



Department of Energy
Carlsbad Field Office
P. O. Box 3090
Carlsbad, New Mexico 88221
August 28, 2008



Mr. Jon E. Hoff, Quality Assurance Manager
Washington TRU Solutions
P.O. Box 2078
Carlsbad, NM 88221-2078

Subject: Corrective Action Report 08-038, Surveillance S-08-14,
Washington TRU Solutions National Emissions Standard for
Hazardous Air Pollutants

Dear Mr. Hoff:

The Carlsbad Field Office (CBFO) conducted Surveillance S-08-14 of Washington TRU Solutions National Emissions Standard for Hazardous Air Pollutants (NESHAP) activities August 19 through 21, 2008.

The surveillance team identified one condition adverse to quality. The enclosed Corrective Action Report (CAR) 08-038 was issued to address this condition adverse to quality.

If you have any questions or comments concerning the CAR, please contact me at (575) 234-7442.

Sincerely,

M. Lea Chism
Quality Assurance Specialist

Enclosure



Mr. Jon E. Hoff

-2-

August 28, 2008

cc: w/enclosure

A. Holland, CBFO

*ED

G. Basabilvazo, CBFO

ED

F. Sharif, WTS

ED

M. A. Mullins, WTS

ED

M. Eagle, EPA

ED

E. Feltcorn, EPA

ED

R. Joglekar, EPA

ED

S. Zappe, NMED

ED

S. Holmes, NMED

ED

T. Kesterson, DOE OB WIPP NMED

ED

D. Winters, DNFSB

ED

A. Pangle, CTAC

ED

G. Galloway, WTS

ED

Thomas Putnam, CTAC

ED

WIPP Operating Record, MS 452-09

CBFO QA File

CBFO M&RC

*ED denotes electronic distribution

CORRECTIVE ACTION REPORT

1. CAR No.: 08-038	2. Activity Report No.: S-08-014	3. Page 1 of 2
4. Controlling document: WP 12-HP3500	5. CBFO Assessment Team Leader: Lea Chism	
6. Responsible organization: WTS	7. CAQ was discussed with: Glen Galloway	
Element that was violated: WP 12-HP3500, revision 14, section 3.1.3, bullets 3, 4, 5, and 10 require information to be recorded on Attachment 1 in whole numbers only, for the gross count rate in cpm, background count rate in cpm, net count rate in cpm, and activity in disintegrations per minute (dpm) for radiation measured (α and/or β).		
9. Condition Adverse to Quality (CAQ): Review of Attachment 1, dated 8-3-08, revealed that the information had been recorded out to two (2) decimals points. The equipment used to make calculations records the information out to two decimal points and it had been recorded that way on Attachment 1. Additional samples collected showed the same deficiency, and a discussion with the supervisor indicated this was the way the information was normally recorded.		
10. Suggested actions (Optional):		
11a. Significant CAQ? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> 11b. Work Suspension recommended? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> 11c. RCRA related? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> 11d. Accelerated corrective action required? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> 11e. Does this CAQ affect waste streams BNINW216 or BNIN218? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	12. Type of actions required: Remedial? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Investigative? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Root Cause Analysis? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Actions to Preclude Recurrence? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
13a. Trend Code: WPO5	13b. CAR Initiator: Thomas Putnam/Jim Oliver <small>(printed name)</small> <i>Thomas Putnam</i>	Date: 8/25/08
14a. Response due date: 09-26-08		
14b. Required corrective action completion date: N/A		
15. Concurrence:		
a. Assessment Team Leader: M. Lea Chism <small>(printed name)</small> <i>M. Lea Chism</i>		Date: 08-28-08
b. CBFO Quality Assurance Manager (if applicable): N/A <small>(printed name)</small>		Date: N/A
16. Acceptance of Proposed Corrective Actions: _____ <small>(printed name)</small>		Date: _____
17. Acceptance of Corrective Action Completion: _____ <small>(printed name)</small>		Date: _____
18. Closure: _____ <small>(printed name)</small>		Date: _____

CAR CONTINUATION SHEET

1. CAR No: 08-038

2. Activity No: S-08-14

3. Page 2 of 2.

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WASTE ISOLATION PILOT PLANT
U.S. DEPARTMENT OF ENERGY
Carlsbad Field Office

**INSTRUCTIONS FOR COMPLETING A CORRECTIVE ACTION PLAN IN
RESPONSE TO A CAR ADDRESSING A CONDITION ADVERSE TO QUALITY**

You are requested to provide a corrective action plan in response to this corrective action report (CAR) by the due date identified in block 14a of the CAR. If this date cannot be met, provide a written request for extension to the assessment team leader (CAR block 5). This request must include justification for the delay and must be provided prior to the response due date (CAR block 14a).

The corrective action plan shall address the corrective actions indicated in CAR block 12. As appropriate, develop the plan in accordance with the following sequence and format:

In order to develop the corrective action plan, perform an investigative action to determine the extent and impact of the deficiency and to identify the root cause. Next, determine the actions required to correct the adverse condition. The plan shall include the following information, as appropriate to CAR block 12.

1. Corrective action response for CAR # 08-038
 - A. **Remedial Actions**-Describe actions required or taken to correct the specific conditions noted and any similar conditions identified during the investigations.
 - B. **Investigative Actions**-Describe the investigative actions performed to determine the extent and impact of the deficiency and the results of the investigation. This will include a determination of the acceptability of any data generated prior to resolution of the deficiency.
 - C. **Root Cause Determination**-Identify the root cause of the condition as determined through investigative actions.
 - D. **Actions to Preclude Recurrence**-Identify the corrective actions required to address the root cause of the condition in order to preclude recurrence.
2. For each action above, identify the individual assigned responsibility for completion of the action and the anticipated (or actual, if complete) completion date.
3. The response must identify the individual having the overall responsibility for completion of the corrective actions.

NOTE: The documentation to support corrective action completion is not to be submitted with the corrective action plan and shall not be submitted until the corrective action plan is approved.