SUMMARY OF FEBRUARY 18, 2004
U.S. NUCLEAR REGULATORY COMMISSION / U.S. DEPARTMENT OF ENERGY
QUARTERLY QUALITY ASSURANCE MEETING

Introduction:

Staff from the U.S. Nuclear Regulatory Commission (NRC) and the Office of Civilian Radioactive Waste Management, U.S. Department of Energy (DOE), held a public Quarterly Quality Assurance (QA) Meeting on February 18, 2004. The purpose of the meeting was to discuss the implementation of DOE's QA program regarding the geologic repository at Yucca Mountain, Nevada. The meeting was held at the NRC office in Rockville, Maryland, and via video conference with the DOE office in Las Vegas, Nevada, and the Center for Nuclear Waste Regulatory Analyses in San Antonio, Texas. Those in attendance included representatives from the NRC, DOE, Bechtel SAIC Company, LLC (BSC), the State of Nevada, Clark County, Government Accounting Office, Nuclear Energy Institute (NEI), Bettis Navy Nuclear Program, and members of industry and the public. A list of attendees is in Enclosure 1 to this meeting summary.

Presentations:

Staff from DOE and BSC made a series of presentations during the course of the QA meeting as described below. A copy of the meeting agenda and presentations are in Enclosures 2 and 3, respectively, to this meeting summary. To allow for the availability of certain presenters, the sequence of presentations did not occur as listed in the meeting agenda.

Quality Assurance Overview

Dennis Brown (DOE) presented an overview of the DOE QA program. During his presentation, Mr. Brown discussed the percentage of adverse conditions self-identified by the line organization, Condition Report (CR) action implementation timeliness, and corrective action program.

Susan Lynch (State of Nevada) stated her concern that DOE's Office of Quality Assurance (OQA) is planning on removing QA from the corrective action oversight of BSC. She also questioned the adequacy of allowing the line organization to close CRs too soon and without OQA oversight. Mr. Brown replied that he wants to take OQA and BSC QA out of the Condition Report process to let the line organizations self-identify and correct their problems. OQA will be involved in all other Corrective Action Program (CAP) activities, but will propose turning more activities over to the line organization in the future. Michael Mason (BSC) added that DOE is developing a transition plan that will include determining corrective action effectiveness. DOE will ensure that transition is well managed and appropriate controls will remain in effect.

Corrective Action Program

Kerry Grooms (DOE) presented an overview of the CAP. During his presentation, he discussed the current status of the program and stated that improvements include: a new single CAP implemented, increased management oversight through the CAP Oversight Committee, and that management is monitoring the effectiveness and performance of the CAP. For example, the line organizations are currently performing assessments of the CAP to identify program constraints and areas where there may be difficulty in meeting their goals or requirements. Mr. Grooms indicated that a full scale audit of the CAP is currently scheduled to be performed in July 2004.

Mr. Grooms also discussed the line organization assessments of the CAP, including review of cause coding, training needs assessment, and process analysis. An enhancement that is being planned is related to CAP significance levels. That is, the corrective action documents will use three significance levels, A, B and C. Level A is the most significant, B would be a high risk that is adverse to quality, and C would be a lower risk or isolated example. Lastly, he reviewed the enhancements to the CAP that are currently under review including revising problem significance levels, simplifying the process, and improving the tools. Mr. Grooms also stated that improvements in the overall CAP are continuing and it appears that necessary components of the program are in place.

Human Performance Issues

Dennis Sorensen (BSC) presented information regarding human performance issues as documented in CR-1497 issued as a condition adverse to quality. He stated that although there are no adverse trends found per criteria in procedure AP-16.3Q, *Trend Evaluation and Reporting*, in the area of human performance, BSC did find a pattern of errors. Specifically, 90 percent of CRs from Fiscal Year 2003 are related to human performance (40 percent), management (26 percent), and communications (24 percent). He stated that human performance causes were primarily skill-based, but included rule-based and knowledge-based causes, which resulted from less-than-adequate self-checking and omitting steps in the procedures. He added that skill-based errors are caused primarily by the amount of time it takes to complete a product according to procedural controls. For example, after a long time away from a process, individuals may forget where they were in the process and the critical steps that need to be completed. Less-then-adequate self-checking was also a primary cause of skill-based errors. Barriers to prevent or reduce human error were less than adequate.

Mr. Sorensen then presented measures to reduce human performance problems including implementing pre-job briefings to emphasize the critical mission, summarizing critical steps, identifying likely errors and best work practices for self-identification, reinforcing accountability for procedural compliance, and establishing expectations for timely self-review. Lessons learned will be developed related to human performance situations, involve workers in sharing the learning of these errors, and develop and track specific actions regarding human performance. Training will be enhanced to address rule-, knowledge-, and skill-based errors as well as procedures enhancements for the end-users to simplify steps and actions, provide notes to clarify expected actions, and more clearly define roles and responsibilities.

Thomas Matula (NRC) asked how the effectiveness of these actions will be measured.
Mr. Sorensen responded that trending is one of the keys to measure effectiveness, and listening to the personnel that are performing the work is another key. The information that is obtained will then be factored into the long-term program improvements and will help to change the culture.

Performance Indicators 2.3 and 2.4

Michael Ulshafer (DOE) presented information regarding DOE's QA Performance Indicators 2.3, *Quality Assurance*, and 2.4, *Corrective Action Management System*. He said that the purposes of indicators are to provide insight into areas needing improvement, provide an objective reference as a basis for management decisions, and focus on critical areas that can impact the mission. He described the structure and development of indicators including a three-tiered structure with increasing levels of detail. The weights of the indicators are subjective, they are approved by senior management, and are reported monthly at the Monthly Operating Review. He also said that the indicators continue to evolve and that DOE will keep NRC informed as indicators are developed and refined.

Mr. Ulshafer presented a summary of the December 2003 QA Performance Indicators. He said that 11 indicators scored in the red, with six out of the 11 showing positive trends after the rollout of the new CAP, two are steady, and three are trending negative. He said that six indicators scored in the yellow, with three out of the six showing positive trends after the rollout of the new CAP, two are steady, and one is negative. Lastly, Mr. Ulshafer said that the performance indicators provides a self-critical snapshot of the Project's implementation of QA requirements, and the indicators are a tool that provides bases for making decisions.

Mr. Matula noted that there are still a large number of performance indicator boxes that are white, indicating that no data is available. Mr. Brown stated that while some data may in fact exist on a preliminary basis, entering preliminary data may produce false indicators. Mr. Ulshafer stated that management approval of performance indicators is required prior to use to ensure that they are accurate, meaningful, and a useful tool to achieve Project success.

Blair Spitzburg (NRC) noted the negative trends in certain Performance Indicators such as: 2.3.2.2, *Percentage of Approved Corrective Action Plans Developed for Level A and B CRs*; 2.4.3.1, *Timely Screening of New Adverse Conditions*; 2.4.3.3, *Nonconformance Report Disposition Timeliness*; 2.4.4.3, *CR Action Implementation Timeliness*; and 2.4.4.4, *Corrective Action System Activity Ratio.* Mr. Brown acknowledged the negative trends and stated that they are working to improve their performance. Mr. Grooms also responded stating that there were several factors that affected the performance in these areas. One, it must be considered that there are now more than two times the number of CRs entering the process. This means even though the trend may be flat or slightly negative, with the increased number of CRs it indicates that DOE is managing its process. DOE is analyzing the process to identify constraints and is performing training needs assessments to improve the performance. DOE has also identified the need to improve the quality of the incoming CRs and is looking at training needs in that area. Also, the indicator is measuring calendar days while the goal is in working days. Mr. Brown commented that BSC has increased the frequency of the screening team meetings to improve performance in this area. Ms. Lynch also commented on the matter of negative trends.

Judy Treichel (Nevada Nuclear Waste Task Force) referred to a newspaper article published on February 18, 2004, regarding site personnel who allegedly claim they were forced to falsify records of tunnel dust levels in the mid 1990s. She said that the same type of QA problems were happening then as they are now. She added that the NRC should be aware of this matter and look at past DOE records to evaluate present performance.

Mr. Matula asked for a meeting between DOE and NRC to go over Performance Indicators regarding QA activities and other appropriate areas. During this meeting, NRC staff would want to go over the data that populate each performance indicator to gain a better understanding of the contents and use of the indicators. April Gil (DOE) stated that DOE will support this meeting and will work with the NRC staff to determine the meeting date and content.

Software Quality Assurance

William Boyle (DOE) briefly discussed data that is identified as to-be-verified (TBV) and stated that it is DOE's and BSC's intention to fully verify such data prior to its use in the License Application. Mr. Matula clarified that the TBV issue also applies to preliminary software and its unqualified output that is currently being used in the development of Analysis Model Reports (AMRs) that will be used in the License Application. Ms. Nancy Williams (BSC) stated that the intention is to remove TBVs from software prior to its use in the Total System Performance Assessment for License Application, but there may be instances where this may not be possible.

Software Development (CAR BSC-01-C-002)

Richard Atkisson (BSC) stated that Corrective Action Report (CAR) BSC-01-C-107 (CR-102) addresses ineffective implementation of software management requirements. CR-102 corrective actions include: procedure revisions/development; training and implementation of requirements emphasis; and management improvement activities. The corrective actions are scheduled to be complete in March 2004. He also described the status of CR-102 actions. OQA has received requests for verification of some actions; 23 of 28 actions are complete and verified as satisfactory, and five actions were found to be unsatisfactory and returned for rework.

Mr. Atkisson described the results of the Project's software performance-based audit. The audit confirmed the need for software development procedure changes. He reported that to date, no adverse impact on code functionality or technical products has been noted. Also, OQA accepted the amended responses for five open actions which include CRs -46, -48, and -76 regarding software development, implementation, and documentation issues, respectively.

Mr. Atkisson discussed retesting of legacy software. As of February 9, 2004, 423 baselined software codes will be used in support of License Application. Those codes baselined before January 13, 2003, are identified as legacy software and will be independently verified and validated. The retest is for code functionality and consists of software installation and validation tests. As of February 9, 2004, 124 software codes have been qualified and have completed retest, and 100 codes are undergoing Independent Verification and Validation.

Software Deficiency Reports BSC(O)-03-D-177, -178, and -179

Mr. Robert Hasson (Navarro Quality Services) presented the OQA Verification Status for Software. He stated that CR-102 contained 28 corrective action commitments of which 23 have been satisfactorily verified by the OQA. Five commitments remain open, two of which are in OQA for verification. Of the five open commitments, three commitments are associated with software procedures, and those procedures are currently in formal review process; one commitment is associated with the need for OQA to verify 17 Software Problem Reports for completion of Impact Analysis; and one commitment is associated with the need for OQA to address legacy software retesting and sample approximately 25 test packages for procedure compliance. Mr. Latta commented that OQA's software audit, conducted in June 2003, noted that deficiencies identified and documented during the audit in Deficiency Reports (DRs) 177, 178, and 179 (CRs -46, -48, and -76, respectively) were similar to previous deficiencies. Mr. Latta stated that these deficiencies were indicative of ineffective corrective actions, and asked if the closure of CR-102 would be predicated on the effective resolution of these CRs. Mr. Hasson stated that OQA would verify corrective actions for the software audit problems documented in CRs 46, 48, and 76 and verify remedial actions by sampling 25 software code packages. Mr. Latta also asked if OQA will conduct a follow-up software audit to support CR closure in light of the fact that the results of the previous software audit were indeterminate. Mr. Brown stated that it is likely that DOE will conduct a follow up software audit and may consider adding it to the audit schedule.

Software "Use" (Deficiency Report BSC (B)-03-D-170)

Mr. Brown defined the term "use" as the utilization of software output in an AMR when it is issued. He stated that OQA determined that it is acceptable to use preliminary software, and the associated preliminary software output, before the AMRs that use the preliminary software are approved by BSC management. When BSC approves the AMR the software and its output must be qualified.

Mr. Brown referred to three letters regarding this matter:

1. R. Dennis Brown to Nancy H. Williams, *Use of Output from Software under Development for Preliminary Analysis Model Report (AMR) Feeds*, February 3, 2004

2. Nancy H. Williams to R. Dennis Brown, *Contract No. DE-ACE28-01RW12101 - Response to Request for Additional Information Regarding 'Use of Output from Software under Development for Preliminary Analysis Model Report (AMR) Feeds,'* February 12, 2004

3. R. Dennis Brown to Nancy H. Williams, *Revision to Position on Use of Output from Software under Development for Preliminary Analysis Model Report Feeds*, February 13, 2004

Mr. Matula requested a copy of the referenced letters and DOE provided them to NRC at the close of the meeting. The letters can be found in Enclosure 4 to this meeting summary.

Mr. Matula pointed out that CR 1804 states that there is no controlled document specifying the process steps that were used to perform certain software activities. Mr. Matula asked when the associated procedures will be updated. Ms. Williams said the procedures will be updated by March 5, 2004. Mr. Matula also inquired if Software Configuration Management controls and software version controls are in place for preliminary software. Ms. Williams said that configuration management controls are implemented when software is approved, however, version control for preliminary software is not implemented.

Software Surveillance Conclusions

Mr. Brown also discussed the recent OQA software surveillance. The scope of this surveillance included tracking of preliminary output of software development and configuration control. OQA reviewed eleven in-process or recently completed AMRs, including about 50 codes. The review team interviewed the involved authors, checkers, and quality engineers. The team identified three conditions adverse to quality related to lack of procedural controls and a formal method of determining how checkers determine software is adequate for intended use. However, the review team did not find any approved AMRs that contained any unqualified software.

Independent Evaluation of Software Issues

Mr. Brown also discussed the OQA independent review conducted in Fall 2003 at the request of the OQA Director. This review involved two industry software QA experts for several months. The scope of the review included CARs, DRs, Software Problem Reports, and Software Deficiency Notices for the period 1998 through 2003. During this process, the team reviewed 190 codes. The team found that remedial actions were appropriate and no remedial actions were undone. One recommendation addressed the need to look at similar issues such as revising procedures, providing training, and providing more management attention for actions to preclude recurrence.

Model Validation Status (CAR BSC-01-C-001)

Jean Younker (BSC) said that BSC issued CAR BSC-01-C-001 (CR-099) in May of 2001 and that the corrective actions included changes to address model validation issues identified in technical products, procedure enhancements, and training. BSC completed corrective actions and requested OQA verification in August 2003. OQA performed an audit of Model Reports in August through November 2003 and verified that BSC completed 11 of the 12 CR-099 corrective actions. OQA also found that six of 20 Model Reports sampled were unsatisfactory. As a result, OQA concluded that CR-099 could not be closed.

Ms. Younker said that BSC submitted three supplemental corrective actions on December 5, 2003, regarding CR-099. First, BSC will conduct a self-assessment to investigate procedural implementation problems. BSC completed its self-assessment on January 15, 2004. BSC did not identify any conditions adverse to quality, but did identify two opportunities for improvement.

Second, DOE will conduct a surveillance of the 36 remaining Model Reports. The BSC team, including technical specialists, are performing the surveillance and completing model validation checklists. The Surveillance Report is scheduled for completion on February 20, 2004. The initial results suggest that the frequency and type of findings will be similar to those findings identified during OQA's independent verification review of Model Reports.

Third, BSC will revise Model Reports found to be unsatisfactory by OQA. Four of the Model Reports have been revised and approved by BSC, and BSC QA has verified that the four Model Reports are adequate. BSC expects to complete the fifth Model Report approval by February 20, 2004. BSC will formally request OQA verification and closure of CR-099 when corrective actions are complete.

Mr. Latta asked if BSC will perform an evaluation of the problems identified by the Surveillance Team to determine if there are any recurring problems. Nancy Williams (BSC) stated that BSC does not intend to perform this review unless they perform additional modeling activities. Mr. Larry Campbell (NRC) suggested that BSC should capture lessons learned from the Surveillance Team's findings so that future modeling personnel can avoid recurring problems, for example, when reports are revised to reflect input from the performance confirmation program. Ms. Williams acknowledged this as a good idea. Mr. Latta also questioned what specific actions would be implemented to preclude recurrence of the deficiencies identified in CR-099. Mr. Brown stated that identification of actions to preclude recurrence would be articulated in the verification and closure of CR-099.

Robert Hasson (Navarro Quality Services) presented information regarding OQA Verification Status for Model Validation documented in CR-099. He stated that OQA had completed 11 of 12 verification activities for corrective actions required by CR-099. He also said that there was significant improvement in validation for Model Reports noted from two years ago.

Mr. Hasson outlined the verification plans for remaining actions regarding CR-099. OQA will perform a 100 percent verification of remaining Model Reports in accordance with procedure AP-SIII.10Q, *Models*. OQA will verify that the five Model Reports found to be unsatisfactory have been corrected. OQA will evaluate BSC's self-assessment and surveillance to determine the need for improvements to procedure AP-SIII.10Q or any other actions necessary to preclude recurrence.

Management of Data (CAR BSC(B)-03-107)

Michael Jaeger (BSC) presented information regarding Data Management and Qualification and CAR BSC-03-C-107 (CR-016) which BSC issued because of recurring data deficiencies. He described actions regarding remediation of technical products in which BSC evaluates each product for procedure compliance. In Phase I, reviews for product compliance are completed during checking and review of AMRs. In Phase II, reviews cover legacy data issues and are completed on approved AMRs. Mr. Jaeger then provided the status of Data Confirmation Reviews: out of approximately 150 technical products, 110 (73 percent) products have completed Phase I review; 33 (22 percent) products completed Phase II review; and 33 (22 percent) products have completed remediation plan inputs. Regarding data verification, BSC reviews documentation for traceability of data from the early data records through progression to the Technical Data Management System.

Mr. Jaeger stated that Qualification of Data is a formal process that is intended to provide a desired level of confidence that data is suitable for its intended use. He provided several metrics regarding qualification of 1387 data sets that will be used in the License Application: Approximately 721 data sets (52 percent) are fully qualified; 456 data sets (33 percent) require qualification; and 210 (15 percent) are additional data sets that may require verifying qualification. He described the actions that will be taken to accelerate verification of the data qualification effort. The AMR review team will be expanded to include the involvement of additional line staff and dedicated teams to verify the qualification of data for each AMR. BSC will also increase the number of data verification staff.

Trending Program Improvements

Mr. Mason introduced the information regarding Trending Program Improvements. Gary Grant (BSC) then presented information regarding improvements in the Trend Program. He discussed trend evaluation and reporting requirements and industry best practices, process improvements, and trends and patterns analysis. He stated that based on the results and findings from the fourth Quarter Fiscal Year 2003 Trend Evaluation Report, DOE was able to identify the processes that are experiencing the most errors in implementation, identify why those processes have errors, take focused corrective action based on the errors' likely situations and the associated causes, and focus on the problems. From the recent results for the first quarter of Fiscal Year 2004 Trend Evaluation Report BSC found that six procedures account for over half of the problems, and the most common cause is human performance in implementation. He said that content (requirements) of the procedures is not a problem, but that problems were primarily related to documentation errors. He also said that excessive pace problems (schedule over quality) were identified in only 1.3 percent of the causal factors.

Mr. Grant summarized the trend results by saying that, as a result of audit activities, different procedures are accounting for problems quarter-to-quarter. He said that problem areas were expected and management is proactively addressing the identified issues. Processes are under control given the amount of data and work being conducted throughout the year, and that DOE now understands the nature and causes of problems with these processes. Lastly, he said that BSC initiated CR-1497 to address the fourth quarter Fiscal Year 2003 Trend Evaluation Report recommendations. DOE has developed a Corrective Action Plan to address the trend report findings which states that DOE will implement an event/error prevention framework based on Institute of Nuclear Power Operations and commercial nuclear practices to address human performance errors in procedure implementation.

Mr. Campbell asked what is the threshold that would consider a negative trend as a significant condition adverse to quality and initiate a Level A CR. Mr. Mason responded by saying that this needs to be addressed and will be included in future updates to the Trending Program.

Mr. Latta noted that two procedures (AP-5.1Q, *Procedure Preparation, Review, and Approval*, and AP-16.1Q, *Condition Reporting and Resolution*) had been specifically revised in order to address recurring deficiencies identified in DOE's Management Improvement Initiative. The extensive revision process associated with these procedures included: management involvement from affected organizations; completion of a comprehensive comment resolution process; independent confirmation; corrective action verification; and the documentation of mandatory training. Given the emphasis placed on the corrective actions related to these procedures, Mr. Latta questioned why there were recurring performance issues within this area. After some discussion, Mr. Grant stated that an increase in problems would be expected for any start-up process but is expected to decrease over time. Mr. Grant also stated that the trending program is evaluating this information.

Rod McCullum (NEI) stated that he felt that the line of discussion regarding the relatively large number of new CRs was not warranted. He stated that in the nuclear industry, a good CAP would produce more CRs which would indicate that the program is working.

Quality Assurance Requirements and Description

Mr. Ulshafer stated that draft Revision 14 of the Quality Assurance Requirements and Description (QARD) addresses four issues:

1. Allowance for line ownership of the CAP.

2. Replacement of an "and" with an "or" when utilizing Peer Review/Independent Technical Reviews in Supplement III.

3. Deleting system, structures, and components that are not classified as "important to safety" or "barriers important to waste isolation" from the QARD.

4. Section 2.0, and updating the QARD to reflect the DOE Office of Repository Development's (ORD) reorganization. He estimated an approval date of Revision 14 by March 2004.

Mr. Matula noted that transferring more ownership of the CAP to the line organization may be premature. This may be a good thing to do for a mature organization that has an effective CAP in place. However, in light of the continuing corrective action issues, procedure implementation and compliance issues, and the number of Performance Indicators still in the red, more time and continued OQA surveillance may be appropriate. Mr. Matula stressed the need for DOE to understand that this proposed change to the QARD may be a reduction in commitment, and that DOE should provide to NRC staff the basis and the supporting justification for the proposed change.

The next revision of the QARD following Revision 14 will address the requirements in 10 CFR Part 63, Subpart G, *Quality Assurance*, and NUREG 1804, *Yucca Mountain Review Plan*. This revision will include:

1. A formal review/comment cycle in the second Quarter of Fiscal Year 2004.

2. Comment resolution in the third Quarter of Fiscal Year 2004.

3. A meeting with NRC in the third or fourth Quarter of Fiscal Year 2004.

4. Review by NRC in the fourth Quarter of Fiscal Year 2004.

Mr. Ulshafer said that the goal is to issue an effective revision of the QARD that implements the requirements of 10 CFR Part 63, Subpart G, in the first Quarter of Fiscal Year 2005.

NRC requested a redline, strike-out copy of the QARD showing proposed changes. DOE agreed and will also provide a compliance matrix, currently under development. These documents will assist NRC staff in effectively reviewing the proposed revisions to the QARD.

Environmental Management Site Audits

Mr. Brown discussed the performance of audits of Environmental Management (EM) sites. He said that DOE initiated CR EM-01-D-089 because the Memorandum of Agreement between EM and DOE did not reflect the current EM organization. The corrective actions included the signing of a *Roles and Responsibilities* Memorandum on December 19, 2003, issuing procedure AP-18.4Q, *DOE EM/RW Oversight Process*, which DOE made effective on December 19, 2003. He reported that DOE closed CR EM-01-D-089 on December 29, 2003.

Mr. Brown discussed CR-097, which documented that DOE did not perform required oversight at Savannah River Site, the National Spent Nuclear Fuel Program, and at the Office of River Protection. The corrective actions include developing an audit schedule and performing required audits beginning in March 2004.

Mr. Matula expressed concern about the amount of time that has elapsed since this issue was first identified and that during this time EM performed quality affecting work with no oversight by DOE. Specifically, DOE first identified this issue on June 28, 2001, in DR EM-01-D-089. Then on July 22, 2003, OQA issued CR OQA(O)-03-D-202 (CR-097) which states that audits have not been conducted at a frequency commensurate with the importance of the High Level Waste work, nor have the activities been audited annually at EM High Level Waste facilities at Savannah River and the Office of River Protection. Mr. Matula requested information regarding the sequence of events and a time line regarding this matter. Mr. Brown said that he will provide this information to the NRC On-Site Representatives in the next few weeks. Larry Vaughan (DOE-EM) reported that the DOE field offices have continuously assessed the EM sites since 2001.

Audit/Surveillance Schedule and Results

Mr. Brown provided an overview of the DOE Audit Schedule for the EM organization. He also described how the work that is being done by the EM organization supports specific AMRs. Specifically, three EM facilities -- Savannah River Site, West Valley Demonstration Project, and Office of River Protection -- produce direct feeds into five AMRs that will be used in the Total System Performance Assessment. Similarly, three EM facilities -- Savannah River Site, Idaho National Engineering and Environmental Laboratory, and Hanford -- produce Spent Nuclear Fuel Characterization Reports which are direct feeds into five AMRs that will be used in the Total System Performance Assessment.

Mr. Grooms discussed the OQA internal audits and surveillances completed in the first quarter of Fiscal Year 2004 and surveillances that are in progress. He also discussed Surveillance OQA-SI-04-003 involving an OQA evaluation of BSC procurement actions regarding the design and prototype of the Waste Package Closure System at Idaho National Engineering and Environmental Laboratory. He stated that the work was not associated with EM Spent Nuclear Fuel or High Level Waste activities. As a result of the surveillance, OQA identified three conditions adverse to quality. Specifically, OQA initiated the following CRs: CR-1712 regarding the lack of procurement document as required by procedure (Level B); CR-1714 regarding lack of a survey of the supplier QA program in accordance with the procedure (Level B); and CR-1720 regarding the lack of placement of the supplier on the Qualified Suppliers List, and quality affecting work was being performed (Level A). As a result of the surveillance, BSC

directed the supplier to suspend work. Mr. Grooms stated that OQA is evaluating the issues documented in the CR.

Relative to the Project's performance of joint audits (i.e., DOE/BSC auditors on the same team), Mr. Latta asked how the requirements related to organizational independence would be assured. Mr. Grooms stated that the independent audit of QA did evaluate this area, and no issues were identified. Also, the annual independent audits of QA will continue to evaluate this area and confirm the appropriate independence of the QA organizations.

In conclusion, Mr. Grooms presented the OQA/BSC internal audit schedule for Fiscal Year 2004.

Public Comments:

Ms. Lynch stated in rebuttal to the comment that Mr. McCullum made during the discussion on Trending Program Improvements that DOE has not had a problem in identifying problems, but has had a problem correcting them so that they do not recur. Therefore, an increase in the number of CRs is not good because the problems keep coming back.

Closing Remarks:

Timothy Gunter's (DOE) review of past open action items led to agreement that the nine open items from the previous meeting are closed. NRC and DOE identified four new action items as indicated in Enclosure 5 to this meeting summary.

Date 3/17/04

C. William Reamer, Deputy Director
Division of Waste Management
Office of Nuclear Material Safety
and Safeguards
U.S. Nuclear Regulatory Commission

Date 3/5/04

R. Dennis Brown, Director
Office of Quality Assurance
Office of Civilian Radioactive
Waste Management
U.S. Department of Energy

Date 3/5/04

Joseph D. Ziegler, Director
Office of License Application and Strategy
Office of Civilian Radioactive
Waste Management
U.S. Department of Energy