



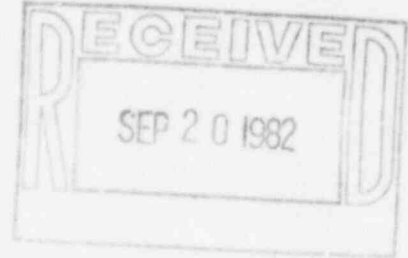
SANDVIK SPECIAL METALS

CORPORATION

(509) 586-4131 • TELEX 152873

P O BOX 6027 • KENNEWICK WASH 99336

September 15, 1982



Mr. Uldis Potapovs
Chief, Vendor Programs Branch
U.S. Nuclear Regulatory Commission
611 Ryan Plaza Drive, Suite 1000
Arlington, Texas 76011

Re: Docket No. 9990076/82-01
Your Letter dated August 19, 1982

Dear Sir:

Attached are the corrective actions for each of the nonconformances that you listed in your letter dated August 19, 1982.

We trust the responses and documentation submitted for each of the identified nonconformances are adequate. Should you have any questions concerning the corrective actions, we will be pleased to discuss them with you.

Very truly yours,

[Signature]
K. C. Bowles, Manager
Quality Assurance

[Signature]
J. A. Lindberg
President

KCB:e

Enclosures:

- 1. Corrective Action for Paragraphs A through I
2. Form QC-011
3. Memo, QA-Audio Visual Presentation, dated March 5, 1979



# SANDVIK SPECIAL METALS

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ENCLOSURE 1

September 15, 1982

Page 1 of 12

CORRECTIVE ACTIONS FOR NONCONFORMANCES LISTED UNDER  
PARAGRAPH A

A.1 ✓

The assigned Quality Assurance Manuals, Process Specifications Manual, and the Quality Assurance Procedure Manual shall be recalled and checked against the Master Manual to assure all are current and up-to-date.

Work station copies will be chained to the work station desk or appropriate receptacle.

A directive will be issued to all people assigned those manuals that it is their responsibility to keep their manual updated and return obsolete copies. The Document Coordinator shall check the procedures returned to assure that all pages in the outdated procedure were returned. The Documentation Coordinator shall follow up on those individuals who have not returned the outdated procedure within the time limit by reporting such individual to the Q. A. Manager. Immediate action shall be taken toward the individuals that neglect to return the procedures.

The above actions will be completed by October 1, 1982.

The document control program for the three manuals shall be placed on a computer program for aiding the Documentation Coordinator those individuals who have not returned or have outdated manuals. This action will be completed by February 15, 1983.

DESIGNATED BY  
Certified By Rheanne Clark

A.2 ✓ The procedure QA-GA-23 will be listed in the Quality Control Matrix. The review and update to the Q. A. Manual did include this procedure, but the revision to the manual was not fully approved at the time of the audit.

The completion date for this item is October 15, 1982.

CORRECTIVE ACTIONS FOR NONCONFORMANCES LISTED UNDER  
PARAGRAPH B

B.1 The form QC011 (see Enclosure 2) was revised May 3, 1982 and implemented by May 15, 1982 to include the identity of the surface measurement equipment that the requirement in QA-SP-45 can be fulfilled.

B.2 The laboratory log record for verification of the digital thermometer was reviewed on April 8, 1982. Even though there was a period during which verification was not performed daily, none of the verification checks indicated that the instrument had been reading incorrectly. Therefore, results obtained with the thermometer during this period are considered valid. Laboratory personnel were verbally counselled regarding the need to adhere strictly to procedures. Daily checks have been performed since April 5, 1982.

In addition to the daily check to be performed by laboratory personnel, the digital thermometer will be placed in the Q.A. calibration overcheck system using a frequency of once a month. The purpose of this is to provide a routine check that the daily verification is being performed and that any deviations or out-of-tolerance conditions are investigated. The Laboratory Supervisor shall make the check and report, in writing, to the Document Coordinator.

Effective date for this item is scheduled for September 30, 1982.

B.3 Laboratory procedures 1300.27 and 1300.28 were issued May 25, 1982 to provide procedural direction of the contractile strain ratio test.

B.3 continued

To determine if other tests were being performed for which there was no written procedure, QCCR sheets were selected at random on September 10, 1982 and the tests specified therein compared against the Laboratory Procedure book index. Existing procedures were available for all tests.

CORRECTIVE ACTIONS FOR NONCONFORMANCES LISTED UNDER  
PARAGRAPH C

The procedure QA-GA-5, paragraph 3.1.1, does not require that material be coded for customers. The form QC110 referenced in paragraph 3.1.1 identifies those customers to which the material is assigned. The form was coded for a customer and distributed per procedure. Not all material in the ingot was used for that customer, as originally planned. The remaining part was later assigned to another customer and the form QC110 did not include the second customer. The procedure and form will be revised to reflect what is needed for similar situations as described above.

The completion date will be September 20, 1982.

CORRECTIVE ACTIONS FOR NONCONFORMANCES LISTED UNDER  
PARAGRAPH D

- D.1        The ultraviolet lamps have been serialized and added to Calibration Procedure QA-GA-15, Appendix 1. Documentation of adequate light intensity was submitted on September 13, 1982 to the Document Coordinator and placed on file.
- D.2        The Weston 703-67 ultraviolet light meter was properly calibrated to NBS standards July 29, 1982. The instrument was added to the Calibration Procedure QA-GA-15, Appendix 1, on September 9, 1982.
- D.3        The ultrasonic standard number 2018 was measured and again recertified and a new calibration card was completed on April 6, 1982. A duplicate copy of all Calibration Record Cards are made and now kept on file by the Q.C./Mfg. Supervisor. This was completed by May 30, 1982.
- D.4        UT Standard F-2002-3 was not in plant as it was sent off-site for conducting a special test. The Calibration Specialist was instructed in May that if standards cannot be located or are out-of-service that it be so noted on the Calibration Card.

CORRECTIVE ACTIONS FOR NONCONFORMANCES LISTED UNDER  
PARAGRAPH E

The procedure NDT-PT-1, Rev. 3, was revised August 27, 1982 to reflect the proper emulsifier.



CORRECTIVE ACTIONS FOR NONCONFORMANCES LISTED UNDER  
PARAGRAPH F

✓ Quality Assurance Manual, Section 1-1, Paragraph 1.2, states:

"To assure that all employees are aware of their responsibilities and understand quality requirements, all newly hired employees attend at least one lecture introducing them to Sandvik Special Metals Quality Assurance Manual and supporting documents. Each employee receives further training on the portions of the Q.A. Manual, Process Specifications and Instructions which concern his individual duties."

A memo on March 5, 1979 (see Enclosure 3) was sent to both Production and Inspection requiring all persons attend the Q.A. audio-visual presentation to assure all employees, exempt included, currently on the payroll did receive the lecture on the Quality Assurance Manual and supporting documents. Also included are copies of various attendance sheets signed by individuals who attended the orientation. (See Attachment A) The training on portions of the Q. A. Manual and Process Specifications which concern his individual duties is so noted on form FP099 as Item 6. (See Attachment B) These records are available and in the personnel file in the Human Resources Department.

There was no documentation of the new employees having attended the Q.A. audio-visual presentation as the form FP099 did not have a specific listing of this training being given. The form FP099 was revised on May 17, 1982 (see Attachment C) where there is a specific item listed showing the new employee received this orientation.

QCI-4 is to outline training for new inspectors hired after April 4, 1978 so the inspector can be permitted to work without supervision at that station. Records are available for persons hired after this date, but the records were not forwarded to the Documentation Coordinator for placement in the Q.A. training file. Steps shall be taken to assure this record is in the proper file. Prior to any upgrade, the Documentation Coordinator will place those records into the training file. Records now on file in the possession of the Supervisor will be forwarded to the Documentation Coordinator. Procedures will be changed to reflect such policy.

Completion date will be September 30, 1982.

CORRECTIVE ACTIONS FOR NONCONFORMANCES LISTED UNDER  
PARAGRAPH G

✓  
Quality Assurance Manual, Section 1-17, Rev. 4, states:  
"Retention periods range from one to ten years minimum,  
depending upon the type of record. The Laboratory  
Procedures are not listed as one being retained for ten  
years. The records show the Process Specification 2431,  
Rev. 0, was originally issued on December 10, 1976.  
This procedure was again revised October 1, 1977, and then  
on February 22, 1979 was revised again. However, due to  
clerical error, the revision was noted revision 3. This  
revision will be changed to read revision 2.

Completion date will be September 15, 1982.

CORRECTIVE ACTIONS FOR NONCONFORMANCES LISTED UNDER  
PARAGRAPH H

✓ SSM takes exceptions to comments in this paragraph. Procedure QA-GA-22, Rev. 2, "Internal Audits" which is also referenced in the Q.A. Matrix outlines those areas and procedures that are audited. Indoctrination of Personnel, Record Storage, and Document Control are areas specifically listed in QA-GA-22 as areas to be audited. Material Control (as outlined in procedure QA-GA-8) is a procedure listed to be audited when several areas, namely Inspection and Production, are audited. Likewise, Procurement or Section 1-7 in the Q.A. Manual is listed as a procedure to audit when Receiving Inspection is being audited.

We therefore feel that the statements in paragraph 4 are not appropriate.

CORRECTIVE ACTIONS FOR NONCONFORMANCES LISTED UNDER  
PARAGRAPH I

SSM shall comply with the procedures in QA-GA-22, "Internal Audit Procedure". Since May 1982, all areas as outlined have been audited. The follow-up audits have been completed. The Production Manager is included on the audit reports.

ENCLOSURE 1 ATTACHMENTS:

- A - Attendance Sheets (4 pages)
- B - Form FP099
- C - Form FP099, Revised 5/17/82

1-9-79

ATTACHMENT A

Page 1 of 4

KAYDELL ROWLES

THE FOLLOWING INSPECTOR'S ATTENDED THE "NEW HIRE  
INDOCTRINATION" FILM.

F. PULLIAM

L. MCGEE

R. COZAD

P. BROWN

T. DUDLEY

V. BUCKENDORF

D. HAMILTON

R. NELSON

S. EHLERS

L. DABBY

L. FRALEY

T. ELY

V. MCNEILL

F. DOTY

H. BESSEC

D. WELCH

*[Handwritten signature]*

IREN S.

1-9-79

ATTACHMENT A

Page 2 of 4

- M. H. Hays
- Mae Kippel
- Juanita Gilchrist
- Clarice Connor
- Nancy Mussouri
- Ronald Blauett
- Jayus A. Sherman
- Jerry Kelly
- Kathy Allen
- R. D. Foster
- D. Finley
- Alicia Lane
- J. E. Waggoner
- S. J. Burrell
- C. S. Larr
- ANDERSON
- KIMSEY
- GRUBBSHOFF

## Attendance for Quality Orientation and Control

The undersigned Attended This session on 3-29-78

550 V. B. Talley Selma Talley  
544 K. J. Sebree  
566 P. A. Englehard Phil Engelhard  
567 B. E. Finley

Shelma Ely,  
Brenda Talley  
Kim Sebree



ATTENDANCE SHEET

Date 1-31-79

(Please sign)

ATTACHMENT A

Page 4 of 4

J. [unclear]

C. [unclear]

V. Tally

M. [unclear]

L. [unclear]

Ch. Hardy

Hardy

E. [unclear]

J. [unclear]

Gene [unclear]

Chas. Howard

C. Howard

D. [unclear]

Melanie Howard

Yvonne [unclear]

Bib [unclear]

M. [unclear]

Absent

R. Kendall

L. Van Cleave

SANDVIK SPECIAL METALS CORPORATION  
NEW EMPLOYEE INSTRUCTION CHECK SHEET

FP099

ATTACHMENT B

Employee: \_\_\_\_\_

Payroll No: \_\_\_\_\_

The following orientation check list must be completed by new employee's supervisor or manager and returned to Finance and Personnel.

1. Tour of work location. \_\_\_\_\_
2. Introduction to appropriate personnel. \_\_\_\_\_
3. Assignment of locker. \_\_\_\_\_
4. Review of Industrial Safety Manual (Read Standards 1.0 through 15.0 and 24.0.) \_\_\_\_\_
5. Issue a pair of safety glasses if required. \_\_\_\_\_
6. Review specifications appropriate to work locations and equipment. \_\_\_\_\_
7. Review special personnel procedures (lunch periods, break times, shift schedules). \_\_\_\_\_
8. Withdrawal of small tools and supplies. \_\_\_\_\_
9. Review work clothes, gloves, safety shoes, appropriate dress codes. \_\_\_\_\_
10. Review time card and TDR card. \_\_\_\_\_
11. Review Planning Job Card and explain planning procedures. \_\_\_\_\_
12. Review safety glass areas as shown by red dots on floor areas for appropriate equipment. Tour Chem Bay, explain safety glass area plus acid tank locations and type of acids and safety showers. \_\_\_\_\_
13. Review disciplinary policy. \_\_\_\_\_

Completed by: \_\_\_\_\_ Date: \_\_\_\_\_

Employee's Signature: \_\_\_\_\_

SANDVIK SPECIAL METALS CORPORATION  
NEW EMPLOYEE INSTRUCTION CHECK SHEET

ATTACHMENT C

EMPLOYEE: \_\_\_\_\_

PR #: \_\_\_\_\_

The following orientation checklist must be completed for all new employees and returned to Human Resources.

1. Material covered in orientation:
  - a. Letter from W. L. Traub re 90-Day Probation/Appraisals (copy to employee).
  - b. Letter from W. L. Traub, "Absences" and Policy and Procedure (copy to employee).
  - c. Disciplinary Policy and Guidelines (copy signed in Personnel File and copy to employee).
  - d. Employee Agreement Relating to Trade Secrets, Inventions, and Patents (copy signed in Personnel File).
  - e. Affirmative Action Policy Statement (copy signed in Personnel File)
  - f. Slide preview of "Shooting for Quality"
2. Tour of work location. \_\_\_\_\_
3. Introduction to appropriate personnel. \_\_\_\_\_
4. Assignment of locker. \_\_\_\_\_
5. Review of Industrial Safety Manual (read Standards 1.0 through 15.0 and 24.0). \_\_\_\_\_
6. Issue a pair of safety glasses, if required. \_\_\_\_\_
7. Review specifications appropriate to work locations and equipment. \_\_\_\_\_
8. Review special personnel procedures (lunch periods, break times, shift schedules). \_\_\_\_\_
9. Withdrawal of small tools and supplies. (To be initialed by VRV)
10. Review work clothes, gloves, safety shoes, appropriate dress codes. \_\_\_\_\_
11. Review time card and TDR card. \_\_\_\_\_
12. Review Planning Job Card and explain planning procedures. \_\_\_\_\_
13. Review safety glass areas as shown by red dots on floor areas for appropriate equipment. Tour chem bay, explain safety glass area plus acid tank locations and types of acids and safety showers. \_\_\_\_\_
14. Review disciplinary policy. \_\_\_\_\_

Completed by: \_\_\_\_\_

Date: \_\_\_\_\_

Employee's Signature: \_\_\_\_\_

SANDVIK SPECIAL METALS CORPORATION

ENCLOSURE 2

Surface Roughness Test

SSM: \_\_\_\_\_

Date: \_\_\_\_\_

Customer: \_\_\_\_\_

PR #: \_\_\_\_\_

Lot #: \_\_\_\_\_

Test Conducted on:

Test Readings in:

Surtronic 3

µins AA

Mezasurf

µins RMS

GAR Visual Comparator # \_\_\_\_\_

Surface Finish:

OD: Bader

ID: Blasted

Etched

Etched

Belt Ground

Other (Specify) \_\_\_\_\_

Other (Specify) \_\_\_\_\_

TUBE #	MAJOR		MINOR	
	OD	ID	OD	ID
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____

\*Refer to QCCR for Number of Samples

# SANDVIK SPECIAL METALS

## MEMORANDUM

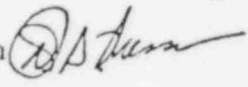
ENCLOSURE 3

Date: March 5, 1979

MEMO NO.:

To: Prod. Supv. W. A. Kline  
Insp. Supv. W. L. Hangartner  
A. W. Brock R. E. Smith  
C. Stacey W. C. Mayer

File No.:

From: F. S. Wesson 

Distribution: JW Nickolaus  
TD Naylor  
DH Bangerter  
KC Bowles  
WG Ruff  
DM O'Sullivan

SUBJECT: QUALITY ASSURANCE AUDIO-VISUAL PRESENTATION

The SSM slide presentation will be shown in the upstairs' lunchroom on March 7, 8 and 12 in accordance with the following schedule.

March 7 (Wednesday)

10:15 a.m. Production Crew - 1/2 Day Shift  
10:45 a.m. Others  
2:45 p.m. Production Crew - 1/2 Day Shift  
3:15 p.m. Others

March 8 (Thursday)

4:45 p.m. 1/2 Swing Shift  
5:15 p.m. 1/2 Swing Shift

March 12 (Monday)

4:45 p.m. 1/2 Swing Shift  
5:15 p.m. 1/2 Swing Shift

Persons who have already seen this presentation are not required to attend.

/sf