANAGEMENT PROJECT OFFICE (WMPO) QUALITY ASSURANCE (QA) AUDIT 88-01 OF
FENIX & SCISSION, INC. (F&S) SUPPORT OF THE NEVADA NUCLEAR WASTE STORAGE
INVESTIGATIONS PROJECT

Please be advised that a team from the WMPO will conduct a QA audit of the F&S
QA Program Plan and quality related activities on February 23, 1988. Please
arrange a pre-audit conference for the appropriate personnel at your Tulsa,
Oklahoma, facility beginning at 10 a.m. on February 23, 1988. The post-audit
conference is tentatively scheduled for 10 a.m. on February 26, 1988.


The team's audit will focus on the following areas:

- * QA Program - Elements
 - 3.0 Design Control
 - 5.0 Instructions, Procedures and Drawings
 - 6.0 Document Control
 - 17.0 Records
- * Technical Areas - Exploratory Shaft Facility Design Activities

The team will consist of:

Henry H. Caldwell, Audit Team Leader, SAIC, Las Vegas, NV
Robert W. Clark, Observer, OGR (Weston), Washington, D.C.
Roland F. Cote, Auditor, SAIC, Las Vegas, NV
George D. Dymmel, Technical Specialist, SAIC, Las Vegas, NV
Gerard Heaney, Auditor, SAIC, Las Vegas, NV

If you have any questions, please contact Henry H. Caldwell at 295-8740.


James Blaylock
Project Quality Manager
Waste Management Project Office

WMPO:JB-1063



Department of Energy

Nevada Operations Office
P O Box 98518
Las Vegas, NV 89193-8518

FEB 11 1992

Richard L. Bullock
Technical Project Officer for NNWSI
Fenix & Scisson, Inc.
Mail Stop 514
P.O. Box 93625
Las Vegas, NV 89193-3265

WASTE MANAGEMENT PROJECT OFFICE (WMPO) QUALITY ASSURANCE STANDARD DEFICIENCY REPORTS (SDRs) NOS. 058 and 061 RESULTING FROM AUDIT 87-9 OF FENIX & SCISSON, INC., OF THE NEVADA NUCLEAR WASTE STORAGE INVESTIGATIONS PROJECT

The SDRs, Nos. 058 and 061, which were identified during WMPO Audit Number 87-9, are considered closed, based on the satisfactory verification of completed corrective actions.

The remaining SDR Nos. 059 and 060, generated on Audit Number 87-9, cannot be closed at this time pending completion and verification of proposed corrective actions.

If you have any questions, please contact me at 295-8913.

James Blaylock
Project Quality Manager
Waste Management Project Office

WMPO:JB-1117

Enclosure:
SDR Nos. 058 and 061

cc w/encl:

V. J. Cassella, HQ (RW-222) FORS
J. P. Knight, HQ (RW-24) FORS
J. A. Cross, F&S, Las Vegas, NV
M. J. Regenda, F&S, Mercury, NV
S. H. Klein, SAIC, Las Vegas, NV
W. R. Kazor, SAIC, Las Vegas, NV
R. H. Klemens, SAIC, Las Vegas, NV
J. J. Brogan, SAIC, Las Vegas, NV
B. A. Wozniak, SAIC, Las Vegas, NV
P. T. Prestholt, NRC, Las Vegas, NV
V. F. Witherill, NTSO, NV
A. R. Veloso, NTSO, NV
R. W. Gray, MED, NV
J. R. Rinaldi, QAD, NV
L. P. Skousen, WMPO, NV
M. P. Kunich, WMPO, NV
R. E. Monks, WMPO, NV



WMPO STANDARD DEFICIENCY REPORT

H-CA-C
3/87

Completed by Originating QA Organization	1 Date <u>7/17/87</u>		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page <u>1</u> of <u>2</u>
	3 Discovered During <u>WMPO Audit 87-9</u>	3a Identified By <u>B. Klemens</u>	3b Branch Chief Concurrence Date <u>N/A</u>		4 SDR No. <u>061</u> Rev. <u>0</u>
	5 Organization <u>Fenix & Scisson, Inc.</u>		6 Person(s) Contacted <u>B. Graves, R. Bullock, P. Bolling</u>		7 Response Due Date <u>20 Working Days fr</u> Date of Transmittal
	8 Requirement (Audit Checklist Reference, if Applicable) <u>QAP-17-1, Rev. 0, Para. 4.0, and TESOP-004-02, Rev. 0, Para. 7.0, require NNWSI QA Records to be indexed into the QARMS database.</u>				
Completed by Organization in Block 5	9 Deficiency <u>Contrary to the above, F&S Personnel Qualification (Certification) Records are retained by their Personnel Department and not turned over to Central Files for indexing into the QARMS database.</u>				
	10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Investigative <input type="checkbox"/> Corrective <u>1) Comply with above requirements. As an alternative, F&S could provide Central Files with a certificate stating that the individual has been certified but due to circumstances the backup records are filed in the (cont'd)</u>				
	11 QAE/Lead Auditor Date <u>R.H. Klemens 7/30/87</u>	12 Branch Manager Date <u>W.R. Kason 7/30/87</u>		13 Project Quality Mgr. Date <u>James B. Blaylock 7/30/87</u>	
14 Remedial/Investigative Action(s) <u>1. Fenix & Scisson, Inc., has developed Procedure PP-60-01, Personnel Selection and Indoctrination (ATTACHMENT 1). This procedure describes a method for documenting the verification of education and experience, initial evaluations, and annual proficiency evaluations. These documents will be Quality Assurance Recrdrs. (Continued)</u>					
15 Effective Date <u>November 30, 1987</u>					
16 Cause of the Condition & Corrective Action to Prevent Recurrence <u>Cause of the Condition: See Letter ADM-10054, Dated July 20, 1987 (ATTACHMENT 2)</u> <u>Corrective Action to Prevent Recurrence: Not applicable.</u>					
17 Effective Date <u>November 30, 1987</u>					
18 Signature/Date <u>T.L. Bullock 8/20/87</u>					
Comp. by Orig. QA Org	19 Response <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Amended Response <input type="checkbox"/> Reject		QAE/Lead Auditor/Date <u>R.H. Klemens 11/9/87</u>	Branch Manager/Date <u>W.R. Kason 11/9/87</u>	
	20 Amended Response <input type="checkbox"/> Accept <input type="checkbox"/> Reject		QAE/Lead Auditor/Date	Branch Manager/Date	
	21 Verification <input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory		QAE/Lead Auditor/Date <u>R.H. Klemens 12/18/87</u>	Branch Manager/Date <u>W.R. Kason 12-18-87</u>	
	22 Remarks <u>Verification based on review of PP-60-01 and PP-50-01 which have been developed to meet the requirements of NVO-196-17.</u>				
23 QA CLOSURE		QAE/Lead Auditor/Date <u>R.H. Klemens 12/30/87</u>	Branch Manager/Date <u>W.R. Kason 12/30/87</u>	PQM/Date <u>J. Blaylock 1/13/88</u>	



WPMO STANDARD DEFICIENCY REPORT
CONTINUATION SHEET

N-QA
10/86

SDR No. 058

Rev. 0

Page 2 of

Requirement (cont'd)

or work request."

Recommended Action (cont'd)

any Quality Assurance Level I or II work requested on previously generated work orde

FENIX & SCISSON, INC.
P O BOX 93268
LAS VEGAS, NEVADA 89193-3268
(702) 295-3627

ADDRESS REPLY TO FS-MNWSI-0316

August 20, 1987

SAIC/T&MSS

AUG 24 1987

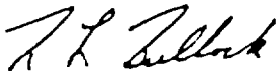
CCF RECEIVED

James Blaylock, Project Quality Manager
Waste Management Project Office
U.S. Department of Energy
Nevada Operations Office
P.O. Box 98518
Las Vegas, Nevada 89193-8518

WASTE MANAGEMENT PROJECT OFFICE (WMPO) QUALITY ASSURANCE (QA) STANDARD DEFICIENCY REPORTS (SDRs) RESULTING FROM AUDIT 87-9 OF FENIX & SCISSON (F&S) SUPPORT OF THE NEVADA NUCLEAR WASTE STORAGE INVESTIGATIONS (NNWSI) PROJECT (WMPO ACTION ITEM #87-2231)

In your response to the subject WMPO Action Item, reference your letter WMPO:JB-2521 dated August 11, 1987, enclosed are the four SDRs generated as a result of the WMPO QA Audit 87-9 of the F&S NNWSI Project QA Program Plan and implementing procedures.

Blocks 14 through 18 in each of the SDRs have been completed per your instructions.



R. L. Bullock
Project Manager

cc: w/enc. Nita J. Brogan, SAIC
R. H. Klemens, SAIC
A. Sacco, DOE
Central Files - 1.2.9

11/11/87 10:00 AM

1 11	1 Date <u>7/17/87</u>		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page <u>1</u> of <u>2</u>
	3 Discovered During <u>WMPO Audit 87-9</u>	3a Identified By <u>B. Klemens</u>	3b Branch Chief Concurrence Date <u>N/A</u>		4 SOR No. <u>061</u> Rev. <u>0</u>
	5 Organization <u>Fenix & Scisson, Inc.</u>		6 Person(s) Contacted <u>B. Graves, R. Bullock, P. Bolling</u>		7 Response Due Date <u>20 Working Days fr</u> Date of Transmittal
	8 Requirement (Audit Checklist Reference, if Applicable) <u>QAP-17-1, Rev. 0, Para. 4.0, and TESOP-004-02, Rev. 0, Para. 7.0, require NNWSI QA Records to be indexed into the QARMS database.</u>				
2 12	9 Deficiency <u>Contrary to the above, FSS Personnel Qualification (Certification) Records are retained by their Personnel Department and not turned over to Central Files for indexing into the QARMS database.</u>				
	10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Investigative <input type="checkbox"/> Corrective <u>1) Comply with above requirements. As an alternative, F&S could provide Central Files with a certificate stating that the individual has been certified but due to circumstances the backup records are filed in the (cont'd)</u>				
	11 QAEL Lead Auditor Date <u>R.H. Klemens 7/30/87</u>	12 Branch Manager Date <u>W.R. Kozin 7/30/87</u>		13 Project Quality Mgr. Date <u>James Blaylock 7/30/87</u>	
3 13	14 Remedial/Investigative Action(s) <u>1. Fenix & Scisson, Inc., has developed Procedure PP-60-01, Personnel Selection and Indoctrination (ATTACHMENT 1). This procedure describes a method for documenting the verification of education and experience, initial evaluations, and annual proficiency evaluations. These documents will be Quality Assurance Records. (Continued)</u>				
	15 Effective Date <u>November 30, 1987</u>				
	16 Cause of the Condition & Corrective Action to Prevent Recurrence <u>Cause of the Condition: See Letter ADM-10054, Dated July 20, 1987 (ATTACHMENT 2)</u> <u>Corrective Action to Prevent Recurrence: Not applicable.</u>				
4 14	17 Effective Date <u>November 30, 1987</u>				
	18 Signature/Date <u>T. L. Bullock 8/20/87</u>				
	19 Response <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Amended Response <input type="checkbox"/> Reject	QAEL Lead Auditor/Date <u>R.H. Klemens 11/9/87</u>		Branch Manager/Date <u>W.R. Kozin 11/9/87</u>	
	20 Amended Response <input type="checkbox"/> Accept <input type="checkbox"/> Reject	QAEL Lead Auditor/Date		Branch Manager/Date	
21 Verifi- cation <input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory	QAEL Lead Auditor/Date <u>R.H. Klemens 12/18/87</u>		Branch Manager/Date <u>W.R. Kozin 12-18-87</u>		
22 Remarks <u>Verification based on review of PP-60-01 and PP-50-01 which have been developed to meet the requirements of NVO-196-17.</u>					
23 QA CLOSURE	QAEL Lead Auditor/Date <u>R.H. Klemens 12/30/87</u>	Branch Manager/Date <u>W.R. Kozin 12/30/87</u>	PQM/Date <u>J. Blaylock 1/13/88</u>		



WMPO STANDARD DEFICIENCY REPORT
CONTINUATION SHEET

N-QA-
10/86

SDR No. 061

Rev.

Page 2 of

Recommended Action (cont'd)


personnel office.

2. Revise QAP-17-1 and TESOP-004-03 accordingly to reflect action taken.

14. Remedial/Investigative Actions (cont'd)

Procedures QAP-17.1 and TESOP-004-03 will be superseded by procedure PP-50-01, NNWSI Records Management. This latter procedure and PP-60-01 will provide for the submittal of Personnel Qualifications and Proficiency Evaluations into the Records Management System, as required by NVO-196-17, Rev. 5, Section II, paragraphs 5.1.6.1 and 5.1.6.4.

The above actions are being taken because of F&S Management's concerns regarding the Privacy Act of 1974. See Letter ADM-10054, Dated July 20, 1987 (ATTACHMENT 2).

 FENIX & SCISSON, INC. LAS VEGAS BRANCH	NEVADA NUCLEAR WASTE STORAGE INVESTIGATIONS (NNWSI) PROJECT PROCEDURE		
	SUBJECT PERSONNEL SELECTION AND INDOCTRINATION	PREPARED BY: D. J. Tunney	EFFECTIVE DATE: 08-20-87
	SUPERSEDES:		REVISION: 0

1.0 PURPOSE

The purpose of this procedure is to describe the selection and indoctrination of personnel performing or verifying activities that affect quality.

2.0 APPLICABILITY

This procedure applies to all management and/or decision making personnel who perform quality-related activities.

3.0 REFERENCES

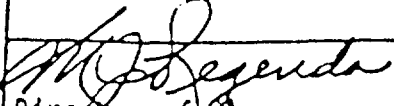
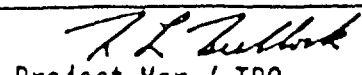

- 3.1 F&S NNWSI Quality Assurance Manual (QAM).
- 3.2 PP-10-02, Training on NNWSI Procedures.
- 3.3 PP-50-01, NNWSI Records Management.

4.0 DEFINITIONS

None.

5.0 RESPONSIBILITIES

- 5.1 Each Manager or Supervisor, starting at the level of the Vice President and General Manager, is responsible for evaluating the education, experience and training of direct subordinates against the requirements specified in their position descriptions, and for performing annual proficiency evaluations.
- 5.2 The Director of Quality Assurance, is responsible for indoctrinating F&S NNWSI project personnel to the requirements of the NNWSI Quality Assurance Program Plan (QAPP) and Regulations related to the NNWSI Project.
- 5.3 The Director of Personnel, Las Vegas, is responsible for verifying the relevant education and experience of F&S employees stationed at the Nevada Test Site (NTS) and the Las Vegas Office.

 Director of QA	 Project Mgr./ TPO	 V.P. & General Manager
APPROVED <i>8/11/87</i>	APPROVED <i>8/14/87</i>	APPROVED <i>8-20-87</i>

5.4 The Administrative Clerk/Personnel, Tulsa Office, is responsible for verifying the education and experience of F&S employees stationed at the Tulsa Office.

6.0 PROCEDURE

6.1 POSITION DESCRIPTIONS

Each Manager and Supervisor shall establish, document and maintain on file, position descriptions for their direct subordinates.

6.2 PERSONNEL QUALIFICATION EVALUATION

The Director of Personnel, Las Vegas or a designee shall verify the education and experience of employees stationed in Las Vegas and at the NIS. The Administrative Clerk/Personnel, Tulsa, shall verify the education and experience of employees stationed in Tulsa. They will then use Attachment 1 to certify that this verification has been completed. This shall be sent to the cognizant manager or supervisor.

Each Manager and Supervisor shall compare the education, experience, and training against those specified in the position description and NNWSI Procedures. Only employees who meet the standard will be utilized to perform activities that affect quality. The Managers and Supervisors will certify that requirements have been met in the format specified in Attachment 1. A copy of this shall be sent to Central Files.

6.3 INDOCTRINATION

The QA Director, Engineers or Specialists shall give a presentation of the purpose, scope, methods of implementation and applicability of the F&S Quality Assurance Program Plan and Regulations related to the NNWSI Project. QA shall document the objective and content of the presentation, date of the presentation, name of the instructor, and attendees. A copy of this shall be sent to Central Files. Training on procedures is given in accordance with PP-10-02, Training on NNWSI Procedures.

6.4 PROFICIENCY EVALUATION

The Manager or Supervisor shall perform a proficiency evaluation on an annual basis and shall certify that the employee has the required education, experience and training. (See Attachment 1). A copy of this certification shall be sent to Central Files.

6.5 QUALITY ASSURANCE RECORDS

The following documents generated during the implementation of this procedure are QA Records:

- a. Personnel Qualification Evaluations (Attachment 1)
- b. Indoctrination Records (See Para. 6.3)
- c. Proficiency Evaluations (Attachment 1)

These are handled in accordance with Procedure PP-50-01, NNWSI Records Management.



FENIX & SCISSON, INC.
LAS VEGAS BRANCH

PERSONNEL QUALIFICATION EVALUATION

This is to certify that the relevant education and experience of _____
_____ a/the _____
_____ employed by Fenix & Scisson, Inc., has been verified by the

Title

Signature Date

Based on my personal review of the individual's education, experience, and training compared to the employee's position description and NNWSI procedures, I certify this employee for the assigned task.

1. _____
Manager or Supervisor Date _____

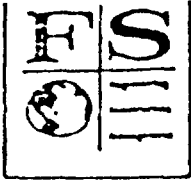
ANNUAL PROFICIENCY EVALUATION

2. _____
Manager or Supervisor Date _____

3. _____
Manager or Supervisor Date _____

4. _____
Manager or Supervisor Date _____

5. _____
Manager or Supervisor Date _____



FENIX & SCISSON, INC.

ATTACHMENT 2
Page 1 of 4

RECEIVED

JUL 21 1987

F&S Q.A.

ADM-10054

TO: R. L. Bullock
FROM: B. J. Graves *B. J. Graves*
SUBJECT: WMPD STANDARD DEFICIENCY REPORT DATED 7/17/87, SDR NO. 87-9-D
DATE: July 20, 1987

The above deficiency report cites F&S because Personnel Qualification (Certification) records are retained in the Personnel Department rather than being turned over to Central Files for indexing into the Qarms Database.

The need for verification of employees education and work history in support of the Quality Assurance program is recognized. However, it is the amount of detailed information being released which is considered a violation of the Privacy Act of 1974 (5 U.S.C. 552a and P.L. 93-579).

A. Current Methods

Certification currently demanded list details of education and work experience on each employee as follows:

1. Education

- degree or certificate
- major
- date graduated
- school or university
- details of post graduate studies, when applicable

2. Work Experience

- dates of employment
- name of employer
- description of work

The form containing the above data is signed by the employee's manager or supervisor certifying the employee for the assigned task. The signed certification is then targeted for Central Files for placement into their associated IMS system.

ADM-10054
WMPD Standard Deficiency Report
Page 2

B. Basis of Objection

We believe the release of such detailed data to Central Files to be willful and intentional release of protected data; that once in Central Files, the data is subject to unauthorized scrutiny by others. This belief is based on the terms of our prime contract, our interpretation of the Privacy Act and supporting court decisions as follows:

1. Article A-36 of our contract requires F&S to comply with the rules and regulations of the Privacy Act of 1974. The article also designates F&S as an "agency" meaning an extension of DOE's responsibilities.
2. Article A-3.b.(2) of our contract requires F&S to use our "...best efforts to treat such information in accordance with any written restrictions imposed on such information..."
3. Paragraph 552a.(a)(4) of the Act defines a record as "...any item, collection, or grouping of information about an individual that is maintained by an agency, including but not limited to, his education, financial transactions, medical history, and criminal or employment history and that contains his name or the identifying number..." etc. (underlining added for emphasis).
4. Paragraph 552a.(b) of the Act also specifies: ".... No agency shall disclose any record which is contained in a system of records by any means of communication to any person, or to another agency, except pursuant to a written request by, or with the written consent of, the individual to whom the record pertains...."
5. A supporting court decision can be found in Howard vs Marsh (Civil Action 82-587, U.S. District Court, Eastern District of Missouri). Two investigators were ordered to review an employee's personnel file to obtain certain information. This was done without the employee's prior knowledge and consent and the courts ruled this as a willful and intentional violation of privacy and awarded damages. The decision was upheld on appeal.
6. Violations of the Act may be subject to civil penalties; officers and/or employees of an agency may be subject to criminal penalties.

ADM-10054
WMPO Standard Deficiency Report
Page 3

A routine function of the F&S employee selection process is the verification of both education and work history. This information is subject to further verification in order to obtain security clearances which is mandatory for continued employment. Therefore, barring a legal opinion to the contrary, we conclude the release of such specific details to Central Files to be: (a) incompatible with the purpose for which the data was originally collected, (b) questionable performance in adhering to our contract provisions, and (c) the potential of an unusually large number of lawsuits.

C. Alternative Suggestion

DOE Order NV 5700.6A-4, Paragraph 17 (Attachment 1-5 thereto) requires F&S to maintain sufficient records to furnish evidence of the quality of facilities, services, items and activities. It specifies "...closely related data, such as qualifications of personnel.....shall be maintained...."

We suggest a certification be placed in Central Files which will be signed jointly by the Personnel Director and the employee's supervisor or manager. Details of the routine verification process used by Personnel and results obtained should be reviewed by both parties prior to signing the document. Data which are considered protected by the act should remain private and part of the employees personnel file. When signing the certification form:

- (a) the Personnel Director certifies the employees education and work history to be correct and acceptable,
- (b) The Supervisor or Manager certifies that the employee is capable of performing the assigned duties.

This suggested certification format will not only provide documentation for the IMS system but will also limit access to those authorized to review the data.

/km

cc: Robert M. Nelson/DOE
Don L. Lockwood/F&S/Tulsa
Jack A. Cross/F&S

WMPO STANDARD DEFICIENCY REPORT

H-21-338
3/87

Completed by Originating QA Organization	1 Date 7/17/87		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page 1 of
	3 Discovered During WMPO AUDIT 87-9	3a Identified By R. KLEMENS	3b Branch Chief Concurrence Date N/A		4 SDR No. 87-9-0 Rev.
	5 Organization FENIX & SCISSON, INC.		6 Person(s) Contacted BILL GRAVES, R. BULLOCK, P. BOLLING		7 Response Due Date is 20 Working Days from Date of Transmittal
	8 Requirement (Audit Checklist Reference, If Applicable) QAP-17-1, Rev.0 Para.4.0 and TESOP-004-03, Rev.0, Para. 7.0 Require NMWSI QA Records to be indexed into the Qarms Database.				
	9 Deficiency F&S Personnel Qualification (Certification) Records are retained by their Personnel Dept., and not turned over to Central Files for indexing into the Qarms Database.				
Completed by Organization in Block B	10 Recommended Action(s) <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Investigative <input type="checkbox"/> Corrective				
	11 QAE/Lead Auditor Date		12 Branch Manager Date		13 Project Quality Mgr. Date
	14 Remedial/Investigative Action(s) 15 Effective Date _____				
Completed by Org. QA Org.	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

FENIX & SCISSION, INC.
P. O. BOX 83268
LAS VEGAS, NEVADA 89193-3268
(702) 295-3627

SAIC/T&MSS

ADDRESS REPLY TO FS-NNWSI-0316

AUG 24 1987

August 20, 1987

CCF RECEIVED

James Blaylock, Project Quality Manager
Waste Management Project Office
U.S. Department of Energy
Nevada Operations Office
P.O. Box 98518
Las Vegas, Nevada 89193-8518

WASTE MANAGEMENT PROJECT OFFICE (WMPO) QUALITY ASSURANCE (QA) STANDARD
DEFICIENCY REPORTS (SDRs) RESULTING FROM AUDIT 87-9 OF FENIX & SCISSION (F&S)
SUPPORT OF THE NEVADA NUCLEAR WASTE STORAGE INVESTIGATIONS (NNWSI) PROJECT
(WMPO ACTION ITEM #87-2231)

In your response to the subject WMPO Action Item, reference your letter
WMPO:JB-2521 dated August 11, 1987, enclosed are the four SDRs generated as a
result of the WMPO QA Audit 87-9 of the F&S NNWSI Project QA Program Plan and
implementing procedures.

Blocks 14 through 18 in each of the SDRs have been completed per your
instructions.



R. L. Bullock
Project Manager

cc: w/enc. Nita J. Brogan, SAIC
R. H. Klemens, SAIC
A. Sacco, DOE
Central Files - 1.2.9



Department of Energy

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

FEB 11 1988

Joseph C. Calovini
Technical Project Officer for NNWSI
Holmes & Narver, Inc.
Suite 860
101 Convention Center Drive
Las Vegas, NV 89109

WASTE MANAGEMENT PROJECT OFFICE (WMPO) QUALITY ASSURANCE STANDARD DEFICIENCY REPORT (SDR) NOS. 083 AND 085 RESULTING FROM AUDIT 87-2 OF HOLMES & NARVER, INC., IN SUPPORT OF THE NEVADA NUCLEAR WASTE STORAGE INVESTIGATIONS PROJECT

SDR Nos. 083 and 085, which were identified during WMPO Audit No. 87-2, are considered closed following satisfactory verification of the committed corrective actions. Copies of the SDRs are enclosed for your files.

If you have any questions, please call me at 295-8913.

James Blaylock
Project Quality Manager
Waste Management Project Office

WMPO:JB-1154

Enclosure:
SDR Nos. 083 and 085

cc w/encl:

V. J. Cassella, HQ (RW-222) FORS
J. P. Knight, HQ (RW-24) FORS
A. E. Gurrola, H&N, Mercury, NV
Richard Ivy, H&N, Mercury, NV
C. O. Wright, H&N, Mercury, NV
S. H. Klein, SAIC, Las Vegas, NV
W. R. Kazor, SAIC, Las Vegas, NV
R. H. Klemens, SAIC, Las Vegas, NV
J. J. Brogan, SAIC, Las Vegas, NV
B. A. Wozniak, SAIC, Las Vegas, NV
P. T. Prestholt, NRC, Las Vegas, NV
R. W. Gray, MED, NV
V. F. Witherill, NTSO, NV
A. R. Veloso, NTSO, NV
J. R. Rinaldi, QAD, NV
M. P. Kunich, WMPO, NV
R. E. Monks, WMPO, NV

WMPU STANDARD DEFICIENCY REPORT

N-OA-038
3/87

Completed by Originating QA Organization	1 Date <u>9/11/87</u>		2 Severity Level <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3		Page <u>1</u> of <u>2</u>
	3 Discovered During <u>WMPU Audit 87-2</u>	3a Identified By <u>F. J. Ruth</u>	3b Branch Chief Concurrence Date <u>N/A</u>	4 SDR No. <u>083</u> Rev. <u>0</u>	
	5 Organization <u>Holmes & Narver</u>	6 Person(s) Contacted <u>Ron Sabol</u>		7 Response Due Date is <u>20 Working Days from Date of Transmittal</u>	
	8 Requirement (Audit Checklist Reference, if Applicable) <u>H&H/ESD, Quality Assurance Program, Subject: Corrective Action, Section 16, Paragraph IV. D.2 CAR Response states "responses to the CAR should be received within 30 days of issue or on the response due date whichever is shorter. Paragraph IV D.2b states, (cont'd)</u>				
Completed by Organization in Block 5	9 Deficiency As a result of the H&H audit Number 87-02, CAR Numbers 87-A-005 through 87-A-010 were issued. The response to CAR-010 was due on 4/15/87 but was not received until 5/1/87. There is no objective evidence either in writing or documented on a Record of Oral Information that there was a request for extending (cont'd)				
	10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Investigative <input type="checkbox"/> Corrective <u>Remedial - Reinstruct personnel to procedural requirements and provide objective evidence of reinstruction. Place appropriate documentation in the file referencing this SDR and action taken for future reference.</u>				
	11 QAE/Lead Auditor Date <u>Robert H. Klemens 9/16/87</u>	12 Branch Manager Date <u>[Signature] 9/16/87</u>	13 Project Quality Mgr. Date <u>James Blaylock 9/16/87</u>		
Completed by Org.	14 Remedial/Investigative Action(s) <u>The late response to CAR-87-A-010 was an oversight on the part of the audited organization. The response to the CAR's issued as a result of H&H Audit 87-02 were to the Chief Quality Assurance via MMSI POI 87-047 dated 4/23/87. On 4/23/87 when the CAR responses were being evaluated by the lead auditor it was noted that the response to CAR 87-A-010 was not included in the submittal package. The Deputy TPO, Mr. K. Dye was immediately informed of the discrepancy. (cont'd)</u>				
	15 Effective Date <u>10/14/87</u>				
	16 Cause of the Condition & Corrective Action to Prevent Recurrence 17 Effective Date _____				
Comp. by Orig. QA Org.	18 Signature/Date " <u>C. J. Wright</u> " <u>10/16/87</u>				
	19 Response <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Amended Response <input type="checkbox"/> Reject	QAE/Lead Auditor/Date <u>R.H. Klemens 11/3/87</u>		Branch Manager/Date <u>[Signature] 11/3/87</u>	
	20 Amended Response <input type="checkbox"/> Accept <input type="checkbox"/> Reject	QAE/Lead Auditor/Date		Branch Manager/Date	
	21 Verification <input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory	QAE/Lead Auditor/Date <u>R.H. Klemens 12/13/87</u>		Branch Manager/Date <u>[Signature] 12-18-87</u>	
	22 Remarks <u>Verified by review of remedial action and applicable documents.</u>				
23 QA CLOSURE	QAE/Lead Auditor/Date <u>R.H. Klemens 12/30/87</u>	Branch Manager/Date <u>[Signature] 12-30-87</u>	PCM/Date <u>[Signature] 1/13/88</u>		

ENCLOSURE



WIND-O STANDARD DEFICIENCY REPORT
CONTINUATION SHEET

N-QA-03:
10/86

SDR No. 083

Rev. 0

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Section 8 Requirement (cont'd)

"if the response is not received within five working days after the due date, a memo shall be sent to the next level of management, noting the lack of a timely response."
(Checklist item no. 1b-45)

Section 9 Deficiency (cont'd)

the response due date. The response was received more than five working days after the due date and a memo was not sent to the next level of management noting the lack of a timely response.

Section 14 Remedial/Investigative Action(s) (cont'd)

Mr. Dye committed to take appropriate steps to provide a written response. The completed CAR response was hand carried to Quality Assurance on 5/1/87.

The failure to respond to CAR-87-A-010 was duly noted in the CAR file (see attached annotated ROI:87-047).

The action taken to obtain timely responses to corrective action reports, as prescribed by our QA program and implementing procedures, was deemed appropriate. Issuing a memo or escalating the CAR to the next higher level of management, in this specific instance, would have served no meaningful purpose.

The actions taken with regards to the late response to CAR-87-A-010 are deemed to be in compliance with our program, and retraining or reinstruction of personnel is not deemed necessary.

WMPO STANDARD DEFICIENCY REPORT

3/87

Completed by Originating QA Organization	1 Date <u>9/10/87</u>		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page <u>1</u> of <u>2</u>
	3 Discovered During <u>Audit 87-2</u>	3a Identified By <u>J. Jardine</u>	3b Branch Chief Concurrence Date <u>N/A</u>		4 SDR No. <u>085</u> Rev. <u>0</u>
	5 Organization <u>Holmes & Narver, Inc.</u>		6 Person(s) Contacted <u>Mark Happ & Joe Calovini</u>		7 Response Due Date <u>20 Working Days fr</u> <u>Date of Transmittal</u>
Completed by Organization in Block 5	8 Requirement (Audit Checklist Reference, if Applicable) <u>Section III, Para. A.1 (Pink) of the H&N QA Manual, Rev. 1 states:</u> <u>"Applicable design inputs, such as..., shall be identified and documented via an</u> <u>Engineering Data Sheet prepared and approved by the responsible NNWSI Project Engr.</u>				
	9 Deficiency <u>At the time that H&N Special Study 6A, "Life Safety Alarm System", was</u> <u>being developed, no measures to implement the requirement cited were available in</u> <u>H&N procedures. Work on Study 6A, which was assigned a QA Level of II, was</u> (cont)				
	10 Recommended Action(s) <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Investigative <input checked="" type="checkbox"/> Corrective <u>Remedial - identify/review/approve inputs to Study 6A per 007 R/O & ICN 001 R/O.</u> <u>Corrective - identify/report cause & take appropriate action to correct.</u>				
Completed by Organization in Block 5	11 GAE/Lead Auditor Date <u>RH Klemens 9/16/87</u>	12 Branch Manager <u>W R Kagan 9/16/87</u>		13 Project Quality Mgr. Date <u>John Blyskal 9/16/87</u>	
	14 Remedial/Investigative Action(s) <u>The Special Study 6A was not considered to be a</u> 15 Effective Date <u>N/A</u> <u>design effort by H&N, but was a request from DOE/WMPO for information to allow</u> <u>them to make decisions on the criteria gathering. The recommendations and</u> <u>conclusions were not necessarily to be used as design input.</u>				
	16 Cause of the Condition & Corrective Action to Prevent Recurrence <u>Not applicable, see Block 14.</u> 17 Effective Date <u>N/A</u>				
Comp. by Orig. QA Org	18 Signature/Date ^{18.1} <u>[Signature]</u> <u>Joseph C. Calovini</u> <u>10/16/87</u>				
	19 Response <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Amended <input type="checkbox"/> Reject <input type="checkbox"/> Response	GAE/Lead Auditor/Date <u>RH Klemens 11/3/87</u>		Branch Manager/Date <u>W R Kagan 11/3/87</u>	
	20 Amended Response <input type="checkbox"/> Accept <input type="checkbox"/> Reject	GAE/Lead Auditor/Date		Branch Manager/Date	
Comp. by Orig. QA Org	21 Verifi- cation <input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory	GAE/Lead Auditor/Date <u>RH Klemens 12/18/87</u>		Branch Manager/Date	
	22 Remarks <u>Verification based on review of Remedial Action and concurrence with H&N rationale.</u>				
23 QA CLOSURE	GAE/Lead Auditor/Date <u>RH Klemens 12/30/87</u>	Branch Manager/Date <u>W R Kagan 12/30/87</u>	PQM/Date <u>J Blyskal 1/13/88</u>		

ENCLOSURE

01/23/87

WMP O STANDARD DEFICIENCY REPORT
CONTINUATION SHEET

N-QA-038
10/86

SCP No. 055

Rev. 0

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Section 8 Requirement (cont'd)

(Checklist Item No. 1b-27)

Section 9 Deficiency (cont'd)

initiated on 5/21/87 (refer to Work Initiation Form 87-008 Rev. 0) in accordance with H3N NNWSI Project Procedure 007, Rev. 0. ICN 001, Rev. 0 to Procedure 007, Rev. 0, which contains measures to implement the requirement cited, was approved on Jun 30, 1987, approximately five weeks subsequent to the beginning of work on Study 6A. The measures provided by ICN 001, Rev. 0 to implement the requirement cited were not applied to Study 6A.



Department of Energy

Nevada Operations Office

P. O. Box 98518

Las Vegas, NV 89193-8518

FEB 11 1988

Lawrence D. Ramspott
Technical Project Officer for NNWSI
Lawrence Livermore National Laboratory
Mail Stop L-204
P.O. Box 808
Livermore, CA 94550

WASTE MANAGEMENT PROJECT OFFICE (WMPO) QUALITY LEVEL STANDARD DEFICIENCY REPORTS (SDRS) RESULTING FROM AUDIT 87-3 OF LAWRENCE LIVERMORE NATIONAL LABORATORY (LLNL) SUPPORT OF THE NEVADA NUCLEAR WASTE STORAGE INVESTIGATIONS PROJECT

Reference: Letter, Clark to Thompson, dtd. 10/29/87

The WMPO has evaluated the responses to SDR Nos. 020 and 024, Revision 1, that were submitted by the above referenced letter and has determined that the responses are acceptable. The SDRs will be closed when the corrective action has been completed by LLNL and verified by the WMPO.

If you have any questions, please call me at FTS 575-8913.

James Blaylock

James Blaylock

Project Quality Manager

Waste Management Project Office

WMPO:JB-1155

cc:

V. J. Cassella, HQ (RW-222) FORS
J. P. Knight, HQ (RW-24) FORS
J. J. Dronkers, LLNL, Livermore, CA
L. B. Ballou, LLNL, Livermore, CA
S. H. Klein, SAIC, Las Vegas, NV
W. R. Kazor, SAIC, Las Vegas, NV
C. M. Thompson, SAIC, Las Vegas, NV
J. J. Brogan, SAIC, Las Vegas, NV
B. A. Wozniak, SAIC, Las Vegas, NV
P. T. Prestholt, NRC, Las Vegas, NV
F. L. Ramirez, SAN
R. W. Gray, MED, NV
J. R. Rinaldi, QAD, NV
L. P. Skousen, WMPO, NV
M. P. Kunich, WMPO, NV
R. E. Monks, WMPO, NV





Department of Energy

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

FEB 11 1988

Donald T. Oakley
Technical Project Officer for NNWSI
Los Alamos National Laboratory
Mail Stop F-619
P.O. Box 1663
Los Alamos, NM 87545

WASTE MANAGEMENT PROJECT OFFICE (WMPO) CLOSURE OF NONCONFORMANCE REPORT (NCR)
WMPO-10

NCR WMPO-10 was generated as a result of Los Alamos National Laboratory (Los Alamos) performing Nevada Nuclear Waste Storage Investigations (NNWSI) Project work activities without having WMPO approved Quality Assurance Level Assignment Sheets (QALAS). Los Alamos has since prepared Scientific Investigation Plans (SIPs) and QALAS for each currently active Los Alamos NNWSI Project work activity. WMPO has approved these documents.

Please note the verification of this NCR was delayed by the generation of WMPO Standard Deficiency Report (SDR) No. 089 which identified that Los Alamos SIPs had not been revised to accurately reflect the descriptions of planned work activities in the Work Breakdown Structure Dictionary. Response to the SDR indicated that although the SIPs were not revised to reflect administrative changes in task activities, there was no change in the technical content of the SIPs and associated QALAS describing the work activities. NCR WMPO-10 is now considered closed based on satisfactory verification that all currently active Los Alamos NNWSI Project work activities have associated WMPO approved SIPs and QALAS as appropriate. No further action is required by Los Alamos. A copy of the closed NCR is enclosed for your information.

If you have any questions, please contact me at FTS 575-8913.

A handwritten signature in cursive script that reads "James Blaylock".

James Blaylock
Project Quality Manager
Waste Management Project Office

WMPO:JB-1153

Enclosure:
NCR No. WMPO-10

04033

NONCONFORMANCE REPORT

H-QA-0
TVBS

ENCLOSURE 11 - SR# WMPO/NV-SR-86-025

PART I - INTATION Originator/Organization Nancy Vulture/Jim Groner - SAIC/QAS
 Assigned Quality Assurance Level _____ NCR No. WMPO-10 NCR Date 3/20/86
 Nonconforming Item or Activity and Responsible Organization WBS Activities/QA Level
 Assignments - Los Alamos National Laboratories
 Specification/Drawing/Procedure Requirements See attached
 Deficiency All (100%) of the WBS activities being conducted by Los Alamos do not have WMPO approved QA Levels as required by NVO-196-17, Rev. 3 Policy (cont'd)

PART II - PERSON/ORGANIZATION ASSIGNED DISPOSITION RESPONSIBILITY
 P. R. Guthals, Quality Assurance Implementation Manager
 Los Alamos National Laboratory

PART III - DISPOSITION Repair Rework Use-as-is No disposition
 Describe Technical Justification and Assignment of Responsibility QALAs submitted earlier are for various reasons being reworked in accordance with the latest WMPO criteria which were developed after the time this NCR has been issued.
PIs are revising their QALA(s) in accordance with criteria established by the interim changes to NNWSI SOP-02-02.
 RESPONSIBLE CAUSE (s)
~~Final Versions of QALAs were in the process of being formulated and submitted to WMPO as the time of the February Surveillance~~ (See page 4 and 5)

Annals of Disposition
 Dispositioner/Date Paul Guthals 8/15/86 Dispositioner/Date _____
 Project QA/Date Paul Guthals 10/29/86 WMPO/TSO/Date James Blanford 7-1-86
 Disposition Action Complete Date 10/29/86

PART IV - VERIFICATION (Approved Disposition Verified and Examined)
 Accept Reject New NCR No. _____ Project QA/Date James Blanford 8/1
 Comments Disposition action in Los Alamos P-122, TWS-WM-10-86-87 consists of and acceptable. All currently active Los Alamos Technical activities have WMPO approved S.P.s and QALAs as appropriate. B. Herney 1-14-88

Specification/Drawing Procedure Requirements (continued)

1) NVO-196-17, Rev. 3 - Policy, Page VI states in part:

"... In order to establish the quality assurance level of the various Project activities, each NNWSI Project Participating Organization shall generate a Quality Assurance Procedure which will define the method of controlling and documenting the level of quality to be applied to the NNWSI Project tasks, or parts thereof, for which they are responsible. The procedure shall include methods for change control of assigned quality levels, and requirements for documentation of the following as a minimum:

- o Persons or organizational unit responsible for determining the quality assurance level.
- o Criteria for determining level of quality assurance to be applied.
- o Technical justification for the quality assurance level selected.
- o Person(s) or organizational unit providing an independent review and approval of the assigned quality assurance level.
- o The quality assurance level selected for application to the respective activities, and which of the criteria (18 point criteria) will be applicable.

The document designating the above shall be sent to WMPO for approval prior to the start of the activity. During the WMPO review and approval of the document indicating the applicable quality level, WMPO may direct that the Participating Organization change the quality assurance level of the activity."

2) SOP-02-02, Rev. 0 - Pages 9 and 10 of 13 - states in part:

5.3.4 "After completing the QALAS, the PI shall sign, date, and forward it to the PQA for review. The PQA shall review the QALAS to determine that the QA criteria selected for the item or activity are acceptable. If the criteria are acceptable, the PQA shall sign and date the QALAS and forward it to the TPO."

5.3.5 "The TPO shall review the logic process used by the PI in determining the quality levels, using the steps outlined in this procedure. If the logic process is acceptable, the TPO shall sign and date the QALAS and return it to the PI. The PI shall be responsible for obtaining the approval of the WMPO Branch Chief and Project Quality Manager responsible for the particular item or activity."

Deficiency (continued)

Page VI. Contrary to requirement (2), Los Alamos submitted 'Draft' QALASs to WMPO on November 19, 1985. The 'Draft' QALASs did not contain the PI, QAL (Los Alamos), and TPO signatures to indicate internal Los Alamos review and approval. In addition, the requirements in SOP-02-02 do not provide for submittal of 'Draft' QALASs for WMPO approval.

The following WBS Activities have continued without WMP approval of assigned QA Levels:

<u>WBS Number</u>	<u>Description</u>	<u>Project Personnel Contacted</u>
X.2.3.4.1.3.A	Hydrothermal Chemistry	C. Duffy/E. Meiers
X.2.3.4.1.2.A	Natural Isotope Chemistry	D. Finnigan/B. Crowe
X.2.3.2.3.1.A	Tectonics and Volcanism	B. Crowe
X.2.3.4.1.1.A	Groundwater Chemistry	B. Crowe
X.2.4.2.3.2.A	Seal Materials evaluation	C. Duffy
X.2.6.9.3.A	Integrated Data Systems	D. Coy
X.2.5.2.1.A	Regulatory Interactions	J. Canera
X.2.5.2.2.A	Site Characterization Plan	J. Canera
X.2.5.3.1.A	Environmental Assessment	J. Canera
X.2.3.1.A	Management and Integration	N/A
X.2.3.4.1.4.A	Solubility Determination	K. Thomas/J. Kerrisk
X.2.3.4.1.5.A	Sorption and Precipitation	K. Thomas
X.2.3.4.1.6.A	Dynamic Transport Process	K. Thomas
X.2.3.4.1.7.A	Retardation sensitivity Anay	G. Cedarberg
X.2.3.4.2.A	Mineralogy and Petrology	B. Barraclough/D. Vaniman
X.2.3.5.1.A	Core Library	B. Carlos/D. Vaniman
X.2.3.5.2.A	Drilling, Construction, Engineering	T. Merson
X.2.4.2.1.3.A	Laboratory properties	D. Vanaman
X.2.5.1.A	Management and Integration	D. To
X.2.6.1.1.A	Exploratory Shaft Management, Planing and Design Review	T. Merson/D. York /P. Aamodt
X.2.6.1.2.A	Safety and Quality Assurance	P. Guthals
X.2.6.9.1.A	Exploratory Shaft Test Plan	P. Aamodt/T. Norris
X.2.6.9.2.4.A	Geochemical Testing	P. Aamodt
X.2.9.1.1.A	Management	N/A
X.2.9.1.2.A	Interface Activities	N/A
X.2.9.1.3.A	Geologic Repository Program Support	N/A N/A
X.2.9.2.A	Project Control	N/A
X.2.9.3.A	Quality Assurance	T. Straquadine/A. Guthrie

NA = Not available for discussion

LOS ALAMOS NATIONAL LABORATORY

Response To

Attachment of NCR WMPO - 10
(continuation of Part III Disposition)

DESCRIBE TECHNICAL JUSTIFICATION AND ASSIGNMENT OF RESPONSIBILITY

This process has been a slow, tedious one, and in some cases, repetitious. (See attached Oakley/Vieth letter for the history involved.)

Since November 1985, the QALAs for the ESF have been formally submitted three times. Each time the QALAs returned for revision or additional information. To date, the ESF QALAs have not been approved.

The ESF QALAs were to have been models for the other QALAs. Drafts of scientific QALAs were also submitted in November 1985 for review and comment; we hoped to gain an understanding of what is specifically required to achieve a satisfactory QALA.

LANL has been working on the efforts described in the Work Breakdown Structure for some time prior to the issuance of the requirement for the QALAs. To comply with the strict interpretation of the "prior to the start of work" clause for these WBSs is extremely difficult when long delays in QALAs approvals are encountered.

COMPLETED QALAs AND DATES FOR COMPLETION

<u>WBS Number</u>	<u>Description</u>	<u>Status</u>	<u>LANL Completion</u>
X.2.3.4.1.3.A	Hydrothermal Chemistry	LANL Review	August 1
X.2.3.4.1.2.A	Natural Isotope Chemistry	LANL Review	August 1
X.2.3.2.3.1.A	Tectonics and Volcanism	WMPO Review	July 9
X.2.3.4.1.1.A	Groundwater Chemistry	Preparation	August 15
X.2.4.2.3.2.A	Seal Material Evaluation	Provided by SNL	
X.2.6.9.3.A	Integrated Data Systems	Preparation	August 1
X.2.3.4.1.4.A	Solubility Determination	LANL Review	August 1
X.2.3.4.1.5.A	Scorption and Precipitation	Preparation	August 8
X.2.3.4.1.6.A	Dynamic Transport Process	Preparation	August 8
X.2.3.4.1.7.A	Retardation Sensitivity Analysis	Approved	June 26
X.2.3.4.2.A	Mineralogy and Petrology		
X.2.6.1.1.A	Exploratory Shaft Management Planning and Design Review	Negotiation LANL/WMPO	August 1
X.2.6.9.1.A	Exploratory Shaft Test Plan	WMPO Review	July 28
X.2.6.9.4.4.A	Geochemical Testing	LANL Review	August 1

ACTIONS TAKEN TO PREVENT RECURRENCE INCLUDE:

1. QA Administrative Procedure, TWS-MSTQA-QP-18, has been revised (R1) to include WMPO Interim Change Notice dated May 9, 1986, to NMWSI-SOP-02 02, R1.
2. A change request has been initiated to implement WMPO Interim Change Notice dated July 7, 1986, to NMWSI-SOP-C2-02, R1.
3. LANL NMWSI PIs have been informed of the latest directions provided by WMPO on Scientific Investigation Plans and the instructions provided by WMPO and SAIC/LV representatives.

Past submissions of QALAs to WMPO for review and comment and for approval have involved time delays and repeated changes in direction and approach. This has caused numerous changes to be made in drafts and also in final QALAs such as for the Exploratory Shaft WBS.

In the future, work on new assignments or tasks in the form of WBSs or changes thereto, will not be initiated without a QALA approved by WMPO.



Department of Energy

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Las Vegas, NV 89193-8518

FEB 11 1988

Michael E. Spaeth
Technical Project Officer for NNWSI
Science Applications
International Corporation
Suite 407
101 Convention Center Drive
Las Vegas, NV 89109

WASTE MANAGEMENT PROJECT OFFICE (WMPO) STANDARD DEFICIENCY REPORTS (SDR)
RESULTING FROM AUDIT 87-4 OF SCIENCE APPLICATIONS INTERNATIONAL CORPORATION
(SAIC)

Reference: Letter, Blaylock to Spaeth, dtd. 11/2/87

As identified in the above referenced letter, the WMPO accepted the SAIC responses to SDR Nos. 048 and 049. Due to the nature of the responses to these SDRs, verification of corrective/remedial action is not appropriate. As a result, the SDRs have been closed. Copies of the SDRs are enclosed for your files.

If you have any questions, please call me at 295-8913.

James Blaylock
James Blaylock
Project Quality Manager
Waste Management Project Office

WMPO:JB-1156

Enclosure:
SDR Nos. 048 and 049

WMPO STANDARD DEFICIENCY REPORT

N-OA-031
3/87

Completed by Originaling QA Organization

1 Date <u>6/22/87</u>		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page <u>1</u> of <u>2</u>	
3 Discovered During <u>WMPO Audit 87-4</u>		3a Identified By <u>F. J. Ruth</u>	3b Branch Chief Concurrence Date <u>N/A</u>		4 SDR No <u>049</u> Rev. <u>0</u>
5 Organization <u>SAIC/T&MSS</u>		6 Person(s) Contacted <u>Martin Jablonski</u>		7 Response Due Date is <u>20 Working Days from</u> Date of Transmittal	
8 Requirement (Audit Checklist Reference, if Applicable) <u>The Quality Level Assignment Sheet for the SAIC/T&MSS Meteorological Monitoring Plan, Program Operation Activity, states in part that (cont'd)</u>					
9 Deficiency <u>There is no objective evidence that an operator instruction manual exists. (refer to audit checklist Item No. 8.0-6)</u>					
10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Investigative <input checked="" type="checkbox"/> Corrective 1. <u>Issue the Operators Instruction Manual.</u> 2) <u>Investigate and evaluate the possibility of additional deficiencies (cont'd)</u>					

11 QAE/Lead Auditor Date <u>M. Thompson 7/1/87</u>		12 Branch Manager Date <u>W.R. Kegan 8/87</u>		13 Project Quality Mgr. Date <u>Jane Blaylock 7/15/87</u>	
---	--	--	--	--	--

14 Remedial/Investigative Action(s) <u>See attached.</u>		15 Effective Date <u>N/A</u>			
---	--	------------------------------	--	--	--

16 Cause of the Condition & Corrective Action to Prevent Recurrence <u>N/A</u>		17 Effective Date <u>N/A</u>			
---	--	------------------------------	--	--	--

18 Signature/Date <u>W. Marnett 8/28/87</u>		<u>W.R. Kegan 8/28/87</u>			
--	--	---------------------------	--	--	--

19 Response <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Amended Response		QAE/Lead Auditor/Date <u>M. Thompson 10/20/87</u>		Branch Manager/Date <u>W.R. Kegan 10/20/87</u>	
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 checked="" type="checkbox"/> Unsatisfactory <u>N/A</u>		QAE/Lead Auditor/Date <u>M. Thompson 1/22/88</u>		Branch Manager/Date <u>W.R. Kegan 1-22-88</u>	

22 Remarks Due to the nature of the response, no verification is appropriate. I concur with the response. No deficiency exists.
Fredrick G. Ruth 1-25-88

23 CLOSURE		QAE/Lead Auditor/Date <u>M. Thompson 1/22/88</u>		Branch Manager/Date <u>W.R. Kegan 1/22/88</u>		PQM/Date <u>...</u>	
------------	--	---	--	--	--	------------------------	--



W PO STANDARD DEFICIENCY REPORT
CONTINUATION SHEET

N-QA-
10/86

SDR No 048

Rev. 0

Page 2 of 2

Block 8 REQUIREMENT (cont'd)

OP 18.2, Rev. 2, "Audits", Paragraph 5.6, requires the issuance of the approved audit report within 30 days from the completion of the audit.

Block 9 DEFICIENCY (cont'd)

<u>Audit/Surv. No.</u>	<u>Audit/Surv. Date</u>	<u>Dist. Date</u>	
SR 87-01	10/22/86	11/4/86	8 Working Days
SR 87-04	5/13/87	5/22/87	7 Working Days
IA-86-04	9/19/86	11/4/86	46 Days

(Refer to Audit Checklist Item No. 10.0-13 and 18.0-13)

Response to SDR-048

Remedial Action/Investigative Action

Block 8 of the SDR references incorrect documents as the sources of requirements; i.e., QP 10.2, Rev. 2, should be QP 10.2, Rev. 0, and QP 18.2, Rev. 2, should be QP 18.1, Rev. 2.

Of the three reports identified in Block 9 only one is delinquent in regard to the transmittal of the report prior to an established date.

1. SR-87-01 was issued on November 4, 1986, which was prior to the effective date (12/20/86) of the applicable procedure. The requirement being cited did not exist prior to December 20, 1986.
2. SR-87-04 was issued seven working days instead of the five working days limit established by QP 10.2. The five working days limit is a T&MSS restraint and not a WMPO requirement.
3. IA-86-04 was issued on November 4, 1986, which was prior to the effective date (12/20/86) of the applicable procedure. All FY 87 internal audits required by WMPO were conducted by T&MSS OA personnel. IA-86-04 was an independent audit conducted by a consultant utilizing QP 18.1 for guidance and appropriate forms.

Corrective Action

No corrective action is required.

WMPO STANDARD DEFICIENCY REPORT

N-0A-03
3/87

Completed by Original Org
Completed by Originating OA Organization
Completed by Org. OA Org

1 Date 6/22/87	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 87-4	3a Identified By T. Vetter	3b Branch Chief Concurrence Date N/A	4 SDR No 048 Rev 0
5 Organization SAIC/T&MSS		6 Person(s) Contacted J. Therien, R. Kettel	7 Response Due Date is 20 Working Days from Date of Transmittal
8 Requirement (Audit Checklist Reference, if Applicable) QP 10.2, Rev. 2 "Surveillances", Paragraph 5.4 requires the T&MSS QA Manager to transmit the surveillance report within five (5) working days. (cont'd)			
9 Deficiency For surveillances and audits noted below, the 5 working day and 30 day requirements were not satisfied. (cont'd)			
10 Recommended Action(s) <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Investigative <input type="checkbox"/> Corrective Establish the necessary priorities to meet the scheduled dates.			

11 QAE/Lead Auditor Date <i>[Signature]</i> 7/16/87	12 Branch Manager Date <i>[Signature]</i> 7/15/87	13 Project Quality Mgr. Date James Blufford 7/15/87
--	--	--

14 Remedial/Investigative Action(s) See attached.	15 Effective Date N/A
--	--------------------------

16 Cause of the Condition & Corrective Action to Prevent Recurrence See attached.	17 Effective Date N/A
--	--------------------------

18 Signature/Date
[Signature] 8/28/87 *[Signature]* 8/28/87

19 Response <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Amended Response <input type="checkbox"/> Reject	QAE/Lead Auditor/Date <i>[Signature]</i> 10/20/87	Branch Manager/Date R. Kettel 10/20/87
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 checked="" type="checkbox"/> Unsatisfactory N/A	QAE/Lead Auditor/Date <i>[Signature]</i> 1/22/88	Branch Manager/Date <i>[Signature]</i> 1/22/88

22 Remarks Due to the nature of the response, no verification is appropriate

QA CLOSURE	QAE/Lead Auditor/Date <i>[Signature]</i> 1/22/88	Branch Manager/Date <i>[Signature]</i> 1/22/88	PQM/Date R.O. 1 0 2/2/88
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Y 'PO STANDARD DEFICIENCY REPORT
CONTINUATION SHEET

N-QA-
10/86

SDR No. 049

Rev. 0

Page 2 of

Block 8 REQUIREMENT (cont'd)

" The specific duties to be carried out will be documented in an operator instruction manual, which will be written prior to the commencement of monitoring."

Block 10 RECOMMENDED ACTION

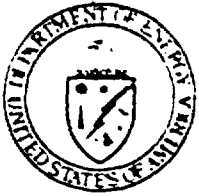
based on the lack of written instructions.

- 3) Determine the cause of the deficiency and specify measures to preclude recurrence

Response to SDR-049

Remedial/Investigative Actions

No deficiency exists. An instruction manual does exist. Please see, NNWSI Project Instructions for Operation and Calibration Checks of Meteorological Monitoring Equipment, (SAIC 86/8000, Rev. 0). This document was made available to the auditor at both the instrument trailer and the Las Vegas office.



Department of Energy

Nevada Operations Office

P. O. Box 98518

Las Vegas, NV 89193-8518

JAN 29 1988

Larry R. Hayes
Technical Project Officer for NNWSI
U.S. Geological Survey
P.O. Box 25046
Mail Stop 421
Denver, CO 80225

WASTE MANAGEMENT PROJECT OFFICE (WMPO) EVALUATION OF U.S. GEOLOGICAL SURVEY (USGS) RESPONSES TO THE QUALITY ASSURANCE (QA) STANDARD DEFICIENCY REPORTS (SDRS) RESULTING FROM AUDIT 87-6/87-7 OF USGS

The WMPO has evaluated the USGS responses to four SDRs (Nos. 069-072) which were generated as a result of WMPO QA Audit 87-6/87-7. The responses to SDR Nos. 069-072 provided, have been accepted without comment. SDR Nos. 069-072 will be closed upon verification of committed corrective actions. Copies of the annotated SDRs listed above are enclosed, herein, for your information and retention.

Based upon your latest date for completion of corrective action, February 1988, we are planning a supplemental visit to Denver to verify/close the subject SDRs. At present this visit should occur during the week of March 7, 1988. Please advise us if your schedule cannot accommodate this visit.

If you have any questions, please contact Henry H. Caldwell at FTS 575-8740.

James Blaylock
James Blaylock

Project Quality Manager

Waste Management Project Office

WMPO:JB-1017

Enclosure:
SDR Nos. 069-072

Completed by Originating QA Organization	1 Date 8/13/87		2 Severity Level <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3		Page 1 of 2
	3 Discovered During WMPQ Audit 87-6/ 87/7		3a Identified By T. Vetter		3b Branch Chief Concurrence Date N/A
	4 SDR No. 059		Rev. Q		
Completed by Originating QA Organization	5 Organization USGS		6 Person(s) Contacted Martha H. Mustard		7 Response Due Date is 20 Working Days from Date of Transmittal
	8 Requirement (Audit Checklist Reference, if Applicable) NNWSI-USGS-18.01, R1 para. 5.11.1 requires that the audit report be issued within 15 days of the audit and para. 5.11.3 requires that all signed originals be filed and maintained in the USGS Quality Assurance Office.				
	9 Deficiency Contrary to the 15 day requirement of 5.11.1 the audit report for USGS-87-01 was issued 18 days after the audit, USGS-87-02 has not been issued 26 days after the audit, and USGS-BR-87-1 was issued 27 days after the audit. Contrary to the requirements of 5.11.3 the originals are not filed (see continuation sheet)				
Completed by Originating QA Organization	10 Recommended Action(s) <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Investigative <input type="checkbox"/> Corrective				
	1. Review the process for completing audit reports and assure that actions delaying submittals are revised to meet the 15 days period. (see continuation sheet)				
	11 QAE/Lead Auditor Date <i>Joe R. Willmon</i> AUG 27 1987				
Completed by Organization in Block 5	12 Branch Manager <i>James Blyford</i> 8/27/87		13 Project Quality Mgr. Date <i>James Blyford</i> 9/1/8		
	14 Remedial/Investigative Action(s) Upon review of NVO-196-17, R4 and R5, it was determined that the USGS program 15 - day time limit for issuance of the audit report was more restrictive than allowed by the 30-day reporting requirement in the NNWSI Project QA Plan. All of the USGS audit reports were issued within the 30 - day time frame, therefore meeting the basic QA Program requirements mandated by the WMPQ, and the integrity of the QA (Cont'd on continuation sheet)				
	15 Effective Date (See attached)				
Completed by Organization in Block 5	16 Cause of the Condition & Corrective Action to Prevent Recurrence Not required for Severity Level 3 SDR.				
	17 Effective Date <u>N/A</u>				
	18 Signature/Date Joe R. Willmon 10/7/87 <i>Joe R. Willmon</i> 10/7/87				
Comp. by Orig. QA Org.	19 Response <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Amended <input type="checkbox"/> Reject <input type="checkbox"/> Response		QAE/Lead Auditor/Date <i>Joe R. Willmon</i> 12/1/87		Branch Manager/Date <i>James Blyford</i> 12/1/87
	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	

ENCLOSURE

CONTINUATION SHEET

SDR No. 069

Rev. 0

Page 2 of 2

Block 9 - Deficiency (cont'd)

and maintained in the USGS Quality Assurance Office.

Block 10 - Recommended Action (cont'd)

2. Obtain all originals and retain in the USGS Quality Assurance Office files.

Block 14 - Remedial/Investigative Action(s): (Cont'd)

audit program was not compromised.

The location of "original" audit document requirements was intended to identify the QA system, not the physical file location. The duplicate filing system maintained by the QA Office includes 2 separate file locations and assures retention, retrievability, and precludes the loss of records. It is the contention of the QA Office that when "originals" are maintained, they may be in either (physical) file location, but preferably the originals should be in the Contractor's duplicate file. This duplicate file is most often used for the distribution of records and documents and as the primary source of the transmittal of QA records to the retention facility meeting USGS Project requirements that records being submitted be originals or first generation copies when possible.

Both the cited conditions will result in revisions to Q/P-18.01 to: 1) specify a 30 - day time frame for audit report issuance as specified in NVO-196-17; and 2) to clarify that "original" audit records shall be maintained within the QA filing system.

Block 15 - Effective Date:

60 days subsequent to WFO approval of the USGS QAPP-01, R4

WMP - STANDARD DEFICIENCY REPORT

FORM 30
3/87

Completed by Originating QA Organization	1 Date		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page 1 of 2	
	3 Discovered During WMP0 Audit 87-6/87-7		3a Identified By G. Heaney		3b Branch Chief Concurrence Date N/A	
	4 SDR No. 070		Rev. 0		7 Response Due Date is 20 Working Days from Date of Transmittal	
	5 Organization USGS		6 Person(s) Contacted J. W. Reid, K. W. Causseaux, J. P. Rousseau, S. L. Breshears			
Completed by Originating QA Organization	8 Requirement (Audit Checklist Reference, if Applicable) MNWSI-USGS-QMP-12.01, Rev. 1 Paragraph 5.3 states "Standards used for calibration of instruments shall be traceable to the National Bureau of Standards (NBS) or other known standards; this includes primary and working standards. If NBS standards do not exist, (cont'd)"					
	9 Deficiency Contrary to the above requirement, during the review of equipment calibration records it was observed that records sent to USGS by a calibration subcontractor do not indicate the NBS test numbers, or any other references which might provide (cont'd)					
	10 Recommended Action(s) <input type="checkbox"/> Remedial <input checked="" type="checkbox"/> Investigative <input type="checkbox"/> Corrective 1) Investigate to determine if the calibration subcontractor has additional records to support the required traceability. If so, obtain these records for the calibration record files. (cont'd)					
Completed by Organization in Block 5	11 QAE/Lead Auditor Date <i>J. A. Caldwell</i> AUG 27 1987		12 Branch Manager Date <i>W. Kason</i> 8/27/87		13 Project Quality Mgr. Date <i>James Blaylock</i> 9/1/87	
	14 Remedial/Investigative Action(s) Investigate to determine if the subcontractor's calibration records support the required traceability. If records supporting the required traceability cannot be obtained from the calibration subcontractor, a MCR will be written for instruments involved with collecting Quality Level I & II data. Procurement documents will be reviewed to determine (Continued on continuation sheet)					
Completed by Organization in Block 5	15 Effective Date <u>11/16/87</u>					
	16 Cause of the Condition & Corrective Action to Prevent Recurrence Minimum requirements will be determined and listed for certifications submitted to USGS. Provide instruction to USGS personnel regarding pertinent information required to be included on subcontractor calibration documentation. Cause of the conditions described within will be determined during the investigative process.					
Completed by Organization in Block 5	17 Effective Date <u>11/16/87</u> <small>6th USES 4th 17 Nov 87 NNA 8711200081</small>					
	18 Signature/Date K. W. Causseaux 10/7/87 <i>KW Causseaux</i> 10/7/87					
Comp. by Orig. QA Org	19 Response <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Amended Response <input type="checkbox"/> Reject		QAE/Lead Auditor/Date <i>J. A. Caldwell</i> 12/1/87		Branch Manager/Date <i>W. Kason</i> 12/2/87	
	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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Block 8 - Requirement (cont'd)

the reference standard shall be supported by certificates, reports, or data sheets attesting to the date, accuracy, and conditions under which the results were obtained."

Block 9 - Deficiency (cont'd)

traceability to NBS standards.

In some cases, the calibration documentation references a non-USGS identification or incomplete USGS serial numbers. In all cases this documentation does not indicate the identity of the vendor or approval signatures attesting to the provided test data.

Examples of calibration records reviewed with this deficiency are:

Three Psychrometer Microvoltmeter/Controllers located in the USGS Hydrologic group in Dever identified with USGS serial numbers 31800146, 23020139, 32020151.

Block 10 - Recommended Action (cont'd)

2) If additional records supporting the required traceability cannot be obtained from the calibration vendor, generate an NCR for the instruments involved and identify any Quality Level I and II data obtained by the use of those instruments.

3a) Review procurement documents to determine if adequate requirements for calibration certifications were specified. Develop minimum requirements list for certifications submitted to USGS.

3b) Provide appropriate USGS personnel with instruction regarding what pertinent information is required to be included on subcontractor calibration documentation.

Block 14 - Remedial/Investigative Action(s) (Cont't)

if adequate requirements for calibration certifications are specified.

WMI - STANDARD DEFICIENCY REPORT

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Completed by Original QA Organization
 Completed by Organization in Block 5
 Comp. by Orig. QA Org.

1 Date 8/13/87		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3			Page 1 of 2
3 Discovered During WMPU Audit 87-6/87-7		3a Identified By D. Klimas		3b Branch Chief Concurrence Date N/A	
4 SDR No. 071		Rev. 0			
5 Organization USGS		6 Person(s) Contacted J. R. Willmon		7 Response Due Date is 20 Working Days from Date of Transmittal	
8 Requirement (Audit Checklist Reference, if Applicable) NNWSI-USGS-QMP-2.5, Rev. 1, para. 5.3.3 Audit Participation - The prospective Lead Auditor shall have participated in a minimum of five quality assurance program audits within a period of time not to exceed three years prior to the date of qualification. (cont'd)					
9 Deficiency Contrary to the above requirements, Ardell Whiteside was certified as a Lead Auditor on 4/28/87 without objective evidence of meeting 5 audits in 3 years and satisfactory attainment on a lead auditors examination administered by USGS.					
10 Recommended Action(s) <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Investigative <input type="checkbox"/> Corrective See attached					
11 QAE/Lead Auditor Date <i>A. Caldwell</i> AUG 27 1987		12 Branch Manager Date <i>J. R. Willmon</i> 8/27/87		13 Project Quality Mgr. Date <i>James Blandford</i> 9/1/87	
14 Remedial/Investigative Action(s) See attached USGS-CAR-87-01, Page 4 (Remedial/Investigative Actions)					
15 Effective Date _____					
16 Cause of the Condition & Corrective Action to Prevent Recurrence See attached USGS-CAR-87-01, Page 3 (Cause & Page 4 (Corrective Action to Prevent Recurrence)					
17 Effective Date _____					
18 Signature/Date Joe R. Willmon 10/7/87 <i>Joe R. Willmon</i> 10/7/87					
19 Response <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Amended Response		QAE/Lead Auditor/Date <i>A. Caldwell</i> 12/1/87		Branch Manager/Date <i>J. R. Willmon</i> 12/2/87	
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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Block 8 - Requirements (cont'd)

One of the audits shall be a nuclear quality assurance audit conducted within the year before the date of qualification.

Para. 5.3.5 - Examination - The prospective Lead Auditor shall pass an examination with a score of 80% or greater, which shall evaluate the individual's comprehension of and the ability to apply the body of knowledge identified in para. 5.3.2. The test may be oral, written, practical, or any combination of the three as determined by the USGS Quality Assurance Manager.

Block 10 - Recommended Action (cont'd)

Process USGS Corrective Action Report (USGS CAR 87-01) that identifies remedial investigations and corrective action. Administer Lead Auditor examinations to candidate and document same. Acquire objective evidence of required audit participation. Assure compliance with actions to preclude recurrence specified in referenced CAR.

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Completed by Originating QA Organization	1 Date		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page 1 of 2	
	3 Discovered During WMPQ Audit 87-6/87-7		3a Identified By G. Heaney		3b Branch Chief Concurrence Date N/A	
	4 SDR No. 072		Rev. 0			
	5 Organization USGS		6 Person(s) Contacted J. Evans, J. Willmon		7 Response Due Date is 20 Working Days from Date of Transmittal	
Completed by Organization in Block 5	8 Requirement (Audit Checklist Reference, if Applicable) Procedure NIWSI-USGS-QMP-3.03, Rev. 0, Para. 5.4, states "The Technical Contact (TC) is responsible for providing completed Software Summary Forms (SSF) and Software Checklists and Indexing Forms (SCIF) to the QA office for all Scientific and Engineering Software (SES) (cont'd)					
	9 Deficiency Contrary to the above requirements, Software Summary Forms and Software Checklists and Indexing Forms are not being completed and sent to the QA office for computer programs presently in use by the Seismology group. Additionally, the computer programs are not being identified by version as required by the procedure.					
	10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Investigative <input checked="" type="checkbox"/> Corrective 1) Implement the procedural requirements. 2) Determine if the lack of identification of version numbers on the computer programs has compromised traceability for any Level I and II data.					
Completed by Organization in Block 5	11 QAE/Lead Auditor Date <i>A. Caldwell</i> 0111G 27 1987		12 Branch Manager Date <i>W. Kegan</i> 9/2/87		13 Project Quality Mgr. Date <i>James Blaylock</i> 9/1/87	
	14 Remedial/Investigative Action(s) We will begin to insert version numbers to the effected codes and complete forms but due to the complexity and the large number (over 100) this process is estimated to take at least six months. Traceability between data and programs have been provided by long-standing USGS coding procedures. Therefore, the lack of versions numbers has not compromised traceability.					
	15 Effective Date 04/6/ 1988					
Completed by Organization in Block 5	16 Cause of the Condition & Corrective Action to Prevent Recurrence Lack of understanding by some personnel combined with the complexity of the program resulted in noncompliance. Affected personnel are now cognizant of the requirements, however, the remedial action identified above must also be complete.					
	17 Effective Date 04/06/88					
Comp. by Orig. QA Org.	18 Signature/Date <i>Joseph J. Barth</i> 10/2/87 Joseph J. Barth 10/2/87					
	19 Response <input type="checkbox"/> Accept <input checked="" type="checkbox"/> Amended Response		QAE/Lead Auditor/Date <i>A. Caldwell</i> 12/1/87		Branch Manager/Date <i>W. Kegan</i> 12/1/87	
	20 Amended Response <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Reject		QAE/Lead Auditor/Date <i>A. Caldwell</i> 1/20/88		Branch Manager/Date <i>W. Kegan</i> 1-20-88	
	21 Verification <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory		QAE/Lead Auditor/Date		Branch Manager/Date	
Comp. by Orig. QA Org.	22 Remarks See attached modification to previous response.					
	23 QA CLOSURE		QAE/Lead Auditor/Date		Branch Manager/Date	

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Block 8 - Requirement (cont'd)

supporting Quality Levels I and II for which the TC is responsible."

Paragraph 6.2 of the same procedure states "Configuration Management System - Each item of software within the scope of this QMP shall produce a unique identification on its output, if feasible. This identification includes version."

Block 10 - Recommended Action (cont'd)

3) Provide additional training to cognizant personnel.