



U.S. Department of Energy  
**Office of River Protection**

P.O. Box 450  
Richland, Washington 99352

02-OSR-0363

Mr. R. F. Naventi, Project Manager  
Bechtel National, Inc.  
3000 George Washington Way  
Richland, Washington 99352

Dear Mr. Naventi:

CONTRACT NO. DE-AC27-01RV14136 – QUALITY ASSURANCE (QA) ASSESSMENT  
INSPECTION REPORT, IR-02-010

From July 8 - 12, 2002, the Office of River Protection performed an inspection of Bechtel National, Inc. (BNI) QA, including Records Management and Document Control. The inspectors found BNI was adequately implementing its QA program in the areas reviewed. The inspectors identified one Finding related to a failure to track and to review document revision history, which is documented in the Notice of Finding (Enclosure 1). The inspectors identified good practices related to BNI's use of Subject Matter Experts and the documentation of their audit-specific training.

The inspectors concluded the BNI QA organization, and the BNI Records Management and Document Control functions inspected, complied with the requirements of the QA Manual. These areas were implemented in accordance with approved procedures and were effective.

Detail of the inspection, including the Finding, is documented in the enclosed inspection report (Enclosure 2). You are requested to provide a written response to the Finding described above within 30 days, in accordance with the instructions provided in the Notice of Finding. If you have any questions, please contact me, or your staff may call P. P. Carrier, (509) 376-3574.

Sincerely,

Roy J. Schepens  
Manager

OSR:ARH

Enclosures:

1. Notice of Finding
2. Inspection Report IR-02-010

## NOTICE OF FINDING

The responsibilities of Bechtel National, Inc. (the Contractor) as they relate to conventional non-radiological worker safety and health; radiological, nuclear, and process safety; environmental protection; and quality assurance (QA) are defined in Section C, Standard 7, "Environmental, Safety, Quality, and Health" of the River Protection Project-Waste Treatment Plant (RPP-WTP) Contract.<sup>1</sup>

Section C, Standard 7, Section (e)(3), "Quality Assurance" of the Contract states: "The Contractor shall develop a QA program, supported by documentation that describes overall implementation of QA requirements." The Contractor's QA program is defined in 24590-WTP-QAM-QA-01-001, *Quality Assurance Manual* (QA Manual).

The Contractor's QA Manual Policy Q-05.1, "Instructions, Procedures, and Drawings," Section 3.1.1, states: "Activities affecting quality shall be prescribed by and performed in accordance with documented instructions, procedures, and drawings of the type appropriate to the circumstances that include or reference appropriate quantitative or qualitative acceptance criteria for determining that prescribed activities have been satisfactorily accomplished."

QA Manual, Policy Q-06.1, "Document Control," states, in part, "Implementing documents shall require that a history of changes to quality-affecting documents, including the reasons for the changes, be documented and maintained. This document history shall be reviewed each time additional changes to the document are proposed."

During an inspection of the Contractor's QA program conducted July 8 through 12, 2002, the following Finding was identified:

Procedure 24590-WTP-GPP-CPRO-001, Revision 0, "Production of River Protection Project-Waste Treatment Plant Procedures," Section 3.6.2 (4), states, in part, "The Records section of a procedure may also contain a 'Reason for Revision.' A brief explanation for the procedure should be stated. This statement is not intended to be all inclusive." As defined in 24590-WTP-GPP-CPRO-001, Section 3.2.4, the use of "may" in the procedure "... denotes permission or acceptability, which is neither a recommendation nor a requirement. Compliance is optional."

Contrary to the QA Manual, Policy Q-06.1, described above, several procedures did not contain revision histories and the Contractor's implementing procedures did not contain the requirement to review the revision history each time additional changes to the document are proposed.

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<sup>1</sup> Contract No. DE-AC27-01RV14136, between the U.S. Department of Energy and Bechtel National, Inc., dated December 11, 2000.

This is considered an inspection Finding for failure to adequately prescribe and perform activities affecting quality as required by QA Manual Policy Q-06.1 (see IR-02-010, Section 1.13, IR-02-010-02-FIN).

The Office of River Protection requires the Contractor to provide within 30 days of the date of the cover letter that transmitted this Notice, a reply to this Finding. The reply should include (1) admission or denial of the alleged Finding; (2) the reason for the Finding, if admitted, and if denied, the reason why; (3) the corrective steps that have been taken and the results achieved; (4) the corrective steps that will be taken to avoid further Findings; and (5) the date when full compliance with the applicable commitments will be achieved. When good cause is shown, consideration will be given to extending the requested response time.

U.S. DEPARTMENT OF ENERGY  
Office of River Protection

INSPECTION:           QUALITY ASSURANCE ASSESSMENT

REPORT NO:           IR-02-010

FACILITY:             Bechtel National, Inc.

LOCATION:             3000 George Washington Way  
                          Richland, Washington 99352

DATES:                July 8-12, 2002

INSPECTORS:         A. Hawkins, Senior Technical Regulatory Advisor (Team Leader)  
                          S. Vega, Inspector  
                          S. English, Consultant  
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                          C. Taylor, Consultant

APPROVED BY:        P. Carrier, Verification and Confirmation Official  
                          Office of Safety Regulation

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**EXECUTIVE SUMMARY**  
Quality Assurance Assessment  
Inspection Report IR-02-010

## **INTRODUCTION**

This inspection of the Bechtel National, Inc. (the Contractor) Quality Assurance Manual (QA Manual) covered the following specific areas:

- Management Programs and Processes (Section 1.2)
- Quality Improvement (Section 1.3)
- Documents and Records (Section 1.4)
- Work Processes (Section 1.5)
- Design (Section 1.6)
- Inspection and Acceptance Testing (Section 1.7)
- Management Assessment (Section 1.8)
- Independent Assessment (Section 1.9)
- Document Control Procedures (Section 1.10)
- Distribution and Use of Documents (Section 1.11)
- Major Document Changes (Section 1.12)
- Incorporating Changes (Section 1.13)
- Expedited Document Changes (Section 1.14)
- Document Review (Section 1.15)
- Records Management Procedures (Section 1.16)
- Generation of Records (Section 1.17)
- Authentication of Records (Section 1.18)
- Classification of Records (Section 1.19)
- Receipt Control of Records (Section 1.20)
- Storage of Records (Section 1.21)
- Retention and Disposition of Records (Section 1.22)
- Retrieval of Records (Section 1.23)
- Correcting Information in Records (Section 1.24)
- Replacement of Records (Section 1.25)
- Verification of Previous Commitments to Corrective Actions for Deviation and Corrective Action Reports (DCARs) (Section 1.26)
- Verification of Previous Commitments to Corrective Actions Findings (Section 1.27)

## **SIGNIFICANT OBSERVATIONS AND CONCLUSIONS**

- The Quality Assurance (QA) Manager and the QA organization had adequate functional authority and independence to assure the effective implementation of, and compliance to, the Contractor's QA Manual. The Contractor was meeting its QA requirements, as they

relate to the QA organization. The Contractor's QA Manager was meeting the expectations and requirements of his position. (Section 1.2)

- The Contractor's procedure 24590-WTP-GPP-QA-204, Quality Trending and Analysis, was implemented as written. In addition, the revisions made to procedure 24590-WTP-GPP-QA-101 captured the process used by the Contractor to issue Price-Anderson Amendment Act reports. (Section 1.3)
- The Contractor adequately implemented the requirements in QA Manual Policy Q-06.1, "Documents and Records." (Section 1.4)
- The QA organization review process provided assurance the relevant QA requirements were being adequately incorporated in the applicable project administrative and technical procedures. (Section 1.5)
- The QA function had adequately implemented their defined responsibilities for design control and software control as identified in QA Manual Policies Q-03.1 and Q-03.2. (Section 1.6)
- The QA organization was adequately involved in establishing independent inspection and acceptance testing requirements. (Section 1.7)
- The Contractor had adequately implemented the requirements for management assessment of the QA function with the exception of a failure to formalize QA effectiveness reporting. Based on the Contractor's prompt corrective action, failure to formalize QA effectiveness reporting was a non-cited Finding. (Section 1.8)
- The Contractor had implemented an adequate independent assessment (audit) program, which uses appropriately trained and qualified audit team members. A good practice was noted related to the use of Subject Matter Experts (SMEs) and the documentation of their audit-specific training. (Section 1.9)
- Implementation of the Contractor's procedures 24590-WTP-GPP-PADC-003, "Internal Review and Approval of Documents," 24590-WTP-GPP-PADC-004, "Production of WTP Project Documents," and 24590-WTP-GPP-CPRO-001, "Production of River Protection Project-Waste Treatment Plant Procedures," was adequate and the activities associated with these procedures, including Project Document Control (PDC) activities where applicable, were effective in meeting QA Manual Policy Q-06.1 requirements:

- For establishment of a document control procedure. (Section 1.10)
- For distribution and use of documents, with the exception of one Inspector Follow-up Item (IR-02-010-01-IFI) related to the implementation of the corrective action to ensure obsolete documents were returned to PDC or destroyed. (Section 1.11)
- For major document changes. (Section 1.12)
- For incorporating changes, with the exception of not consistently retaining revision history on each document, nor reviewing the revision history before making additional changes. Finding IR-02-010-02-FIN was written to document the lack of procedural requirements associated with documenting revision history for quality-affecting documents. (Section 1.13)
- For expedited document changes, with the exception of pen and ink changes in the field. The Contractor was in the process of implementing this portion of the expedited change process, therefore, Inspector Follow-up Item (IR-02-010-03-IFI) will be tracked in this area. (Section 1.14)
- For document review. (Section 1.15)
- Implementation of the Contractor's procedure 24590-WTP-GPP-PADC-002, "Project Records Management," was adequate and the activities associated with this procedure, including Project Document Control (PDC) activities where applicable, were effective in meeting QA Manual Policy Q-17.1 requirements:
  - For establishment of a records management procedure. (Section 1.16)
  - For generation of records. (Section 1.17)
  - For authentication of records. (Section 1.18)
  - For the classification of records. (Section 1.19)
  - For receipt control of records. (Section 1.20)
  - For storage of records, with the exception of not formally establishing retrieval times. The lack of formally established retrieval times was addressed during the inspection. (Section 1.21)
  - For the retention and disposition of records. (Section 1.22)
  - For the retrieval of records, with the exception of deficiencies previously documented and not yet corrected. (Section 1.23)
  - For correcting information in records. (Section 1.24)

- For replacement of records. (Section 1.25)
- DCARs 01-QAO-WTP-033-01, 01-QAO-WTP-033-02, 01-QAO-WTP-033-03, and 02-QAO-WTP-003-01 were closed via this inspection report. (Section 1.26)
- The corrective actions for Finding IR-02-003-02-FIN were completed, and this finding can be closed. (Section 1.27)

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# QUALITY ASSURANCE ASSESSMENT REPORT

## IR-02-010

### 1.0 REPORT DETAILS

#### 1.1 Introduction

The River Protection Project-Waste Treatment Project (RPP-WTP) Contractor, Bechtel National, Inc. (the Contractor), was conducting limited construction activities at the time of this inspection. The quality-related design programs were in-place and implemented. This inspection reviewed the Contractor's application of quality assurance (QA) requirements to the limited-construction programs and sampled QA implementation.

In accordance with the RPP-WTP Contract<sup>1</sup> and specifically 10 CFR 830, Subpart A, "Quality Assurance Requirements," the Contractor was required to have a QA Manual that assigned responsibilities and authorities, defined policies and requirements, and provided for the performance and assessment of work. Revision 0 of the Contractor's QA Manual, dated August 31, 2001, was used as the basis for this inspection.

The inspectors reviewed the Contractor's implementing procedures to determine if they complied with the commitments in the QA Manual. In addition, the inspectors assessed the implementation of the Contractor's QA Manual as it related to the limited construction phase of the RPP-WTP Contract to ensure the Contractor was following its program and procedures in the conduct of Quality Level-1 and Quality Level-2 limited-construction functions.

#### 1.2 Management Programs and Processes (Inspection Technical Procedure [ITP] I-101)

##### 1.2.1 Inspection Scope

This assessment evaluated the degree to which the QA Manager accomplished the responsibilities specified in QA Manual Policies Q-01.1, Q-02.1, and Q-16.1 for management programs and processes. The inspectors assessed the implementation of the Contractor's QA requirements, as related to this area, including the authorities, responsibilities, and independence of the QA Manager. To accomplish this, the inspectors selected certain QA Manual requirements in this area and examined processes and documents demonstrating implementation of the requirements. The inspectors also interviewed project and QA management and staff, and examined the QA procedures and activities used to implement the requirements.

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<sup>1</sup> Contract DE-AC27-01RV14136 between the U.S. Department of Energy and Bechtel National, Inc., dated December 11, 2000.

## 1.2.2 Observations and Assessments

The inspectors reviewed the Contractor's organization chart and the QA Manager's position description. The inspectors found both confirmed the QA Manager reported directly to the Corporate QA Manager and had direct access to the Project Manager. The inspectors observed the QA Manager met daily with the Project Manager and the Corporate QA Manager routinely visited to review the status of QA activities. The inspectors questioned the QA Manager regarding his personal involvement in QA activities and whether he was assigned any duties unrelated to his QA responsibilities. The QA Manager confirmed, through reference to his signature on procedures and documents, his personal involvement in providing QA guidance and oversight for the project and he had no peripheral duties. Based on these factors, the inspectors found the QA Manager had adequate functional authority and independence and no duties that would preclude full attention to assigned responsibilities.

The inspectors determined the QA organization conducts a program of audits and surveillances under the aegis of the QA Manager. The inspectors found the QA Manager provided adequate guidance and oversight for the project. QA organization oversight activities are more completely discussed in Section 1.9.

The inspectors discussed with the QA Manager his role in stop work. The Contractor allowed a stop work to be issued by individual staff (for safety-related issues), by management (for any issue it determined to be appropriate) and the QA Manager (for any issue he determined to be appropriate). The inspectors found QA staff had a role in determining the appropriate corrective action and for lifting the stop work order. The QA Manager indicated, to date, no issues required this level of action. The U.S. Department of Energy (DOE) had not issued a stop work to the WTP as managed by the Contractor. The QA Manager noted he had suspended, based on repeat problems, authority for one organization to place agreements for technical services. The inspectors reviewed the documentation for this suspension and found it was adequate and it confirmed the authority of the QA Manager to impose corrective action. Based on these factors, the inspectors determined the QA Manager had adequate authority to direct work be stopped on nonconforming materials or activities.

The inspectors interviewed the QA Manager regarding working interfaces and lines of communication with other departments, industry representatives, and regulatory groups. The QA Manager noted, and the inspectors confirmed, he had a standing weekly interface meeting with the Office of River Protection (ORP) (Office of Safety Regulation and Assistant Manager for Environmental, Safety, and Quality) QA personnel. The QA Manager noted he interfaced with industry representatives through his corporate QA organization. The inspectors discussed the interfaces between the QA organization and other Contractor organizations with the QA Manager, members of the QA Manager's staff, and other Contractor management. The inspectors identified no discrepancies in this area.

The inspectors obtained and reviewed the Contractor's training material for all project staff related to the QA Manual (Course Code 25490-WTP-CRM-TRA-00502, "Quality Assurance Manual Overview," approved September 13, 2001.) The inspectors found the material adequately addressed project QA requirements and how they flow down to the Contractor's work processes. The material also covered individual QA responsibilities. The Training Material

Design Package was reviewed and approved by the QA Manager. Based on this information, the inspectors determined the QA Manager's input for QA indoctrination of personnel outside the QA organization was adequate.

During the inspection, the QA Manager reviewed proposed changes to the QA Manual with the inspectors. On the last day of the inspection (July 12, 2002), the ORP received for review and approval Revision 1 to the QA Manual.<sup>2</sup> The inspectors found the revision was reviewed and approved by both the Contractor's QA Manager and the corporate QA Manager. Based on these factors, the inspectors found the QA Manager meets requirements to develop and maintain the QA Manual, to determine proposed revisions, and to approve revisions.

### **1.2.3 Conclusions**

The inspectors concluded the QA Manager had adequately accomplished the QA Manual-required responsibilities in the area of QA management and processes.

## **1.3 Quality Improvement (ITP I-101)**

### **1.3.1 Inspection Scope**

The purpose of this portion of the inspection was to evaluate two specific subjects in the area of Quality Improvement as they had been applied during the limited-construction phase of the project. The inspectors selected the areas of quality trending and Price-Anderson Amendment Act (PAAA) procedure implementation on which to focus because these two procedures had not been implemented as written during a previous inspection. The inspectors interviewed project and QA management and staff, and reviewed implementing documents.

### **1.3.2 Observations and Assessments**

During an inspection January 7 through 11, 2002, the Contractor told the inspectors data were insufficient to use the established statistical criteria for quality trending and analysis at that time. The inspectors followed up during this inspection to determine whether the statistical criteria had been used. The inspectors reviewed summary results showing the analysis of the statistical criteria provided in the Contractor's procedure 24590-WTP-GPP-QA-204, Revision 0, "Quality Trending and Analysis," and found the statistical criteria were used.

The inspectors interviewed the Manager of QA Programs to determine whether the Contractor had identified any statistically significant trends. The Contractor told the inspectors no statistically significant trends were identified; however, the analysis of the raw data had proven useful in determining criteria levels were not at the correct levels for this project. The Contractor was in the process of re-establishing statistical criteria.

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<sup>2</sup> BNI letter from A. R. Veirup to M. R. Barrett, ORP, "Deliverable 7.2, Quality Assurance Manual – 245690-WTP-QAM-QA-01-001, Revision 1," CCN-035574, dated July 12, 2002.

In addition, during the January inspection, the inspectors identified several instances within the Contractor's procedure 24590-WTP-GPP-QA-101, Revision 0, "Price Anderson Amendments Act Compliance and Reporting," where the procedure was not followed as written. The inspectors interviewed the Manager of QA Programs and the QA Manager, who said a Corrective Action Report (CAR) was written because of the deviations from the procedure identified during the January assessment.

The inspectors requested to obtain and review a copy of the CAR. The Contractor could not locate one; however, an Immediate Procedure Change had been prepared during the January inspection. The inspectors reviewed the changes to the procedure and determined they were sufficient to adequately address the deviations identified in January.

### **1.3.3 Conclusions**

The inspectors concluded the Contractor's procedure 24590-WTP-GPP-QA-204 was implemented as written. In addition, the inspectors concluded the revisions made to procedure 24590-WTP-GPP-QA-101, captured the process used by the Contractor to process PAAA reports.

## **1.4 Documents and Records (ITP I-101)**

### **1.4.1 Inspection Scope**

This assessment evaluated the degree to which the QA Manager, and the QA organization, accomplished the responsibilities specified in QA Manual Policy Q-06.1, Document Control, Sections 2 and 3.7. To accomplish this purpose, the inspectors interviewed Contractor personnel responsible for the preparation, revision, and approval of the QA Manual and implementing procedures. In addition, the inspectors reviewed objective evidence of the process used to develop, control, and release procedures. The scope of this inspection focused on the actions taken by the Contractor's Project Document Control (PDC) staff, and did not include activities performed at the satellite records storage areas.

### **1.4.2 Observations and Assessments**

The inspectors observed the QA Manager, or designee, concurred on the following document control procedures:

- 24590-WTP-GPP-PADC-001, Revision 1, "RPP-WTP Document Numbering"
- 24590-WTP-GPP-PADC-002, Revision 1, "Project Records Management"
- 24590-WTP-GPP-PADC-003, Revision 1, "Internal Review and Approval of Documents"

- 24590-WTP-GPP-PADC-004, Revision 1, “Production of WTP Project Documents.”

The QA Manager’s signature on the initial issue and changes to these procedures verified implementation of the QA Manual requirements.

### **1.4.3 Conclusions**

The inspectors concluded the Contractor adequately implemented requirements in QA Manual Policy Q-06.1, “Documents and Records,” Sections 2 and 3.7.

## **1.5 Work Processes (ITP I-101)**

### **1.5.1 Inspection Scope**

This assessment evaluated the degree to which the QA Manager accomplished the assigned responsibilities specified in QA Manual Policies Q-02.4, Q-05.1, Q-09.1, Q-12.1, Q-12.2, and Q-13.1 that applied during the limited-construction phase of the project. To accomplish this, the inspectors selected requirements of the QA Manual in this area and examined the procedures implementing the requirements and the processes used by the QA organization to obtain assurance the QA requirements were being accomplished as specified. The inspectors interviewed project and QA management and staff and examined the QA activities used to obtain assurance the requirements were being accomplished as required.

### **1.5.2 Observations and Assessments**

The inspectors reviewed the Contractor’s procedures relevant to the preparation, review, and approval of administrative and technical procedures. The inspectors reviewed Contractor procedures 24590-WTP-GPP-PADC-003, Revision 1, "Internal Review and Approval of Documents," and 24590-WTP-GPP-QA-207, Revision 1, “Quality Assurance Review of Documents,” and determined they adequately described a process for the QA Manager’s (or designated alternate) involvement in the process of establishing administrative and technical procedures.

The administrative and technical procedures reviewed included the work activities associated with independent inspection, special processes and work control, and measuring and test equipment calibration. The inspectors determined during an interview with the Contractor’s QA Manager that “Special Reviews” (QA Manual Policy Q-02.4) and “Installed Process Instrumentation” (QA Manual Policy Q-12.2) activities had not been implemented at this phase of the project.

The inspectors verified the QA Manager and staff were adequately involved in the procedure development and approval process using interviews of QA staff and the review of Document Review Requests for six administrative procedures and two technical procedures. When these procedures were submitted to the QA organization for review, the initial review was assigned to

a quality engineer with the relevant training and experience. The Document Review Requests reviewed by the inspectors were:

- 24590-WTP-MN-CON-01-001, Revision 1, “Weld Control Manual”
- 24590-WTP-GPP-CON-7102, Revision 0, “Control of Measuring and Test Equipment”
- 24590-WTP-GPP-SREG-002, Revision 1, “Authorization Basis Maintenance”
- 24590-WTP-GPP-CTRG-002, Revision 3, “Training”
- 24590-WTP-GPP-PDAC-003, Revision 1, “Internal Review and Approval of Documents”
- 24590-WTP-GPP-CON-3303, Revision 0, “Raceways and Accessories”
- 24590-WTP-GPP-CON-3308, Revision 0, “Grounding”
- 24590-WTP-GPP-CON-7104, Revision 1, “Nonconformance Reporting and Control.”

The reviews were performed in accordance with the above Contractor’s procedures and used checklists as a review tool to ensure the relevant QA policy requirements were incorporated into the procedures being reviewed. When satisfied with the procedure’s content, the reviewer recommended approval by the QA Manager. The QA Manager approved the procedures only after being provided assurance the procedure adequately incorporated relevant QA requirements. The checklist and QA engineering review provided the level of assurance the QA Manager needed to approve the procedures.

The inspectors verified the QA Manager and staff monitored quality assurance program implementation for handling, storage, and shipping activities. The Contractor stated this monitoring is accomplished through the surveillance process. The inspectors confirmed this verification by reviewing the following six QA and quality control surveillance reports:

- 24590-WTP-SV-QA-02-021, “Crane and Lifting Equipment,” February 13, 2002
- 24590-WTP-SV-QC-02-012, “Storage Areas,” March 4, 2002
- 24590-WTP-SV-QC-02-015, “Storage Areas,” April 3, 2002
- 24590-WTP-SV-QC-02-024, “Piping Laydown Area,” May 7, 2002
- 24590-WTP-SV-QA-02-072, “Crane Use and Operations,” February 13, 2002
- 24590-WTP-SV-QA-02-146, “Storage,” March 27, 2002.

The inspectors determined the surveillances were adequate to monitor quality assurance program implementation for handling, storage, and shipping activities.

### 1.5.3 Conclusions

The inspectors determined the QA organization review process provided assurance the relevant QA requirements were being adequately incorporated in the applicable project administrative and technical procedures.

## 1.6 Design (ITP I-101)

### 1.6.1 Inspection Scope

This assessment evaluated the degree to which the QA Manager accomplished applicable responsibilities specified in QA Manual Policies Q-03.1 and Q-03.2. To accomplish this purpose, the inspectors selected certain requirements of the QA Manual in this area and examined the procedures implementing the requirements and processes used by the QA organization to obtain assurance the QA requirements are being accomplished as specified. The inspectors interviewed project and QA management and staff and examined the QA activities used to assure the requirements were being accomplished as required.

### 1.6.2 Observations and Assessments

The inspectors verified the QA Manager established the QA program for design control and reviewed the procedures that implemented the requirements. The inspectors confirmed these activities by examining the current QA Manual (24590-WT-QAM-QA-01-001, Policy Q-03.1 for design control, and the *Quality Assurance Provisions Document* 24590-WTP-QPD-QA-01-001, Revision 1, maintained by the QA organization.

The *Quality Assurance Provisions Document* provides the link between the QA Manual and the implementing procedures. The inspectors selected five procedures that represented key elements of design control and verified the QA Manager had reviewed and approved the documents. Each approved procedure indicated it was verified against the requirements of the QA Manual. The following procedures were examined and determined to be adequate:

- 24590-WTP-3DP-GO4B-00027, Revision 0, “Design Verification”
- 24590-WTP-3DP-GO4B-00037, Revision 0, “Engineering Calculations”
- 24590-WTP-3DP-GO4B-00049, Revision 0, “Engineering Specification”
- 24590-WTP-3DP-GO4T-00901, Revision 0, “Design Change Control”
- 24590-WTP- GPP-CON-7101, Revision 1, “Construction Quality Control Program.”

QA implemented procedure 24590-WTP-GPP-QA-207 to guide their review activity.

The inspectors verified the QA Manager established the QA program for software control and reviewed the procedures that implemented the requirements. The inspectors confirmed this activity by examining QA Manual Policy Q-03.2 for software quality, and the *Quality Assurance Provisions Document*. This document provides the link between the QA Manual and the implementing procedures.

The inspectors selected three procedures that represented key elements of software control and verified the QA Manager had reviewed and approved the documents. Each approved procedure was also verified against the requirements of the QA Manual. The following procedures were examined and determined to meet the requirements:

- 24590-WTP-GPP-IT-005, Revision 1, “Project IT Change Control Process”
- 24590-WTP-GPP-IT-008, Revision 0, “Software Life Cycle Management”
- 24590-WTP-GPP-IT-001, Revision 1, “Use of Quality Affecting Software Applications.”

The inspectors confirmed QA staff participation in preparing software control procedures and the delivery of training to involved staff. A Senior Quality Engineer was a key participant in the team that prepared procedure 24590-WTP-GPP-IT-008. She also participated in the revision process for 24590-WTP-GPP-IT-005 and 24590-WTP-GPP-IT-001. In addition, she was a member of the panel discussion at the software training, “IT Answers for WTP Responsible Managers and Project Program Sponsors,” offered on April 25 and May 9, 2002. The Senior Quality Engineer was also the designated QA representative on the IT Change Control Board that reviews and controls requests for new software within the company.

### **1.6.3 Conclusions**

The QA function adequately implemented their defined responsibilities for design control and software control as identified in QA Manual Policies Q-03.1 and Q-03.2.

## **1.7 Inspection and Acceptance Testing (ITP I-101)**

### **1.7.1 Inspection Scope**

This assessment evaluated the degree to which the QA Manager and the QA organization accomplished applicable responsibilities specified in QA Manual Policies Q-09.1, Q-10.1, Q-11.1, and Q-14.1. To accomplish this purpose, the inspectors reviewed the Contractor’s procedures applicable to the planning of inspections and acceptance testing. Implementation of the Contractor’s inspection and acceptance testing procedures was evaluated previously and reported in Inspection Report IR-02-003, dated March 2002.

### **1.7.2 Observations and Assessments**

The inspectors reviewed the Contractor’s procedures relevant to establishing inspection and acceptance testing requirements. The inspectors reviewed Contractor procedures 24590-WTP-GPP-CON-7101; 24590-WTP-GPP-CON-1201, Revision 0, “Construction Work Packages”; and 24590-WTP-GPP-CON-3105, Revision 1, “Special Instructions for Construction Work Packages.” The inspectors determined these procedures adequately described a process for the QA Manager’s (or designated alternate) involvement in establishing inspection and acceptance testing requirements.

Section 1.5 of this inspection report describes the process used by the QA Manager to ensure the inspection and acceptance testing procedures adequately incorporate all relevant QA program requirements. In addition, to ensure the requirements are correctly incorporated into the documents, the inspectors verified Contractor procedure 24590-WTP-GPP-QA-207 was used to review technical documents containing inspection and acceptance testing requirements.

The inspectors reviewed Contractor procedures 24590-WTP-GPP-CON-7104 and 24590-WTP-GPP-CON-7101 and determined they adequately included procedures for identifying the quality status of items. Implementation of quality status controls was evaluated previously and reported in Inspection Report IR-02-003, dated March 2002.

### **1.7.3 Conclusions**

The inspectors determined the QA organization is adequately involved in establishing independent inspection and acceptance testing requirements in accordance with the QA Manual.

## **1.8 Management Assessment (ITP I-101)**

### **1.8.1 Inspection Scope**

This assessment evaluated the degree to which the QA Manager accomplished the responsibilities specified in QA Manual Policies Q-01.1 and Q-18.3. The inspectors selected certain requirements of the QA Manual in this area and examined processes and documents demonstrating implementation of the requirements. To perform this assessment, the inspectors interviewed QA management and staff and examined the QA procedures and activities used to implement the requirements.

### **1.8.2 Observations and Assessments**

The inspectors confirmed the QA Manager performed evaluations and self-assessments on a planned and periodic basis to verify the QA Program was being effectively implemented. The inspectors examined evidence of a management assessment of the QA Program, a Management Assessment Report for Management Assessments, a Line Management Assessment Report, examination of QA performance indicators, and several surveillances of activities within the QA function. Table 1 lists these activities.

The inspectors examined the surveillance schedule for 2002, Revision 3, which was signed by QA management in February 2002. The schedule indicated every principle subject area that would be inspected every month. The inspectors and the newly appointed Manager for Surveillance and Audits discussed the effectiveness of the schedule. The manager recognized he wanted a new tool to aid in the planning of near-term work that included identification of what was done.

The Manager of Surveillance and Audits was able to identify the surveillances that had occurred by referring to the “Bingo Board” that is prominently displayed in the main lobby to indicate the topic areas and general results (e.g., green, yellow, red) for the surveillances conducted in the previous 6 months. The “Bingo Board” demonstrated surveillances were focused on areas where project activities were occurring.

**Table 1 - Activities Examined to Verify Implementation of Management Assessments**

<b>Document Number</b>	<b>Information</b>
CCN 027869, Internal Memorandum, January 31, 2002	“RPP-WTP Quarterly QA Performance Indicators, Fourth Quarter CY 2002”
CCN 030135, Internal Memorandum, March 4, 2002	The Contractor’s Manager of Quality Assurance conducted the 2002 Annual Quality Assurance Program Evaluation. The WTP QA Manager indicated this was used as his management assessment of the QA Program.
CCN 031803, Internal Memorandum, date not identified	“RPP-WTP-Quarterly QA Performance Indicators, First Quarter CY 2002”
CCN 035583	Information was presented as “RPP-WTP QA Performance Indicator Report for the Year 2001.” Corrective Action Report 24590-WTP-CAR-QA-02-135 was written to document the information was presented to management but was never officially formalized and presented as an annual report.
CCN 036341, Internal Memorandum, July 2, 2002	“Revision of Management Assessment Schedule,” 24590-WTP-MAS-MG-01-002, Revision 4, documented the annual management assessment schedule and indicated the management assessment for quality is scheduled for November 2002.
24590-WTP-MAR-QA-02-001, Rev. 0	“RPP-WTP Management Assessment of the Management Assessment System”
24590-WTP-MAR-QA-02-002, Rev. 0	“Line Management Assessment Report, Review of Corrected on the Spot (COTS) Application in the QA Surveillance Program.”
24590-WTP-SV-QA-02-089	“Surveillance of Procurement, PCAR Readiness”
24590-WTP-SV-QA-02-090	“Surveillance of Procurement, PCAR Readiness”
24590-WTP-SV-QA-02-119, Rev. 0	“Surveillance Report of PCAR Readiness Assessment Checklist Verification QA 23-71”
24590-WTP-SV-QA-02-120, Rev. 0	“Surveillance Report of PCAR Readiness Assessment Checklist Verification QA 11-22”
24590-WTP-SV-QA-02-132	“Follow-on to previous surveillance 24590-WTP-SV-QA-01-097, Verification of Closed LCAR Items IHS-20, 26, 27, 28, 29, 30, and 31”
24590-WTP-SV-QA-02-142	“Surveillance of Construction—Welding,” which resulted in CAR No. 24590-WTP-CAR-QA-02-062
24590-WTP-SV-QA-02-167	“Surveillance of Checking of Engineering Drawings”
24590-WTP-SV-QA-02-187	“Surveillance of Construction—Training,” verification of corrective actions for CAR No. 24590-WTP-CAR-QA-02-046
24590-WTP-SV-QA-02-223, Rev. 0	“Surveillance Report on Follow-up on CAR”
24590-WTP-SV-QA-02-265	“Surveillance of Field Document Control”
24590-WTP-SV-QA-02-322, Rev. 0	“Surveillance Report Verifying QAIS System CARs Processed Through PDC”
24590-WTP-SV-QA-02-339	“Surveillance to Verify Corrective Action to CAR No. 24590-WTP-CAR-QA-02-076”

Procedure 24590-WTP-GPP-MGT-002, Revision 1, “Project Management Assessment,” Section 3.2.4, stated: “The Quality Assurance manager or designee is...responsible for: Coordinating an annual integrated project management review and evaluation of data from various internal and external sources to identify problems that hinder the organization’s ability to achieve its mission and performance objectives, and to encourage continuous improvement.”

Section 3.9, Review and Analysis, stated, in part:

- “3.9.1 Project Manager or designee: Annually (as a minimum), with the assistance of the Quality Assurance (QA) organization, review and evaluate data from management assessments and various internal and external sources and indicators to identify problems that hinder the organization’s ability to achieve its mission, performance objectives, and encourage continuous improvement.
- Project Manager or designee: Document the review and analysis in a report, and submit to PDC for distribution of the report to appropriate management.”

The Quality Assurance organization had completed and presented reports to senior management on program effectiveness. These reports were not formalized in a document and submitted to PDC. To comply with the identified requirements, reports must be formally documented and issued to PDC for record purposes. The Contractor initiated CAR No. 24590-WTP-CAR-QA-02-135 to identify and correct this situation. The inspectors reviewed this CAR and found it adequately addressed the deficiency. This would be considered an inspection finding; however, because this issue met the non-cited Finding criteria in Inspection Administrative Procedure A-104, “Inspection Performance,” a Finding was not issued. Specifically, the issue was not programmatic and was entered into the Contractor’s corrective action program for timely corrective action.

The inspectors confirmed the internal audit schedule was adequate to cover the current project activities.

### **1.8.3 Conclusions**

The inspectors concluded the Contractor had adequately implemented the requirements for management assessment of the QA function with one identified non-cited Finding for failure to document the review and evaluation of management assessments and other indicators.

## **1.9 Independent Assessment (ITP I-101)**

### **1.9.1 Inspection Scope**

The inspectors evaluated the degree to which the QA Manager accomplished responsibilities specified in QA Manual Policies Q-01.1, Q-02.3, and Q-18.1, regarding independent assessment. The inspectors assessed implementation of the Contractor’s QA requirements, as related to this area, applied during the limited-construction phase of the project. The inspectors selected certain

requirements of the QA Manual in this area and examined the objective evidence of the procedures and processes used to implement the requirements.

### **1.9.2 Observations and Assessments**

The inspectors reviewed the Contractor procedure 24590-WTP-GPP-QA-203, Revision 0. “Auditor/Lead Auditor Training and Qualification,” related to the qualification of audit team participants. The inspectors determined the procedure adequately defined the requirements for technical specialist and auditor training, and lead auditor qualification and certification. The inspectors reviewed the qualification and certification documentation for three individuals. The inspectors determined the qualifications were based on passing a written examination and the individuals were qualified in accordance with the requirements established in the procedure.

The Office of Safety Regulation Inspection Report IR-02-001, dated February 2002, identified inadequate documentation of auditor qualification and the lack of use of technical specialists on audit teams. The inspectors verified the three individuals currently qualified as auditors had their qualifications adequately documented. The inspectors also verified technical specialists were used in two of four audit reports reviewed.

The inspectors reviewed the current audit schedule, 24590-WTP-SC-QA-01-002, Revision 4, approved July 2, 2002. The inspectors selected four completed audits from the schedule, reviewed the audit reports, and determined 1) the audits were being performed, 2) the audits used qualified audit personnel, and 3) the audit team members were independent of the work audited. The following audit reports were reviewed and determined to meet the requirements:

- 24590-WTP-IAR-QA-01-003, “Process Technology”
- 24590-WTP-IAR-QA-02-003, “Price-Anderson Act Amendment” (used two Subject Matter Experts [SMEs], i.e., technical specialists)
- 24590-WTP-IAR-QA-02-002, “Project Procurement Activities”
- 24590-WTP-IAR-QA-02-004, “Authorization Basis Maintenance” (used two technical specialists).

The inspectors identified a good practice during evaluation of the Contractor’s audit process. The PAAA audit used two SMEs that were PAAA specialists at two other DOE sites. Their involvement and Contractor-specific audit process training were documented in the introduction to the audit report.

### **1.9.3 Conclusions**

The inspectors determined the Contractor has implemented an adequate independent assessment (audit) program which uses appropriately trained and qualified audit team members.

## **1.10 Document Control Procedures (ITP I-131)**

The Document Control portion of this inspection focused on the actions performed by the Contractor's PDC, and did not include activities performed at the satellite records storage areas. In addition, the documents selected to review for the requirements described below were limited to implementing procedures.

### **1.10.1 Inspection Scope**

This assessment evaluated the degree to which the Contractor's document control procedures described implementation of the requirements specified in QA Manual Policy Q-06.1, Document Control, Section 3.1, "General." The inspectors assessed implementation of the Contractor's QA requirements, as related to this area, applied at the start of the limited-construction phase of the project. The inspectors reviewed implementing procedures and processes. To perform this assessment, the inspectors interviewed document control management and staff, and reviewed procedures within the PDC.

### **1.10.2 Observations and Assessments**

The inspectors interviewed PDC management and staff. In addition, the inspectors reviewed procedures 24590-WTP-GPP-PADC-004, "Production of WTP Project Documents," and 24590-WTP-GPP-CPRO-001, "Production of River Protection Project-Waste Treatment Plant Procedures," to verify the preparation, issuance, and change of documents were controlled as required by QA Manual Policy Q-06.1. The inspectors determined the procedures to be adequate.

The inspectors confirmed preparation, issuance, and change of documents were controlled by these procedures. In addition, the inspectors reviewed the Contractor's controlled-documents list and lists of controlled documents for several copyholders. The inspectors determined the two lists to be adequate.

The inspectors reviewed the following documents and changes to documents, and confirmed they were reviewed for adequacy and approved for use by authorized personnel:

- 24590-WTP-GPP-QA-201, Revisions 0 and 2, "Corrective Action"
- 24590-WTP-GPP-CON-3104, Revisions 0 and 1, "As-Built Drawings"
- 24590-WTP-GPP-SIND-008, Revision 0 and Interim Change 0A, "Lockout/Tagout"
- 24590-WTP-3DP-G03B-010, Revision 1, "Engineering Planning and Control."

### **1.10.3 Conclusions**

The inspectors concluded the Contractor's implementing documents adequately describe the preparation, issuance, and change of procedures.

## **1.11 Distribution and Use of Documents (ITP I-131)**

### **1.11.1 Inspection Scope**

This assessment evaluated the degree to which the Contractor's procedures described implementation of the requirements specified in QA Manual Policy Q-06.1, Document Control, Section 3.2, "Distribution and Use of Documents." The inspectors assessed implementation of the Contractor's QA requirements, as related to this area, applied during the limited-construction phase of the project. The inspectors reviewed implementing procedures and processes. To perform this assessment, the inspectors interviewed document control management and staff, and reviewed documents within PDC.

### **1.11.2 Observations and Assessments**

The inspectors reviewed the Contractor's procedures to verify the distribution and use of procedures, including changes and editorial corrections to procedures, included the following controls:

- Controlled procedures were identified.
- Controlled procedures were reviewed for completeness and approved before distribution.
- A method was established to ensure the correct controlled procedures, either in hardcopy or electronic media, were distributed to, or made available to, and used at the work location.
- Effective dates were established for approved procedures.
- A method was established to identify the status of each procedure the Contractor was required to control.

The inspectors determined the requirements were adequate for control of procedures.

The inspectors reviewed objective evidence the following documents were reviewed for completeness and approved before distribution:

- 24590-WTP-PER-M-02-001, Revision 0, Material Selection for Building Secondary Containment Leak Detection
- 24590-PTF-PER-M-02-005, Revision 0, Flooding Volume for PT Elevation 0 –45'
- 24590-PTF-PER-M-02-006, Revision 0, Sump Data – PT Facility Elevation 0 and –45'.

The Contractor used a checklist to review incoming documents for completeness. The checklist was not considered a record and was not maintained as such. The stamp was considered the objective evidence of review for completeness. The stamp was initialed and dated and read

“Issued by RPP-WTP PDC.” The inspectors observed the stamp on each permit and determined the requirements were met for that particular document type.

In addition, QA Manual Policy Q-06.1, Section 3.2, required, in part: “A method shall be established to ensure the disposition of obsolete or superseded documents so they are controlled and not used to perform work.”

The Contractor's Procedure 24590-WTP-GPP-PADC-002, Subsection 3.5.5.1, addressed this requirement by stating: “When the old revision is no longer effective, the document may be returned to PDC for destruction, or the recipient may notify PDC, in writing, indicating that the document has been destroyed.” The use of the word “may” in two places in this procedure makes this non-mandatory, and thus, it is not a requirement.

In order to correct the deficiency described above, the Contractor developed labels to affix to the RPP-WTP Document Distribution Receipt forms. The labels direct the controlled document owner to initial on the line provided as to whether they returned or destroyed the obsolete document. The inspectors reviewed this corrective action and found it adequately addressed the deficiency. The inspectors will verify the implementation of the corrective action during a future inspection, so this will be identified as Inspector Follow-up Item IR-02-010-01-IFI.

The inspectors did not make this a Finding because no obsolete documents were in use. The inspectors did not confirm copyholders were using the correct documents during this inspection. The inspectors focused on the process used by PDC to ensure the copyholders received the correct documents, and returned or destroyed the obsolete ones.

The inspectors reviewed three RPP-WTP Document Distribution Receipt forms to confirm the Contractor had established and implemented a method to ensure the correct controlled documents were made available to copyholders. The inspectors determined the forms were an adequate method to confirm this.

### **1.11.3 Conclusions**

The inspectors concluded the Contractor had established adequate controls for distribution and use of procedures, including changes, with the exception of the method to ensure disposition of obsolete or superseded procedures.

## **1.12 Major Document Changes (ITP I-131)**

### **1.12.1 Inspection Scope**

This assessment evaluated the degree to which the Contractor's procedures described implementation of the requirements specified in QA Manual Policy Q-06.1, Document Control, Section 3.3, “Major Document Changes.” The inspectors assessed implementation of the Contractor's QA requirements, as related to this area, applied during the limited-construction phase of the project. The inspectors reviewed implementing procedures and processes. The

inspectors also interviewed document control management and staff, and reviewed procedures and procedure revisions within PDC.

### **1.12.2 Observations and Assessments**

The inspectors reviewed major changes to the following procedures to verify the reviews and approvals of the changes were the same as the original:

- 24590-WTP-GPP-QA-201, Revisions 0 and 2, "Corrective Action"
- 24590-WTP-GPP-CON-3104, Revisions 0 and 1, "As-Built Drawings"
- 24590-WTP-GPP-SIND-008, Revision 0 and Interim Change 0A, "Lockout/Tagout"
- 24590-WTP-3DP-G03B-010, Revision 1, "Engineering Planning and Control."

Approvals on the above revisions and interim changes were the same as the original procedure. Before the inspection, the Contractor had reviewed this requirement and identified several deviations, which they documented in CAR No. 24590-WTP-CAR-QA-02-130. The inspectors reviewed the CAR and determined it was adequate.

All Contractor personnel had access to previous revisions to the procedures in hard copy through PDC. In addition, Contractor personnel had access to the current revision to each procedure on-line. The inspectors verified current revisions of procedures were available on-line by confirming with the PDC staff the computer printed procedure was the most recent. The inspectors performed this confirmation for the following document control and records management procedures:

- 24590-WTP-GPP-PADC-002, Revision 1, "Project Records Management"
- 24590-WTP-GPP-PADC-003, Revision 1, "Internal Review and Approval of Documents"
- 24590-WTP-GPP-PADC-004, Revision 1, "Production of WTP Project Documents"
- 24590-WTP-GPP-PADC-006, Revision 0, "Correspondence Preparation and Control"
- 24590-WTP-GPP-CPRO-001, Revision 0, "Production of River Protection Project – Waste Treatment Plant Procedures."

The inspectors determined each of the procedures was the most current revision.

### **1.12.3 Conclusions**

The inspectors concluded the Contractor had adequately implemented the requirements of QA Manual Policy Q-06.1, Section 3.3, for major document changes of procedures.

## **1.13 Incorporating Changes (ITP I-131)**

### **1.13.1 Inspection Scope**

This assessment evaluated the degree to which the Contractor's procedures described implementation of the requirements specified in QA Manual Policy Q-06.1, Document Control, Section 3.5, "Incorporating Changes." The inspectors assessed implementation of the Contractor's QA requirements, as related to this area, applied during the limited-construction phase of the project. The inspectors reviewed implementing procedures and processes. The inspectors interviewed document control management and staff, and reviewed procedures within PDC.

### **1.13.2 Observations and Assessments**

The inspectors verified through review of Contractor procedure 24590-WTP-GPP-CPRO-001 that this procedure included a method to incorporate changes. However, the inspectors reviewed a sample of nine procedures and identified three procedures that did not contain the required history of changes, including the reasons for the changes.

Procedure 24590-WTP-GPP-CPRO-001, Section 3.6.2 (4) states, in part: "The Records section of a procedure may also contain a Reason for Revision. A brief explanation for the procedure should be stated. This statement is not intended to be all inclusive." Procedure 24590-WTP-GPP-CPRO-001, Section 3.2.4, defines the word 'may' as follows: "May – denotes permission or acceptability, which is neither a recommendation nor a requirement. Compliance is optional." This is a reduction from the QA Manual Policy Q06.1 requirement. In addition, the inspectors could not locate an implementing procedure that contained a requirement that the revision history be reviewed each time additional changes to a procedure were proposed. This deviation from the QA Manual requirement is considered a Finding for failure to have adequate procedures as required in QA Manual Policy Q05.1 (IR-02-010-02-FIN).

The inspectors notified the procedure custodian (i.e., the Commissioning and Training Area Procedures Manager) of this deviation, and the procedure custodian wrote CAR No. 24590-WTP-CAR-QA-02-136 to document the deviation. The inspectors interviewed the procedure custodian and reviewed the CAR to verify it addressed the entire requirement and determined it was complete. In addition, the procedure custodian showed the inspectors the modified draft revision to the procedure, which contained the requirement for the revision history and the review of the history before each proposed revision. The inspectors determined the CAR and the proposed procedure revision addressed the circumstances leading to the Finding described above.

### **1.13.3 Conclusions**

The inspectors concluded the Contractor had adequately implemented the requirements of QA Manual Policy Q-06.1, for incorporating changes in procedures, with the exception of the above Finding (IR-02-010-02-FIN) regarding maintaining history of document revisions.

## **1.14 Expedited Document Changes (ITP I-131)**

### **1.14.1 Inspection Scope**

This assessment evaluated the degree to which the Contractor's procedures described implementation of the requirements specified in QA Manual Policy Q-06.1, Document Control, Section 3.6, "Expedited Document Changes." The inspectors assessed implementation of the Contractor's QA requirements, as related to this area, applied during the limited-construction phase of the project. The inspectors reviewed implementing procedures and processes. The inspectors also interviewed document control management and staff within PDC.

### **1.14.2 Observations and Assessments**

In the entrance meeting, the inspectors learned the Contractor had performed a gap analysis before the inspection, and received a brief description of the deviations identified. One of the deviations was the Contractor had not established a method for performing pen and ink changes to a procedure if an activity cannot be performed as listed, and the change process would cause unreasonable delays. The inspectors reviewed the draft revision to procedure 24590-WTP-GPP-CPRO-001 to verify a method for pen and ink changes would be included. The draft revision included provision for such changes. Completion of the revision and implementation of the expedited change process will be tracked as an inspector follow-up item (IR-02-010-03-IFI).

### **1.14.3 Conclusions**

The inspectors concluded the Contractor had not implemented the requirements of QA Manual Policy Q-06.1, Sections 3.6.1, 3.6.2, and 3.6.3, for expedited document changes of procedures. An inspector follow-up item (IR-02-010-03-IFI) will be tracked in this area.

## **1.15 Document Review (ITP I-131)**

### **1.15.1 Inspection Scope**

This assessment evaluated the degree to which the Contractor's procedures described implementation of the requirements specified in QA Manual Policy Q-06.1, Document Control, Section 3.7, "Document Review." The inspectors assessed implementation of the Contractor's QA requirements, as related to this area, applied during the limited-construction phase of the project. The inspectors reviewed implementing procedures and processes. The inspectors also interviewed document control management and staff, and reviewed documents within PDC.

### **1.15.2 Observations and Assessments**

The inspectors reviewed Contractor procedure 24590-WTP-GPP-PADC-003A. The requirements of the QA Manual Policy Q-06.1, Section 3.7, were included in Section 3.1 of the

procedure. The inspectors reviewed the procedure review packages for each of the following documents to confirm review requirements were implemented:

- 24590-WTP-GPP-QA-201, Revisions 0 and 2, "Corrective Action"
- 24590-WTP-GPP-CON-3104, Revisions 0 and 1, "As-Built Drawings"
- 24590-WTP-GPP-SIND-008, Revision 0 and Interim Change 0A, "Lockout/Tagout"
- 24590-WTP-3DP-G03B-010, Revision 1, "Engineering Planning and Control."

The inspectors confirmed someone other than the preparer of the procedure performed the reviews of these procedures. The inspectors reviewed documented evidence the QA organization reviewed the procedures and changes. The inspectors confirmed the mandatory comments on the procedures were resolved before approval and issuance of the document. The inspectors determined the requirements of the QA Manual were adequately implemented.

### **1.15.3 Conclusions**

The inspectors concluded the Contractor had adequately implemented the requirements of QA Manual Policy Q-06.1, Section 3.7, for document review of procedures.

## **1.16 Records Management Procedures (ITP I-131)**

The Records Management portion of this inspection focused on the actions performed by the Contractor's PDC, and did not include activities performed at the satellite records storage areas. This portion of the inspection focused on procedures, and some design drawings.

### **1.16.1 Inspection Scope**

This assessment evaluated the degree to which the Contractor's records management procedures described implementation of the requirements specified in QA Manual Policy Q-17.1, Quality Assurance Records, Section 3.1, "General." The inspectors assessed implementation of the Contractor's QA requirements, as related to this area, applied during the limited-construction phase of the project. The inspectors reviewed implementing procedures and processes. The inspectors also interviewed records management staff, and reviewed records maintained by PDC.

### **1.16.2 Observations and Assessments**

The inspectors confirmed Contractor procedure 24590-WTP-GPP-PADC-002 adequately addressed records management requirements as specified in QA Manual Policy Q-17.1, Section 3.1. The inspectors also verified the procedure was being followed and records were identified, generated, received as records, distributed, maintained, and controlled as required. This verification was accomplished by following the processes described in the procedure through interviews of document control management and staff, and by reviewing documents in PDC. The inspectors determined implementation of the procedure was adequate.

### **1.16.3 Conclusions**

The inspectors determined the Contractor's procedures adequately addressed records management requirements. Implementation of the Contractor's Project Records Management procedure in this area was determined to be adequate and the activities associated with this procedure were effective in meeting the QA Manual Policy Q-17.1, Section 3.1, requirements.

## **1.17 Generation of Records (ITP I-131)**

### **1.17.1 Inspection Scope**

This assessment evaluated the degree to which the Contractor's procedures described implementation of the requirements specified in QA Manual Policy Q-17.1, Quality Assurance Records, Section 3.2, "Generation of Records." The inspectors assessed implementation of the Contractor's QA requirements, as related to this area, applied during the limited-construction phase of the project. The inspectors reviewed implementing procedures and processes. The inspectors also interviewed records management staff, and reviewed records maintained by PDC.

### **1.17.2 Observations and Assessments**

The inspectors confirmed the Contractor's Project Records Management procedure adequately addressed requirements for the generation of records as specified in QA Manual Policy Q-17.1. The inspectors also verified the procedure was being followed and records were properly generated, legible, accurate, and complete.

In addition, the inspectors verified the following:

- Procedures identified the records generated as a result of implementation of the procedure
- Records were traceable to an associated item or activity
- Records properly reflected the work done.

The inspectors accomplished this by interviewing document control management and staff, reviewing procedures, and locating the corresponding records (e.g., vendor audits, surveillances, and internal audits) in PDC to ensure they met the procedure criteria. The inspectors determined implementation of the procedure was adequate.

### **1.17.3 Conclusions**

The inspectors determined implementation of the Contractor's Project Records Management procedure in this area is adequate and PDC activities associated with this procedure were effective in meeting QA Manual Policy Q-17.1, Section 3.2, requirements for generation of records.

## **1.18 Authentication of Records (ITP I-131)**

### **1.18.1 Inspection Scope**

This assessment evaluated the degree to which the Contractor's procedures described implementation of the requirements specified in QA Manual Policy Q-17.1, Quality Assurance Records, Section 3.3, "Authentication of Records." The inspectors assessed implementation of the Contractor's QA requirements, as related to this area, applied during the limited-construction phase of the project. The inspectors reviewed implementing procedures and processes. The inspectors also interviewed records management staff, and reviewed records maintained by PDC.

### **1.18.2 Observations and Assessments**

The inspectors confirmed the Contractor's Project Records Management procedure adequately addressed requirements for the authentication of records as specified in QA Manual Policy Q-17.1, Section 3.3. The inspectors also verified the procedure was being followed, and records were properly authenticated, by having authorized personnel stamp the record, initial, or sign and date the record. The inspectors verified these activities by interviewing document control management and staff, reviewing procedures, and locating the corresponding records in PDC to ensure they met the procedure criteria. The inspectors determined the authentication of records process was adequate.

The inspectors noted, as of the time of the inspection, the PDC did not maintain records whose nature precludes stamping, initialing, or signing (such as recorded on magnetic tape or optical media), and therefore, had no provisions for controlling such records. QA Manual Policy Q-17.1, Section 3.3, contained requirements for such records. Thus, guidance was available if future Contractor activities would require PDC to maintain such records.

### **1.18.3 Conclusions**

The inspectors determined implementation of the Contractor's Project Records Management procedure is adequate and PDC activities associated with this procedure were effective in meeting QA Manual Policy Q-17.1, Section 3.3, requirements for authentication of records.

## **1.19 Classification of Records (ITP I-131)**

### **1.19.1 Inspection Scope**

This assessment evaluated the degree to which the Contractor's procedures described implementation of the requirements specified in QA Manual Policy Q-17.1, Quality Assurance Records, Section 3.4, "Classification of Records." The inspectors assessed implementation of the Contractor's QA requirements, as related to this area, applied during the limited-construction phase of the project. The inspectors reviewed implementing procedures and processes. The inspectors also interviewed records management staff and reviewed records maintained by PDC.

### **1.19.2 Observations and Assessments**

The inspectors confirmed Contractor's Project Records Management procedure adequately addressed requirements for the classification of records as specified in QA Manual Policy Q-17.1. The inspectors also verified the procedure was being followed, records were properly classified as lifetime or nonpermanent records, and those classifications met QA Manual requirements. The inspectors accomplished this verification by interviewing document control management and staff, reviewing procedures, and locating the corresponding records in PDC to ensure they met the procedure criteria. The inspectors determined implementation of the procedure was adequate.

The inspectors noted, per the Project Records Management procedure, all records would be maintained as lifetime records as long as there is a DOE moratorium on destroying records. The procedure also stated, when the moratorium is lifted, records would be classified and the classification would be indicated in Records Inventory and Disposition Schedules (RIDS).

### **1.19.3 Conclusions**

The inspectors determined implementation of the Contractor's Project Records Management procedure in this area was adequate and PDC activities associated with this procedure were effective in meeting QA Manual Policy Q-17.1, Section 3.4, requirements for the classification of records.

## **1.20 Receipt Control of Records (ITP I-131)**

### **1.20.1 Inspection Scope**

This assessment evaluated the degree to which the Contractor's procedures described implementation of the requirements specified in QA Manual Policy Q-17.1, Quality Assurance Records, Section 3.5, "Receipt Control of Records." The inspectors assessed implementation of the Contractor's QA requirements, as related to this area, applied during the limited-construction phase of the project. The inspectors reviewed implementing procedures and processes. The inspectors also interviewed records management staff and reviewed records maintained by PDC.

### **1.20.2 Observations and Assessments**

The inspectors confirmed Contractor's Project Records Management procedure adequately addressed requirements for receipt control of records as specified in QA Manual Policy Q-17.1, Section 3.5. The inspectors verified the procedure was followed and there was a system in place for receipt of records. The inspectors confirmed PDC staff-verified record transmittals indicated what was actually received and the records were legible and complete.

In addition, the inspectors observed the temporary storage of records was appropriate during the receipt process, and the status and location of records during receipt could be determined. The

inspectors accomplished this verification by interviewing document control management and staff, reviewing procedures, and locating the corresponding records in PDC to ensure they met the procedure criteria. The inspectors determined temporary storage of records was appropriate.

### **1.20.3 Conclusions**

The inspectors determined implementation of the Contractor's Project Records Management procedure was adequate and PDC activities associated with this procedure were effective in meeting the QA Manual Policy Q-17.1, Section 3.5, requirements for receipt control of records.

## **1.21 Storage of Records (ITP I-131)**

### **1.21.1 Inspection Scope**

The inspectors observed activities within the PDC records storage area to evaluate the degree to which the Contractor's procedures described implementation of the requirements specified in QA Manual Policy Q-17.1, Quality Assurance Records, Section 3.6, "Storage of Records." The inspectors assessed implementation of the Contractor's QA requirements, as related to records storage. The inspectors also selected certain requirements of the QA Manual in this area and examined the objective evidence of the procedures and processes used to implement the requirements. The inspectors interviewed records management staff and reviewed records maintained by PDC to obtain the required objective evidence.

### **1.21.2 Observations and Assessments**

The inspectors confirmed Contractor's Project Records Management procedure adequately addressed requirements for storage of records as specified in QA Manual Policy Q-17.1. The inspectors verified the procedure adequately described the storage facility, the filing system, the methods for controlling and securing the records area, the method for filing supplemental information, and the method for disposition of superseded records. The inspectors toured the PDC records storage area to verify records were maintained as procedures specified. The inspectors were satisfied the Contractor's records were stored in accordance with QA Manual requirements.

The inspectors also verified the storage facility properly protected records from damage, the storage areas were under proper access control, and storage containers were appropriate for the type of record maintained in them. The inspectors accomplished this verification by interviewing document control management and staff, reviewing procedures, inspecting the PDC records storage area, and locating the corresponding records in PDC to ensure they met the procedure criteria.

The inspectors noted a requirement in QA Manual Policy Q-17.1 was not captured in the implementing procedure 24590-WTP-GPP-PADC-002. Section 3.6.7A required the records management system to provide for retrieval of records with planned retrieval times based on

record type. Through interviews, the inspectors determined a non-written policy existed indicating records will be retrieved within 1-½ hours for requests from within the project, and 9 hours for requests from outside the project. This policy was not documented or otherwise formalized, and did not address the stipulation retrieval will be based on document type.

The Contractor initiated CAR No. 24590-WTP-CAR-QA-02-161 to identify and correct this situation. The inspectors reviewed this CAR and found it adequately addressed the deficiency. This issue had only minor significance and no Finding was issued.

### **1.21.3 Conclusions**

The inspectors determined implementation of the Contractor's Project Records Management procedure was adequate and PDC activities associated with this procedure, except for the instance of not formally establishing retrieval times, were effective in meeting the QA Manual Policy Q-17.1, Section 3.6, requirements for storage of records. The lack of formally established retrieval times was addressed during the inspection.

## **1.22 Retention and Disposition of Records (ITP I-131)**

### **1.22.1 Inspection Scope**

This assessment evaluated the degree to which the Contractor's procedures described implementation of the requirements specified in QA Manual Policy Q-17.1, Quality Assurance Records, Section 3.7, "Retention and Disposition of Records." The inspectors assessed implementation of the Contractor's QA requirements, as related to this area, applied during the limited-construction phase of the project. The inspectors reviewed implementing procedures and processes. The inspectors also interviewed records management staff and reviewed records maintained by PDC.

### **1.22.2 Observations and Assessments**

The inspectors confirmed the Contractor's Project Records Management procedure adequately addressed requirements for the retention and disposition of records as specified in QA Manual Policy Q-17.1, Section 3.7. The inspectors also verified the procedure was being followed, and records were retained according to the retention period established in the procedure. The inspectors accomplished this verification by interviewing document control management and staff, reviewing procedures, and locating the corresponding records in PDC to ensure they met the procedure criteria. The inspectors determined the retention and disposition of records was adequate.

The procedure indicated records would be designated as lifetime or nonpermanent in the RIDS. Retention periods were based on these record types. The procedure recognized the current moratorium on destroying records, so all records were maintained as lifetime until the moratorium is lifted. When the moratorium is lifted, RIDS will be generated, and record types

will be established. Therefore, to date, records were not maintained as required by QA Manual Policy Q-17.1, Section 3.7. Contractor procedure 24590-WTP-GPP-PADC-002 explained this discrepancy and contained the current practice. The inspectors determined this practice was adequate.

The inspectors noted, as of the time of the inspection, PDC did not receive or maintain records whose nature precludes stamping, initialing, or signing (such as recorded on magnetic tape or optical media), and therefore, had no provisions for controlling such records. QA Manual Policy Q-17.1, Section 3.7, did contain requirements for such records. Thus, guidance was available if future Contractor activities would require PDC to maintain such records.

### **1.22.3 Conclusions**

The inspectors determined implementation of the Contractor's Project Records Management procedure in this area was adequate and PDC activities associated with this procedure were effective in meeting QA Manual Policy Q-17.1, Section 3.7, requirements for the retention and disposition of records.

## **1.23 Retrieval of Records (ITP I-131)**

### **1.23.1 Inspection Scope**

This assessment evaluated the degree to which the Contractor's procedures described implementation of the requirements specified in QA Manual Policy Q-17.1, Quality Assurance Records, Section 3.8, "Retrieval of Records." The inspectors assessed implementation of the Contractor's QA requirements, as related to this area, applied during the limited-construction phase of the project. The inspectors reviewed implementing procedures and processes. The inspectors also interviewed records management staff and reviewed records management by PDC.

### **1.23.2 Observations and Assessments**

The inspectors confirmed the Contractor's Project Records Management procedure adequately addressed requirements for the retrieval of records as specified in QA Manual Policy Q-17.1, Section 3.8. The inspectors also verified the procedure was being followed and documents were physically retrievable from the records center. The inspectors accomplished this verification by interviewing document control management and staff, and requesting them to locate and retrieve records.

During this activity, the inspectors identified no problems, but a recent ORP inspection and a recent Office of Quality Assurance (QAO) audit identified deficiencies in this area. Because Findings issued from the previous inspection and audit addressed the failures in this area, the inspectors did not revisit this topic.

The inspectors also verified a records indexing system existed, records are properly stored in the records center after going through the receiving process, and a list of personnel with authority to access records was posted. The inspectors accomplished this verification by interviewing document control management and staff, reviewing procedures, and locating the corresponding records in PDC to ensure they met the procedure criteria. The inspectors determined the Contractor's indexing system was adequate.

### **1.23.3 Conclusions**

The inspectors determined implementation of the Contractor's Project Records Management procedure in this area was adequate and PDC activities associated with this procedure, except as previously documented, were effective in meeting QA Manual Policy Q-17.1, Section 3.8, requirements for the retrieval of records.

## **1.24 Correcting Information in Records (ITP I-131)**

### **1.24.1 Inspection Scope**

This assessment evaluated the degree to which the Contractor's procedures described implementation of the requirements specified in QA Manual Policy Q-17.1, Quality Assurance Records, Section 3.9, "Correcting Information in Records." The inspectors assessed implementation of the Contractor's QA requirements, as related to this area, applied during the limited-construction phase of the project. The inspectors reviewed implementing procedures and processes. The inspectors also interviewed records management staff and reviewed records maintained by PDC.

### **1.24.2 Observations and Assessments**

The inspectors confirmed the Contractor's Project Records Management procedure adequately addressed requirements for correcting information in records as specified in QA Manual Policy Q-17.1, Section 3.9. The inspectors also verified the procedure was followed, records were properly corrected, and the proper reviews were performed and documented. The inspectors accomplished this verification by interviewing document control management and staff, reviewing procedures, and locating the corresponding records in PDC to ensure they understood the process and followed the procedure. The inspectors determined the correction of records was implemented adequately.

### **1.24.3 Conclusions**

The inspectors determined implementation of the Contractor's Project Records Management procedure was adequate and PDC activities associated with this procedure were effective in meeting QA Manual Policy Q-17.1, Section 3.9, requirements for correcting information in records.

## **1.25 Replacement of Records (ITP I-131)**

### **1.25.1 Inspection Scope**

This assessment evaluated the degree to which the Contractor's procedures described implementation of the requirements specified in QA Manual Policy Q-17.1, Quality Assurance Records, Section 3.10, "Replacement of Records." The inspectors assessed implementation of the Contractor's QA requirements, as related to this area, applied during the limited-construction phase of the project. The inspectors reviewed implementing procedures and processes. The inspectors also interviewed records management and staff, and reviewed records maintained by PDC.

### **1.25.2 Observations and Assessments**

The inspectors confirmed the Contractor's Project Records Management procedure adequately addressed requirements for the replacement of records as specified in QA Manual Policy Q-17.1, Section 3.10. The inspectors also verified the procedure was followed and records were properly replaced. The inspectors accomplished this verification by interviewing document control management and staff, reviewing procedures, and locating the corresponding records in PDC to ensure they met procedure criteria.

The inspectors reviewed drawings 24590 LAW M5K V17T 0001, Revision A, and 24590 LAW MO LFH 0002001, Revision A, which had been replaced when the originals were crumpled or torn. The inspectors observed the drawings were stamped "Duplicate Original" as was required. The inspectors determined implementation of the procedure was adequate regarding replacement of records.

### **1.25.3 Conclusions**

The inspectors determined implementation of the Contractor's Project Records Management procedure in this area was adequate and PDC activities associated with this procedure were effective in meeting QA Manual Policy Q-17.1, Section 3.10, requirements for replacement of records.

## **1.26 Verification of Previous Commitments to Corrective Actions for Deviation and Corrective Action Reports (DCARs) (Inspection Administrative Procedure [IAP] A-106)**

### **1.26.1 Inspection Scope**

This assessment verified implementation of corrective action the Contractor committed to perform in response to several DCARs. The inspectors interviewed records management personnel and reviewed objective evidence of implementation of the corrective actions.

### 1.26.2 Observations and Assessments

The inspectors reviewed objective evidence of revisions to 24590-WTP-GPP-PADC-002 in response to DCARs 01-QAO-WTP-033-01 and 01-QAO-WTP-033-02. The revisions acceptably addressed the corrective actions specified in the DCARs. In addition, the Contractor sent the requested revision to the *Quality Assurance Provisions Document*, 24590-WTP-QPD-QA-01-001, to ORP on July 12, 2002.<sup>3</sup> This action adequately implemented the corrective action specified in DCAR 02-QAO-WTP-003-01.

The inspectors reviewed the corrective action response for DCAR 01-QAO-WTP-033-03 and associated correspondence. At the time of the inspection the Contractor was not in agreement with ORP's interpretation of the QA Manual requirements and had not transmitted an acceptable corrective action response. However, during the inspection the inspectors received additional information in which to close this DCAR. DCAR 01-QAO-WTP-033-03 is considered closed.

### 1.26.3 Conclusions

DCARs 01-QAO-WTP-033-01, 01-QAO-WTP-033-02, 01-QAO-WTP-033-03, and 02-QAO-WTP-003-01 are considered closed.

## 1.27 Verification of Previous Commitments to Corrective Actions for Findings (IAP A-106)

### 1.27.1 Inspection Scope

This assessment verified implementation of corrective actions the Contractor committed to perform in response to a previous Finding. The inspectors interviewed Contractor management and staff, and reviewed objective evidence of implementation of the corrective actions.

**1.27.2 (Closed IR-02-003-02-FIN)**, Calibration records were not being submitted to PDC and were being temporarily stored incorrectly. During a previous inspection, documented in inspection report IR-02-003, the Contractor had not submitted some calibration records to PDC for record retention. A Finding was issued to the Contractor and a response to the Finding, which provided corrective actions, was sent to ORP on April 30, 2002.<sup>4</sup>

The inspectors interviewed the QA surveillance engineer who evaluated completion of the corrective action described in Contractor's Corrective Action Report, 24590-WTP-CAR-QA-02-055. The inspectors also went to PDC and pulled a sample of the documents that should have been submitted as records. The records requested were found at PDC. The documents found in

<sup>3</sup> BNI letter from A. R. Veirup to M. K. Barrett, ORP, "Deliverable 6.11, Quality Assurance Provision Document, 24590-WTP-QPD-QA-01-001, Revision 1," CCN-035573, dated July 12, 2002.

<sup>4</sup> BNI letter from A. R. Veirup to M. K. Barrett, ORP, "Bechtel National, Inc. Response to Inspection Report IR-02-003-Quality Control, Control of Special Processes, and Control of Measuring and Test Equipment Assessment," CCN-032212, dated April 30, 2002.

the records files were measuring and test equipment (M&TE) usage logs for March 28 and April 5, 2002; original calibration records for torque wrench TW-001 and a surface thermometer; and an M&TE evaluation report for torque wrench TW-002. The inspectors verified an e-mail message was sent to applicable project staff reminding them of their responsibility for prompt submittal of M&TE calibration documentation to PDC for records retention.

Based on the above, the inspectors determined the corrective action for Finding IR-02-003-02-FIN was adequately completed, and this Finding is closed.

## **2.0 EXIT MEETING SUMMARY**

The inspectors presented the inspection results to members of Contractor management at an exit meeting on July 12, 2002. The Contractor acknowledged the observations and conclusions.

The inspectors asked the Contractor whether any materials examined during the inspection should be considered limited rights data. None were identified.

## **3.0 REPORT BACKGROUND INFORMATION**

### **3.1 Partial List of Persons Contacted**

C. Camp, Deputy Project Document Control Supervisor  
 D. Canazaro, QA Programs Manager  
 L. Carpenter, IT Program Manager  
 G. Gloria, Senior Quality Engineer, Surveillance  
 G. Grant, Supplier QA Manager  
 G. Hagen, Project Administration/Document Control Manager  
 R. Hollenbeck, Senior Engineer Lead Auditor  
 D. Kammenzind, Quality Engineer  
 K. Lesko, Commissioning and Training Area Procedures Manager  
 B. Klinger, Audits and Surveillance Manager  
 R. Maxwell, CAMS Database Administrator  
 S. Sallee, Senior Engineer Lead Auditor  
 G. Shell, Quality Assurance Manager  
 R. Souther, Chief Information Officer  
 P. Talmage, Senior Quality Engineer  
 G. Warner, Quality Engineering Manager

### **3.2 List of Inspection Procedures Used**

Inspection Technical Procedure I-101, "Quality Assurance Assessment"

Inspection Technical Procedure I-131, "Document Control and Records Management Program Inspection"

## Inspection Administrative Procedure A-106, "Verification of Corrective Actions"

**3.3 List of Items Opened, Closed, and Discussed**Opened

IR-02-010-01-IFI	Inspection Follow-up Item	Verify implementation of procedure change to address disposition of obsolete or superseded documents. (Section 1.11)
IR-02-010-02-FIN	Finding	Failure to consistently retain revision history on each document, and failure to review the history before making additional changes. (Section 1.13)
IR-02-010-03-IFI	Inspection Follow-up Item	Verify implementation of the process for making pen and ink changes for expedited document changes. (Section 1.14)

Closed

DCAR-01-QAO-WTP-033-01		The Contractor's drawings and specifications were not received accompanied by a completed Document Information Form. (Section 1.26)
DCAR-01-QAO-WTP-033-02		The Contractor had not classified the records as lifetime or nonpermanent as required by their QA Manual Policy Q-17.1 and NQA-1-1989. (Section 1.26)
DCAR-01-QAO-WTP-033-03		The Contractor did not maintain records of objective evidence of the review of records and documents submitted for processing. (Section 1.26)
DCAR-02-QAO-WTP-003-01		There was no objective evidence the Quality Assurance Provisions Document had been updated. (Section 1.26)
IR-02-003-02-FIN	Finding	Calibration records were not submitted to PDC and were temporarily stored incorrectly. (Section 1.27)

Discussed

None

**3.4 List of Acronyms**

CAR	Corrective Action Report
DCAR	Deviation and Corrective Action Report
DOE	U.S. Department of Energy
IT	Information Technology
M&TE	Measuring and Test Equipment
ORP	Office of River Protection
PAAA	Price-Anderson Amendment Act
PDC	Project Document Control
QA	quality assurance
QAO	Office of Quality Assurance
RIDS	Records Inventory and Disposition Schedule
RPP-WTP	River Protection Project Waste Treatment Plant
SME	Subject Matter Expert

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