



2500 WILSON BOULEVARD, SUITE 202
ARLINGTON, VIRGINIA 22201

(703) 276-9300
FAX: (703) 276-9310

Memorandum

To: Observers to the Quality Audit of EM-343

From: Norman Frank, Audit Team Leader *Norman Frank*

Subject: Observer/Team Meeting

Date: August 9, 1991

Enclosed is your copy of the auditors' notebook for the August 26-30, 1991 audit of EM-343, the Waste Vitrification Branch of Environmental Restoration and Waste Management.

There will be a meeting from 8:30 a.m. until 9:00 a.m. on August 26, 1991 for the observers and the audit team. At this meeting, we will cover the basic audit plan and how the audit will be conducted. We will try to answer any questions you have at that time.

The meeting will be in the Trevion II Building. Please meet in the lobby at 8:15 a.m. A map of the Germantown, MD area is provided in the auditors' notebook. A good hotel to stay at is the Comfort Inn located less than 1 mile from the building. The address is:

20260 Goldenrod Lane
Phone: 1-301-428-1300 (direct)
Phone: 1-800-221-2222 (toll free)

Please call me if you have any questions or need additional information.

see enclosure on shelf

140001

9108140248 910826
PDR WASTE
WM-1 PDR

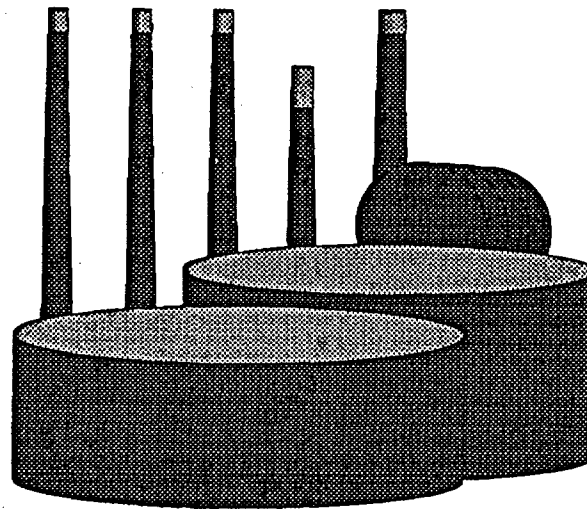
*405
WM-1
NH01*

DOE HEADQUARTERS

AUDIT HQ-91-003

of EM-343

Environmental Restoration and
Waste Management,
Waste Vitrification Branch



Germantown, MD

August 26, 1991
through
August 30, 1991

405

John Buckley, NRC

Rec'd in letter 8/26/91

*received with letter cttu
8/26/91*

Audit No. HQ-91-003
Contents of Audit Binder

Notification Letter and Audit Plan

- Notification Letter
- Audit Plan
- DOE Memorandum from John W. Bartlett to EM-1 dated October 29, 1990 (provides authority to audit)
- DOE Memorandum providing observers

General Information

- DOE Shuttle Bus Schedule between Germantown and Forrestal Building
- Map of DOE Germantown area
- Copy of EM-30 telephone directory
- ATL's temporary lodgings:
Courtyard Marriot (9011760Q)
805 Russell Avenue
Gaithersburg, MD 20879
Phone 301-670-0008
- EM Audit Team Assignments
- SPP Index with Team Assignments
- SPP List arranged by Audit Team
- List of Observers
- Observers' Protocols
- Audit Observer Inquiry form

Technical Documents

- Report of a May 1991 review of the EM Standard Practice Procedures led by P. Slattery

Past Evaluations by HQ

- Statement that there have been no previous audits
- Surveillance HQ-SR-91-011, SPP 4.11 and SPP 4.12 (technical reviews)

Blank CARs

- 5 CAR sheets
- 5 CAR continuations sheets

Audit Checklist

- 91-003, Programmatic checklist

Quality Assurance Program Description

- DOE/EM/WO/01
- DOE/EM/WO/02

4105

Procedures

- Consolidation/Revision Information
- Specific procedures to be audited by the individual
- Note: for observers, a complete set of the procedures will be provided

memorandum

DATE: JUL 29 1991

REPLY TO: RW-3
ATTN OF:

SUBJECT: OFFICE OF CIVILIAN RADIOACTIVE WASTE MANAGEMENT (OCRWM) QUALITY ASSURANCE
(QA) AUDIT HQ-91-003 OF THE VITRIFICATION PROJECTS BRANCH (EM-343)

TO: Associate Director, (EM-30)

Please be advised that a team from OCRWM, Office of Quality Assurance (OQA), will conduct a QA audit of the EM-343 QA Program and implementation, where possible, during the period August 26-30, 1991. Current plans will be for the audit team to hold a preaudit meeting on Monday, August 26, 1991, beginning at 9:00 a.m., at your facilities in Germantown, MD. Please arrange for the appropriate personnel to attend the meeting. The postaudit meeting is tentatively scheduled for 1:30 p.m. on Friday, August 30, 1991. I would like to request that you make the necessary arrangements for the locations where the preaudit and postaudit meetings will be held and notify me within 10 days prior to the date of the preaudit conference. The audit team will also need a meeting/working room during the performance of the audit.

All activities performed by EM appropriate to its role in the development and qualification of the waste form through August 1991 shall be subject to audit.

The audit will focus on the following areas:

QA PROGRAM ELEMENTS

- 1 - Organization
- 2 - Quality Assurance Program
- 3 - Design Control (including software and scientific investigation)
- 4 - Procurement Document Control
- 5 - Instructions, Procedures, and Drawings
- 6 - Document Control
- 7 - Control of Purchased Items and Services
- 15 - Control of Nonconforming Items
- 16 - Corrective Action
- 17 - Quality Assurance Records
- 18 - Audits

The audit of implementation will be primarily based upon the current revisions of your implementing procedures and/or procedures that were in effect when the activity was performed.

TECHNICAL AREAS

Auditors will review and evaluate activities to determine adequacy in the following areas:

1. Qualifications of technical personnel
2. Understanding of procedural requirements as they pertain to the development and qualification of waste forms.

If the audit team identifies a need to verify additional programmatic or technical areas during the audit, they will be added to the audit checklist(s) and verified accordingly.

The audit team will consist of:

<u>NAME</u>	<u>ORGANIZATION</u>	<u>TEAM</u>
Robert W. Clark	DOE, Washington, D.C.	Audit Manager
Norman C. Frank	CER Corp., Arlington, VA	Audit Team Leader
James J. George	CER Corp., Arlington, VA	Auditor
Donald E. Miller	CER Corp., Arlington, VA	Auditor
Craig G. Walenga	CER Corp., Arlington, VA	Auditor
Clyde D. Morell	CER Corp., Arlington, VA	Auditor
Thomas E. Rodgers	CER Corp., Arlington, VA	Auditor
Louis Wade	CER Corp., Arlington, VA	Auditor

Observers from the State of Nevada, U.S. Nuclear Regulatory Commission, or other interested parties may also accompany the team. You will be notified of these observers prior to the audit.

If you have any questions, please contact Robert Clark at (202) 586-1238 or FTS 896-1238 or Norman C. Frank at (703) 276-9300.



Donald G. Horton, Director
Office of Quality Assurance

Enclosure:
Audit Plan, HQ-91-002

cc:

F. Peters, RW-2, FORS
D. Shelor, RW-30, FORS
R> Millner, RW-40, FORS
C. Gertz, RW-20, Las Vegas, NV
S. Cowan, EM-30, TREV.
M. Frei, EM-34
J. Hennessey, EM-343
K. Chancey, EM-343
J. Gilray, NRC, Las Vegas, NV
K. Hooks, NRC, Washington, DC
W. Belke, NRC, Washington, DC
R. Loux, NWPO, Carson City, NV
E. von Tiesenhausen, Clark County, Las Vegas, NV
S. Bradhurst, Nye County, Tonopah, NV
K. Whipple, Lincoln County, Pioche, NV

Audit Plan
Audit Number: HQ-91-003
Audit of Office of Environmental
Restoration and Waste Management (EM)

An audit of EM-343, Vitrification Projects Branch, will be conducted the week of August 26-30, 1991 in their offices in Germantown, MD. The audit will be conducted by:

Norman C. Frank,	CER Corporation	Audit Team Leader
Donald E. Miller,	CER Corporation	Auditor
James G. George,	CER Corporation	Auditor
Craig G. Walenga,	CER Corporation	Auditor
Clyde D. Morell,	CER Corporation	Auditor
Thomas E. Rodgers,	CER Corporation	Auditor
Louis Wade,	Roy F. Weston	Auditor

Observers from the State of Nevada, the NRC, the Edison Electric Institute (EEI), and other interested parties will be invited to participate.

Audit Scope

The audit will include the activities of EM-343, Vitrification Projects Branch, related to the development and qualification of waste forms. Activities up to the time of the audit will be included in the scope.

The implementation of the following criteria will be evaluated during the audit:

- 1 - Organization
- 2 - Quality Assurance Program
- 3 - Design Control (including software and scientific investigation)
- 4 - Procurement Document Control
- 5 - Instructions, Procedures, and Drawings
- 6 - Document Control
- 7 - Control of Purchased Items and Services
- 15 - Control of Nonconforming Items
- 16 - Corrective Action
- 17 - Quality Assurance Records
- 18 - Audits

The auditable requirements will be drawn from the October 1990 issue of the Environmental Restoration and Waste Management (EM) Quality Assurance Program Descriptions (DOE/EM/WO/01 and 02), applicable Standard Practice Procedures, and documents pertaining to the development and qualification of waste forms.

Preliminary Audit Schedule

Audit Team Briefing	August 26	8:30 am
Preaudit Meeting	August 26	9:00 am
Conduct of Audit	August 26	9:30 am - 4:00 pm
	August 27-29	8:30 am - 4:00 pm
	August 30	8:30 am - 12:00 pm
	August 30	1:30 pm - 2:30 pm
Postaudit Meeting		4:00 pm
Daily Audit Team Debriefing		8:30 pm
Daily Summary to EM-343		

Enclosure

The audit may be extended as necessary to ensure adequate coverage of each criteria to be audited.

Audit Checklists and Annexes:

91-003 QA Programmatic Checklist
Annex A DOE Procedure on Protocol (July 1987)
Annex B NRC Draft QA Procedure for Observing DOE/OGR HLRW

Prepared by:


Norman C. Frank, CER Corporation
Audit Team Leader


Date: 7/22/91

Approved by:


Robert W. Clark, Director
Headquarters Quality Assurance Division

Date: 7/29/91

Approved by:


Donald G. Horton, Director
Office of Quality Assurance

Date: 7/29/91

United States Government

Department of Energy

Memorandum

DATE: OCT 29 1990

REPLY TO
ATTN OF: RW-3

SUBJECT: Qualification of Office of Environmental Restoration and Waste Management (EM) Quality Assurance Program to Support High-Level Waste Form Production

TO: Acting Director, Office of Environmental Restoration and Waste Management, EM-1

The Office of Civilian Radioactive Waste Management (OCRWM) has evaluated your request for assistance in the qualification of quality assurance programs for the Waste Form Producer Organizations. This memorandum provides OCRWM's position on qualification of EM's quality assurance program, as well as quality assurance programs for Waste Form Producer Organizations that are involved in the startup and operation of waste processing facilities. This includes Operations Offices, Project Offices and Operating Contractors (i.e., West Valley Nuclear Services and Westinghouse Savannah River Corporation). The position stated herein is based on discussions with and endorsement by the OCRWM Office of Quality Assurance and the Nuclear Regulatory Commission (NRC).

OCRWM is not on the critical path for EM's Quality Assurance Program. OCRWM's only role is the review and acceptance of the EM High-Level Waste Quality Assurance Program Description (QAPD) document, DOE/EM/WO/02. Submittal of that QAPD for OCRWM review should be after EM approval. The review of the EM QAPD will be conducted in accordance with the requirements contained in the OCRWM Quality Assurance Requirements Document (DOE/RW-0214) in effect when the Quality Assurance Program Description is submitted. Quality Assurance Program Descriptions from Operations Offices, Project Offices and Operating Contractors are not subject to review and acceptance by OCRWM. OCRWM does, however, request that these QAPDs be submitted for information subsequent to their approval. EM's and other QAPDs will be provided by OCRWM to the NRC for information only. Should the NRC or OCRWM have questions on QAPD content, OCRWM will address those questions to your attention.

In addition to the review for acceptance of the EM Quality Assurance Program Description, OCRWM will conduct audits and surveillances of activities performed by EM. On occasion, OCRWM will observe EM verification activities as well as activities performed by Operation Offices, Project Offices and Operating Contractors. The latter will be performed in concert

with EM's overview of such activities. In either case, the NRC, the State of Nevada, and other affected organizations are extended the opportunity to observe OCRWM verification of High-Level Waste Form Production Activities. Notification will be provided to EM by OCRWM in advance of such activities.

We believe the position stated herein fully supports EM's qualification effort and provides OCRWM with an appropriate level of assurance regarding waste form production. There have been staff level discussions between EM, NRC, and OCRWM on this issue. Please contact me or Mr. Donald G. Horton at 586-8858 if you or your staff have any questions regarding this issue.



John W. Bartlett, Director
Office of Civilian Radioactive
Waste Management



CORPORATION

2500 WILSON BOULEVARD, SUITE 202
ARLINGTON, VIRGINIA 22201

(703) 276-9300
FAX: (703) 276-9310

August 6, 1991

1050-0078

File No.: 100.100.201

100.110.24110791003

Mr. Donald G. Horton
Director
OCRWM Office of Quality Assurance
United States Department of Energy
1000 Independence Avenue, S.W.
Washington, DC 20585

SUBJECT: DOE CONTRACT NO. DE-AC01-90RW00178; OBSERVERS FOR EM AUDIT

Dear Mr. Horton:

In the notification letter to EM concerning the August 26-30 audit we stated, "you will be notified of ... observers prior to the audit." The attached preliminary draft letter forwards this information to EM.

Clark, Esmeralda, Eureka, Lincoln, and White Pines Counties, NV; Inyo County, CA; and the State of Nevada have been contacted by the Audit Team Leader, but no observers will be coming.

Should you have any questions, please do not hesitate to give me or Norman Frank a call at (703)276-9300.

Sincerely,

Marc J. Meyer
Program Manager
CER Corporation

MJM/ND/ac

Attachment: Draft memo to EM-30

cc: B. Clark, DOE-HQ
C. Rueter, DOE-HQ
R. Minning, DOE-HQ
W. Booth, Weston
Central Records Facility

RW-3

OBSERVERS FOR THE OFFICE OF CIVILIAN RADIOACTIVE WASTE MANAGEMENT
(OCRWM) AUDIT HQ-91-003 OF THE VITRIFICATION PROJECTS BRANCH (EM-343)

Ms. Jill E. Lytel, Associate Director (EM-30)
Office of Waste Operations
U.S. Department of Energy
Forrestal Building
100 Independence Avenue, S.W.
Washington, D.C. 20585

The following people will be observers on the August 26-30, 1991,
audit of EM-343. Please arrange for these people to have access to
buildings and offices we will be visiting during the audit.

James T. Conway, USNRC, [REDACTED], U.S. Citizen
(has NRC badge)
John T. Buckley, USNRC, [REDACTED], U.S. Citizen
(has NRC badge)
Philip Niedzielski-Eichner, Nye County, NV, [REDACTED],
[REDACTED] U.S. Citizen
Frank Nash, TESS, has an active DOE badge
Thomas R. Colandrea, EEI [REDACTED] U.S. Citizen

If you have any questions, please contact Bob Clark at (202) 586-1238 or
FTS 896-1238 or Norman C. Frank at (703) 276-9300.

Donald Horton, Director
Office of Quality Assurance

Attachments

cc: C. Hampton, YMSCPO
D. Spence, YMSCPO
C. Gertz, YMPO
R. Loux, State of Nevada
S. W. Zimmerman, NWPO, Carson City, NV
K. Whipple, Lincoln County, NV
M. Baughman, Lincoln County, NV
J. Bingham, Clark County, NV
D. Bechtel, Clark County, NV
Englebrecht von Tiesenhasuen, Clark County, Las Vegas, NV
S. Bradhurst, Nye County, NV
B. Raper, Nye County, NV

cc: P. Niedzielski-Eichner, Nye County, NV
R. Campbell, Inyo County, CA
R. Michener, Inyo County, CA
G. Derby, Lander County, NV
P. Goicoechea, Eureka, NV
C. Schank, Churchill County, NV
C. Jackson, Mineral County, NV
F. Sperry, White Pine County, NV
L. Vaughan, Esmeralda County, NV
K. Hooks, NRC, Washington, D.C.
J. W. Gilray, NRC, Las Vegas, NV
W. Belke, NRC, Washington, D.C.
S. Cowan (EM-30) TREV
M. Frei (EM-34) TREV
J. Hennessey (EM-343) TREV
K. Chacey, (EM-343) TREV
F. Peters, HQ, (RW-2) FORS
C. P. Gertz, HQ, (RW-20) Las Vegas, NV
D. E. Shelor, HQ, (RW-30) FORS
R. A. Milner, HQ, (RW-40) FORS
R. J. Brackett, TESS, HQ (RW-3) FORS

DOE Shuttle Bus Schedule GERMANTOWN – D.C.

ROUTE "A"

Southbound	
Departs Germantown	Arrives Forrestal
7:15 a.m.	8:20 a.m.
8:30 a.m.	9:35 a.m.
9:45 a.m.	10:50 a.m.
11:00 a.m.	12:05 p.m.
12:15 p.m.	1:20 p.m.
1:30 p.m.	2:35 p.m.
2:45 p.m.	3:50 p.m.
4:00 p.m.	5:05 p.m.
5:30 p.m.	6:30 p.m.

ROUTE "B"

Northbound	
Departs Forrestal	Arrives Germantown
7:15 a.m.	8:20 a.m.
8:30 a.m.	9:35 a.m.
9:45 a.m.	10:50 a.m.
11:00 a.m.	12:05 p.m.
12:15 p.m.	1:20 p.m.
1:30 p.m.	2:35 p.m.
2:45 p.m.	3:50 p.m.
4:00 p.m.	5:05 p.m.
5:30 p.m.	6:30 p.m.

[illegible]

Germantown

Route Symbol	Name	Phone Number	Location
Office of Statistical Standards			
El-70	Director Yvonne M. Bishop	586-2222	2F-081/FORS
El-72	Director, Quality Assurance Division Douglas R. Hale.....	586-2315	2F-081/FORS
El-73	Director, Data Collection Services Division John Gross.....	586-2308	1E-256/FORS
OFFICE OF ENVIRONMENTAL RESTORATION AND WASTE MANAGEMENT			
EM-1	Director Leo P. Duffy	586-7710	7A-049/FORS
EM-1	Assistant to the Director Melinda Downing	586-7710	7A-049/FORS
EM-1	Technical Assistant Thomas C. Elsasser	586-2979	7A-049/FORS
EM-1	Special Assistant David C. Durham	586-2979	7A-049/FORS
EM-1	Special Assistant Ellen Livingston-Behan	586-2979	7A-049/FORS
EM-2	Deputy Director Paul D. Grimm	586-7709	7A-049/FORS
EM-2.1	Director, 5-Year Plan Richard J. Aiken	586-4373	7A-049/FORS
EM-3	Executive Assistant Michael C. Sellers	586-2979	7A-049/FORS
Office of Planning and Resource Management			
EM-10	Associate Director James E. Dieckhoner (Acting)	586-1665	GA-208/FORS
EM-12	Director, Administrative Management Division Raymond E. Gibson	586-2661	GA-208/FORS
EM-13	Director, Financial Management and Policy Division Eli B. Bronstein	586-8899	GA-208/FORS
Office of Quality Assurance and Quality Control			
EM-20	Associate Director Randal S. Scott	586-8754	6B-138/FORS
EM-22	Director, Environmental Compliance Division Michael H. Kleinrock	586-0338	8H-050/FORS
EM-23	Director, Safety and Health Compliance Division Owen O. Thompson.....	353-7910	438/TREV
EM-24	Director, Engineering and Cost Evaluation Division Vincent Fayne	586-0126	8H-050/FORS
Office of Waste Operations			
EM-30	Associate Director Jill E. Lytle	586-0370	6B-170/FORS
EM-30	Deputy Associate Director Stephen P. Cowan.....	353-7100	355/TREV
EM-32	Director, Site Operations Division James E. Dieckhoner	353-7105	339/TREV
EM-32	Deputy Director Joseph A. Coleman	353-7105	341/TREV
EM-321	Chief, Eastern Operations Branch Elizabeth Jordan	353-7116	343/TREV
EM-322	Chief, Western Operations Branch Joseph Boda	353-7111	337/TREV

Route Symbol	Name	Phone Number	Location
M-323	Chief, Corrective Activities Branch Leanne Waldo Smith.....	353-7130	347/TREV
EM-33	Director, Program Support Division James A. Turi.....	353-7147	375/TREV
EM-331	Chief, Regulatory Compliance Branch Lee E. Stevens.....	353-7142	305/TREV
EM-332	Chief, Resource Management Branch John E. Yanoski.....	353-7154	349/TREV
EM-34	Director, Waste Management Projects Division Mark W. Frei.....	353-7201	323/TREV
EM-341	Chief, Construction Management Branch Ram B. Lahoti	353-7210	327/TREV
EM-342	Chief, W.I.P.P. Branch Steven P. Schneider.....	353-7201	316/TREV
EM-343	Chief, Vitrification Projects Branch Kenneth A. Chacey	353-7186	315/TREV
EM-35	Director, Technical Support Division John C. Tseng.....	353-7170	366/TREV
EM-351	Chief, Technical Support Branch (Vacant)	353-7174	370/TREV
EM-352	Chief, Waste Minimization Branch Jmaes V. Antizzo	353-7180	370/TREV

Office of Environmental Restoration

EM-40	Associate Director Roger P. Whitfield	586-6331	6B-158/FORS
EM-40	Deputy Associate Director John E. Baublitz.....	353-8100	225/TREV
EM-42	Director, Eastern Area Programs Division James J. Fiore	353-8141	104/TREV
EM-42	Deputy Director Donald C. Fulmer.....	353-8144	106/TREV
EM-421	Chief, Eastern Area Off-Site Branch James W. Wagoner II.....	353-8147	122/TREV
EM-422	Chief, Eastern Area On-Site Branch Donald C. Fulmer.....	353-8144	106/TREV
EM-423	Chief, Eastern Area Decontamination/Decommissioning Branch William E. Murphie.....	353-7216	306/TREV
EM-424	Chief, Feed Materials Production Center Kimberly A. Hayes (Acting).....	353-8154	306/TREV
EM-43	Director, Program Support Division William Wisenbaker (Acting)	353-8105	209/TREV
EM-431	Chief, Regulatory Compliance Branch Douglas Smith.....	353-8113	205/TREV
EM-432	Chief, Resource Management Branch Brian F. McCully.....	353-8126	219/TREV
EM-433	Chief Program Integration Branch Gale P. Turi (Acting).....	353-8118	209/TREV
EM-44	Director, Northwestern Area Programs Branch Dr. Sally A. Mann (Acting).....	353-8161	156/TREV
EM-441	Chief, Northwestern Off-Site Branch Dr. Sally A. Mann (Acting)	353-6436	D-436/GTN
EM-442	Chief, Northwestern On-Site Remediation Branch John C. Lehr.....	353-8164	160/TREV
EM-443	Chief, Northwestern Decontamination/Decommissioning Branch John C. Lehr (Acting).....	353-8164	160/TREV
EM-45	Director, Southwestern Area Programs Division Ralph Lightner.....	353-8180	145/TREV
EM-451	Chief, Southwestern Off-Site Remediation Branch Dr. Ralph G. Lightner (Acting).....	353-8180	145/TREV

Route Symbol	Name	Phone Number	Location
EM-452	Chief, Southwestern On-Site Branch John A. Alquist.....	353-8184	174/TREV
EM-453	Chief, Southwestern Decontamination/Decommissioning Branch Ray Greenberg.....	353-8190	173/TREV
Office of Technology Development			
EM-50	Associate Director Clyde Frank.....	586-6382	6B-158/FORS
EM-50	Deputy Associate Director Gloria S. Patton	353-7260	470/TREV
EM-52	Director, Institutional & Technology Integration Division Susan M. Prestwich.....	353-7924	412/TREV
EM-53	Director, Program Support Division Lawrence H. Harmon	353-7940	464/TREV
EM-54	Director, Research and Development Division Stephen C. T. Lien	353-7911	404/TREV
EM-55	Director, Demonstration Testing and Evaluation Division Carl L. Cooley	353-7286	408/TREV
OFFICE OF ENERGY RESEARCH			
ER-1	Director Dr. James F. Decker (Acting)	586-5434	7B-058/FORS
ER-2	Deputy Director Dr. James F. Decker	586-5434	7B-058/FORS
ER-2	Executive Director Dr. David B. Nelson.....	586-5430	7B-058/FORS
ER-6	Director, Science and Technology Affairs Staff Dr. Philip M. Stone	586-9942	7B-040/FORS
ER-7	Director, Scientific Computing Staff David B. Nelson.....	353-5800	G-215/GTN
ER-8	Director, Office of Assessment and Support Joseph R. Maher	353-4097	F-235/GTN
ER-8.1	Director, Facility Safety Division Joseph R. Maher (Acting).....	353-4097	F-235/GTN
ER-8.2	Director, Environmental and Health Protection Division James K. Farley (Acting)	353-2314	F-235/GTN
ER-9	Director, Office of Subseabed Disposal Research Dr. Walter L. Warnick (Acting)	353-3122	F-327/GTN
Office of Basic Energy Sciences			
ER-10	Associate Director Dr. Donald K. Stevens	353-5565	J-304/GTN
ER-11	Deputy Associate Director Dr. Louis C. Ianniello	353-3081	J-304/GTN
ER-13	Director, Materials Sciences Division Dr. Iran Thomas.....	353-3427	J-317/GTN
ER-131	Chief, Metallurgy & Ceramics Branch Dr. Robert J. Gottschall	353-3428	J-322/GTN
ER-132	Chief, Solid State Physics & Materials Chemistry Branch Dr. B. Chalmers Frazer	353-3426	J-325/GTN
ER-14	Director, Chemical Sciences Division Dr. Robert S. Marianelli	353-5804	G-334/GTN
ER-141	Chief, Fundamental Interactions Branch Dr. Allan H. Laufer	353-5820	G-340/GTN
ER-142	Chief, Processes & Techniques Branch Dr. F. Dee Stevenson	353-5802	G-341/GTN
ER-15	Director, Engineering & Geosciences Division Dr. James S. Coleman	353-5822	G-363/GTN

Office of Waste Operations EM-30

Jill Lytle, Associate Director
Steve Cowan, Deputy Associate Director
Kris Morris, Policy & Program Analyst
Carolyn McCall, Secretary
Susan Sappington, Secretary
Tech Asst, (vacant)

Site Operations, EM-32

James Dieckhoner, Director
Joseph Coleman, Deputy Director
Cheryl Seymour, Secretary
WM Spec., (vacant)

Eastern Operations Branch, EM-321

Betsy Jordan, Chief
Nancy Ohler, Secretary
Kay Whitfeld, Env. Prot. Spec.
Michael Torbert, WM Engineer
Mary Burandt, WM Engineer
Bryan Westich, WM Engineer
WM Spec., (vacant)
WM Spec., (vacant)

Western Operations Branch, EM-322

Joseph Boda, Chief
Secretary, (vacant)
Warren Black, Env. Prot. Spec.
Jim Keenan, WM Engineer
Andrew Griffith, WM Engineer
Gordon Langille, Env. Prot. Spec.
WM Engineer (vacant)

Central Operations Branch, EM-323

Leanne Smith, Chief
Cathy Fauble, Secretary
Peter Siebach, Env. Engineer
Jane Talarico, Env. Prot. Spec.
Josh Williams, WM Engineer
Matt Zenkovich, WM Engineer
Jeff Kerridge, WM Engineer
WM Spec., (vacant)
WM Spec., (vacant)

Program Support, EM-33

James A. Turi, Director
Deputy Director, (vacant)
Secretary, (vacant)

Regulatory Compliance Branch, EM-331

Lee Stevens, Chief
Amy Rand, Secretary
Lydia Chang, Env. Engr.
Greg Duggan, Env. Prot. Spec.
Don Henninger, Env. Prot. Spec.
John Stewart, Env. Prot. Spec.
Dave Levenstein, WM Spec.
Betty Shackelford, WM Spec.
QA Program Mgr., (vacant)
Safety Analysis Engineer (vacant)
Health Phy., (vacant)
Fac. Safety Appr., (vacant)
QA Spec., (vacant)

Resource Management Branch, EM-332

Jack Yanoeki, Chief
Secretary, (vacant)
Barry Gaffney, Program Analyst
Barbara Hammond, Program Analyst
Debra Voigt, Budget Analyst
Maureen O'Dell, Program Assistant
Budget Analyst, (vacant)
Admin. Asst., (vacant)

Program Operations Support Branch, EM-333

Chief, (vacant)
Secretary, (vacant)
Dotti Whitt, Program Analyst
Gen. Engr., (vacant)
Gen. Engr., (vacant)
Phys. Scientist, (vacant)
Contract Spec., (vacant)
Admin. Asst., (vacant)

Waste Mgmt Projects, EM-34

Mark Frel, Director
Deputy Director, (vacant)
Claire Picarella, Secretary
Tech Asst, (vacant)

Construction Management Branch, EM-341

Ram Lahoti, Chief
Secretary, (vacant)
Jim Davis, WM Engineer
WM Engineer (vacant)
Gen. Engr., (vacant)
Gen. Engr., (vacant)
Gen. Engr., (vacant)

WIPP Projects Branch, EM-342

Steve Schneider, Chief
Secretary, (vacant)
Jay Rhoderick, Waste Iso. Scientist
Mark Duff, Phys. Scientist
Douglas Tonkay, WM Engineer
WM Engineer (vacant)
Gen. Engr., (vacant)
Phys. Scientist, (vacant)
Program Analyst, (vacant)

Vitrification Projects Branch, EM-343

Ken Chacey, Chief
Krystal Carter, Secretary
Tom Gutmann, Gen. Engineer
Ted McIntosh, Gen. Engineer
Virgil Trice, Chem. Engineer
Henry Walter, Phys. Scientist
Jack Hennessey, Phys. Scientist
Olenna Truskett, WM Engineer
Ha Nguyen, WM Engineer

Technical Support, EM-35

John Tseng, Director
Secretary, (vacant)

Technical Support Branch, EM-351

Chief, (vacant)
Mary Jane Wisenbaker, Secretary
Mary Pearl, Writer-Editor
Jonathan Kang, WM Engineer
Terry Plummer, Env. Prot. Spec.
WM Engineer (vacant)
WM Engineer (vacant)
Haz. Waste Prog. Mgr., (vacant)
HLW Prog. Mgr., (vacant)

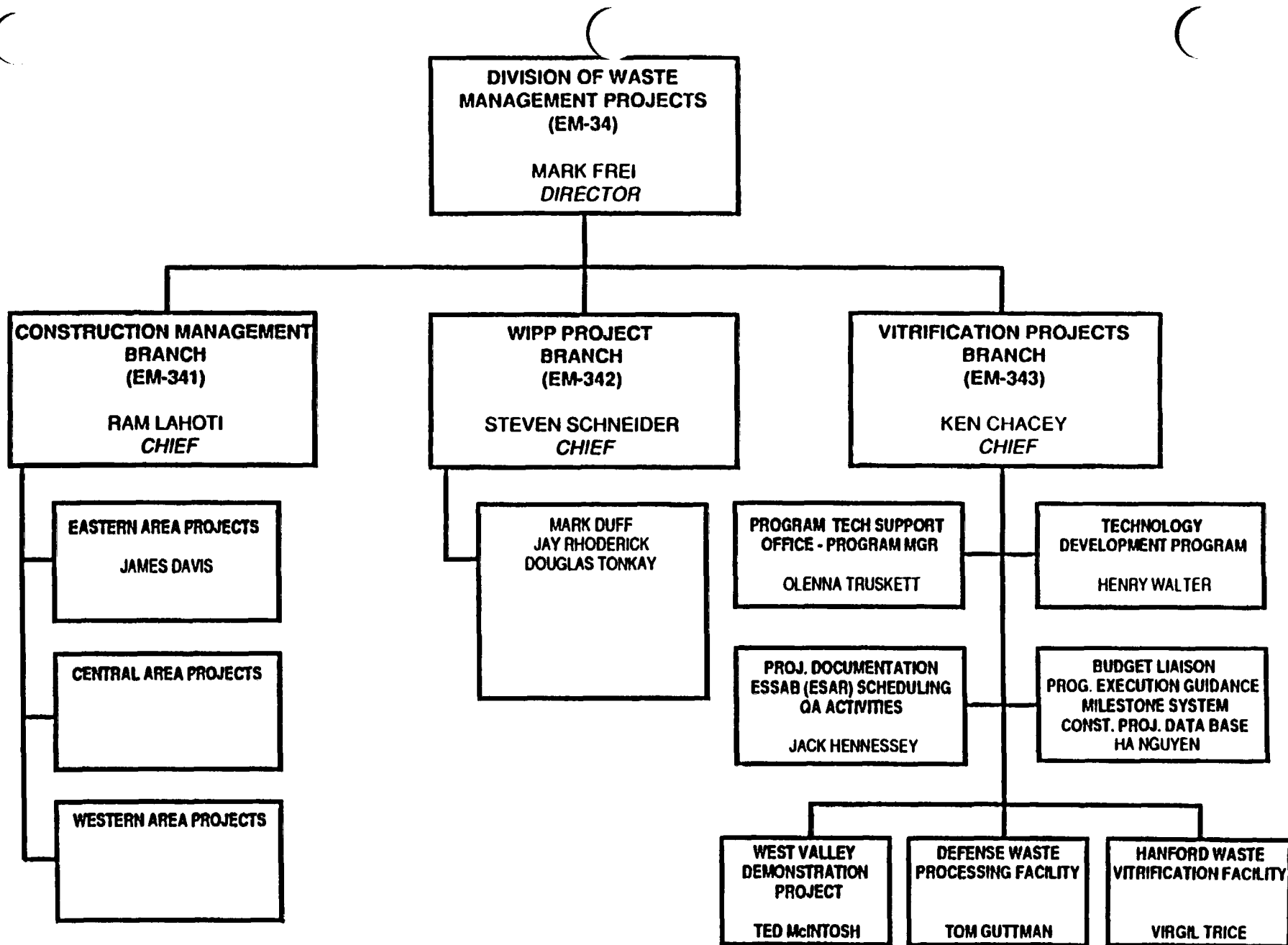
Waste Minimization Branch, EM-352

James Antizzo, Chief
Secretary, (vacant)
Rebecca Redeker, Mgmt Intern
Waste Min. Info. Spec., (vacant)

On Board	62
Named Actions	2
Vacancies	6
Immediate Needs	17
High Priority	23

Total	110
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2/14/91



During the audit Norman Frank will be staying at:

Courtyard Marriot (9011760Q)
805 Russell Avenue
Gaithersburg, MD 20879
Phone: 301-670-0008

EM Audit Team Assignments

Audit Manager: Robert Clark, DOE/OQA
 Audit Team Leader: Norman C. Frank

Team A Louis Wade and Clyde Morell [Criteria 1,2,3
 (scientific investigation)]

Team B Don Miller and Jim George [Criteria 4,7,15,16]

Team C Craig Walenga and Tom Rodgers [Criteria 3
 (facilities and software),5,6,17,18]

Monday	Tuesday	Wednesday	Thursday	Friday
8:30 am Team and Observer Briefing	8:30 am	8:30 am	8:30 am	8:30 am
9:00 am to 10:00 am Preaudit Meeting	ATL - Brief EM Management and Crit. 2 B - Crit. 4/7 C - Crit. 6	ATL - Brief EM Management A - Crit. 3 B - Crit. 15 C - Crit. 3	ATL - Brief EM Management A - Crit 3 B - Crit. 16 C - Crit. 18	ATL - Brief EM Management A, B, and C - Meet with final EM staff; consolidate comments, results, and CARs
10:00 am Audit A - Crit. 1 B - Crit. 4 C - Crit. 5				
11:30 am to 12:30 pm LUNCH				
12:30 pm A - Crit. 1 B - Crit. 4 C - Crit. 5	12:30 pm A - Crit. 2/3 B - Crit. 7 C - Crit. 6	12:30 pm A - Crit. 3 B - Crit. 15 C - Crit. 17	12:30 pm A, B, and C - Meet with final EM staff	2:00 - 2:30 pm Postaudit Meeting
4:00 pm Team Debriefing	4:00 pm Team Debriefing	4:00 pm Team Debriefing	4:00 pm Team Debriefing	

Criteria Covered by the Audit

1-7, and 15-18

STANDARD PRACTICE PROCEDURE

SPP 1.01
Page 1 of 5
Rev. 0
Effective
Date 02/02/90

INDEX OF HIGH-LEVEL WASTE STANDARD PRACTICE PROCEDURES FOR QUALITY ASSURANCE

Section 1.0 - QUALITY ASSURANCE PROGRAM OVERVIEW

<u>SPP Number</u>	<u>Title</u>	<u>Revision</u>	
✓1.01	Index of High-Level Waste Standard Practice Procedures for Quality Assurance	0	ALL

Section 2.0 - CONTROL OF PROGRAM DEFINING DOCUMENTS

<u>SPP Number</u>	<u>Title</u>	<u>Revision</u>	
✓2.01	Standard Practice Procedures	0	C
✓2.03	Quality Assurance Program Description Preparation, Maintenance, and Control	0	C
✓2.04	Control of the Standard Practice Procedures Manual	0	C
✓2.05	Selective Application of QA Activities	?	C

Section 3.0 - TRAINING AND CERTIFICATION

<u>SPP Number</u>	<u>Title</u>	<u>Revision</u>	
✓3.01	Preparation and Maintenance of Plans for Personnel Training, Indoctrination, and Orientation	0	A
✓3.02	Preparation and Conduct of Personnel Training, Indoctrination, and Orientation	0	A
✓3.03	Certification of Quality Assurance Audit Personnel	0	A
✓3.04	Documentation of Surveillance and Review Personnel Qualifications	0	A

✓3.05	Administration of Personnel Certification and Qualification Records	0	A
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Section 4.0 - PROGRAM CONTROL AND VERIFICATION

<u>SPP Number</u>	<u>Title</u>	<u>Revision</u>	
✓4.01	Planning and Scheduling of Evaluation Activities	0	A, C
✓4.02	Administration of Quality Assurance Audits	0	C
✓4.03	Conduct of Quality Assurance Audits	0	C
✓4.04	Administration and Conduct of Surveillance	0	A
4.05	Administration of Technical Reviews	0	A, C
✓4.06	Conduct of Technical Reviews	0	A, C
4.08	Administration of Peer Reviews	0	A
4.09	Conduct of Peer Reviews	0	A
✓4.10	Review of Operations Offices Quality Assurance Program Descriptions and Procedures	0	B
✓4.11	Review of Waste Acceptance Process Technical Documents	0	B
✓4.12	Review of Program Execution Guidance Documents	0	B
4.13	Participation in Evaluation Activities Led by External Organizations	0	A, C

Section 5.0 - NONCONFORMANCE, DEVIATION, AND CORRECTIVE ACTION CONTROL

<u>SPP Number</u>	<u>Title</u>	<u>Revision</u>	
✓5.01	Deviation Reporting and Disposition	0	B
✓5.02	Management Action Request	0	B
✓5.03	Control of Unsatisfactory Conditions (Stop Work Orders)	0	B
✓5.04	Disposition of Deviations Identified By Outside Organizations	0	B
✓5.05	Review of Unusual Occurrences	0	B
✓5.06	Control and Disposition of Deviations and Recommendations for Improvement by Outside Organizations	0	B

Section 6.0 - DOCUMENTATION CONTROL

<u>SPP Number</u>	<u>Title</u>	<u>Revision</u>	
✓6.01	Official HLW Office Files	0	C
✓6.02	Preparation of Correspondence	0	C
✓6.03	Incoming Mail	0	C
✓6.04	Commitment Control	0	C
✓6.05	Controlled Documents	0	C

Section 7.0 - QUALITY RECORDS MANAGEMENT

<u>SPP Number</u>	<u>Title</u>	<u>Revision</u>	
✓7.01	Preparation, Transfer, and Receipt of Quality Records	0	C
✓7.02	Quality Records Management	0	C

Section 8.0 - PROGRAM COORDINATION, EVALUATION, AND REPORTING

<u>SPP Number</u>	<u>Title</u>	<u>Revision</u>	
8.01	Coordination of Reviews and Evaluations by Outside Organizations	0	A
✓8.02	Quality Assurance Program Evaluation and Assessment of Adequacy and Effectiveness	0	A
✓8.03	Review and Reporting of Quality Assurance Program Progress and Status	0	A

Section 9.0 - PROJECT MANAGEMENT

<u>SPP Number</u>	<u>Title</u>	<u>Revision</u>	
✓9.01	Preparation and Maintenance of the Program Schedules	0	A
✓9.02	HLW Monthly Progress Reporting	0	A
✓9.03	Preparation and Maintenance of the Work Breakdown Structures (WBS)	0	A

Section 10.0 - PROGRAM IMPROVEMENT

<u>SPP Number</u>	<u>Title</u>	<u>Revision</u>	
✓10.01	Identification and Analysis of Adverse Quality Trends and Problems	0	A
10.02	Planning and Conduct of Quality Improvement	0	B
✓10.03	Differing Staff Opinions and Allegations	0	A

EM AUDIT
PROCEDURES ARRANGED BY AUDIT TEAM

<u>SPP Number</u>	<u>Title</u>	<u>Revision</u>
<u>TEAM "A"</u>		
1.01	Index of High-Level Waste Standard Practice Procedures for Quality Assurance	0
3.01	Preparation and Maintenance of Plans for Personnel Training, Indoctrination, and Orientation	0
3.02	Preparation and Conduct of Personnel Training, Indoctrination, and Orientation	0
3.03	Certification of Quality Assurance Audit Personnel	0
3.04	Documentation of Surveillance and Review Personnel Qualifications	0
3.05	Administration of Personnel Certification and Qualification Activities	0
4.01	Planning and Scheduling of Evaluation Activities	0
4.04	Administration and Conduct of Surveillance	0
4.05	Administration of Technical Reviews	0
4.06	Conduct of Technical Reviews	0
4.08	Administration of Peer Reviews	0
4.09	Conduct of Peer Reviews	0
4.13	Participation in Evaluation Activities Led by External Organizations	0
8.01	Coordination of Reviews and Evaluations by Outside Organizations	0
8.02	Quality Assurance Program Evaluation and Assessment of Adequacy and Effectiveness	0
8.03	Review and Reporting of Quality Assurance Program Progress and Status	0

<u>SPP Number</u>	<u>Title</u>	<u>Revision</u>
9.01	Preparation and Maintenance of the Program Schedules	0
9.02	HLW Monthly Progress Reporting	0
9.03	Preparation and Maintenance of the Work Breakdown Structures (WBS)	0
10.01	Identification and Analysis of Adverse Quality Trends and Problems	0
10.03	Differing Staff Opinions and Allegations	0
<u>TEAM "B"</u>		
1.01	Index of High-Level Waste Standard Practice Procedures for Quality Assurance	0
4.10	Review of Operations Offices Quality Assurance Program Descriptions and Procedures	0
4.11	Review of Waste Acceptance Process Technical Documents	0
4.12	Review of Program Execution Guidance Documents	
5.01	Deviation Reporting and Disposition	0
5.02	Management Action Request	0
5.03	Control of Unsatisfactory Conditions (Stop Work Orders)	0
5.04	Disposition of Deviations Identified by Outside Organizations	0
5.05	Review of Unusual Occurrences	0
5.06	Control and Disposition of Deviations and Recommendations for Improvement by Outside Organizations	0
10.02	Planning and Conduct of Quality Improvement	0
<u>TEAM "C"</u>		
1.01	Index of High-Level Waste Standard Practice Procedures for Quality Assurance	0
2.01	Standard Practice Procedures	0

<u>SPP Number</u>	<u>Title</u>	<u>Revision</u>
2.03	Quality Assurance Program Description Preparation, Maintenance, and Control	0
2.04	Control of the Standard Practice Procedures Manual	0
2.05	Selective Application of QA Activities	?
4.01	Planning and Scheduling of Evaluation Activities	0
4.02	Administration of Quality Assurance Audits	0
4.03	Conduct of Quality Assurance Audits	0
4.05	Administration of Technical Reviews	0
4.06	Conduct of Technical Reviews	0
4.13	Participation in Evaluation Activities Led by External Organization	0
6.01	Official HLW Office Files	0
6.02	Preparation of Correspondence	0
6.03	Incoming Mail	0
6.04	Commitment Control	0
6.05	Controlled Documents	0
7.01	Preparation, Transfer, and Receipt of Quality Records	0
7.02	Quality Records Management	0

The observers on this audit are scheduled to be:

James T. Conway, USNRC

John T. Buckley, USNRC

Phillip Niedzielski-Eichner, Nye County, NV

Frank Nash, TESS

Thomas R. Colandrea, EEI

HLW DIVISION PROCEDURE FOR CONDUCTING OBSERVATION AUDITS OF DOE HIGH LEVEL WASTE REPOSITORY PROGRAM QA AUDITS

1.0 PURPOSE

This procedure describes the High-Level Waste Management Division's methodology for conducting observation audits of quality assurance (QA) audits performed by the Department of Energy (DOE). These audits may be performed on DOE, its contractors and subcontractors, its participating organizations, and may include contractor audits of their subcontractors. For example, the staff may observe a USGS audit of one of their contractors.

The primary objective of the Nuclear Regulatory Commission's (NRC) observation audit program is to gain confidence that the DOE is implementing a program which meets the NRC's QA program requirements established in 10 CFR 60, Subpart G. This confidence is gained by assessing DOE's ability to identify and correct problems through their audit program. Observation audits will be the principal means for the staff to assess the implementation of the DOE program prior to the start of extensive site characterization activities. Observation audits also enable the staff to provide guidance to the DOE on QA program implementation and the overall DOE audit program. The staff will follow-up on staff concerns with respect to the audit and/or deficiencies identified by the audit team. This will assure the staff that corrective action is being performed and QA programs are being properly implemented.

2.0 OBJECTIVE

The objective of this procedure is to describe techniques for assessing the overall effectiveness of a quality assurance program audit conducted in the DOE program. Guidance on the following areas is provided:

- (a) Qualifications required for the observers.
- (b) Responsibilities
- (c) Criteria for selection of audits for observation
- (d) Areas to be observed
- (e) Protocol during the observation audit
- (f) Reporting requirements
- (g) Follow-up

3.0 QUALIFICATIONS OF THE OBSERVERS

Personnel selected for observation audits shall have experience or training commensurate with the scope, complexity, or special nature of the activities to be audited (e.g., technical observers shall be selected based on their education and experience in the technical area being audited). The observers shall be selected based on the following qualifications: auditing and technical experience, education, auditor training, communication skills, and knowledge of QA, technical, and regulatory requirements. All observers shall meet the requirements of ANSI/ASME NQA-1-1983 for auditor qualifications.

The training program for observers should address the following:

- 3.1 (a) The basics of the audit process

- (b) Applicable requirements documents
- (c) DOE/NRC protocol for observers
- (d) Conduct of observers

Attendance and successful completion of an exam covering the topics above should be completed prior to any staff member participating as an observer.

4.0 RESPONSIBILITIES

The following identifies the responsibilities of individuals involved in the observation audit process:

- 4.1 Operations Branch Chief**
 - (a) Approval of observation audit schedule.
 - (b) Reviewing and approving the final report.
 - (c) Transmitting the final report to the DOE.
- 4.2 Functional Section Leaders (QA and technical sections)**
 - (a) Preparation of observation audit schedule in consultation with P/M and technical branch (QA Section Leader only)
 - (b) Selection of observers.
 - (c) Assuring that observers are indoctrinated and trained for the audit observation. This information shall be documented and retained.
 - (d) Concurring on final report.
 - (e) Revising observation audit procedure as needed.
- 4.3 Project Manager (HLOS)**
 - (a) Coordinating the arrangements for the observation, including meeting notices for the State, letters to DOE, coordinating with TRB and QA section to assure integration.
 - (b) Acting as the principal spokesperson for the NRC during the audit. P/M will rely on functional staff to explain observations or other topics within their discipline.
 - (c) Ensuring during the audit that all concerns, positions, methods, etc. are consistent with Commission and Office policies.
 - (d) Writing the transmittal letter to DOE.
 - (e) Co-authoring report.
 - (f) Integrating evaluations of technical section and QA section observers, as necessary.
 - (g) Leading observation audit team during the audit.
- 4.4 Observers**
 - (a) Evaluating the DOE audit program in accordance with this procedure, reviewing pertinent background information (such as the DOE audit plan, previously identified open items, the checklist, the QA plan, and any necessary technical procedures or documents).
 - (b) Completing the checklist described in Attachment A.
 - (c) Writing the report (for their area of responsibility).
 - (d) Concurring on report.
 - (e) Explaining NRC observations to DOE audit team, as necessary.

Technical staff members will be primarily responsible for evaluating the effectiveness of the DOE audit team in assessing the quality of the technical work. QA staff will primarily be responsible for evaluating the audit team's assessment of the controls applied to work. Because these areas overlap, and because individual team members may possess qualifications in areas outside of their specific responsibilities, QA and technical staff should coordinate and integrate their review of the DOE audit.

5.0 CRITERIA FOR SELECTION OF AUDITS FOR OBSERVATION

The selection of audits for observation should be based on the following:

- (a) The importance of the activity being audited (for example, critical path activities which provide site characterization data which are important to public radiological health and safety and/or waste isolation).
- (b) The time since the last audit (NRC, DOE, WMPO, etc).
- (c) The results of previous audits, observation audits, or other reviews by NRC or DOE, particularly those which identified major concerns.

The OCRWM Consolidated Audit Schedule should be used for determining which audits are planned by DOE.

6.0 AREAS TO BE OBSERVED

See Attachment A for instruction on the areas to be observed and the use of a checklist to document results.

7.0 PROTOCOL DURING AUDIT

During the observation audit, the staff shall conduct themselves in a professional and cooperative manner. Observers should coordinate with the DOE audit team leader to assure that the effectiveness of the audit team is not disrupted. Observers are encouraged to participate fully by furnishing their questions, observations, and recommendations to the DOE audit team leader. Efforts should be made by the observer to minimize direct questions of the audited organization. It may be necessary to exclude observers from certain portions of the audit (such as procurement actions that are in-process, or sensitive personnel records). Observers should obtain a copy of the audit checklist as soon as it is available and should prevent predisclosure of the list to the audited organization.

All staff concerns should be communicated to the audit team leader in a clear and timely manner. Observers shall indicate the acceptable areas of the audit program as well as express concerns, or recommendations to the DOE audit team leader prior to leaving the site. Every attempt should be made to express their concerns daily to the DOE audit team leader. Whenever possible, the observers should attend the entrance and exit meetings and audit team caucuses. The observers should also express their concerns about the adequacy and implementation of the audited organization's QA program to the audit team leader prior to the exit meeting. Observer concerns about the conduct of the audit should be addressed only to the audit team leader unless directed otherwise by the audit team leader. The audit team leader should be given the opportunity to respond to staff concerns. The observer should consider any new

information provided to determine if concerns are still valid. Efforts should be made to reach agreement with the audit team leader on the nature of the concern and where necessary, that appropriate corrective action will be taken. All observations should be based on facts and personal opinions should be avoided.

8.0 REPORTING REQUIREMENTS

A report shall be written upon completion of the audit and will be sent to the Director, Office of Systems Integration and Regulations, Office of Civilian Radioactive Waste Management, Department of Energy. The DOE Project Office (WMPO), the State of Nevada, and the organization that conducted the audit shall also receive a copy of the report. The report shall evaluate the overall effectiveness of the DOE audit in assessing the implementation of the QA program. Needed improvements in the audit, which would make future audits acceptable to the staff, should be identified. The areas addressed in the checklist (Attachment A) should be included in the report to the extent that each was observed. In addition, each report shall address the audit results. The report should address the positive as well as the negative aspects of the audit.

The format of the report should include the following headings:

8.1 Summary

- (a) Objective of audit and audit observation
- (b) Scope of audit
- (c) Main conclusions on overall effectiveness of audit and major areas needing improvement.

8.2 Introduction

- (a) Contents of report (observations, DOE findings, audit team members, etc.)
- (b) Date(s) of audit observation and the organization being observed
- (c) General background information about the audited organization (e.g., their scope of work and importance to safety or waste isolation.

8.3 Audit Purpose and Scope

- (a) Based on DOE's and NRC's perspective
- (b) QA criteria and technical work audited

8.4 Audit Team Members and Observers (name, title, and affiliation)

8.5 NRC Observations of the Audit Team

- (a) Addresses each area described in the checklist (Attachment A) to the extent that each was observed.
- (b) Conclusions should be based on facts. Subjective judgements should be minimized.
- (c) Supporting detail (i.e., examples) should be provided as necessary to clearly support the observations.

8.6 Preliminary Results/Findings of Audit Team

- (a) Attach a copy of the draft results or summarize the results.

8.7 Appendices may be attached which address specific observations such as:

- (a) Observations and open items with respect to the audited organization's QA program identified by the audit observer.

9.0 FOLLOW-UP

The staff may elect to observe follow-up audits or surveillances by DOE which are needed to verify that the audited organization is implementing the necessary corrective action. Likewise, follow-up audits by the staff may be necessary to ensure that those recommendations for improving the DOE audit program are being implemented. It is the responsibility of the observers to track all staff concerns. All concerns shall be documented and subsequently closed out upon satisfactory resolution of the concern. The actions taken to resolve the issue shall be documented.

10.0 REFERENCES

ASME/ANSI NQA-1-1983
10 CFR Part 50 Appendix B
OCRWM Consolidated Audit Schedule --
DOE Memo on Observer Protocol (July 14, 1987)

ATTACHMENT A

AREAS TO BE OBSERVED AND CHECKLIST COMPLETION

This attachment provides guidance on the areas to be addressed before or during the observation audit. A checklist (attached) shall be used which documents the area investigated and the results. The checklist is intended to be a guide for the audit observers. Observers should rely on their professional judgement in deciding which areas to emphasize or de-emphasize in the checklist. The staff should place a greater focus on performance of the audit team rather than just programmatic compliance. This means did the audit team verify that the audited organization's QA program is producing quality products (i.e., reports, data, test procedures) and the documentation necessary to defend that work in licensing. In addition, concerns should be put into perspective. For example, does a missing signature have a negative effect on the effectiveness of the audit? If not, the staff should clearly indicate that a noncompliance exists but it did not result in reduced product quality. The product, in this case, is an effective audit.

HLWM DIVISION OBSERVATION
AUDIT CHECKLIST

1. Observation Audit No:
2. Observer:
3. Date(s) of Audit:
4. Audited Organization:
5. Audit Conducted By:

PROCEDURE: The areas listed should be addressed either before or during the audit. When information used to support staff conclusions is obtained by verification of documented evidence, appropriate documents should be referenced. However, in those instances where only verbal information can be obtained, this shall be noted and the person contacted documented, so that appropriate follow-up action can be taken to verify that supporting documentation exists.

The observation audit number shall be placed on each successive checklist sheet. In addition, upon completion of the respective checklist, the HRC observer shall sign and date each checklist sheet in the space provided. Lastly, for those areas not covered or not applicable (NA) the auditor shall document this and provide justification in the "RESULTS" section of the checklist.

The following checklist has been organized in relative order of importance. This will emphasize audit performance rather than procedural compliance.

Staff should not be limited to only those questions on the list, but should pursue any others which will assist in achieving the objective of the observation audit.



Department of Energy
Washington DC 20585

JUL 14 1987

State and Tribal Representatives (List Attached)

At the last Quality Assurance Coordinating Group meeting DOE, State, Tribal and NRC representatives discussed the policy that should be used with regard to the participation of State, Tribal and NRC representatives on DOE audits. It appears that a general consensus was reached among the meeting participants on a procedure for participating in the DOE QA auditing process. Details are in the attached draft policy statement.

We are pleased to invite your review of the enclosed draft policy statement and would appreciate knowing of any remaining concerns you may have.

Sincerely,

Stephen H. Kale
Associate Director for
Geologic Repositories, Office of
Civilian Radioactive Waste Management

Enclosure

SAIC/T&MSS

MAY 27 1988

CCF RECEIVED



Celebrating the U.S. Constitution Bicentennial — 1787-1987

ENCLOSURE 2

POLICY FOR PARTICIPATION OF STATE, TRIBAL AND NRC REPRESENTATIVES
AS OBSERVERS ON DOE AUDITS

1. The QA Manager of OGR will furnish to the State, Tribal and NRC representatives a schedule of audits planned by DOE-HQ (OGR) and by the DOE project offices. Because of frequent changes to the schedule, the schedule will be updated at approximately monthly intervals and copies furnished to the State, Tribal and NRC representatives.
2. OGR and the project offices will make every effort to send an audit notification at least 30 days prior to each QA audit. The audit notification will, whenever possible, include an audit plan and a description of the scope of the audit. Copies of OGR audit notifications will be furnished to NRC and to all State and Tribal representatives; copies of project audit notifications will be furnished to NRC and to the affected State and Tribal representatives.
3. State, Tribal and NRC representatives may request to participate in any audit. Requests need not be in writing. Telephone contacts to request participation are:

OGR - Carl Newton - (202) 586-5059
BWIP - Pierre Saget - (509) 942-7250
WMPO - Jim Blaylock - (702) 295-1125
SRPO - Jerry Reese - (806) 374-2320

State, Tribal and NRC representatives who wish to participate will make every effort to contact the DOE representative at least two weeks prior to the audit so that arrangements for their participation can be made.

4. When a request to participate is received by DOE from a State, Tribal or NRC representative, it is DOE's policy to make every reasonable effort to honor the request. When small audit teams are used by DOE, and requests for many observers are received, it may be necessary for DOE to limit participation (but in no event to less than one observer per organizational entity, i.e., one from the affected State, one from each affected Tribe, and one from NRC), so that the auditing process will not be hampered by an excessive number of observers. In instances where the limit of one observer per affected party will still result in an excessive observer to auditor ratio, DOE will contact the affected parties and seek voluntary reductions. It is expected the parties will make every reasonable attempt to accommodate DOE's requests.

5. Observers on DOE audits will be under the authority of the audit team leader (or sub-team leader if the team is divided during the audit). Observers are encouraged to participate fully by furnishing their questions, observations and recommendations to the audit team leader (or sub-team leader). Direct interactions between observers and auditee personnel will generally be discouraged and it may be necessary to exempt observers from certain portions of an audit (such as procurement actions that are in-process, classified material, or sensitive personnel records). The DOE policy is that every effort is to be made to limit such exemptions and to include observers as full participants in all aspects of the audit possible.
6. The State, Tribal and NRC representatives who will be participating in a QA audit are to be furnished a copy of the audit checklist as soon as it is available. A target date of ten days prior to the audit will be attempted. The State, Tribal and NRC representatives who receive audit checklists are, of course, to keep their contents confidential and to not, under any circumstances, divulge its contents to representatives of the organization to be audited.
7. DOE encourages observers to receive formal QA auditor training and QA lead auditor training. Every effort to accommodate State, Tribal and NRC representatives in DOE sponsored training courses is to be made. There are, however, no DOE requirements for observers to have had such training.
8. DOE invites observers to express concerns and recommendations on the auditee's QA program to the audit team leader for his consideration in preparing the audit report. DOE also invites observations on the conduct of the audit and solicits recommendations on how we might improve our audit process. Observers will be afforded an opportunity to speak at exit meetings following each audit. Regular opportunities are to be provided to observers during the course of the audit and at the quarterly QACC meeting for State, Tribal and NRC representatives to discuss their comments and recommendations.

AUDIT OBSERVER INQUIRY

Audit. No. _____

Log No. _____

Name _____ Organization _____

Requirement Reference _____

Question/Concern _____

Response _____

Observer's Acknowledgement _____

Cleared for Submittal to Audit Participant: _____

Lead Auditor/ Lead Technical Specialist

Audit Team Leader

AUDIT OBSERVER INQUIRY

Audit. No. _____

Log No. _____

Name _____ Organization _____

Requirement Reference _____

Question/Concern _____

Response _____

Observer's Acknowledgement

Cleared for Submittal to Audit Participant: _____

Lead Auditor/ Lead Technical Specialist

Audit Team Leader

AUDIT OBSERVER INQUIRY

Audit. No. _____

Log No. _____

Name _____ Organization _____

Requirement Reference _____

Question/Concern _____

Response _____

Observer's Acknowledgement _____

Cleared for Submittal to Audit Participant: _____

Lead Auditor/ Lead Technical Specialist

Audit Team Leader

AUDIT OBSERVER INQUIRY

Audit. No. _____

Log No. _____

Name _____ Organization _____

Requirement Reference _____

Question/Concern _____

Response _____

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Response _____

Observer's Acknowledgement _____

Cleared for Submittal to Audit Participant: _____

Lead Auditor/ Lead Technical Specialist

Audit Team Leader

MEMORANDUM

Date: July 16, 1991
Subject: Report of EM-343 Informal Review
To: Kenneth A. Chacey, Chief
Vitrification Projects Branch, EM-343
U.S. Department of Energy

Attached is the original report and a copy with the backup material collected during the informal review of EM-343. The report is for your information and use as you feel appropriate.


Patrick L. Slattery
Team Leader


Ray B. Walton
Team Member

Attachment

7/16/91
M5465

U.S. DEPARTMENT OF ENERGY
OFFICE OF ENVIRONMENTAL RESTORATION
AND WASTE MANAGEMENT
OFFICE OF WASTE MANAGEMENT
VITRIFICATION PROJECTS BRANCH

INFORMAL REVIEW

ORGANIZATION EVALUATED: U.S. Department of Energy, Office of
Environmental Restoration and Waste
Management, Division of Waste Management
Projects, Vitrification Projects Branch (EM-343)

DATE OF REPORT: June 14, 1991


DATES OF REVIEW: May 20-22, 1991

LOCATION: DOE Headquarters, Trevion I and Trevion II Buildings

REVIEW RESULTS:

The review was performed to identify any weak areas in the EM-343 implementation of their Quality Assurance (QA) Program so that quality improvements could be initiated and problems corrected. The Review was to include evaluating the Standard Practice Procedures (SPPs) for adequacy of implementation by EM-343. EM-343 had not attempted to invoke all 43 SPPs within EM-343 at this time but placed emphasis on 15 of the SPPs. In several cases, the 15 procedures had not been implemented by EM-343 to the degree that the procedures practicality for day to day use could be evaluated nor possible improvements be determined. Therefore the team concluded that EM-343 has not reached full implementation of the QA Program. The team has discussed several potential improvement areas in the Attachment. It also appeared to the team that implementation may be slowed by an apparent lack of a comprehensive understanding of the QA Program by EM-343 personnel and in-house QA resources.

Because of the purpose of the review, the team discussed some general suggestions for improvement with EM-343. No Deviations and Corrective Action Reports were written since the team concluded that the procedures had not been fully implemented at this time. The team recommends that EM-343 evaluate the areas for potential improvement and take necessary actions.


PATRICK L. SLATTERY
Team Leader


RAY B. WALTON
Team Member

Attachment

Specific Observations and Discussions

1. EM-343 QA Program Definition

There is no clear definition of the EM-343 QA program. Currently, there is no officially designated EM-343 (in-house) QA Program Manager. EM-343 personnel must be involved in many of the SPPs in addition to the 15 procedures that were originally emphasized. An example of SPPs that also apply to the EM-343 staff, but were not invoked on the original matrix, are those procedures pertaining to audits/surveillance, certification of personnel, QAPM Monthly Reports, and conduct of technical reviews. At this time, the SPPs do not cover involvement with procurement quality (especially of services such as support contractors) or for quality control of software (if used in technical reviews of Safety Analysis Reports, etc.).

2. Procedural implementation and conformance to procedures

Some of the procedures are clearly written for EM-343 performance with many of the procedures only requiring EM-343 participation.

Review of EM-343 implementation of the 15 emphasized procedures found several requirements were not implemented by EM-343. Subcontractors were performing some of these activities vice designated EM-343 representatives. However, several SPP requirements (e.g., available listings of personnel for record access, annual QA program evaluation, provisions identified for dual record storage, records not being validated, personnel not signing/dating documents) were not being met.

3. Records Management

EM-343 has established a file cabinet for QA records and elected to have a dual storage container in the Trevion I building. Very few records were maintained presently in the QA Records file cabinet in EM-343 or their "dual" storage area in Trevion I location. (As mentioned above the records are not being validated at this time). Most of the records reviewed had some errors including: signatures missing, orientation modules not identified on attendance sheets, missing records, incorrect data transfer, original records not available, and in some cases what the record represented was not clear. At the time of the surveillance, some records called for in SPPs were requested to be reviewed. Some records for SPPs 3.01, 6.05, and 9.02 had been entered into the QA records file cabinets. Records for SPPs 2.01, 2.03, 3.03, 3.04, 4.01, 4.02, 4.04, 4.10, 5.02, 5.03, 5.04, 7.02, 10.01, and 10.03 had not been entered into the "QA records file cabinets". The team did not believe that attendance lists for QA orientation SPPs orientation which are being maintained in several locations meet the definition of a QA record, nor would Trevion I meet the requirements for "sufficiently remote to eliminate the chance of exposure to a simultaneous hazard".

Review of the Index to Division of Waste Management Projects Files indicates some QA records are probably filed in the HLW Project files and not the "QA records file cabinet" at this time. Examples would be the review and approval of SARs,

Procurement, ORRs, Title I and II, etc. Therefore, these documents are not being protected by dual storage at this time.

4. Orientation/Training

Training assessments have been made and approved for EM-343 personnel. However, there does not appear to be a basis for these assessments (i.e., no job analysis). Normally three requirements were specified as mandatory training. Two of the training sessions are orientations and none of the training would stop a person from performing their day-to-day duties. Other classroom training has been identified as desirable training but was not considered mandatory.

The assessment for the individual expected to be designated QA Program Manager did not include auditing techniques.

There is presently no in-house certified EM-343 lead auditors nor do any of the training assessments indicate that certain people will be expected to obtain certification.

The training assessments reviewed by the team only reflected formal classroom training. On-the-job training and reading assignments should be recognized and utilized. It was the team's understanding that neither individual, primarily involved with quality records management had read or been told to read DOE Order 1324.2A or the Vitrification Projects [Branch] Records Management Policies and Requirements document.

5. Document Control

The EM-343 designated QA records file cabinet contained several Controlled Document Master Lists. Instead of a list of documents that EM-343 would control, this turned out to be lists, which identified controlled documents that were known to be currently assigned to EM-343 personnel as of January 1991. Several lists were missing, and there was no established frequency to update the lists. Consideration should be given to how EM-343 controls the QAPD, SPP's, Policies and Requirement documents, Memorandum of Agreement, procurement document-specification, etc... that are originated, approved and issued by EM-343. It was also noted that some of the controlled documents appeared to take an excessive time for distribution. An example of this situation was the Vitrification Projects Records Management Policies and Requirements document which was approved by EM-30 on 8/30/90 and was distributed approximately 6 months later on 2/28/91.

It is also unclear on how "Golden Sheets" have been distributed and controlled, and how SPP changes are to interact with such sheets. One of the team members indicated his controlled copy of the SPP's did not contain the Gold Sheets.

6. Inattention to Detail

A few items are mentioned below because small errors can add confusion to implementation or impair communication because of the many participants involved with this program.

- On May 14, 1991, one memo from EM-343 specifies that BDM/SAIC will be the lead support organization for audits/surveillance. On the same day another memo from EM-30 assigns implementation

responsibility to PTSO for the quarterly and annual evaluation and assessment schedule. The distribution lists for these two memos are different and in neither memo are all persons responsible for implementing portions of the memos (i.e., portions of the EM-343 QA Program) included on distribution.

- The May 14, 1991, memo from EM-30 that distributed the approved E&A schedule did not attach an E&A schedule with an approval signature although the team was told that the schedule had been approved on May 6, 1991.
- The team was requested to perform this review during May 23-24. These dates were moved up to May 20-22 by the team and with EM-343 agreement. The approved E&A schedule, which gets wide distribution, does not indicate this review but does indicate that a surveillance is to be performed in June 1991. If external parties wanted to observe or participate in this review, they would not have been aware of the dates of the review.

There have been no previous audits of DOE/EM by DOE/RW. There have been three surveillances conducted by DOE/RW, of which only one report is issued. The issued report is included in this auditor's binder.

The previous surveillances are:

HQ-SR-91-011, July 16-18, 1991, covering SPP 4.11 and SPP 4.12 (report included).

HQ-SR-91-016, August 6-8, 1991, covering SPP 7.01 and SPP 7.02.

HQ-SR-91-014, August 20-22, 1991, covering SPP 3.03 and SPP 3.04.

OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.

¹⁴ CAR NO. _____
DATE: _____
SHEET: _____ OF _____
QA
WBS NO.: _____

CORRECTIVE ACTION REQUEST

¹ Controlling Document		² Related Report No.	
³ Responsible Organization		⁴ Discussed With	
¹⁰ Response Due	¹¹ Responsibility for Corrective Action	¹² Stop Work Order Y or N	
⁵ Requirement:			
⁶ Adverse Condition:			
⁷ Recommended Action(s):			
⁸ Initiator	Date:	⁹ Severity Level - 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	¹³ Approved by OQA _____ Date:
¹⁵ Verification of Corrective Action:			
¹⁶ Corrective Action Completed and Accepted: QAR _____ Date _____		¹⁷ Closure Approved By: OQA _____	

**INSTRUCTIONS FOR THE PREPARATION OF
OFFICE OF CIVILIAN RADIOACTIVE WASTE MANAGEMENT
CORRECTIVE ACTION REQUEST**

Initiator

1. Enter the document and revision which has not been complied with.
2. Enter the number of the report for the activity that resulted in identifying the adverse condition (i.e., Audit Report No., Surveillance Report No.). Enter N/A if there is not a related report.
3. Enter the organization responsible for the adverse condition (e.g., USGS, RW-40).
4. Enter the name of the individual with whom the CAR condition was discussed.
5. State or paraphrase the requirement in narrative, concise form including specific reference (para./section no.) to the governing document (block 1).
6. Describe the adverse condition found, in concise narrative form including reference to examples discovered. (Use and refer to continuation sheet, if needed.)
7. Provide a recommended action that would be acceptable.
8. Enter your name and date.

Director, OQA (or designee)

9. Check applicable box.
10. Enter the date the response is due from the responsible organization.
11. Enter the individual (name and title) who is responsible for responding to the CAR.
12. Circle N if a Stop Work Order was not issued or Y if one was issued.
13. Sign and date the CAR.
14. Obtain from the CAR Coordinator the next sequential number from the CAR log and enter the date the CAR is issued.

QA Representative

15. Document the objective evidence used during verification.
16. Sign and date when corrective action is verified and accepted.

Director, OQA

17. Verify CAR is acceptable for procedural compliance; sign and date.

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WASHINGTON, D.C.**

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SHEET: _____ OF _____

CORRECTIVE ACTION REQUEST
(continuation sheet)

**OFFICE OF CIVILIAN
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**CORRECTIVE ACTION REQUEST
(continuation sheet)**

**OFFICE OF CIVILIAN
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CORRECTIVE ACTION REQUEST
(continuation sheet)

**OFFICE OF CIVILIAN
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**CORRECTIVE ACTION REQUEST
(continuation sheet)**

**OFFICE OF CIVILIAN
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**CORRECTIVE ACTION REQUEST
(continuation sheet)**

**OFFICE OF CIVILIAN
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U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.**

SHEET 1 OF 14
AUDIT/SURVEILLANCE/INSPECTION
NO. HQ-91-003

QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>Clyde Morell</u> <i>Clyde Morell</i> DATE <u>8/7/91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <i>James C. Frank</i> DATE <u>8/7/91</u>	
DATES OF EVALUATION <u>8/26 - 30/91</u>				
CONTROLLING DOCUMENT (Title, Number, Revision) Quality Assurance Program Description DOE/EM/WO/02, Rev. 0			ACTIVITY EVALUATED Criterion 1 - Organization	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	<u>Section 1.0 Organization</u> Verify that the interface with OCRWM and other DOE offices are clearly defined and understood. Review QA Interactions. (DOE/EM/WO/02) (Para. 1.0a)			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

**OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.**

SHEET 2 OF 14
AUDIT/SURVEILLANCE/INSPECTION
NO. HQ-91-003

Crit. 1 - 02

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	Fig. 1.0.2 shows the QA function delegated to a Support Contractor. Verify that EM retains control of QA. (RW 0214 Para. 1.2) Note: DOE may delegate the work but still retains responsibility and accountability.		
3	Is the responsibility and authority of each organization clearly established and documented. (NQA Supp. 1S-1 Para. 3.1)		
4	Are interfaces between organizations and changes thereto documented? (NQA-1 Supp. 1S-1 Para. 3.2) Note: Section 1.0 of the QAPD does not address all the organizations identified in Fig. 1.2.1-1. Section 1.0 Para. 2.0 addresses Vitrification Projects Branch. Subsequent paragraphs address committees, offices and branches		

OFFICE OF CIVILIAN
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U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.

SHEET 3 OF 14
AUDIT/SURVEILLANCE/INSPECTION
NO. HQ-91-003

102 - Crit 1

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
5	Verify the organization independence of the Vitrification Branch Client for production responsibilities. (RW214, Para. 2.2) Note: Section 1.0 Para. 1.2.1(2a) states the branch chief responsible for cost, schedule, technical requirements and quality assurance.		
6	Verify that organizations above, below and related to the Vitrification Projects Branch are established. Note: Section 1.0 Para. 1.2.1(2)a. states that these organizations are shown on Figure 1.2.1-1.		

**OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.**

SHEET 4 OF 14
AUDIT/SURVEILLANCE/INSPECTION
NO. HQ-91-003

102 - Crit. 1

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
7	Is the organization line between the Office of Environment QA/QC, (EM20) and EM343 clearly established (Section 1.0 Para. 1.2.1(2)c)		
8	Is the organization for QA for the DOE Operations Offices at RL, SR, CH & ID clearly established? (Section 1.0 Para. 1.2.1(2)b) a) Have letters of delegation been initiated to these offices?		
9	What is the chance of the Material Steering Committee (MSC)? a) Who is responsible for the MSC? b) Who verifies of the MSC? c) Verify that the MSC reviews the activities of the MIO in accordance with SPP 4.13.		

**OFFICE OF CIVILIAN
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U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.**

SHEET 5 OF 14
AUDIT/SURVEILLANCE/INSPECTION
NO. HQ-91-003

02-Crit. 1

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
10	Verify RWs participation on the Material Steering Committee (MSC) Review notification, attendance, agenda reports and disposition and deliberations. Section 1.0 Para. 1.2.1(5)b		
11	Ask the same questions for <i>Waste Acceptance Committee, Materials Integration Office, and the Materials Characterization Center.</i>		
12	Review the chance of the Materials Integrated Office (MIO) (a) What RW needs impact MIO and how are these needs tracked? [Section 1.0 Para. 1.2.1(7)] (b) Is "special projects" defined. (c) Does MIO control special projects/studies. (d) Review monthly progress reports. (e) Review Peer Reports. See SPP 4.09 (f) Verify MSC review of MIO activities. [Section 1.0, Para. 1.201(7)] (g) Verify the qualification of the personnel of MIO (Section 1.0, Para. 1.2.1) Personnel selected to perform or verify activities affecting quality shall have education, experience, and training commensurate with the minimum requirements specified. Relevant education and experience shall be verified. Documentation for affected organization training and qualification program shall include the objective, content of the program, attendees, and date of attendance.		

**OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.**

SHEET 6 OF 14
AUDIT/SURVEILLANCE/INSPECTION
NO. HQ-91-003

02 - Crit 1

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
12	The suitable proficiency of personnel performing activities that affect quality is maintained through indoctrination and training. Indoctrination and training is verified through the audit, surveillance and trend program.		
13	<p>Review the Materials Characterization Center (MCC) activities -</p> <ul style="list-style-type: none"> (a) Is there a character or contract? (b) Does MIO provide test parameters. (c) Are tests controlled in accordance with RW 214 Section 11 and NQA BR 11 and Supp. 11.S.1 <ul style="list-style-type: none"> • Test requirements and acceptance criteria. • Specified requirements • Test procedures • Calibrated instrumentation. • Appropriate equipment • Trained personnel • Environmental condition. • Test results <p>(Section 1.0 Para., 1.2.1(8)a)</p>		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
14	Verify the qualifications of the MGC staff.		
15	Verify organizational reporting relationship to the vitrifications branch office.		
16	Verify RW input into MCC review reports, meeting reports and correspondence. [Section 1.0 Para. 1.2.1(8)b]		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
17	Review MCC program plan and monthly report. Is the monthly report distributed to DOE HQ and Operation Offices? [Section 1.0 Para. 1.2.1(8)b]		
18	Does EM or RW monitor the activities of: WGWA Operations Office, RW, SR, CH & ID Review audit schedules, audit reports, surveillance reports, inspection reports, trip reports. Review and directives, comments or observations. (General)		
19	Verify the control of WAC. WCWA MIO and MCC review: Charters, contracts, specification. Is the "Chain of Command" and reporting responsibility established? (General)		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
20	Where is the Vitrification Projects Branch Chief located? If he is located at HQ verify lines of authority, responsibility to other groups on Fig. 1.2.1-1 (Section 1.0, Para. 1.2.2a)		
21	<p>Verify that the HLW Quality Assurance Program Manager is assigned and meets the following prerequisites:</p> <ul style="list-style-type: none"> (1) Is at a level equivalent to the other positions reporting to the Vitrification Projects Branch Chief. (2) Has knowledge and experience in quality assurance and management. (3) Has the authority and resources to do the following: <ul style="list-style-type: none"> • Verify that the organization's and sub-tier organizations' quality assurance programs are implemented effectively and adequately. • Ensure that further processing, delivery, installation, or operation is controlled until a nonconformance, deficiency, or unsatisfactory condition is properly dispositioned, or recommend stop work to the Vitrification Projects Branch Chief. • Review and recommend approval or disapproval of quality assurance programs, revisions to programs, and the interpretations of the programs. (4) Does not have other duties or responsibilities that could prevent full attention to quality assurance program matters. (5) Has freedom from cost and schedule considerations when they are opposed to quality considerations. 		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
22	(6) Has access to the Vitrification Projects Branch Chief and the Director of Waste Operations when necessary to identify and resolve unresolved quality concerns. (Section 1.0, Para. 1.2.2b)		
23	Verify that the QA Specialist has been assigned by the support services contractor. (Section 1.0 Para. 1.2.2c)		
24	Verify that the support services contractor has performed the following tasks: (1) Recommending the organization of the HLW Quality Assurance Program and the assignments for execution responsibility as appropriate. (2) Recommending the organization and staffing plan and level for conducting the quality assurance practices necessary to fulfill DOE's responsibility for establishment and adequacy of the Program. (3) Administratively controlling the Quality Assurance Specialists. (Section 1.0 Para. 1.2.2c)		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
25	<p>Verify that the QA Program Manager and QA specialist are assigned and have the documented authority to do the following:</p> <ul style="list-style-type: none"> (1) Gain access to work areas and identify quality problem (2) Initiate, recommend, or provide solutions to quality problems through designated channels. (3) Verify implementation of solutions. (4) Determine the adequacy of facilities and equipment provided to carry out approved procedures and instructions. (5) Issue special instructions necessary to execute his or her responsibilities. (6) Notify responsible management of unsatisfactory work or unapproved practices, and if necessary, stop unsatisfactory work or control further processing, deliver, or installation or nonconforming materials. (Section 1.0, Para. 1.2.3) 		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
26	<p>The Vitrification Projects Branch Chief has performed the following specific tasks:</p> <ul style="list-style-type: none"> (1) Organizing the D&Q Quality Assurance Program and assigning execution responsibility as appropriate (2) Ensuring that each Operations Offices' organization give the person responsible for quality assurance sufficient authority to assess and identify quality problems; to irritate, recommend, or provide solutions; and to verify implementation of solutions. (3) Arranging for the support and assistance needed to implement the D&Q Quality Assurance Program. (4) Maintaining technical and administrative control of individuals under his or her supervision that perform quality assurance related activities. Is objective evidence available to support these activities? (Section 1.0, Para. 1.2.4) 		
27	<p>Review results of verification of the QA program.</p> <ul style="list-style-type: none"> a) Is the extent of QA controls as determined by the QA program manager consistent with the production activities? b) What is the approval circuit for QA procedure prepared by the QA program manager? c) Review Audit/surveillance schedules, report and follow-up activities. (Section 1.0, Para. 1.3.1) 		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
28	The QA Project Manager and QA Specialists are sub-contractor personnel. Verify continuity of the assignments. Report on any personnel turnover which may have an adverse affect on the program. (General) Identify a DOE person responsible for overseeing this position and what measurements in pace to assure accountability (RW214, RW4, Section 1, Para. 1.2)		
29	Review the Quality Engineering function. Verify: a) Assignments (DOE or Contractor personnel). b) Establishment of program requirements c) Status reporting. d) Planning. e) Reporting f) Record retention g) Quality improvement h) Nonconformance control i) Trend analysis j) Training and indoctrination k) Interface with QA, HQ and other groups [Section 1.0, Para. 1.3.1(s)]		
30	Verify qualification to QA personnel have been evaluated and verified. (Section 1.0, Para. 1.4.1)		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
31	Verify that communications are established and in use. Have quality problems been communicated, evaluated, dispositioned and distributed? (Section 1.0, Para. 1.5)		
32	Assess the effectiveness of formal versus informal communication and the judgment factor. (Section 1.0, Para. 1.5)		
33	Verify that Quality Assurance appears on the agenda of monthly and quarterly meetings. Review QA and OCRWM attendance and participation. (Section 1.0, Para. 1.5)		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>Fred Bearham</u> <i>Sal</i> DATE <u>8-7-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u><i>Jerman C. Frank</i></u> DATE <u>8/7/91</u>	
DATES OF EVALUATION 8/26-30/91				
CONTROLLING DOCUMENT (Title, Number, Revision) Quality Assurance Program Description DOE/EM/WO/02, Rev. 0			ACTIVITY EVALUATED Criterion 2 - Quality Assurance Program	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Verify the EM 331 is included on an organization chart. What is the interface between EM 20 and EM 331? (DOE/EM/WO/02 Section 2.0 Para. 2.2.2a)			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	Is the responsibility for performance of the annual assessment established? EM 20 and EM 343 appear to both have this responsibility (DOE/EM/WO/02 Section 2.0 Para. 2.2.2b)		
3	Verify that the annual assessment has been performed. Review reports and follow-up activities. (DOE/EM/WO/02 Section 2.0 Para. 2.2.2b)		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
4	<p>Review objective evidence that the QA Program Manager is assigned and performs the following:</p> <ul style="list-style-type: none"> • Participation in multi-discipline audits and reviews. • Review and acceptance of program plans and procedures • Review and concurrence with proposed corrective actions resulting from audit findings of deficiency. • Execution of certain design control and document control activities • Execution of certain development and qualification control activities. <p>(DOE/EM/VO/02 Section 2.0 Para. 2.2.3)</p>		
5	<p>Is there a detailed job description for QA personnel? Verify compliance with NQA-1 Supplement 2S-1, 2S-2 2S-3 and 2S-4. Does EM identify this requirement in job description? Is a copy of NQA-1 available at the EM office? (DOE/EM/VO/02 Section 2.0 Para. 2.3.1)</p>		
6	<p>Review annual assessment reports for accuracy, completeness, (is scope fully addressed?) distribution, management review and follow-up. (DOE/EM/VO/02 Section 2.0 Para. 2.2.3(4))</p>		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
7	Verify that annual assessments address the following purposes: <ul style="list-style-type: none"> • The effectiveness of implementation • The adequacy of planning and control • The effectiveness of corrective action • The adequacy of the organizational structure, staffing, and training • The adequacy of the management reporting system. [Section 2.0 Para. 2.2.3(4)]		
8	Verify the independence and qualification of assessment team member [DOE/EM/WO/02 Section 2.0 Para. 2.2.3 (4)]		
9	Is there provision for interim management assessment in special circumstances such as adverse trend, significant change in management, significant change in program or result of the communication process? (General)		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
10	Is it understood that commitment to commits to NQA-1 Basic Requirements and supplements? (DOE/EM/VO/02 Section 2.0 Para. 2.3.1)		
11	Table 2.3.2.1 identifies procedures that have been delegated to a lower organization. What is the status of these procedures? Review schedule and approval process. (DOE/EM/VO/02 Section 2.0 Para. 2.3.2)		
12	Does Waste Operations (EM30) issue and control program execution guidance document? (DOE/EM/VO/02 Section 2.0 Para. 2.3.3)		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
13	Verify that QA programs are established by each Operations Office & Operating Contractor. Review evidence of programs from Savannah River, Hanford, Idaho and West Valley for current revision, approval and document control. [DOE/EM/WO/02 Section 2.0 Para. 2.3.3.(1)]		
14	Verify that Operating Office and Operating Contractor QAPDs identify items and activities included in the Waste Acceptance Process. [DOE/EM/WO/02 Section 2.0 Para. 2.3.3(12)]		
15	Verify that programs address the following: <ul style="list-style-type: none"> • Research and development that is essential to qualification of the waste form • Control of materials, equipment, facilities, and processes that are essential to the certification of canistered waste forms • Processing operations that are essential to the certification of canistered waste forms. (DOE/EM/WO/01 Page 2 Para. 3.0)		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
16	<p>Verify implementation of the coordination activity.</p> <p>(a) Is the activity adequately staffed by qualified experienced personnel?</p> <p>(b) Are the coordinating groups or individuals identified?</p> <p>(c) Review objective evidence of interface coordination with OCRWM, Operations Office, Qualifiers</p> <p>(d) Are the following elements evident in the coordination process?</p> <p>(1) The control of documents through the implementation of document procedures.</p> <p>(2) The control of communications using communication control procedures.</p> <p>(3) The performance of, and participation in, technical and peer reviews.</p> <p>(DOE/EM/WO/02 Section 2.0 Para. 2.5.1)</p>		
17	<p>Does Para. 2.6.2 limit the QA program to the following elements?</p> <p>2.6.1 Quality assurance program activities, which include those major elements listed below, are performed as described in other sections of this program description.</p> <ul style="list-style-type: none"> • Program • Organization • Document Control • Audits and Reviews • Nonconformance Control • Corrective Action • Reporting • Records <p>(DOE/EM/Wo/02 Para. 2.6.2)</p>		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
18	Para. 2.6.2 states "these manuals each contain copies of the quality assurance program implementing documents listed in Figure 2.3.2-1. A brief description of those procedures is contained in Attachment II". Review the intent and implementation of this requirement (DOE/EM/VO/02 Para. 2.6.2)		
19	Para. 2.7 identifies responsibilities for Waste Operations (EM30) and Vitrification Projects Branch (EM 343). Review the interface. Is there overlap or duplication of responsibility? (DOE/EM/VO/02 Para. 2.7)		
20	Are the organizations over which the Vitrification Projects Branch has overview, defined? [DOE/EM/VO/02 Para. 2.7.1(3)]		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
21	Verify that the Vitrification Project Branch has performed the following activities for each organization. Review schedules and reports. (a) Review of QA plans and procedures (b) Surveillance of activities affecting quality. (c) QA auditor (DOE/EM/WO/02 Para. 2.7.1(3)a)		
22	Verify that approved procedures are in place to control the activities referenced in attribute #23. (DOE/EM/WO/02 Para. 2.7.1(3)b)		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>L. Wade</u> <i>LWL</i> <i>JER</i> DATE <u>8-7-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <i>James C. Frank</i> DATE <u>8/7/91</u>
DATES OF EVALUATION 8/26-30/91			
CONTROLLING DOCUMENT (Title, Number, Revision) Quality Assurance Program Description DOE/EM/WO/02, Rev. 0			ACTIVITY EVALUATED Criterion 3 - Design Control
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Verify that Waste Operations has delegated the responsibility for design control activities, including operational readiness review to Operations Office. (Para. 3.1.1)		
2	Waste Operations retains the responsibility for "selected technical and peer reviews". The selection of the reviews is the option of the Vitrification Projects Branch Chief. Demonstrate the process used to determine what receives a technical or peer review (Para. 3.1.1)		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	Demonstrate that Technical Reviews and Peer Reviews are conducted in accordance with approved procedures. (Para. 3.1.1)		
4	Verify that the Vitrification Projects Branch monitors and periodically audits the Operations Offices' design control practices, to ensure proper implementation and adequacy. (Para. 3.2.2)		
5	Demonstrate how revisions to the Waste Acceptance Specification (WAS) is communicated to the producers to require them to revise the Waste Form Compliance Plan (WCP) and the Waste Form Qualification Report (WQR) accordingly. (0.3 of Introduction) (RW-214, Appendix B)		

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QUALITY ASSURANCE CHECKLIST

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CONTROLLING DOCUMENT (Title, Number, Revision) Quality Assurance Program Description DOE/EM/WO/02, Rev. 0			ACTIVITY EVALUATED Criterion 4 - Procurement Document Control	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Verify the types of procurement activities conducted. (DOE/EM/WO/02, Paragraph 4.1.1) • Assignment of program execution to Operations Offices. • Procurement of Administrative and Technical support through completion bids.			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	Determine how many Operations Offices have been assigned program extension responsibilities and what these responsibilities are [DOE/EM/VO/02, Paragraph 4.1.1(1)]		
3	Verify that quality assurance requirements have been assigned to operations offices. (Paragraph 4.2.1) • Review supporting documentation		
4	Verify that support contracts specify both Technical and QA Requirements [Paragraph 4.1.1(2)]		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
5	Determine how EM has passed grading requirement down to the operations offices. (Paragraph 4.2.1)		
6	Determine if the procurement documents include the following information: <ul style="list-style-type: none"> • Scope of work • Technical & regulatory requirements • Quality assurance program requirements • Right of Access • Special QA requirements are specified which must be complied with • Documentation requirements • Nonconformance control 		
7	Verify that Procurement Documents are reviewed by the affected organizations and the reviews are documented. (NQA-1 Basic Requirement 4 and 4S-1) <ul style="list-style-type: none"> • Verify that an agreement has been reached. 		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
8	Verify that changes/revisions are reviewed in the same manner as the original. (NQA-1, BR-4 and 4S-1)		

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QUALITY ASSURANCE CHECKLIST

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DATES OF EVALUATION 8/26-30/91				
CONTROLLING DOCUMENT (Title, Number, Revision) Quality Assurance Program Description DOE/EM/WO/02, Rev. 0			ACTIVITY EVALUATED Criterion 5 - Instructions, Procedures & Drawings	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS <small>Record objective evidence reviewed, method of verification, personnel contacted</small>	RESULTS	
1	Has Waste Operations established a management procedures system that prescribes methods for performing quality-related activities? (Para. 5.1.1)			
2	Are procedure used by the Vitrification Projects Branch prepared in accordance with an approved procedure which prescribes a format and Identification system to be used? (Para. 5.1.) Implementation (Para. 6.1.1)			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	Verify that the procedures are organized under a management procedure system that is administered by a Procedure Coordinator who controls the issue of procedures. (Para. 5.1.2) a) Identify and review the management procedure system. b) Identify the procedure coordinator. c) Identify and review the procedure used by the coordinator to control the procedure.		
4	Verify that the Verification Projects Branch Chief has audited or has arranged for independent audit of the practices to ensure implementation and adequacy (Para. 5.1.3)		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
5	Verify that procedures, instructions, and drawings prepared by or issued by EM have been subjected to an independent review by a qualified reviewer. (Para. 5.1.4) a) How are reviewers qualified.		
6	Verify that the Vitrification Projects Branch has monitored and periodically audited the Operations Offices documentation practices. (Para. 5.2.2)		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>L. Wade</u> <u>JSR</u> DATE <u>8/7/91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u>[Signature]</u> DATE <u>8/7/91</u>	
DATES OF EVALUATION 8/26-30/91				
CONTROLLING DOCUMENT (Title, Number, Revision) Quality Assurance Program Description DOE/EM/WO/02, Rev. 0			ACTIVITY EVALUATED Criterion 6 - Document Control	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS	
1	Has waste operations established and implemented a document control system that fulfills the quality assurance program requirements and applies to documents prepared by EM. (Para. b.1.1)			
2	Verify that the Quality Assurance Program Manager and the Quality Assurance Specialists have reviewed the document control system and have confirmed it's readiness to function prior to implementation (Para. 6.1.1)			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	<p>Verify that Vitrification Projects Branch Documents that are related to or that affect quality, are controlled by procedure and that the procedure addresses the following. (Para. 6.1.2)</p> <ul style="list-style-type: none"> (1) Uniformity of format of initial and subsequent issuances. (2) Proper identification of the originator and date of origin of document, and a mechanism for verifying the authenticity of information. (3) Procedures for the review, approval, issuance, and revision of documents by the organization are established. (4) Initial issuance of document for use at locations where the activity will be performed prior to commencing the work. (5) Prompt and accurate issuance and distribution, including a mechanism for receipt control, of both the original document and subsequent document revisions to prevent inadvertent use of superseded material and to replace document in work areas in a timely manner. (6) Efficient revision of documents when necessary to clarify, correct, augment, or update the content of a document, while preserving the integrity of originally approved and released information. (7) Example of controlled documents are this QAPD and the Standard Practice Procedures. 		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
4	Verify that procedures standardize the identification, format and numbering of controlled documents (Para. 6.1.3)		
5	Verify that controlled documents have been reviewed for adequacy by the Quality Assurance Program Manager. (Para. 6.1.3)		
6	Verify that provisions are in place for documents to be reviewed and comments resolved before final approval. (Para. 6.1.3) (a) Review documentation of the review sequence and assure records are maintained.		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
7	Verify the changes or revisions to controlled documents receive the same review and acceptance. (Para. 6.1.3)		
8	Verify the Branch Chief has established an appropriate periodic review schedule for the accepted controlled document. (Para. 6.1.3)		
9	Verify that the Vitrification Projects Branch maintains a listing of quality assurance administrative and technical procedures and that these procedures are under a receipt control system (Para. 6.1.4)		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
10	Verify that the procedure coordinator reviews the document distribution listing at least bi-monthly to follow-up on any delinquent receipt pages. (Para. 6.1.4)		
11	Verify that the master distribution list is maintained current. (Para. 6.1.4)		
12	Verify that the Quality Assurance Program Manager participates in and monitors the execution of the document control system. (Para. 6.1.5)		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
13	Verify that periodic audits of the document control system are performed. (Para. 6.1.5)		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>Fred Bearham</u> <i>[Signature]</i> DATE <u>8-7-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u><i>[Signature]</i></u> DATE <u>8/7/91</u>	
DATES OF EVALUATION 8/26-30/91				
CONTROLLING DOCUMENT (Title, Number, Revision) Quality Assurance Program Description DOE/EM/WO/02, Rev. 0			ACTIVITY EVALUATED Criterion 7 - Control of Purchased Items and Services	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS	
1	Verify that the PEGDs and Support Contracts establish the following: • What is to be accomplished? • What is to accomplish it? • How is it to be accomplished? • When is it to be accomplished? (NQA-1 BR-7, 7S-1)			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	Determine which standard DOE administrative procedures and DOE Orders are used to Control Administrative Support Contracts. [Para. 7.1.1(2)]		
3	Verify that the administrative procedures and DOE Orders identified in item 2 meet the requirements of DOE/RW-214, R.4 (General)		
4	Verify that Waste Operations has performed overview activities for proper implementation and adequacy. (Para. 7.1.1 and 7.2.4)		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>F. Bearham</u> <i>2/8/91</i> DATE <u>8-7-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u><i>James C. Frank</i></u> DATE <u>8/7/91</u>	
DATES OF EVALUATION <u>8/26 - 30/91</u>				
CONTROLLING DOCUMENT (Title, Number, Revision) Quality Assurance Program Description DOE/EM/WO/02, Rev. 0			ACTIVITY EVALUATED Criterion 15 - Control of Nonconforming Items	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS *
1	Verify that EM-30 has established procedures for control of non-conforming items. (DOE/EM/WO/02 Para. 15.1-1)			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	Does EM-343 retain control of the nonconformance program for all offices? EM-32, EM-33, EM-331 RL, SR, CH, ID?		
3	Is this procedure applicable only to canistered waste? (DOE/EM/WO/02 Para. 15.1.3)		
4	Verify reference to 10CFR21 Is it applicable? Is it posted? Is training/indoctrination conducted? Is the reporting process defined? (DOE/EM/WO/02 Para. 15.1.4)		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
5	Verify that the vitrification Project Branch Chief "periodically" audits the program. (DOE/EM/VO/02 Para. 15.1.5)		
6	Verify that QA Program Manager "periodically" analysis DCARs for "trends". Define or clarify "periodically" and "trends" (DOE/EM/VO/02 Para. 15.1.6)		
7	Verify that "significant" results of trend analysis are distributed to EM-343 Branch Chief, EM-30 and EM-20 and EM-1. Is "significant" defined?		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
8	<p>Operations offices are required to controls that include the following:</p> <ol style="list-style-type: none"> (1) Nonconforming items or activities are identified, documented, segregated (where practical), reviewed, and dispositioned. Affected organizations are notified of the nonconforming items or activities (including design consideration and computer codes), if the disposition is other than a scrap or rework. (2) Documentation identifies the non-conforming item or activities describes the nonconformance, the disposition of the nonconformance, and the inspection requirements; and includes signature approval of the disposition. Nonconformances are corrected or resolved before initiating the proper toneal test program on the item. (3) Provisions are established for identifying those individuals or groups, including the quality assurance organization, who are assigned the responsibility and authority to approve the dispositioning and closeout of nonconforming items. (4) Nonconforming items are segregated, where practical, from acceptable items and identified as nonconforming until they are properly dispositioned. (5) Acceptability of rework or repair is verified by reinspecting the items as originally inspected, or by a method that is at least equal to the original inspection method. Inspection, rework, and repair procedures are documented. (6) Nonconformance reports dispositioned "use as is," "use as repaired," or "used as modified" are made part of the inspection record and forwarded to Operations Office management. (7) Nonconformances reports are periodically analyzed to show quality trends. The significant results are forwarded to management for review and assessment. Is Em-30 or EM-343 in the approval circuit for these procedures? Are they available for review? (DOE/EM/WO/02 Para. 15.2.1) 		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
9	<p>Verify that the following requirements of NQA-1 are addressed and understood</p> <p>9.1 Identification</p> <p>(a) Identification of nonconforming items shall be by marking, tagging, or other methods which shall not adversely affect the end use of the item. The identification shall be legible and easily recognizable.</p> <p>(b) If identification of each nonconforming item is not practical, the container, package or serrated storage area, as appropriate, shall be identified.</p> <p>9.2 Segregation</p> <p>(a) Nonconforming items shall be segregated, when practical, by placing them in a clearly identified and designated hold area until properly dispositioned.</p> <p>(b) When segregation is impractical or impossible due to physical conditions, such as size, weight, or access limitations, other precautions shall be employed to preclude inadvertent use of non-conforming item.</p>		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
	<p>9.5 Disposition</p> <p>The disposition, such as use-as-is, reject, repair or rework, of nonconforming items shall be identified and documented. Technical justification for the acceptability of a nonconforming item, dispositioned use-as-is repair shall be subject to design control measures commensurate with those applied to the original design. The as-built records, if such records are required, shall reflect the accepted deviation.</p>		
	<p>9.6 Repaired or Reworked Items</p> <p>Repaired or reworked items shall be reexamined in accordance with applicable procedures and with the original acceptance criteria unless the nonconforming item dispositioned has established alternate acceptance criteria. (ASME NQA-1 Supplement 15S-1)</p>		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>Fred Bearham</u> <i>2/8/91</i> DATE <u>8-7-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u><i>James C. Frank</i></u> DATE <u>8/7/91</u>	
DATES OF EVALUATION 8/26-30/91				
CONTROLLING DOCUMENT (Title, Number, Revision) Quality Assurance Program Description DOE/EM/WO/02, Rev. 0			ACTIVITY EVALUATED Criterion 16 - Corrective Action	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS	
1	Verify that EM-30 through EM-343 has established a corrective action system to include the following: (1) Evaluation of nonconformances to determine the need for corrective action and significant conditions adverse to quality. Evaluation is in accordance with established procedures and criteria. (2) Corrective action includes identification of root cause(s) and action to prevent recurrence. (3) Documented review, by quality assurance specialist, to determine adequacy of the corrective action. (4) Follow-up reviews by quality assurance specialist, to verify the proper implementation of the corrective action.			

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	(5) Identification of significant conditions adverse to quality, identification of the root cause(s), resolution of generic implications, trending and review by an appropriate level of Waste Operations management. (DOE/EM/VO/02 Para. 16.1.1)		
2	Are guidelines established to differentiate between significant and non-significant conditions? (DOE/EM/VO/02 Para. 16.1.1)		
3	Verify that the corrective action program has been periodically audited. Review schedules, reports and follow-up activities. (DOE/EM/VO/02 Para. 16.1.2)		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
4	Operations Offices are required to establish and implement a corrective action system to include the same elements as the EM-30 System. Verify that the system is implemented and is audited by EM-30. (DOE/EM/WO/02 Para. 16.2.1)		
5	<p>Waste Operations, through the Vitrification Projects Branch, has established and implemented a system for corrective action for conditions which affect the development and qualification of an acceptable canistered waste form product and/or production process. This corrective action system requires conditions adverse to quality such as failures, nonconformances, malfunctions, deficiencies and defective material and equipment be reported through nonconformance and unusual occurrence reporting procedures. Quality assurance activities found deficient in reviews and audits of Operations Offices are also reported. The corrective action system includes the following elements:</p> <p>(1) Evaluation of nonconformances to determine the need for corrective action and significant conditions adverse to quality. Evaluation is in accordance with established procedures and criteria. Corrective action is required for nonconformances that are significant conditions adverse to quality, repetitive, or concern inadequate disposition of deviations.</p>		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
5	<p>(2) Corrective action includes identification of root cause(s) and action to prevent recurrence.</p> <p>(3) Documented review, by a quality assurance specialist, to determine adequacy of the corrective action.</p> <p>(4) Follow-up reviews by quality assurance specialists to verify the proper implementation of the corrective action.</p> <p>(5) Identification of significant conditions adverse to quality, identification of the root cause(s), resolution of generic implications, trending [reference Section 1.3.1(3)], and review by an appropriate level of Waste Operations management. This documented review includes the definition of corrective action and the action to prevent recurrence.</p>		
6	<p>The Vitrification Projects Branch Chief, assisted by the Quality Assurance Program Manager and the Quality Assurance Specialists, executes the corrective action system relating to development and qualification activities, and arranges for periodic independent audit of the system to ensure implementation and adequacy.</p>		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
7	<p>Operations offices are required to establish and implement a corrective action system which supports development and qualification activities. Each system will include the following elements:</p> <ul style="list-style-type: none"> (1) Evaluation of nonconformances to determine the need for corrective action. Evaluation is in accordance with established procedures. Corrective action is required for nonconformances that are significant conditions adverse to quality, repetitive, or concern inadequate disposition of deviations. (2) Corrective action includes identification of root cause(s) and action to prevent recurrence. (3) Documented reviews by the Operations Office quality assurance organization to determine adequacy of the corrective action. (4) Follow-up reviews by the Operations Office quality assurance organization to verify the proper implementation of the corrective action. (5) Identification of significant conditions adverse to quality, identification of root cause(s), trending, resolution of generic implications, and review by appropriate levels of management. This documented review includes the definition of corrective action and the action to prevent recurrence. 		
8	<p>Vitrification Projects Branch monitors Operations Offices' corrective action systems related to development and qualification activities, and periodically audits those activities to ensure implementation and adequacy.</p>		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>N.C. Frank</u> <i>JER</i> DATE <u>8/7/91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u><i>Norman C. Frank</i></u> DATE <u>8/7/91</u>	
DATES OF EVALUATION 8/26-30/91				
CONTROLLING DOCUMENT (Title, Number, Revision) Quality Assurance Program Description DOE/EM/WO/02, Rev. 0			ACTIVITY EVALUATED Criterion 17 - Quality Assurance Records	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS	
1	Verify that quality records are identified in the WCP and/or the WQR (Para. 17.1.1b)			

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	* RESULTS
2	Verify that a plan has been developed to capture those records generated prior to issuance to the WCP and/or the WQR.		
3	<p>Review seven packages that have been transferred to RW. Verify identification, packaging, and transfer met:</p> <p>(1) The records package will be identified as either QRP x.x.x. (Quality Records Package), ARP x.x.x (Administrative Record Package), or RTP x.x. (Record Turnover Package), with the "x.x.x" being the DOE-designated project identifier.</p> <p>(2) The Waste Form Producers do not assign Quality Levels to Waste Acceptance Process activities. However, all activities relating to the quality of the canistered waste form and its PR will be accomplished under a quality assurance program that is equivalent to a Quality Level I (QL-I) program within RW. As a result, QL-I will be the Quality Level Identifier for all quality record sent to RW by the Waste Form Producers.</p> <p>(3) A Table of Contents will accompany the package, with the above package identifier and Quality Level in the upper right corner of the first page.</p> <p>(4) The records package will be sent to RW using a transmittal form. (Para. 17.1.1b)</p>		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
4	For those same records packages, verify the records are legible, accurate, authenticated, identified and retrievable.		
5	Review the scope of the records program and the content of the QA Records. Verify the scope and contents accurately represents the work done by or through EM (Para. 17.1.1.c)		
6	Verify that responsibilities are defined for: <ul style="list-style-type: none"> the definition and implementation of record activities, particularly in the retention and safe storage of records. for record creation, transmittal, retention, and maintenance consistent with applicable codes, and standards (Para. 17.1.1b) 		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
7	<p>View the facilities for storing records. Verify that:</p> <ul style="list-style-type: none"> • Suitable facilities for the storage of records are described and utilized. • Work not directly associated with the records program is prohibited within the records storage facility. • Smoking, eating, or drinking is prohibited throughout the records storage facility. <p>(Para. 17.1.1b)</p>		
8	<p>View two facilities for storing documents and records prior to being received in the quality record control storage area. Verify that:</p> <ul style="list-style-type: none"> • Criteria are established and described for determining when a document becomes a quality assurance record subject to the controls of this section and the retention periods for such records. • Controls are established and described for controlling, protecting, and maintaining those records before they are entered and stored in the quality record control storage area. <p>(Para. 17.1.1.b)</p>		

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02 - Crit. 17

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
9	Review two laboratory, field, or log books, two data sheets, two data reduction documents, and one software program. Verify the method of documenting/recording, reviewing, and confirming accuracy as described. (Para. 17.1.1b)		
10	Determine the extent of assignment of records preparation and collection, storage, and maintenance assigned to Operations offices. Review the documentation that works this assignment. (Para. 17.1.2)		
11	Determine the number of Quality Assurance Specialists assisting the QA Program Manager in implementation of the records system. (Para. 17.1.3)		
12	Verify that the QA Program Manager has either performed an audit or arranged for an independent audit of the records system to ensure implementation and adequacy. (Para. 17.1.3)		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>Fred Bearham</u> <u>JB</u> DATE <u>8/7/91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u>James C. Frank</u> DATE <u>8/7/91</u>	
DATES OF EVALUATION 8/26-30/91				
CONTROLLING DOCUMENT (Title, Number, Revision) Quality Assurance Program Description DOE/EM/WO/02, Rev. 0			ACTIVITY EVALUATED Criterion 18 - Audits	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Review annual audit plan and the quarterly status. (a) Verify both external and internal audits are performed. (b) Verify that each Operations Office is scheduled for audit by EM. (c) Verify that new contractors are added to the schedule (See Item 12) (Para. 18.1.1 and 18.1.2a)			

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02-Crit. 18

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	<p>Reviews the audit plan for two Operation Offices. Verify it included:</p> <ul style="list-style-type: none"> (a) An objective evaluation of quality-related practices, procedures and instructions; the effectiveness of implementation; and the conformance with policy directives. (b) The evaluation of work areas, activities (including personnel training and indoctrination), processes, and items. (c) Review of documents and records to ensure that the quality assurance programs are effective and properly implemented. (d) Evaluation of identified elements of interface control with respect to Operations Offices' internal activities, as well as interfacing activities with contractors. <p>(Para. 18.1.2b)</p>		
3	<p>Determine whether any unscheduled audits were needed or performed. (Para. 18.1.2c)</p>		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
4	<p>Review the detailed plan for four audits to verify:</p> <ul style="list-style-type: none"> • It addresses the quality of products and technical work as well as programmatic compliance. • previous internal and external audits and the impact of changes in personnel, organization, and the quality assurance program were evaluated during its development. • It includes a written checklist of items to be investigated. • It includes a preaudit and a postaudit meeting. <p>(Para. 18.1.3a)</p>		
5	<p>Review four audit reports</p> <p>(a) Verify that the need for corrective action is established and the audit results are documented.</p> <p>(b) Verify each audit report includes a statement on the status and adequacy of the QA Program and on the QA Program effectiveness.</p> <p>(Para. 18.1.1 and 18.1.3b)</p>		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
6	<p>Obtain the names of the auditors for the four audit reports. Verify that the audit team:</p> <ul style="list-style-type: none"> • was certified in accordance with Section 2.7 of the QAPD. • did not have direct responsibility for the areas being audited. • included technical personnel to assess the quality of the products and technical works. <p>(Para. 18.1.3c)</p>		
7	<p>Verify that formal responses to the audit findings were provided.</p> <p>(Para. 18.1.3c)</p>		
8	<p>Verify that formal responses to the audit findings were provided.</p> <p>(Para. 18.1.4)</p>		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
9	Determine how the corrective action is monitored. Determine if any reaudits have been performed. (Para. 18.1.4)		
10	Review the previous four monthly progress and status reports. Verify that audit summaries are included. (Para. 18.1.5)		
11	Verify that a trend analysis has been done on "audit reports and data" and that the reports were provided to management? Determine whether management responded to the reports. (Para. 18.1.5)		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
12	Verify that all areas of the D&Q QA program where the requirements of DOE/RW-0214 are being implemented have been audited on an annual basis. (Par. 18.1.6)		
13	Verify that the activities and practices were audited upon implementation. These activities are to include: (1) The preparation, review, approval, and control of quality assurance program description, designs, specifications, procurement documents, instructions, procedures, and drawings. (2) The determination of those site operations that affect the integrity of development and qualification activities. (3) Requests for proposal and evaluation of bids. (4) Indoctrination and training program. (5) Interface control among DOE offices and major project participants. (6) Calibration and nonconformance control systems. (7) Quarterly assurance program commitments. (8) Activities associated with computer codes. (Para. 18.1.6b)		

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DATES OF EVALUATION 8/26-30/91				
DOCUMENT (Title, Number, Revision) Standard Practice Procedures, SPP 2.01, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 2.01	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Verify that the SPP Coordination Log is being completed and maintained current. (5.a.4)			
2	Verify that SPP's are prepared in the format specified in Attachment B. (5.a.5)			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 2.01

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	Verify that appropriate reviewers have been designated to review the SPP (5.a.7)		
4	Demonstrate how reviewers are selected and how their qualifications are determined and verified. (5.a.8) I.e. It would seem that a technical reviewer would have different qualifications than a QA or administrative reviewer.		
5	Verify that reviewers are conducted, comments are documented and properly resolved (5.a.8-10)		

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SPP 2.01

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
6	Verify that reviewers agree with the resolution of comments as evidenced by signatures on the SPP Coordination Log (5.a.15)		
7	Verify that SPP's are approved by the manager and agreed to by the QA specialist's on the SPP coordination log (5.a.17 & 18)		
8	Verify that the SPP Coordinator maintains the index (Attachment D) current, obtains the managers approval and distributes in accordance with reference 3.a. (5.b.1-4) Note: The reference to 3.a should be changed to 3.b		

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SPP 2.01

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
9	Verify that revisions to SPP's follow the same steps as the original and the portions revised are identified. (5.c.1&2)		
10	<p>Verify that the SPP Coordinator prepares the following quality records in accordance with reference 3.b (5.d.1)</p> <p>Note: The reference to 3.b should be changed to 3.c</p> <ul style="list-style-type: none"> a. Each SPP and revision as issued. b. SPP Coordination Log for each SPP revision. c. Each revision of the SPP Index. d. Review and comment form from each reviewer of each SPP. 		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
11	Verify that the SPP Coordinator maintains the following records for working and historical purposes (5.d.2) a. Copies of previously issued revisions and reviewers comments. b. Current SPP original c. Copy of SPP coordination log for each revision.		
12	Verify that an annual review of SPPs is conducted and those requiring revision are identified and revisions processed (5.e.1-3)		

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QUALITY ASSURANCE CHECKLIST

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DOCUMENT (Title, Number, Revision) Quality Assurance Program Description Preparation, Maintenance, and Control SP			ACTIVITY EVALUATED 2.03, Rev. 0 <i>Implementation of SP 2.03</i>	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS	
1	Identify who the manager is responsible for controlling and implementing this procedure.			
2	Review position description to determine if the manager is qualified to perform the assigned task.			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 2.03

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	Review training requirements to determine the manager has been trained prior to performing or directing the preparation of a draft QAPD.		
4	Identify the QAPD preparer for draft QAPD DOE/WO/02, Rev. 0.		
5	Verify the QAP preparer has prepared a draft QAPD as outlined in (5(a-1, a-2 & a-3).		

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SPP 2.03

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
6	Identify reviewers for the draft QAPD.		
7	Verify that the manager has established and approved a review criteria.		
8	Verify that the reviewers are using the approved review criteria for the QAPD review.		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
9	Verify that the reviewer have documented their comments in writing on the review/comment form reference 3c on that the reviewer has annotated a hard copy of the draft QAPD.		
10	Verify that the manager has resolved all comments on the review/comment form on the annotated QAPD. (SPP 2.03, Section 5)		
11	Verify that subsequent revision and comments are controlled by the manager in accord with step 1 through 4.		

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SPP 2.03

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
12	Verify that the manager initiates a QAPD coordination log and performs the requirement of b(1) steps (a) through (c) and b(2).		
13	Verify that the reviewer has signed and dated the appropriate blank of review/comment form to denote agreement with each part of the QAPD under question.		
14	Verify that the reviewer forwards the package (i.e QAPD, the review/comment, and the coordination log to the manager for provisional approval.		

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SPP 2.03

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
15	Verify that the manager performs the steps b(5) through b(8).		
16	<u>Revisions.</u> Verify that the manager performs the steps of c(1) through (2).		
17	<u>Annual QAPD Review.</u> Verify that the QAS performs the step of c(1) & (2).		

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SPP 2.03

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
18	<u>Control and Distribution.</u> Verify that the SPP Coordinator performs steps 5e.(1) through e.(u).		
19	Verify how uncontrolled QAPDs are distributed and identified.		
20	<u>Records.</u> Verify that the SPP Coordination performs the steps of f(1) through f(2).		

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QUALITY ASSURANCE CHECKLIST

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DATES OF EVALUATION 8/26-30/91			
DOCUMENT (Title, Number, Revision) Control of the Standard Practice Procedure Manual, SPP-2.04, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 2.04
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS <small>Record objective evidence reviewed, method of verification, personnel contacted</small>	RESULTS
1	Verify that the SPP Coordinator maintains an approved SPP distribution list including any revisions (5.a.1&2)		
2	Demonstrate how the approver is selected and what qualifications and/or level of authority he/she has (5.a.3)		

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 2.04

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	Verify that the SPP Coordinator has assigned and distributed controlled copies of the SPP Manual to those on the list (5.a.4-8)		
4	Verify that manual holders comply with the transmittal instructions, completes Part B of some and returns it as indicated (5.a.9)		
5	Verify the SPP Coordinator assures the transmittal memorandum is returned and if not, appropriate action is taken (5.a.10-12)		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
6	Verify the SPP Coordinator maintains the receipts or logs recording receipt status for SPP manuals or manual revisions. [5.b.1(a)]		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>Clyde Morell</u> <u>JCR</u> DATE <u>8/7/91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u><i>James C. Frank</i></u> DATE <u>8/7/91</u>
DATES OF EVALUATION 8/26-30/91			
CONTROLLING DOCUMENT (Title, Number, Revision) Selective Application of Quality Assurance Activities, SPP 2.05, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 2.05
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Verify that this procedure has been issued.		
2	If this procedure has not been issued, what controls are in place to implement QAPD DOE/EM/VO/02 [Para. 2.7.1(1)]		

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 2.05

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	Identify DOE management responsible for implementing this QAPD requirement of graded quality assurance program.		
4	Verify assigned personnel are trained prior to performing work.		
5	Review completed reviews implementing this requirement.		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>C. Morell</u> <i>[Signature]</i> DATE <u>8/7/91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u><i>[Signature]</i></u> DATE <u>8/7/91</u>	
DATES OF EVALUATION 8/26-30/91				
CONTROLLING DOCUMENT (Title, Number, Revision) Personnel Training, Indoctrination and Orientation (TI&O) SPP 3.01, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 3.01	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Verify that a Training Coordinator is assigned (Para. 5.a.1) SPP 3.01			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 3.01

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	Review the TI&O training schedule and plan. Verify that it addresses appropriate personnel and TI&O modules. Review Attachment B. (SPP 3.01, Para. 5.a.1)		
3	Verify that manager has assessed the annual TI&O needs of personnel performing quality related activities are personnel performing quality related activities identified under their cognizance. (SPP 3.01, Para. 5.a.2)		
4	Review TI&O worksheet for completeness, accuracy and legibility. (SPP 3.01, Attachment A)		

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SPP 3.01

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
5	Is the difference between quality related functions, quality achieving functions and quality assuring functions clearly defined (SPP 3.01, Para. 5.a.4)		
6	Verify that the needs assessment is incorporated into the TI&O plan (SPP 3.01, Para. 5.a.6.)		
7	Verify that the plan and schedule was distributed by January 1990. (SPP 3.01, Para. 5.b.1)		

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SPP 3.01

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
8	Verify that the training Coordinator has coordinated and monitored outside training courses (SPP 3.01, Para. 5.b.3)		
9	Verify the adequacy of the implementation of the procedures. a) Are all personnel performing b) Do training modules address the subject matter and needs of trainers. c) Are the strengths and weaknesses of the TI&O process identified and evaluated. (SPP 3.01, Para. 5.a.2)		
10	Are the Manager Identified. Reviewed organization charts and job descriptions (SPP 3.01, Para. 4.a.1)		

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SPP 3.01

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
11	How was TI&O controlled prior to issue of the SPPs? (General).		
12	Has a matrix, or similar document, been prepared to identify and track I&TO requirements? (General).		
13	Verify that the documentation required by the procedure is prepared and stored in accordance with SPP 7.01 (SPP 3.01, Para. 5.d.1)		

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SPP 3.01

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
14	Verify QA input into the TI&O process (SPP 3.01, Para. 4 General)		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>C. Morell</u> <i>[Signature]</i> DATE <u>8/7/91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <i>[Signature]</i> DATE <u>8/7/91</u>
DATES OF EVALUATION 8/26-30/91			
CONTROLLING DOCUMENT (Title, Number, Revision) Preparation and Conduct of Personnel T, I & O) SPP 3.02, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 3.02
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Review lessons for clarity, scope, content (is the subject matter addressed) SPP 3.02, Para. 5.a.5) - See other attributes in procedure.		

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 3.02

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	Verify that subject matter experts review and comment on lesson plans (SPP 3.02, Para 5.a.5)		
3	Verify that lesson plans are approved by the QA specialist and the manager (SPP 3.02, Para. 5.a.7)		
4	How does the manager ensure that personnel received QA indoctrination (SPP 3.02, Para. 5.b.1)		

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SPP 3.02

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
5	Verify that personnel have received QA indoctrination and re-indoctrination at 3 year intervals. Review documentation (SPP 3.02, Para. 5.b.1)		
6	Verify that project specific indoctrination classes have been conducted (SPP 3.02, Para 5.b.2)		
7	Review the evaluation of each participant for satisfactory completion of training. (SPP 3.02, Para. 5.c.6)		

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SPP 3.02

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
8	Verify that personnel assigned to altered training sessions have completed the training. (SPP 3.02, Para 5.c.8)		
9	Verify that TI&O sessions have been conducted when QA instructions are revised. Check the procedure issue process to determine recent issues. (SPP 3.02, Para 5.c.9)		
10	Verify that TI&O modules are administered, analyzed, evaluated and revised. (SPP 3.02, Para. 5.d.)		

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SPP 3.02

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
11	Verify that lessons are developed in accordance with established guidelines (SPP 3.02, Attachment A)		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>Louis R. Wade</u> <i>LWD</i> DATE <u>8-1-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <i>Arman C. Frank</i> DATE <u>8/7/91</u>	
DATES OF EVALUATION 8/26-30/91				
CONTROLLING DOCUMENT (Title, Number, Revision) Certification of Quality Assurance Audit Personnel SPP 3.03, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 3.03	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Verify the auditor examiner is certified in accordance with this instruction (General).			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 3.03 Rev. 0 Con't

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	Verify that auditors/lead auditors from outside organizations have been certified per SPP 3.03 or their certifications under another approved program confirmed in writing (General)		
3	Verify that an audits coordinator (CPC) has been assigned (5.a)		
4	Verify the CPC selects candidates to be considered for certification using the Audit Task Description, Obtains the necessary supporting documentation and forwards to the Certifying official for evaluation of the candidates. (5.a.1, 1-4)		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	* RESULTS
5	Verify the Certifying Official evaluates the candidate and documents the results on the Certification of Qualification Form, Attachment C, and forwards to CPC. (5.a.4, a-e)		
6	Verify the CPC reviews the documentation for adequacy and completeness including verification of the credit allocation and prepares a notification of Certification Memorandum, Attachment E (5.b.1).		
7	Verify the CPC enters the certification data and information on the Recertification Schedule, Attachment F. (5.b.2)		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
8	Verify the CPC; (5.c.1-3) a. Maintains the Recertification Schedule in accordance with SPP 3.05. (Refer to SPP-3.05 checklist). b. Issues a recertification notice to the certifying official and the affected person at least five (5) weeks prior tot he required data for recertification. c. Provides the Certifying Official with the original certification documentation and any additional supporting documentation accumulated on an annual basis.		
9	Verify that the certifying officer has evaluated the documentation and updated the certification for annual evaluation and signs a new Certification Certificate (5.c.4&5)		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
10	Verify the CPC transmits the Certificate to the person and their supervisor using the Notice of Certification Memorandum (5.d.1)		
11	Verify that the following quality records are maintained in accordance with SPP 7.01 (5.d.2) a. Certification Certificate b. Certification of Auditor Qualification form		
12	Verify that the QAS maintains the original certification documentation in the persons certification and training file in accordance with SPP 3.05. (Refer to SPP 3.05 checklist) (5.d.3)		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
13	<p>Verify that <u>Auditors</u> meet the following minimum qualifications (Exhibit-1 Para. 3)</p> <p>a) Training</p> <ol style="list-style-type: none"> 1. Codes, standards and regulations 2. Audit techniques, OTT, etc. 3. Demonstrate knowledge of audit instructions and requirements of clients QAPD and DOE documents. <p>b) Education and experience (5 points minimum)</p> <p>c) Communication skills</p>		
14	<p>Verify that <u>Auditors</u> Qualifications are maintained as follows (Exhibit 1 Para. 4)</p> <p>a) Maintenance of proficiency;</p> <p>b) Requalification</p>		

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SPP 3.03 Rev. 0 Con't

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
15	Verify that Lead Auditors meet the following minimum qualifications. (Exhibit-2 Para. 3) a) Education and Experience (10 pts. min.) 1. Education (4 pts. max.) 2. Experience (9 pts. max.) 3. Other (2 pts. max.) 4. Rights of management (2 pts. max.)		
16	Verify that Lead Auditors have received training in the following areas. (Exhibit-2 Para. 3c) a) DOE Order 5700.6, client instructions and requirements, NQA-1 etc. b) General structure of QA program 18 criteria. c) Auditing techniques d) Audit planning e) On the job training		
17	Verify that Lead Auditors qualifications are maintained as follows (Exhibit-2 Para. 4) a) Maintenance of proficiency b) Requalification		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
18	Verify that auditor examines meet the following minimum qualifications (Exhibit 3-Para. 3) a) Education and experience (10 pts min) 1) Education (4 pts. max.) 2) Experience (9 pts. max.) 3) Other (2 pts. max.) 4) Rights of management (2 pts. max.)		
19	Verify that Auditor examiners have received training in the following areas (Exhibit 3-Para. 3c) a) NQA-1 and other nuclear related codes and standards b) General structure of QA program c) Auditing techniques d) audit planning e) On-the-job training		
20	Verify that auditor examiners qualifications are maintained as follows (Exhibit 3-Para. 4) a) Maintenance of proficiency b) Requalification		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>L. W. ADE LAU</u> DATE <u>8-7-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u>Jerman C. Frank</u> DATE <u>8/7/91</u>
DATES OF EVALUATION 8/26-30/91			
CONTROLLING DOCUMENT (Title, Number, Revision) Documentation of Surveillance and Review Personnel Qual. SPP-3.04, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 3.04
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Verify that surveillance personnel are selected, evaluated and qualified in accordance with Section 5 of this procedure (SPP 3.04, Para. 5.a)		

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 3.04

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	Verify that participation in a survey or review is documentation on part IV of the Surveillance and Review qualification form. (SPP 3.04, Para. 5.a.5)		
3	Verify that surveillance and review personnel are requalified and the the requalification schedule is maintained (SPP 3.04, Para. 5.c)		
4	Verify that requalification notices are sent out at least 5 weeks prior to requalification date. (SPP 3.04, Para 5.c.2)		

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SPP 3.04

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
5	Verify that the CPC reviews qualifications on an annual basis. (SPP 3.04, Para. 5.c.3)		
6	Verify that surveillance and review personnel are qualified by education and experience. (SPP 3.04, Attachment A Para. 3.) Para 5.b.2)		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>L. WADE LMD</u> DATE <u>8-7-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u>James C. Freny</u> DATE <u>8/7/91</u>	
DATES OF EVALUATION 8/26-30/91				
CONTROLLING DOCUMENT (Title, Number, Revision) Administration of Personnel Certification & Qualification Records, SPP-3.05, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 3.05	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS <small>Record objective evidence reviewed, method of verification, personnel contacted</small>	RESULTS	
1	Verify that the following documentation is on file for each person: (a) Standard Resumes (Attachment A). (b) Documentation of training activities (which support qualification or certification requirements) including results of any examination. (c) Audit, Surveillance and Review Participation Records (Attachment B and C).			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 3.05

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	<p>(d) Verification of education documentation.</p> <p>(e) Job descriptions/task qualification requirement documents</p> <p>(f) Physicians certification of physical ability (such as eye sight) when applicable. (SPP 3.05, Para 5.a)</p> <p>Verify that the CPC maintains files under the following tabs: Certification Documentation, Training Documentation, Resume, Education Verification, Task Qualification Requirements, and Miscellaneous (SPP 3.05, Para. 5.a.5)</p>		

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SPP 3.05

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	Verify that are certification and requalification schedule is maintained by the CPC. (SPP 3.05, Para. 5.a.6)		
4	Verify that files updated whenever there are annual evaluations, extensions or changes in status. (SPP 3.05, Para 5.a.6)		
5	Verify that the forms required by this procedure are completed and on file. (SPP 3.05, Para. 6)		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>Craig Walenga</u> <i>Loul</i> <i>JCR</i> DATE <u>8-7-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u><i>Norman C. F...</i></u> DATE <u>8/7/91</u>	
DATES OF EVALUATION 8/26-30/91				
DOCUMENT (Title, Number, Revision) 2/2/90 Planning and Scheduling of Evaluation Activities SPP 4.01, Rev. 0			ACTIVITY EVALUATED Planning and Scheduling	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Evaluate SPP 4.01 to determine if the procedure is consistent with the EM QAPD, DOE/EM/WO/02. Flowchart the procedure. Is the procedure adequate, complete, and correct and does it appear to be implementable?			
2	Obtain the long range evaluation and schedule described in SPP 4.01, 5.b for the subsequent three fiscal year. Determine who is the EAS, the appropriate organizational directors and who is the Program Coordinator.			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 4.01

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	Discuss with the EAS how the SPP 4.01, 5.a,b,c and d process is implemented. Does it appear to be adequately implemented? Does the EAS appear knowledgeable of process? Has the EAS been trained to SPP 4.01?		
4	Discuss with the <u>Program Coordinator</u> or (PC) this process. Does the PC appear knowledgeable in the process? Has the PC been trained to SPP 4.01?		
5	During the discussions with the PC and EAS and through your own review assessment, is the Long Range Plan and Schedule adequate for the scopes of work that are on-going or will be conducted? Is the schedule for the next 3 fiscal year from the past Sept. 15? (SPP 4.01, Para. 5.d.) Check various SPPs for evaluation criteria. Are technical reviews schedules? (SPP 4.01, Para. 4)		

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SPP 4.01

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
6	Determine if each Organizational Director and Program Coordinators has been sent or has received the last (9/90) Long Range and Schedule. SPP 4.01, 5.d. Has this distribution been done through the PC? SPP 4.01, Para. 5.d.2. note.		
7	Determine if each Organizational Director and Program Coordinator will receive the 9/91 Long Range Plan are not yet approved, discuss the <u>EAS</u> and <u>PC</u> the status of the plan and schedule and if the SPP 4.01, Para. 5.d.1 requirement is to be met. (DOE/EM/WO/02 Page 2, Para. 3.1)		
8	Was the R&D effort documented? Are historical files maintained? (DOE/EM/WO/02 Page 3, Para. 4.2)		

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SPP 4.01

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
9	Obtain a copy of the Annual Evaluation Plan and Schedule and evaluate adequacy of the plan and schedule based on the approved long range plan and schedule and planned work. (SPP 4.01, Para. 5.e.2)		
10	Discuss with the EAS the establishment of the annual evaluation plan and schedule. Does the EAS appear knowledgeable?		
11	Discuss with the EAS the establishment of the annual plan and schedule. Does the EAS appear knowledgeable?		

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SPP 4.01

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
12	Has the PC approved the Annual Evaluation Plan and Schedule? (SPP 4.01, Para. 5.f)		
13	Determine if fiscal 1991 Annual Plan and Schedule was distributed through the Program Coordinator to the PC and the organizational directors. SPP 4.01 5.2.d(note) and 5.g. Spot check the PC and the organization directors to see if they have a copy.		
14	Obtain the fiscal 1992 Annual Plan and Schedule. Has the PC approved it? Has it bee distributed as described in Item 13? If not, discuss with the EAS and PC the current status of the plan and schedule.		

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SPP 4.01

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
15	Obtain the 4 quarterly fiscal 1991 Evaluation Plans and Schedules. Have they been approved by the PC? (SPP 4.01, Para. 5.i)		
16	Evaluate each Quarterly Evaluation Plan and Schedule against the Annual Plan and Schedule? Does it adequately address the Annual?		
17	Determine if each of the 4 quarterly plans and schedule have been sent through the Program Coordinator to the PG and the organizational directors by the 1st day of each fiscal quarter during fiscal 1991. Note SPP 4.01, Para. 5.j.2 (note) indicates the fiscal quarters are January, April, July, October.		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>Clyde Morell</u> <i>DMR</i> DATE <u>8/7/91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u><i>James C. Frank</i></u> DATE <u>8/7/91</u>
DATES OF EVALUATION 8/26-30/91			
CONTROLLING DOCUMENT (Title, Number, Revision) Administration of Quality Audits SPP 4.02, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 4.02
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Request - Position description of the Program Coordinator.		
2	Request - Position description of the Audits coordinator.		
3	Request - Position description of the Audit team leader.		

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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NO. HQ-91-003

SPP 4.02

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
4	Verify that the position descriptions are in line with the responsibilities identified in steps 5.a.(1) through (15), 5.b.(1) through (10), 5.c.(1) through (5), and 5(d).		
5	Verify that the individuals assigned to these positions have been trained prior to performing work to this procedure.		
6	Section 5.b.(e) states that the PC signs and dates the audit transmittal letter and returns to the QAS for dispositioning. The QAS has not been defined in this procedure. Please clarify.		

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NO. HQ-91-003

QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>L. Wade <i>fwl</i> JER</u> DATE <u>8-7-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u><i>Norman C. Frank</i></u> DATE <u>8/7/91</u>
DATES OF EVALUATION 8/26-30/91			
CONTROLLING DOCUMENT (Title, Number, Revision) Conduct of Quality Assurance Audits, SPP 4.03, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 4.03
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Demonstrate how the audit team leader determines the specific reviews and investigations to be made during the audit to match the status of activities. (Par. 5.a.2)		
2	Verify the audit team leader prepares the final audit scope and planning document including the list of requirements and implementing procedures (Par. 5.a.3)		

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 4.03

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	Demonstrate how the extent and depth of the audit is determined and is this determination documented (5.a.3)		
4	Verify that audit checklist (attachment A) are prepared and contain as a minimum; (Para. 5.a.6) a) Audit I.D. number, b) Detailed I.D. of attributes, c) Identification of requirements		
5	Verify the audits team leader assembles the audit planning package and obtains the review of the approval of the QAS (Para. 5.a.7-10) <i>and</i>		

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SPP 4.03

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
6	Verify that audits have been conducted on activities in a timely manner in order to identify potential or real deficiencies in the early stages of the activity. (Para. 5.d)		
7	Verify that deviations identified during the audit are documented on a DCAR in accordance with SPP-5.01 (Para. 5.d.9&10)		
8	Verify that checklists are completed appropriately during the course of the audit. (Para. 5.d.11&12)		

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SPP 4.03

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
9	Verify that audit reports are prepared in accordance with Attachment B and have been signed by the audit team leader and team members. (Para. 5.f.1-3)		
10	Verify the audit report, including deviation reports, completed audit checklist, and the final audit planning package to the QAS in a timely manner to ensure issue of the final report within 30 days of the post-audit conference. (Para. 5.f.5)		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>Louis R. Wade <i>LRL</i></u> DATE <u>8-7-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u><i>Jermain C. Frauf</i></u> DATE <u>8/7/91</u>
DATES OF EVALUATION 8/26-30/91			
DOCUMENT (Title, Number, Revision) Administration and Conduct of Surveillance SPP 4.04, Rev. 0			ACTIVITY EVALUATED SPP 4.04 <i>Implementation</i>
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Verify that the Surveillance Coordinator plans and schedules surveillance in accordance with SPP 4.01 (General) (Refer to c/ for SPP 4.01)		
2	Verify that personnel who perform surveillance are qualified in accordance with SPP 3.04 (General) (Refer to C/ for SPP 3.04)		

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 4.04

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	Verify the surveillance coordinator has ensured that evaluators are aware of assigned surveillance activities and; has determined the need for unscheduled surveillances (5.a. 1&2)		
4	Verify the evaluator has identified and collected input material and prepare a surveillance guide sheet-Attachment B. (5.a.4)		
5	Verify the evaluator has established a file for each surveillance activity and assigned a unique number and completes the activity status log (5.a.60)		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
6	Verify that surveillances have been conducted and documented. (5.b.1-5)		
7	Verify that deviations are documented in accordance SPP 5.01 (5.b.7) (Refer to c1 for SPP 5.01)		
8	Verify the evaluator upon completion of the report closes out the file on the surveillance activity and updates the surveillance activity log (5.c.3)		

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SPP 4.04

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
9	Verify that results of surveillance activities are transmitted to the management of the organization being evaluated. (5.C.4)		
10	Verify that surveillance reports are retained as quality records in accordance with SPP 7.01. (Refer to c1 for SPP 7.01)		
11	Verify the surveillance coordinator maintains the following records for working/historical purposes. (5.d.2) a) surveillance guide sheets b) surveillance activity log c) surveillance reports		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>C. Morell</u> <i>TCR</i> DATE <u>8/1/91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u><i>James C. Frank</i></u> DATE <u>8/2/91</u>
DATES OF EVALUATION 8/26-30/91			
CONTROLLING DOCUMENT (Title, Number, Revision) Administration of Technical Reviews SPP-4.05, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 4.05
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Verify that the SPP is applied to: <ul style="list-style-type: none"> • Review Group composition and qualifications • Review Group funding • Initiation of Reviews • Processing of Review Reports • Records Control (SPP 4.05 Para. 4) 		
2	Verify that a charter has been established for a EM TRG to review the WAPs WCPs, and WQRs. of each of the Vitrification projects: <ul style="list-style-type: none"> a) Savannah River b) West Valley c) Hanford 		

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	What is the process used to decide which documents are subject to review? (SPP 4.05, Para. 4)		
4	How does the Review Coordinator ensure that documents requiring review do not bypass the system? (SPP 4.05 Para. 4) (SPP 9.03 Para. 4.a.7)		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS																
5	<p>How is the coordination of the following various activities controlled? Review several packages. Verify each step is performed.</p> <p>a. Establishment of the Technical Review Group</p> <table><thead><tr><th><u>Performer</u></th><th><u>Action</u></th></tr></thead><tbody><tr><td>Review Coordinator</td><td>(1) Appoints Technical Review Group (TRG) Chairman.</td></tr><tr><td>Materials Integration</td><td>(2) Appoints Executive Secretary (ES) Office (MO)</td></tr><tr><td>Review Coordinator</td><td>(3) Approves appointment of the ES</td></tr><tr><td>TRG Chairman, ES</td><td>(4) Recommend members for TRG core group.(See Attachment A.</td></tr><tr><td>Review Coordinator</td><td>(5) Approves appointment of TRG core group membership.</td></tr><tr><td>TRG Chairman, ES</td><td>(6) Appoint technical consultants to the TRG as needed.</td></tr><tr><td>Review Coordinator</td><td>(7) Arranges for adequate funding to support TRG activities throughout the year.</td></tr></tbody></table> <p>(SPP 4.05 Para. 5.a)</p>	<u>Performer</u>	<u>Action</u>	Review Coordinator	(1) Appoints Technical Review Group (TRG) Chairman.	Materials Integration	(2) Appoints Executive Secretary (ES) Office (MO)	Review Coordinator	(3) Approves appointment of the ES	TRG Chairman, ES	(4) Recommend members for TRG core group.(See Attachment A.	Review Coordinator	(5) Approves appointment of TRG core group membership.	TRG Chairman, ES	(6) Appoint technical consultants to the TRG as needed.	Review Coordinator	(7) Arranges for adequate funding to support TRG activities throughout the year.		
<u>Performer</u>	<u>Action</u>																		
Review Coordinator	(1) Appoints Technical Review Group (TRG) Chairman.																		
Materials Integration	(2) Appoints Executive Secretary (ES) Office (MO)																		
Review Coordinator	(3) Approves appointment of the ES																		
TRG Chairman, ES	(4) Recommend members for TRG core group.(See Attachment A.																		
Review Coordinator	(5) Approves appointment of TRG core group membership.																		
TRG Chairman, ES	(6) Appoint technical consultants to the TRG as needed.																		
Review Coordinator	(7) Arranges for adequate funding to support TRG activities throughout the year.																		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS										
5a	<p>b. Documentation of TRG Qualification</p> <table><thead><tr><th><u>Performer</u></th><th><u>Action</u></th></tr></thead><tbody><tr><td>TRG Chairman</td><td><p>(1) Obtains documentation from each review group member to include:</p><p>(a) Resume (see Attachment B).</p><p>(b) Statement of Independence (see Attachment C).</p><p>(c) Qualification information (see Attachment D).</p></td></tr><tr><td></td><td><p>(2) Forwards qualification statements to the ES for incorporation into the technical document review file.</p></td></tr><tr><td>ES</td><td><p>(3) Maintains qualification statements and provides a copy of them to the Review Coordinator as they are generated.</p></td></tr><tr><td>Review Coordinator</td><td><p>(4) Assures that the minimum qualifications described in Attachment E are met.</p><p>(5) Issues Reviewer Certification Certificate (see Attachment F)</p></td></tr></tbody></table> <p>(SPP 4.05 Para. 5.B)</p>	<u>Performer</u>	<u>Action</u>	TRG Chairman	<p>(1) Obtains documentation from each review group member to include:</p> <p>(a) Resume (see Attachment B).</p> <p>(b) Statement of Independence (see Attachment C).</p> <p>(c) Qualification information (see Attachment D).</p>		<p>(2) Forwards qualification statements to the ES for incorporation into the technical document review file.</p>	ES	<p>(3) Maintains qualification statements and provides a copy of them to the Review Coordinator as they are generated.</p>	Review Coordinator	<p>(4) Assures that the minimum qualifications described in Attachment E are met.</p> <p>(5) Issues Reviewer Certification Certificate (see Attachment F)</p>		
<u>Performer</u>	<u>Action</u>												
TRG Chairman	<p>(1) Obtains documentation from each review group member to include:</p> <p>(a) Resume (see Attachment B).</p> <p>(b) Statement of Independence (see Attachment C).</p> <p>(c) Qualification information (see Attachment D).</p>												
	<p>(2) Forwards qualification statements to the ES for incorporation into the technical document review file.</p>												
ES	<p>(3) Maintains qualification statements and provides a copy of them to the Review Coordinator as they are generated.</p>												
Review Coordinator	<p>(4) Assures that the minimum qualifications described in Attachment E are met.</p> <p>(5) Issues Reviewer Certification Certificate (see Attachment F)</p>												

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS																				
5b	<p>c. Initiation of Technical Review</p> <table><tr><td><u>Performer</u></td><td><u>Action</u></td></tr><tr><td>Operations Office</td><td>(1) Forwards package to work to be reviewed to the Review Coordinator.</td></tr><tr><td></td><td>(2) Provides input to Statement of Work (SOW) for the Review Coordinator's use.</td></tr><tr><td>Review Coordinator</td><td>(3) Prepares and approves finalized SOW for the TRG.</td></tr><tr><td></td><td>(4) Authorizes the review of the package by the TRG.</td></tr><tr><td></td><td>(5) Logs the documents on the Review Log (Attachment G).</td></tr><tr><td></td><td>(6) Transmits the SOW and package of work to be reviewed to the TRG Chairman.</td></tr><tr><td>TRG Chairman</td><td>(7) Forwards the SOW and package of work to be reviewed to the ES.</td></tr><tr><td>Executive Secretary</td><td>(8) Establishes a technical review document file and a reviewer's data package for each review.</td></tr><tr><td>TRG Chairman</td><td>(9) Initiates the technical review in accordance with SPP 4.06</td></tr></table> <p>(SPP 4.05 Para. 5.C)</p>	<u>Performer</u>	<u>Action</u>	Operations Office	(1) Forwards package to work to be reviewed to the Review Coordinator.		(2) Provides input to Statement of Work (SOW) for the Review Coordinator's use.	Review Coordinator	(3) Prepares and approves finalized SOW for the TRG.		(4) Authorizes the review of the package by the TRG.		(5) Logs the documents on the Review Log (Attachment G).		(6) Transmits the SOW and package of work to be reviewed to the TRG Chairman.	TRG Chairman	(7) Forwards the SOW and package of work to be reviewed to the ES.	Executive Secretary	(8) Establishes a technical review document file and a reviewer's data package for each review.	TRG Chairman	(9) Initiates the technical review in accordance with SPP 4.06		
<u>Performer</u>	<u>Action</u>																						
Operations Office	(1) Forwards package to work to be reviewed to the Review Coordinator.																						
	(2) Provides input to Statement of Work (SOW) for the Review Coordinator's use.																						
Review Coordinator	(3) Prepares and approves finalized SOW for the TRG.																						
	(4) Authorizes the review of the package by the TRG.																						
	(5) Logs the documents on the Review Log (Attachment G).																						
	(6) Transmits the SOW and package of work to be reviewed to the TRG Chairman.																						
TRG Chairman	(7) Forwards the SOW and package of work to be reviewed to the ES.																						
Executive Secretary	(8) Establishes a technical review document file and a reviewer's data package for each review.																						
TRG Chairman	(9) Initiates the technical review in accordance with SPP 4.06																						

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS																
5c	<p>d. Processing of the Preliminary Review Report</p> <table><thead><tr><th><u>Performer</u></th><th><u>Action</u></th></tr></thead><tbody><tr><td>TRG Chairman</td><td>(1) Transmits preliminary review report [see paragraph 4.a(4)] to the Review Coordinator.</td></tr><tr><td>Review Coordinator</td><td>(2) Reviews and transmits the preliminary review report to the Operations Office and document generator.</td></tr><tr><td>Operations Office</td><td>(3) Responds to the comments contained in the preliminary review report and forwards the responses to the Review Coordinator</td></tr><tr><td>Review Coordinator</td><td>(4) Review and transmits the responses received by the TRG Chairman.</td></tr><tr><td>TRG Chairman</td><td>(5) Coordinates response resolution with the Operations Office through the Review Coordinator.</td></tr><tr><td></td><td>(6) Concurs with responses after resolution.</td></tr><tr><td>Review Coordinator</td><td>(7) Ensures that all comments are closed out and that the TRG concurs with the resolution of the comments.</td></tr></tbody></table> <p>(SPP 4.05 Para. 5.D)</p>	<u>Performer</u>	<u>Action</u>	TRG Chairman	(1) Transmits preliminary review report [see paragraph 4.a(4)] to the Review Coordinator.	Review Coordinator	(2) Reviews and transmits the preliminary review report to the Operations Office and document generator.	Operations Office	(3) Responds to the comments contained in the preliminary review report and forwards the responses to the Review Coordinator	Review Coordinator	(4) Review and transmits the responses received by the TRG Chairman.	TRG Chairman	(5) Coordinates response resolution with the Operations Office through the Review Coordinator.		(6) Concurs with responses after resolution.	Review Coordinator	(7) Ensures that all comments are closed out and that the TRG concurs with the resolution of the comments.		
<u>Performer</u>	<u>Action</u>																		
TRG Chairman	(1) Transmits preliminary review report [see paragraph 4.a(4)] to the Review Coordinator.																		
Review Coordinator	(2) Reviews and transmits the preliminary review report to the Operations Office and document generator.																		
Operations Office	(3) Responds to the comments contained in the preliminary review report and forwards the responses to the Review Coordinator																		
Review Coordinator	(4) Review and transmits the responses received by the TRG Chairman.																		
TRG Chairman	(5) Coordinates response resolution with the Operations Office through the Review Coordinator.																		
	(6) Concurs with responses after resolution.																		
Review Coordinator	(7) Ensures that all comments are closed out and that the TRG concurs with the resolution of the comments.																		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS												
5d	<p>e. Processing of the Final Review Report</p> <table><tr><td><u>Performer</u></td><td><u>Action</u></td></tr><tr><td>TRG Chairman</td><td>(1) Transmits the final review report [see paragraph 4.A(5)] to the Review Coordinator.</td></tr><tr><td>Review Coordinator</td><td>(2) Transmits the final review report and the corresponding revised materials (or section thereof) through appropriate channels.</td></tr><tr><td></td><td>(3) Records any comments and date completion the Review Log (Attachment G).</td></tr></table> <p>(SPP 4.05 Para. 5.E)</p>	<u>Performer</u>	<u>Action</u>	TRG Chairman	(1) Transmits the final review report [see paragraph 4.A(5)] to the Review Coordinator.	Review Coordinator	(2) Transmits the final review report and the corresponding revised materials (or section thereof) through appropriate channels.		(3) Records any comments and date completion the Review Log (Attachment G).						
<u>Performer</u>	<u>Action</u>														
TRG Chairman	(1) Transmits the final review report [see paragraph 4.A(5)] to the Review Coordinator.														
Review Coordinator	(2) Transmits the final review report and the corresponding revised materials (or section thereof) through appropriate channels.														
	(3) Records any comments and date completion the Review Log (Attachment G).														
5e	<p>f. Records</p> <table><tr><td><u>Performer</u></td><td><u>Action</u></td></tr><tr><td>Review Coordinator</td><td>(1) Prepares the Technical Review Record files in accordance with SPP 7.01 to include the following:</td></tr><tr><td></td><td>(a) Package being submitted for review.</td></tr><tr><td></td><td>(b) SOW.</td></tr><tr><td></td><td>(c) Final review report.</td></tr><tr><td></td><td>(d) Reviewer qualification statements.</td></tr></table> <p>(SPP 4.05 Para. 5.F)</p>	<u>Performer</u>	<u>Action</u>	Review Coordinator	(1) Prepares the Technical Review Record files in accordance with SPP 7.01 to include the following:		(a) Package being submitted for review.		(b) SOW.		(c) Final review report.		(d) Reviewer qualification statements.		
<u>Performer</u>	<u>Action</u>														
Review Coordinator	(1) Prepares the Technical Review Record files in accordance with SPP 7.01 to include the following:														
	(a) Package being submitted for review.														
	(b) SOW.														
	(c) Final review report.														
	(d) Reviewer qualification statements.														

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SPP 4.05

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
6	<p>Verify that the following documents are properly completed and filed.</p> <p>a. Attachment A - Technical Review Group Composition</p> <p>b. Attachment B - Standard Resume Content</p> <p>c. Attachment C - Statement of Reviewer Independence (Example)</p> <p>d. Attachment D - Reviewer Qualification Form (Example)</p> <p>e. Attachment E - Minimum Qualifications for the Technical Review Group</p> <p>f. Attachment F - Certification Certificate (Example)</p> <p>g. Attachment G - Review Log (Example)</p> <p>h. Attachment H - Simplified Flow Diagram for Package Review</p> <p>(SPP 4.05 Para. 6)</p>		

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NO. HQ-91-003

QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>L. WADE JER</u> DATE <u>8-7-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u><i>James C. Frank</i></u> DATE <u>8/7/91</u>	
DATES OF EVALUATION 8/26-30/91				
CONTROLLING DOCUMENT (Title, Number, Revision) Conduct of Technical Reviews SPP 4.06, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 4.06	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS	
1	Verify that documents requiring review are identified and that reviews are conducted or scheduled. (SPP 4.06 Para. 1)			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 4.06

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	Verify that the requirements of SPP 4.05 have been complied with prior to review. (SPP 4.06)		
3	Is there any evidence that documents requiring review have bypassed the system? (SPP 4.06 Para. 1)		
4	Are time constraints/schedules established? (SPP 4.06 Para. 5.b.2)		

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SPP 4.06

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
5	Verify that comments are recorded in the Review Comment Record (RCR) (SPP 4.06 Para. 5.b.3)		
6	Verify that TRG comments are integrated into one RCR and received TRG member concurrence (SPP 4.06 Para. 5.c.1)		
7	Verify that the TRG chairman has documented majority and minority positions. (SPP 4.06 Para. 5.c.3)		

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SPP 4.06

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
8	Verify that the preliminary review report accurately reflects the group's omments. (SPP 4.06 Para. 5.c.5)		
98	Verify that response resolution have been Incorporated into the final review report. (SPP 4.06 Para. 5.d)		

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QUALITY ASSURANCE CHECKLIST

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DATES OF EVALUATION 8/26-30/91				
CONTROLLING DOCUMENT (Title, Number, Revision) Administration of Peer Reviews SPP 4.08, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 4.08	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Verify that sequential steps for processing the preliminary Peer Review Report are followed. (SPP 4.08 Para. 5.d)			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 4.08

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	Is the report reviewed and approved by Management. (SPP 4.08 Para. 5.e) prior to review. (SPP 4.05)		
3	Verify that all preliminary comments are disposed of prior to issue final report. (SPP 4.08 Para. 5.e)		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>Clyde Morell</u> <i>C. Morell</i> DATE <u>8/7/91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <i>James C. Frank</i> DATE <u>8/7/91</u>	
DATES OF EVALUATION 8/26-30/91				
CONTROLLING DOCUMENT (Title, Number, Revision) Peer Reviews SPP 4.09, Rev. 0 Date 2/02/90			ACTIVITY EVALUATED Peer Reviews	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	<p>QARD-DOE/EM/WO/02 Section 3.0- Design Control Para. 3.2.1 states "Operations Offices Are Required to exercise design control practice in accordance with specific requirements..." "The practices include the following: ...(15) Peer Reviews...."</p> <p>Identify who at EM DOE Headquarters is responsible for the managing of the Peer Review Function. (RW 214 Rev. 4, Paragraph 1.3 delegation of work states in part "... Program Participant delegates work - a qualified individual from within the delegating office shall be designated office shall be designated as accountable for the quality of the designated work".) Ask for a DOE memo designating someone in Headquarters to oversee the peer reviews being done by the Operating office.</p> <p>How is the need for a Peer Review established? (SPP 4.09, Para. 1)</p>			

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SPP 4.09

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	* RESULTS
2	Request the job description of the EM Headquarters designated individual to oversee the peer review of the Operations Office.		
3	Is the person responsible for determination of the need for a Peer Review identified. (SPP 4.09 Para. 4)		
4	Review several Peer Reviews for compliance with this SPP. (SPP 4.09 Para. 1) report. (SPP 4.08 Para. 5.e)		
5	Verify that the requirements of SPP 4.08 are complied with prior to the review. (SPP 4.09)		

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SPP 4.09

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
6	Verify that the attributes in Attachment A are addressed. (SPP 4.09 Para. 5.b.2)		
7	Verify that comments are incorporated into RCRC have Group concurrence (SPP 4.09 Para. 5.c)		
8	Verify that comments are dispositioned prior to issue of the final report. (SPP 4.09 Para. 5.a)		

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SPP 4.09

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
9	Verify Management Review/Approve/Assessment/Audit or Evaluation of the adequacy of this procedure. (General)		
10	Verify that completed attachments are on file. (SPP 4.09 Para. 6)		
11	Review Completed Peer Review to verify compliance with Section 5.0, Section 6.0, and Appendix A through C.		

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SPP 4.09

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
12	How was TI&O controlled prior to issue of the SPPs? (General)		
13	Has Peer Review been done of quality activities completed prior to the implementation of the SPP 5.		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>Don Miller</u> <i>DEM</i> DATE <u>8-7-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <i>James C. Frank</i> DATE <u>8/7/91</u>	
DATES OF EVALUATION 8/26-30/91				
DOCUMENT (Title, Number, Revision) Review of Operations Office Q.A. Program Descriptions & Procedures, SPP 4.10, Rev. 0			ACTIVITY EVALUATED Criterion 5	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS	
1	Determine the Operation Office's requiring QA Program Description's and Procedure review. (Para. 4.0)			
2	Verify that the requirements for Quality Assurance Program Descriptions and Procedures are defined in Procurement Documents and Address the following: <ul style="list-style-type: none"> • Adequately identify quality related activities • Identifies at what level the documents require review and approval. • Determine who the QASs are. (Para. 4) 			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 4.10

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	Verify that Operations Offices QA program descriptions have been reviewed (SPP 4.10, Paragraph 1)		
4	Is a checklist used for review process? (SPP 4.10, Para. 4.0)		
5	Who determines which QA programs are subject to review (SPP 4.10, Para. 4.0)		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
6	<p>Verify that the QA has performed the following functions:</p> <p>(1) Receives request for assistance from a DOE-HLW Program as needed to perform reviews.</p>		
7	<p>(2) Locates and ensures receipt of the descriptions and procedures from the Operations Offices and logs the descriptions and procedures in the Quality Assurance descriptions and Procedures review Log (Attachment B to SPP 4.11)</p> <p>(3) Secures approval of the list and obtains program execution guidance, if necessary, to compile all descriptions and procedures for review.</p>		

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SPP 4.10

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
6	<p>(4) Identifies and provides the HLW Program a list of quality assurance program descriptions and procedures requiring routine review.</p> <p>(5) Establishes a review file for each description or procedure to be reviewed.</p> <p>(6) Identifies additional comments for selected review based on the document's importance to quality, extent of revision and content.</p>		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
6	<p>(7) Coordinates with the HLW Program Manager and Division Managers, if appropriate, the assignment of the program descriptions or procedures to receive review.</p> <p>(8) Assigns the description or procedure to the appropriate reviewer for review. (SPP 4.10, Para. 5.a.)</p>		
7	<p>Has the evaluator performed an adequate review. Check several reviews for completeness, accuracy, and identification of errors or omission. (SPP 4.10, Para. 5.b.3)</p>		

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SPP 4.10

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
8	Verify the completeness of the review. (a) Are all quality requirements identified and addressed. (b) Are references to codes and standards correct. Check dates, titles revision and applicability. (SPP 4.10, Para. 5.b.3)		
9	Is the difference between comments and deviations clearly established? (SPP 4.10, Para. 5.c)		
10	Are comments categorized as mandatory and non-mandatory? (SPP 4.10, Para. 5.d)		

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SPP 4.10

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
11	Has the evaluator assessed the reviewed procedure's success potential (SPP 4.10, Para. 5.b.4)		
12	What safeguards are in place to prevent this procedure from being by-passed. (General)		
13	Verify that a Review Comment Record form is prepared for each review. (SPP 4.10, Para. 5.d)		

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SPP 4.1D

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
14	Verify that the QAS has: (a) consolidated comments (b) distributed review results (c) updated the review log (SPP 4.10, Para. 5.d)		
15	Verify that the review file contains the following QA Records (Para. 5.e.1) <ul style="list-style-type: none"> • document control • guide sheets • review comment sheet • deviations • any review notes or other pertinent data relevant to the review. 		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>Don Miller Jem</u> DATE <u>8-7-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u>Jermain C. Frank</u> DATE <u>8/7/91</u>	
DATES OF EVALUATION 8/26-30/91				
CONTROLLING DOCUMENT (Title, Number, Revision) Review Waste Acceptance Process Technical Documents SPP 4.11 Rev. 0			ACTIVITY EVALUATED Implementation of SPP 4.11	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Verify that SPP 4.11 is available at work stations (Page 1)			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 4.11

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	Verify objective evidence that assigned personnel are familiar with SPP 4.11 and documents referenced therein (SPP 3.04, SPP 4.01 and SPP 7.01) See EM/WO/02 Para. 2.1.7 (Para. 3 A, B & C)		
3	Have any lower tier documents been issued to control the review		
4	Verify that reviews of technical documents address the following attributes. a. Applicability b. Correctness c. Adequacy d. Completeness (Para. 4)		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
5	Are review of technical documents indepth and critical (Para. 4).		
5a	Were any review of technical reviews performed prior to issuance of this SPP, if so, did reviews meet the intent of this SPP? (General).		
6	Are technical documents reviewed to determine if QA requirements are complete, correctly stated, inspectable, and controlled. (Para. 4).		

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SPP 4.11

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
	<p>Note: Check for quantitative, qualitative acceptance criteria tolerances, references to codes and standards. (Para. 4)</p> <p>7 Verify that the review activity is adequately controlled.</p> <p>7a Is there a log of incoming documents and an assigned reviewer?</p>		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
7b	What safeguards are there to endure that no documents bypasses the system?		
7c	Is there a schedule for turnaround of the review? Is an alternate reviewer assigned in the principal reviewers absence? (General).		
8	Review several technical document review. Look for completeness, clarity, consistency and approval (General).		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
9	Are comments resolved in a timely manner? (General) Check population and average response time.		
10	Verify that the steps in the review process are performed and documented as necessary (Para. 5)		
11	Has E.M. performed an indepth review of document review activities? (General).		

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SPP 4.11

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
12	Is the responsibility for supervision of the review process clearly defined? SPP 4.01 (Para. 5)		
13	Has the QA specialist identified and listed documents for which reviews are required or recommended? (Para. 5A)		
14	Verify that reviewers are qualified in accordance with SPP 3.04. How is this documented.		

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SPP 4.11

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
15	Are reviews consistent. Check reviews of similar documents performed by various personnel. (General).		
16	Review several document packages. a. Is there an index to indicate what should be in the file? b. Are files clearly labelled. c. Is access controlled. d. Is there a tracking system to indicate the status of each review.		
17	Para. 5C(2) requires the reviewer to forward notes and pertinent data to the preparer. Para. 5C(3) requires the QAS to file pertinent data. Is this a conflict? Para. 5.		

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SPP 4.11

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
18	Have EM personnel received training/ indoctrination in SPP 4.11 and 4.12 (QAAP 2.1 and 5.1.3)		
19	What is the approval circuit for SPP's. EM/WO/02, Para. 2-1.		
20	What is the applicability of SPP? (General)		

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SPP 4.11

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
21	Are SPP's the property of PDC, EM, or RW. (Lead Page SPP's)		
22	Why isn't the 18 criteria format adopted. (EM/w0/02 Para. 6.1 and 5.1.2)		
23	Is there a matrix showing relation- ship between SPP's and other procedures. (EM/w/02 Para. 2.1.6)		

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SP4.11

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	* RESULTS
24	Review results of EM surveillance, audits and reviews of SPP 4.11 and 4.12.		
25	Are SPP's prepared in accordance with QAAP Section 5.		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>Don Miller <i>DM</i></u> DATE <u>8-7-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u><i>German C. Frank</i></u> DATE <u>8/7/91</u>
DATES OF EVALUATION 8/26-30/91			
CONTROLLING DOCUMENT (Title, Number, Revision) Review of Program Execution Guidance Documents (PEGDS) SPP 4-12, REV. 0			ACTIVITY EVALUATED Implementation of SPP 4.12
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS <small>Record objective evidence reviewed, method of verification, personnel contacted</small>	RESULTS
1	Verify objective evidence that assigned personnel are familiar with SPP 4.12 are documents referenced therein. (See EM/WO/02 Para. 2.1.7)		
2	Have any lower tier documents been issued to control the review activity. (Para. 4, General)		

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	Verify that reviews of technical documents address the following attributes. a. Applicability b. Correctness c. Adequacy d. Completeness		
4	Are review of technical documents indepth and critical (Para. 4).		
4a	Were any reviews of PEGDS performed prior to issuance of this SPP, if so, did reviews meet the intent of this SPP (General).		

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5	<p>Are P.E.G. documents reviews to determine, if QA requirements are complete, correctly stated, inspectable, and controlled. (Para. 5.b.3).</p> <p>Note: Check for quantitative, qualitative acceptance criteria tolerances, references to codes and standards. (EM/WO/02, Para. 5.1.1.)</p>		
6	<p>Verify that the review activity is adequately controlled (EM/WO/02, Para 4.1.1)</p>		
6a	<p>Is there a log of incoming documents and an assigned reviewer. (Para. 5.a.5)</p>		

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6b	What safeguards are there to ensure that no documents bypasses the system (General).		
6c	Is there a schedule for turnaround of the review. Is an alternate reviewer assigned in the principal reviewers absence (General).		
7	Review several PEGD reviews. Look for completeness, clarity, consistency and approval (General).		

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8	Are comments resolved in a timely manner. (General) Check population and average response time.		
9	Verify that the steps in the review process are performed and documented as necessary. (Para. 5)		
10	Has E.M. performed an indepth review of document review activities. (General).		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
11	Is the responsibility for supervision of the review process clearly defined. (SPP 4.01, Para. 5)		
12	Verify that reviewers are qualified in accordance with SPP 3.04. How is this documented?		
13	Are reviews consistent. Check reviews of similar documents performed by various personnel. (General)		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
14	Review several document packages. a. Is there an index to indicate what should be in the file? b. Are files clearly labelled? c. Is access controlled? d. Is there a tracking system to indicate the status of each review.		
15	Is distribution of review results and resolution of comments performed in accordance with Para. 5.b.		
16	Have EM personnel received training/indoctrination in SSP 4.12. (QAAP 2.1 and 5.1.3)		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
17	Review results of EM surveillance, audits and reviews of SPP 4.11 and 4.12.		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>Clyde Morell</u> <i>CLM</i> ^{JCR} DATE <u>8/7/91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u>Arman Catravas</u> DATE <u>8/7/91</u>	
DATES OF EVALUATION 8/26-30/91				
CONTROLLING DOCUMENT (Title, Number, Revision) Participation in Evaluation Activities Lead By External Organization, SPP 4.13, Rev. 0			ACTIVITY EVALUATED <i>Implementation of SPP 4.13</i>	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Identify completed External Evaluation Activities based on scope of scheduled evaluations. [SPP 3.01, Para. 5.a.(1)]			
2	Verify that the QAS confirms the schedule date with the organization leading the evaluation activity.			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	Verify that the QAS completes Part 1 of the External Evaluation Participation Record and submits for approval.		
4	Verify the QAS has been trained to perform the tasks identified in this procedure.		
5	Participation in External Activities verify that the participants performs the steps 1 through 3 (noting deviations) (Para. 5.b)		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
6	Evaluation of performance verify that the participant performs the steps 1,2 & 3.		
7	Records. Verify the QAS prepare the External Evaluation Participation Record as a quality record in accordance with SPP 7.01		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>D. Miller</u> <i>[Signature]</i> DATE <u>8-2-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <i>[Signature]</i> DATE <u>8/2/91</u>	
DATES OF EVALUATION 8/26-30/91				
DOCUMENT (Title, Number, Revision) Deviation Reporting and Disposition, SPP-5.01, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 5.01	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Determine if any organization responsible for providing corrective action for a deviation has been non responsive or untimely. If so, has the implementing organization evaluated the deviation to determine the need for escalated management attention. (Para. 4.0) • Determine what criteria was used for evaluation and where this criteria is documented.			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	<p>Identification and documentation of deviations (Para. 5.a.1-4). Determine if deviations are promptly identified by evaluators and that the evaluators:</p> <ul style="list-style-type: none"> • Discuss the deviation with the organization responsible for item or activity; • Confirms that the deviations exists; • Verify how this is done. • Confirms that the condition has not been documented; • Determine what happens if the deviation has already been documented. • Documents the deviation on a Deviation and Corrective Action Report (DCAR); • Initiates a nonconforming item tag for deviations involving hardware; • Determine what happens if the item is not hardware orientated, such as database, documents, procedures, etc. 		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	<p>Verify that the DCAR Administrator has established a DCAR working file and the file contains the following documents: (Para. 5.a.5, s.c.4, 5.e.7, 5.f.6)</p> <ul style="list-style-type: none"> • Copy of the original DCAR and all revisions • Copy of transmittal memorandum or letter • Copies of all proposed dispositions • Copies of all proposed corrective actions • Copies of all accepted/rejected corrective actions and dispositions • Copies of all correspondence related to dispositions and corrective actions for the initiating organization and responsible organization for each DCAR. 		
4	<p>Verify that the DCAR Administrator has established a Log and the Log contains the information listed in attachment E. Verify that the log is up-to-date.</p>		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
5	<p>Evaluation of deviations for corrective action reporting (Significance) (Para. 5.b.1-5) Verify that the evaluator:</p> <ul style="list-style-type: none"> • evaluates the deviation against the criteria listed in attachment C: • documents if corrective action is required • Ensures the responsible organization is notified of the adverse condition requiring control in order that they may take appropriate action. Determine how this is done. 		
6	<p>Deviation and Corrective Action Report (Para. 5.c.1-9) A. Verify that the evaluator:</p> <ul style="list-style-type: none"> • Obtains concurrence that corrective action is required from the manager. • Issues and transmits the DCAR via memorandum or letter to the responsible organization. • Forwards the DCAR to the DCAR Administrator for filing. <p>B. Determine how the evaluator verifies items containing deviations are segregated or otherwise controlled to preclude inadvertent use.</p> <p>C. Determine how the evaluator expedites responses when necessary.</p>		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
7	<p>Receipt of Proposed Dispositions/Corrective Actions (Para. 5.d.1 & 2)</p> <p>A. Determine how the responsible organization transmits the proposed disposition and corrective action.</p> <p>B. Verify that the date of receipt for each proposed disposition and corrective action are logged.</p>		
8	<p>Evaluation of Proposed Disposition/Corrective Action (Para. 5.e.1-7 & 5.f.1-10)</p> <p>Verify that the evaluator:</p> <p>Evaluates the adequacy of the proposed disposition for solving the specified problem.</p> <p>Determine the actions necessary to accept the disposition.</p> <p>Determine the actions necessary to reject the disposition.</p> <p>Verify that the evaluator notifies the responsible organization of the accepted or rejected disposition.</p> <p>Verify the If Corrective Action is requested, the evaluation includes:</p> <ul style="list-style-type: none"> • Reason for the deviation (root cause) • Action taken/proposed to investigate and correct any similar work in which the same deviation may exist and was to previously identified. • Managers approval (Section 9 of DCAR) <p>Verify that when a DCAR is revised the DCAR Administrator opens a new entry in the log.</p>		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	* RESULTS
8	<p>What criteria is used to determine if the deviation is reportable as an Unusual Occurrence?</p> <p>Determine what the DCAR Administrator does with the original DCAR and with the revised DCAR. (Para. 5.f.9)</p>		
9	<p>Verification and Closure of the Dispositioned Action/Corrective Action (Para. 5.h.1-6 and 5.g.1-9)</p> <p>Verify that the evaluator:</p> <ul style="list-style-type: none"> • During disposition monitors progress and when complete verifies that the actions taken to correct the deviation and corrective action, if applicable, have been completed satisfactorily and as scheduled. • Verifies the action taken to prevent recurrence is satisfactory. • Verifies the action to investigate and correct any similar work is satisfactorily complete. • Documents the verification activities. • Ensures the removal of any nonconforming item (tags) only after verifying satisfactory completion of all disposition actions. Determine how controls are removed from items other than hardware. • When corrective action taken is unacceptable issues a revision to the DCAR and coordinates with the organization responsible for corrective action to obtain further action. Determine what course action would follow an unacceptable corrective action. • Issues correspondence to inform the involved parties of the closure of the corrective action. 		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>D. Miller <i>Dem</i></u> DATE <u>8-7-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u><i>James C. Tracy</i></u> DATE <u>8/7/91</u>
DATES OF EVALUATION 8/26-30/91			
DOCUMENT (Title, Number, Revision) Management Action Request, SPP-5.02, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 5.02
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Determine if any Internal or External MARs have been issued.		
2	Determine if the MARS(s) were responded to within 15 days.		

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	Verify that the evaluator has evaluated late MARs for escalation to the next level.		
4	Determine the responsible level of management for the following MARs. • Level 1 • Level 2 • Level 3		
5	Verify that a MAR Log has been established, unique numbers assigned, and dates entered for tracking purposes.		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
6	Verify that the MAR is in the appropriate DCAR working file.		
7	Verify that MARs are prepared and maintained as quality records.		

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ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>D. Miller <i>Dem</i></u> DATE <u>8-7-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u><i>Annem C. F...</i></u> DATE <u>8/7/91</u>
DATES OF EVALUATION 8/26-30/91			
DOCUMENT (Title, Number, Revision) Control of Unsatisfactory Conditions (SWO) SPP 5.03, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 5.03
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Determine if any unsatisfactory conditions have been identified and if any Stop Work Orders have been initiated.		

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	<p>Determine who has QA responsibility and authority to initiate actions to control or to stop an activity identified as unsatisfactory. Determine how this authority is implemented.</p> <p>What happens to the UAD after it goes to management.</p> <p>According to the FARS and DEARS, the Contracting Officer is the only one who can Stop Work. How is this accomplished.</p>		
3	<p>Verify that a Urgent Action Directive (UAD) Log has been established and updated as required. (Para. 5.b.3)</p>		
4	<p>Verify that an Urgent Action Directive working file has been established and contains the following information:</p> <p>Copies of Urgent Action Directives</p>		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
5	Determine how the Urgent Action Directive and the DCAR are tracked thru closure.		
6	Determine what constitutes a UAD record.		
7	Determine how the unsatisfactory work.		

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ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>D. Miller <i>DM</i></u> DATE <u>8-7-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u><i>James C. Frank</i></u> DATE <u>8/7/91</u>	
DATES OF EVALUATION 8/26-30/91				
DOCUMENT (Title, Number, Revision) Disposition of Deviations Identified by Outside Organizations, SPP 5.04, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 5.04	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	<p>Determine if any deviations have been initiated and issued concerning Defense Waste, Waste Acceptance Specification (WAS) or the Federal Repository License Application. (Para. 4)</p> <p>Verify that the WAS has been issued. If it hasn't, then why is it listed? The WAPSs should be the documents referenced.</p> <p>Verify that OCRWM approves any deviations concerning the above.</p>			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	What is the purpose of this procedure? How will this procedure be used for deviations identified from auditing organizations submitted on the (General)		
3	Verify that a commitment log has been established and is maintained in current status. (Para. 5.a.2) (General)		
4	How provides the disposition? (General)		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
5	What is meant by defining the disposition? (Para. 5.a.7)		
6	How is the request for assistance made verbal or in writing? (Para. 5.b.1)		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>Don Miller</u> <i>2/26/91</i> DATE <u>8-7-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u><i>Jeanne C. Frank</i></u> DATE <u>8/7/91</u>	
DATES OF EVALUATION 8/26-30/91				
CONTROLLING DOCUMENT (Title, Number, Revision) Review of Unusual Occurrences, SPP 5.05, Rev. 0			ACTIVITY EVALUATED Criterion 16 - Corrective Action	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Determine if any UORs have been received and what type of evaluation has been requested. (Para. 5.a.1) List the UORs received: From: Date of Report Subject of UOR Closure Date:			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	Interview the responsible Manager and determine the purpose of the following: (Para. 4.a.2.a-c) a) Initial UOR - • Define established timeframe b) Interim UOR c) final UOR		
3	Determine how UORs are tracked through closure. (General)		
4	Determine what criteria is used to evaluate the UOR for programmatic significance such that it adversely affects or potentially effects the performance, reliability, or safety of a facility. (General)		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
5	<p>Verify that final UORs correctly retain the information provided in the initial and interim reports and that the final UOR contains the following: (Para. 5.a.5.a-d)</p> <ul style="list-style-type: none"> • Determination of cause • Adequacy of disposition • Adequacy of action to prevent recurrence • Generic applicability to other features or facilities internal or external to DOE. 		
6	<p>Verify the review memorandum or letter fully addresses the review request. (Para. 5.a.7)</p> <p>Verify that memorandum or letter clearly indicates "No Comments".</p>		

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
7	Verify if comments are made, the comments are clear and action items are clearly defined. (Para. 5.a.7)		
8	Determine how deviation that have not been documented are identified. (Para. 5.a.8) • Verify that DCARs are prepared.		
9	Verify that the following are designated as QA records and processed in accordance with SPP 7.01: (Para. 5.b.1) • Copies of UOR • Related correspondence • Key working papers		

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NO. HQ-91-003

QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>J. George <i>Jem</i></u> DATE <u>8-7-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u><i>James C. Frank</i></u> DATE <u>8/7/91</u>	
DATES OF EVALUATION 8/26-30/91				
DOCUMENT (Title, Number, Revision) Control & Disposition of Deviations & Recommendations for Improvement by Outside Organizations". SPP 5.06, Rev. 0			ACTIVITY EVALUATED Control and Disposition for Deviations	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	<p>Section 2, page 1, requires that the procedural process "...apply only to the organization(s) that has adopted this SPP for its own use or that has had it invoked by contractual....means".</p> <p>Verify by interviews with appropriate personnel and/or review of objective evidence?:</p> <ol style="list-style-type: none"> 1. List who are the affected organizations. 2. Identify how the SPP is adopted or involved. 3. Verify that the process is in use for those organizations for whom it has been adapted or invoked. 			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 5.06

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	<p>Section 4, first paragraph, page 1, states in part "... reports and recommendations are a likely result of... evaluation by external organizations...may be received in various formats...referred to generically as external program evaluation reports. The coordination of these external evaluations are addressed in SPP 8.01:.</p> <p>Verify by review of objective evidence that:</p> <ol style="list-style-type: none"> 1. External organizations are reviewing and recommending improvements. <ol style="list-style-type: none"> A. Provide a list of those organizations. B. Review several of the reports for content and format and determine if they provide the appropriate information. 2. The coordination of these evaluations is in accordance with SPP 8.01. 		

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SPP 5.06

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	<p>Section 4, second paragraph, first sentence, page 1, state that "each deviation and recommendation for improvement will be evaluated and an appropriate response will be prepared in the time frame requested".</p> <p>Choose several examples and verify by review of objective evidence that each deviation/recommendation is:</p> <ol style="list-style-type: none"> 1. Evaluated, 2. Has an appropriate response, 3. Is prepared in the requested time frame. 		
4	<p>Section 5, paragraph, items (2) and (3), page 2.</p> <p>Verify by review of objective evidence that the DCAR Administrator</p> <ol style="list-style-type: none"> 1. Establishes a working file for each external program evaluation report and; 2. Enters each report in the Commitment Control Log in accordance with SPP 6.04 		

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SPP 5.06

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
5	<p>Section 5, paragraph a, item (4), page 2.</p> <p>Verify by review of objective evidence and interviews with personnel that the "evaluator" reviews external program evaluation and reports identified deviations in accordance with SPP 5.01.</p> <ol style="list-style-type: none"> 1. Review how and what criteria are used to identify deviations. 		
6	<p>Section 5, paragraph b, items (1) through (4) and (7) through (10), pages 2 through 4.</p> <p>Choose several examples from the "Commitment Control Log" and verify by review of objective evidence that the "evaluator" of each deviation or recommendation for improvement:</p> <ol style="list-style-type: none"> 1. Evaluates for appropriateness; 2. Develops an appropriate course of action that includes either the <ol style="list-style-type: none"> A. Actions taken. B. Proposed Actions or C. Rejection; 3. Documents the above actions, including reasons for rejections; 4. Obtains Manager concurrence for initial responses; 5. Initiates corrective actions; 6. Monitors implementation of corrective actions including <ol style="list-style-type: none"> A. Using the Commitment Control Program and B. Informs Manager through normal progress reporting; 7. Verifies implementation and; 8. Documents implementation as appropriate and forwards to Manager for signature. 		

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SPP 5.06

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	* RESULTS
7	<p>Section 5, paragraph C, item (1), page 4.</p> <p>Verify through interviews with personnel and review of objective evidence that the DCAR Administrator ensures the external program evaluation report file contains:</p> <ol style="list-style-type: none"> 1. The External Program Evaluation Report, 2. All initial, interim and final response correspondence. <p>Additionally verify that the report files are pared as QA records in accordance with SPP 7.01</p> <ol style="list-style-type: none"> 1. Review several examples. 		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>N.C. Frank</u> <i>NER</i> CONCURRED BY <u>N/A</u> APPROVED BY <i>[Signature]</i>	DATE <u>8/7/91</u> DATE _____ DATE <u>8/7/91</u>
DATES OF EVALUATION 8/26-30/91			DOCUMENT (Title, Number, Revision) Official HLW Office Files, SPP 6.01, Rev. 0	
ACTIVITY EVALUATED Office File Operation			ITEM NO.	
CHARACTERISTICS TO BE EVALUATED			REMARKS Record objective evidence reviewed, method of verification, personnel contacted	
1 Verify the Program Coordinator has designated, in writing, one or more File Administrators. [5.1.(1)]			RESULTS	
2 Verify that the File Administrator assigns file numbers to documents. [5.b(1)]				

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 6.01

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	Verify the File Administrator maintains a list of any alterations, additions, or deletions to the HLW Office File Guide. [5.b.(3)]		
4	See QAPD checklist for Criterion 17.		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>N.C. Frank</u> <u>TER</u> DATE <u>8/7/91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u><i>James C. Frank</i></u> DATE <u>8/12/91</u>
DATES OF EVALUATION Aug. 26-30, 1991			
CONTROLLING DOCUMENT (Title, Number, Revision) Preparation of Correspondence, SPP 6.02, Rev. 0			ACTIVITY EVALUATED Preparation and Handling of Corresponding
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Verify that the originator of the correspondence prepares outgoing correspondence i.a.w. DOE Order 1325.1A and Attachment A. [5.a(1)]		
2	Review five outgoing letters against Para. 5.a and Attachment A. Record any discrepancies noted.		

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 6.02

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	Ask secretary to explain 5.b.(1) concerning "If other than the originating secretary."		
4	Review the commitment control log for the five outgoing letters. Note any discrepancies.		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>N.C. Frank</u> <i>NC</i> DATE <u>8/7/91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <i>[Signature]</i> DATE <u>8/7/91</u>
DATES OF EVALUATION 8/26-30/91			
DOCUMENT (Title, Number, Revision) Incoming Mail, SPP 6.03, Rev. 0			ACTIVITY EVALUATED Processing of Incoming Mail
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Review the "Incoming Mail Routing and Handling Matrix" Verify it: <ul style="list-style-type: none"> is filled out has been concurred with by potential recipients. has been concurred wit by the Quality Assurance Specialist 		
2	Explore how change to the matrix are made and controlled. Verify that a file of each revision is kept [5.a(4),(5) and 5c(1)]		

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 603

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	* RESULTS
3	Request the Correspondence Control Clerk to process three representations pieces of Incoming mail. Verify processing is done as described in Paragraph 5b.		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>N.C. Frank</u> <i>NER</i> DATE <u>8/7/91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <i>[Signature]</i> DATE <u>8/7/91</u>		
DATES OF EVALUATION 8/26-30/91					
DOCUMENT (Title, Number, Revision) Commitment Control, SPP 6.04, Rev. 0			ACTIVITY EVALUATED <i>Implementation of SPP 6.04</i>		
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS	
1	Determine whether John W. Bartlett's October 29, 1990 letter to EM-1 was included in commitment control.				
2	Review seven commitment data sheets for completeness and inclusion on the commitment log. [5.a(1) through (7)]				

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 604

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	* RESULTS
3	Review the last three commitment logs. Verify: <ul style="list-style-type: none"> distributed weekly to reviewer and Quality Assurance Specialist [5.a.(8)] commitments sorted by due date with most recent ones first [5.a(6)] new entries indicated with an asterisk [5.a(5) note] 		
4	Trace three commitments from October 1990 through to closure. Verify: <ul style="list-style-type: none"> for commitments not met, a new date is scheduled [5.b.(3) and (4)] updated status is received from reviewers [5.c(1)] CCC advises the reviewer of commitments more than 10 days past due [5.c.(3)] 		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>N.C. Frank JER</u> DATE <u>8/7/91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u>[Signature]</u> DATE <u>8/7/91</u>
DATES OF EVALUATION Aug. 26-30, 1991			
CONTROLLING DOCUMENT (Title, Number, Revision) Controlled Documents, SPP 6.05, Rev. 0			ACTIVITY EVALUATED <u>Implementation of SPP 6.05</u>
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Determine who makes copies, established the distribution list, establishes receipt control prior to step 5.a(1). [5.a(1)]		
2	Verify that the assignee routes controlled documents to the document control.		

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>Craig Walenga</u> <i>ICR</i> CONCURRED BY <u>N/A</u> APPROVED BY <u><i>James C. Frank</i></u>	DATE <u>8/2/91</u> DATE <u>8/2/91</u>
DATES OF EVALUATION 8/26-30/91				
DOCUMENT (Title, Number, Revision) QA Records SPP 7.01, Rev. 0 & SPP 7.02, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 7.01 & 7.02	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS	
1	<p>a. Identify during the surveillance specific individuals who performed work IAW a procedure. Verify that the persons listed have had the training and qualifications necessary to conduct the work.</p> <p>The attached list includes:</p> <ul style="list-style-type: none"> • Name • Work performed • Procedures applicable • Training • Quals <p>b. Interview several people in each category to determine their familiarity with the procedure they implement.</p> <p>c. Do the persons have controlled copies of procedure that are current?</p>			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 7.01 & 7.02

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	Verify Quality Record Index is established IAW SPP 7.01, 5.a.1 and 2 and SPP 6.01 (Item #4)		
3	Check if the QRI has been approved by the appropriate DOE interface. Determine who is on appropriate DOE interface!! (Item #4)		
4	Has the QRI been adequately and correctly incorporated within the file guides listed in SPP 6.01? Address adequacy of SPP 6.01 file listing versus EM program.		

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SPP 7.01 & 7.02

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
5	Determine period of time that program has been implemented. Has the QRI been kept current as required by SPP 7.01, 5.a.5.		
6	<p>a. Identify who is required to receive the QRI (that is, document preparers) IAW SPP 7.01, 5.a.6.</p> <p>b. Verify that the preparers have:</p> <ol style="list-style-type: none"> 1. received; 2. or have been sent the latest QRI. <p>c. How are new document preparers provided with the list? That is, have there been new employees since the last list was distributed? (Item 4)</p>		
7	Check the Central Records Facility for any receipt of EM records packages. Log ten packages of various types if more than 10 are found. These records package will be used to verify implementation of SPP 7.01 and 7.02		

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SPP 7.01 & 7.02

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
8	Identify the Quality Records Coordinator and interview the person to determine - what criteria are used to determine what are acceptable records. SPP 7.01, 6.c.4 (Item 4)		
9	<p>Obtain from the records system two relatively recent records packages from each of the following Quality Records types:</p> <ul style="list-style-type: none"> • HLW instructions • HLW QAPD • Audit • Surveillance • Peer review • Document Review • (QRI) • WAS & WCP records • Deviation and CAR • Q Records Indexes and logs • WQR • PR <p>List the record packages obtained. How many records packages are in the records system? (Item 14)</p>		

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SPP 7.01 & 7.02

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
10	<p>Using the records packages obtained, determine that the:</p> <ul style="list-style-type: none"> a) Quality Record Verification Sheet is completed adequately and completely IAW SPP 7.01, 5.b.8 and SPP 7.02, 5.d.1-4? b) Quality Records Inventory List completed adequately and correctly SPP 7.01, 5.c.1? c) Do the quality records meet SPP 7.01, 5.b.2 through 5.b.7 and 5.b.9? d) Is the Quality Record Log completed and accurate? SPP 7.02, 5.d.5 		
11	<p>When retrieving the documents in Item 12, determine the following:</p> <ul style="list-style-type: none"> (1) Filed IAW the Index system (2) Environmental conditions meet SPP 7.02, 5.d.7 (3) Controls for access established and effectively implemented. Are they adequate? SPP 7.02, 5.d.8 (4) Ensure authorized access list is maintained current, that is, list doesn't contain names of EM personnel and contractors no longer associated with EM. (5) Verify that smoking, eating, drinking being prohibited throughout the records facility? DOE/EM/WO/02. 17.1.1, Para.2, Sub Para. 7 		

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SPP 7.01 & 7.02

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
12	Discuss with QRC records are stored to maintain duplicate storage. SPP 7.02, Section 4, Para. 3 and 5.d.9.		
13	Discuss with QRC how records are turned over to RW? DOE/EM/WO/02, 17.1.1, Para. 2		
14	Discuss with QRC who the file administrators as provided for in SPP 7.02, 5.a and 5.b and 5.c. (Item 4)		

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SPP 7.01 & 7.02

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
15	Review the Quality Records Log to identify records that have been transferred and the storage location. Discuss how the process is handled by addressing three different packages that were transferred.		
16	Through discussions with personnel, ask who is formally tasked with implementing the Quality Records System and where that functional assignment exists.		
17	<p>For several file administrators, interview these persons and obtain the RIDs form for each filing station. Verify that appropriate DOE concurrence for the Block 8 disposition instructions.</p> <p>Have them explain the RIDs approval process.</p> <p>Verify that Quality Records are listed as "lifetime" as defined in SPP 7.02, 4.a(3) and SPP 7.01, 4.a.(3)</p>		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>L. WADE Paul</u> DATE <u>8-7-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u>James C. Frank</u> DATE <u>8/7/91</u>	
DATES OF EVALUATION 8/26-30/91				
CONTROLLING DOCUMENT (Title, Number, Revision) Coord. of Reviews & Evaluation by Outside Org. SPP-8.01, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 8.01	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	* RESULTS
1	Determine what activities are subject to this SPP. (SPP 8.01 Para. 1)			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 8.01

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	Has the Memorandum of Understanding (MOU) been issued? (SPP 8.01 Para. 4)		
3	<p>Has the Program Coordination or Quality Assurance Specialist performed the following activities:</p> <ul style="list-style-type: none"> (1) Receives notification of scheduled reviews or evaluations by external organizations. (2) Notifies the Quality Assurance Specialist (QAS) as to the review or evaluation schedule and scope. (3) Acts as the Coordinator for the owner/sponsor of the program and serves as primary contact for the external review and evaluation team. 		

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SPP 8.01

QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	<p>(4) As requested by the external review or evaluation team:</p> <ul style="list-style-type: none"> (a) Arranges for meeting facilities, notification and attendance key owner/sponsor personnel at meetings. (b) Arranges for work space for the external review or evaluation team. (c) Coordinates activities to provide assistance and arranges for access to owner/sponsor personnel activities, files, and records. <p>(5) Prepares notes on the review or evaluation teams concerns and assists in clarifying issues.</p>		

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3	(6) Routinely apprises the Program Coordinator and affected owner/sponsor Directors of external organizations concerns. (7) Responds promptly to review and evaluation findings in accordance with SPP 5.05. (SPP 8.01 Para. 5.a)		
4	Is this procedure mandatory. Has it been invoked for this audit? Note: It appears that the intended purpose does not require proceduralization.		

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QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>L. WADE LML</u> DATE <u>8-7-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u>James C. Franz</u> DATE <u>8/9/91</u>	DATES OF EVALUATION 8/26-30/91
CONTROLLING DOCUMENT (Title, Number, Revision) QA Program Evaluation & Assessment of Adequacy & Eff. SPP 8.02, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 8.02	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Review the last annual assessment for the following: Completeness Applicability (was the scope addressed?) Compliance with this SPP. Qualification of assessment personnel Follow-up of Corrective Action Schedule (was the assessment performed on time and within 12 months from the previous assessment?) Planning (use of checklist, research and notification. Performance, reporting and distribution of the report. (SPP 8.02 Para. 4)			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	<p>Verify that the QAS is performing the following: Assess the adequacy of the research and data collection process.</p> <p>(1) Routinely collects information in order to assess the effectiveness of the quality assurance program during the year including:</p> <ul style="list-style-type: none"> a) Results of Organizational Evaluation Activities. b) Organizational Quality Progress and Review Reports. c) Quality Trend Reports. d) Quality Problem Reports. e) Results of any special reviews conducted during the year. f) Field Office Evaluation and Assessment of Contractors. <p>(2) Each year in January, reviews the collected information and determines if any additional data is necessary to adequately assess the Quality Assurance Program.</p>		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	<p>(3) If additional information, is necessary, obtains it through appropriate means.</p> <p>(4) Using the collected information, identifies accomplishments, problem areas, quality trends, and evaluation results. Then assesses the adequacy and effectiveness of program practices and instructions. SPP 8.02 Para. 5A</p>		
3	<p>Is there provision for an intermediate assessment to address problems identified during the year? (SPP 8.02 Para 1)</p>		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
4	Verify that the Assessment Report has been prepared and distributed. (SPP 8.02 Para. 5.b.1)		
5	Verify that the report has been reviewed by management and action taken to address adverse trends. General Note: This SPP does not address corrective action or management review.		

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DATES OF EVALUATION 8/26-30/91			
CONTROLLING DOCUMENT (Title, Number, Revision) Review & Reporting of QA Program & Status SPP 8.03, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 8.03
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Are status reports prepared monthly as required by this SPP? (SPP 8.03 Para. 1)		

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	Verify that the QAS review QA Program activities each month including: (a) Operations Office Quality Status (b) Results of Evaluation Activities (c) Quality Problem Reports (d) Quality Trend Reports (SPP 8.03 Para. 5.A)		
3	Is the report a paperwork review or is it generated as a result of site visits? (General)		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
4	Verify that the report is distributed and reviewed by management. Are any Corrective Actions generated as a result of the report? (SPP 8.03 Para. 5.b)		

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DATES OF EVALUATION 8/26-30/91				
CONTROLLING DOCUMENT (Title, Number, Revision) Preparation and Maintenance of the Program Schedules SPP 9.01, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 9.01	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Identify what schedules are being controlled under this procedure.			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	Verify that the following schedule data is available: a) Milestone dates. b) Supporting schedules. c) Operation office schedules d) Program Schedule (SPP 9.01 Para. 4.0)		
3	Has the program revised, updated and reissued no less than quarterly (SPP 9.01 Para. 4.0)		
4	Does the program incorporate all of the individual schedules related to different portions of the operation. Verify that all EM group schedules are addressed. (SPP 9.01 Para. 4.0)		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
5	Does the schedule provide a credible basis for evaluation planning? (SPP 9.01 Para. 4.0)		
6	Are the schedules of all non-EM groups addressed? Verify interfaces with OCRWM (General)		
7	Is the schedule coordinator assigned? Verify that the following activities are performed: (1) Initiates the Program Schedule development by requesting information from operations which are responsible for individual segment schedules.		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
7	<p>(2) Requests, as a minimum, the following schedule information for selected milestones within the segment schedules:</p> <ul style="list-style-type: none"> a) Segment identification. b) Milestone description. c) Status or progress remarks. d) Completion due date. e) Forecast Completion date. f) Responsible Manager. g) Person responsible for next action. h) Date of the data. <p>(3) Reviews each submittal for completeness and obtains any needed additional information</p> <p>(4) Assembles data into a draft program schedule.</p>		

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	<p>(5) Incorporates comments into a Program Schedule.</p> <p>(6) Establishes a supporting data base as a basis for schedule information.</p> <p>(7) Reviews Program Schedule for items of responsibility and verifies listing of all needed activities (Program Coordinator</p>		

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8	<p>(8) Concurs with the Program Schedule and forwards to the DOE designate for review and approval.</p> <p>(9) Distributes the Program Schedule to the DOE selected personnel, QAS, Operations Offices, and Operating Contractors which provided input, with notice of the monthly update cycle and due date of required status/progress input.</p> <p>10) Finalizes the supporting schedule data base.</p> <p>Verify that the program is maintained in accordance with this SPP. Verify that data submitted by contributors is reviewed, corrected, assembled and distributed. (SPP 9.01 Para. 5.B)</p>		

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CONTROLLING DOCUMENT (Title, Number, Revision) HLW Monthly Progress Reporting SPP 9.02, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 9.02	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Verify that the Program Control Assistant is assigned and that monthly and quarterly reports are prepared, assembled, reviewed and distributed. Is there a control log or similar document. (SPP 9.02 Para. 1)			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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QUALITY ASSURANCE CHECKLIST (continuation sheet)

ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	<p>Verify that the monthly report includes the following:</p> <ul style="list-style-type: none"> (a) Work change approved and in process. (b) Changes in principal agreements. (c) Significant program accomplishments including events, milestones met, and major alterations. (d) Contractor reports (uniform reporting system - DOE 1332.1A) as per contractual agreements and/or working agreements. (e) Monthly Quarterly Assurance Program Progress and Status Report. (See SPP 8.03) (f) Latest Project Schedule. (See SPP 9.01) (SPP 9.02 Para. 5a) 		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	Is the monthly drafted in accordance with the guidance in DOE Order 4700.1 at the EM office. Does 4700.1 address monthly and quarterly reports) (SPP 9.02 Para. 5.a.2)		
4	Verify that the monthly report includes a section to reflect quality assurance program progress and status. (SPP 9.02 Para. 5.a.2)		
5	Verify that Program Coordinator reviews and distributes reports. Is the DOE designate identified? What is the distribution of the reports? (SPP 9.02 Para. 5.a.4)		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
6	Verify review and approval of the reports by DOE designate. (SPP 9.02 Para. 5.a.5)		
7	Review historical files. Verify sequential filing, retrievability and disposition of review comments. (SPP 9.02 Para. 5.b)		

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DATES OF EVALUATION 8/26-30/91			
CONTROLLING DOCUMENT (Title, Number, Revision) Preparation and Maintenance of WBS SPP 9.03, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 9.03
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	Determine if this SPP is subject to audit. Review applicable section of DOE order 4700.1 Project Management System. (SPP 9.03 Para. 3.a)		

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	Does the WBS format comply with DOE/MA-0295, WBS Guide? (SPP 9.03 Para. 3.b)		
3	Is the Program Management Plan developed in accordance with DOE order 4700.1? (SPP 9.03 Para. 4.a.7)		
4	Verify that the Program Control Assistant is assigned performs the following activities:		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
4	<p>(1) Obtains Work Breakdown Structure from each support contributor for HLW work and forwards to the Program Coordinator.</p> <p>(2) Reviews each WBS to assure each meets requirements of DOE 4700.1 and DOE/MA-0295 and coordinates as required with contributors</p> <p>(3) Integrates the first 3 levels of each WBS and the WBS into the SWBS in a flow diagram format. (See Attachment A for sample).</p>		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
4	<p>(4) Develops and documents the SWBS Dictionary in accordance with DOE/MA-0295 on forms DOE F1332.10 and DOE F1332-11. (See Attachment B for samples.)</p> <p>(5) Reviews the SWBS and SWBS Dictionary and secures DOE approval.</p> <p>(6) Reviews and returns the approved document to the Program Control Assistant.</p>		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
4	<p>(7) Coordinates or performs the incorporation of the SWBS into the HLW Program Plan and incorporate of the SWBS Flow Diagram and Dictionary into the DWPF Program Management Plan in accordance DOE 4700.1</p> <p>(8) Assembles the SWBS, HLW WBS, CWBS and DWPF-PO WBS data and information into a database for background of WBS development for reviews and later revisions. (SPP 9.03 Para. 5.a.8)</p>		
5	<p>Verify that the SWBS is revised, distributed, approved and incorporated into the Program Plan in accordance with this procedure. (SPP 9.03 Para. 5.b)</p>		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
6	Verify that the Program Control Assistant maintains a file with WBS background information for working and historical purpose. Is the official SWBS in the program plan. Is the SWBS Dictionary in the program management plan. Verify that Attachment A & B are properly completed and included in files. (SPP 9.02 Para. 5.c)		

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DATES OF EVALUATION 8/26-30/91			
CONTROLLING DOCUMENT (Title, Number, Revision) Identification and Analysis-Trends SPP 10.01, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 10.01
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	<u>SPP 10.01</u> Is the Quality Assurance Specialists (QAS) assigned? (SPP 10.01 Para. 5a)		

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	Verify that the QAS has monitored program feedback information and identified trends/problems [SPP 10.01 Para. 5a (1&2)]		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
3	<p>Verify that the QAS has reviewed the following feedback sources:</p> <ul style="list-style-type: none"> • Adverse quality trend/program reports • Audit reports • Change orders and changes in basic data • Contractor progress and status reports • Contractor reported non-conformances and deviations • Design review reports • Deviation and corrective action reports • Inspector, examination and test results • Operational readiness review reports • Peer review reports • Procurement document review reports • Quality assurance program progress and status reports • Reviews and evaluations by outside organizations • Reviews and evaluations by Internal organizations • Surveillance reports • Technical documents review reports • Unusual occurrence reports <p>Is the review documented? Is there a matrix showing each feedback, date received, review data and trend analysis?</p>		
4	<p>Verify that adverse trends are documented on Attachment B. [SPP 10.01 Para. 5a(3)]</p>		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
5	Verify that the adverse quality trend/problem is analyzed by the QAS. Is the root cause identified? [SPP 10.01 Para. 5.b(1&2)]		
6	Verify that DOE Program Manager concurs and approves the adverse quality trend/problem report (AQTR). before and after analysis by the QAS. [SPP 10.01 Para. 5a(4) and 5b(4)]		
7	Verify that the Program Managers are familiar with this SPP and its contents (General)		

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
8	What is the involvement of the Branch Chief in problem resolution? (General)		
9	The SPP does not address (a) corrective action (b) prevention of recurrence or (c) dissemination of trend analysis to avoid similar problems at other EM locations (General)		

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NO. HQ-91-003

QUALITY ASSURANCE CHECKLIST

ORGANIZATION EVALUATED EM-30	<input checked="" type="checkbox"/> EXTERNAL <input type="checkbox"/> INTERNAL	<input checked="" type="checkbox"/> AUDIT <input type="checkbox"/> SURVEILLANCE <input type="checkbox"/> INSPECTION	PREPARED BY <u>James George</u> <i>JG</i> DATE <u>8-1-91</u> CONCURRED BY <u>N/A</u> DATE _____ APPROVED BY <u>James C. Froug</u> DATE <u>8/7/91</u>
DATES OF EVALUATION 8/26-30/91			
CONTROLLING DOCUMENT (Title, Number, Revision) Planning and Conduct of Quality Improvement SPP 10.02, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 10.02
ITEM NO.	CHARACTERISTICS TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	<p>Section 2, page 1, requires that the procedural process "...apply only to the organization(s) that has adopted this SPP for its own use or that has had it invoked by contractual...means".</p> <p>Verify by interviews with appropriate personnel and/or review of objective evidence:</p> <ol style="list-style-type: none"> 1. List who are the affected organizations. 2. Verify that the process is in use for those organizations for whom it has been adapted or invoked. 		

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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2	Section 4, page 1, states in part that "this instruction addresses the planning...for those quality trends...identified...In accordance with SPP 10.01. Verify by interviews with personnel and review of objective evidence that those adverse quality trends and/or problem identified and analyzed in SPP 10.01 are improved through the use of this procedure.		
3	Section 5, pages 1 through 3, contains paragraphs b. and c., with titles, but does not contain a paragraph a. Verify whether this is an oversight or a typographical error.		

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4	<p>Section 5, Items (1) through (7), pages 1 and 2. Verify by interviews with personnel and review of objective evidence that the QA Specialist:</p> <ol style="list-style-type: none"> 1. Initiates quality improvement, planning by <ol style="list-style-type: none"> a. Documents each adverse quality trend/problem on a "Quality Trend/Problem Report" for and; b. Logs the quality trend/problem on a "Quality Improvement Log"; 2. Monitors improvements developed to address root causes (how is this accomplished?); 3. Monitors contributors to identified trends/problems (how is this accomplished?); 4. Documents proposed improvements in a plan which contains <ol style="list-style-type: none"> a. plan for implementation and b. schedule for implementation; 5. Obtains HLW Program Manager review/approval; 6. Distributes to other selected Program Managers (how is this determined?); 7. Prepares the quality record and; 8. Logs approval of the improvement actions on the "Quality Improvement Log". 		

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5	<p>Section 5, paragraph b, items (2) and (3), page 2</p> <p>Verify by review the objective evidence that the QAS informs the program manager of quality improvement progress.</p> <p>1. How is this activity accomplished?</p> <p>Additionally, verify that the QAS verifies accomplishment of quality improvement actions and "logs the completion date on the "Quality Improvement Log".</p> <p>1. How and where is the verification documented?</p>		
6	<p>Section 5, paragraph c, item (1), page 3.</p> <p>Verify by review of objective evidence that the QA Specialist prepares the "Quality Improvement Logs" and "Plans" as QA Records. Choose several at random and verify they have been processed in accordance with SPP 7.01.</p>		

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DATES OF EVALUATION 8/26-30/91				
CONTROLLING DOCUMENT (Title, Number, Revision) Differing Staff Opinions and Allegations SPP-10.03, Rev. 0			ACTIVITY EVALUATED Implementation of SPP 10.03	
ITEM NO.	CHARACTERISTICS TO BE EVALUATED		REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
1	SPP10.03 Verify that staff are aware of this SPP and familiar with its' content. Review training/indoctrination records and interview staff. (SPP 10.03, Para. 4)			

* INDICATE RESULTS: SATISFACTORY (SAT), UNSATISFACTORY (UNSAT), NOT APPLICABLE (N/A)

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SPP 10.03

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ITEM NO.	CHARACTERISTIC TO BE EVALUATED	REMARKS Record objective evidence reviewed, method of verification, personnel contacted	RESULTS
2	Verify that differing opinions and allegations are assigned and identification number are logged by the affected manager		
3	Is it required that all differences of opinion be documented? Note: There may be instances where staff have disagreed with QA or safety issues and not documented it. (SPP 10.03, Para. 1.0)		
4	Verify be review of documentation interviews with staff that the sequential procedural steps are followed. a) Identification of an issue b) Discussion between Manager and Concerned Individual (C.I.) c) Identification and logging of the issue d) Resolution and notification to C.I. e) Concurrence by C.I. f) Escalation to higher management or DOE (if necessary) g) Closure documented in the log. (SPP 10.03, Para. 5.a&b)		

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5	Verify that staff are advised of the procedure regarding external allegators. Note: This is a potentially sensitive issue and it is important that staff are aware. As interviewers how they would respond to an external allegator. [SPP 10.03, Para. 5.C.(1)]		
6	What is the procedure for notifying the external allegator regarding resolutions? The employee receiving the allegation should ask the allegator if they wish to be notified and how. [SPP 10.03, Para. 5.c.(2)]		
7	Review available documentation of external allegations. (SPP 10.3, Para. 5.d)		

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8	Are other managers informed? [SPP 10.3, Para. 5.c.(11)] Note: Look for "lessons learned". If an allegation is received on one project are other projects notified?		
9	a) Is compliance with this procedure verified? Review audits/surveillance reports. (DOE RW 0214, Para. 2.9) b) Verify that site personnel have received indoctrination (DOE RW 0214, Para. 2.8)		