



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

JUN - 5 2012



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

Subject: Transmittal of Audit Report for Audit A-12-17

Dear Mr. Hoff:

The Carlsbad Field Office performed Audit A-12-17, Washington TRU Solutions Records Processes, April 3-5, 2012. The audit team concluded that the overall status of the records processes evaluated is adequately established for compliance with upper-tier requirements, satisfactory in the implementation of these requirements, and effective in achieving the desired results. Three Corrective Action Reports were generated as a result of the audit and have been transmitted under separate correspondence. The results of the audit and conclusions are provided in detail in the enclosed report.

If you have any questions or comments, please contact Richard Farrell at (575) 234-7459.

Sincerely,

Randy Unger, Director
 Office of Quality Assurance

Enclosure

cc: w/ enclosure

R. Unger, CBFO	* ED	T. Kliphuis, NMED	ED
G. Basabilvazo, CBFO	ED	T. Hall, NMED	ED
C. Gadbury, CBFO	ED	S. Holmes, NMED	ED
R. Farrell, CBFO	ED	R. Maestas, NMED	ED
D. Garcia, CBFO	ED	T. Kesterson, NMED/DOE OB	ED
M. Milligan, CBFO	ED	J. Marple, NMED/DOE OB	ED
F. Sharif, WTS	ED	D. Winters, DNFSB	ED
M.A. Mullins, WTS	ED	M. Mager, CTAC	ED
P. Hester, WTS	ED	G. Knox, CTAC	ED
E. Harkness, WTS	ED	G. White, CTAC	ED
T. Peake, EPA	ED	WIPP Operating Record	ED
M. Eagle, EPA	ED	CBFO QA File	
E. Feltcorn, EPA	ED	CBFO M&RC	
R. Joglekar, EPA	ED	*ED denotes electronic distribution	
S. Ghose, EPA	ED		
R. Lee, EPA	ED		
J. Kieling, NMED	ED		



**U.S. DEPARTMENT OF ENERGY
CARLSBAD FIELD OFFICE**

AUDIT REPORT

OF

AUDIT NUMBER A-12-17

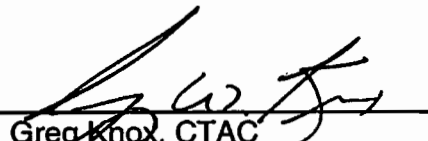
April 3 – 5, 2012

**WASHINGTON TRU SOLUTIONS (WTS)
RECORDS PROCESSES**

CARLSBAD, NEW MEXICO



Prepared by:


Greg Knox, CTAC
Audit Team Leader

Date: 22 MAY 2012

Approved by:


Randy Unger, CBFO
Quality Assurance Director

Date: 4 June 12

1.0 EXECUTIVE SUMMARY

Carlsbad Field Office (CBFO) Audit A-12-17 was conducted April 3 – 5, 2012, to evaluate the adequacy, implementation, and effectiveness of quality assurance (QA) and technical activities related to records processes at the Waste Isolation Pilot Plant (WIPP) near Carlsbad, NM. The activities were evaluated with respect to the requirements defined in DOE/CBFO-94-1012, *CBFO Quality Assurance Program Document (QAPD)*; WP 13-1, *Washington TRU Solutions, LLC, Quality Assurance Program Description*; and Washington TRU Solutions (WTS) implementing procedures.

The audit team identified seven conditions adverse to quality (CAQs) during this audit, all of them related to records processing. The CAQs resulted in the issuance of three corrective action reports (CARs), as described in section 6.0.

Overall, the audit team verified that WTS records processing, except for the areas identified in the CARs, continues to be adequately established for compliance with upper-tier requirements, satisfactory in the implementation of these requirements, and effective in achieving the desired results.

2.0 SCOPE

The scope of the audit included an evaluation of WTS records processing procedures and records, and performance of quality-affecting activities. The audit evaluated adequacy of WTS procedures with respect to CBFO and WTS QA and records requirements.

The audit team witnessed implementation and evaluated documentation of implementation of records processing procedures. Emphasis was placed on quality records. Effectiveness of implementation and documentation of procedure work steps were also evaluated.

Evaluation of WTS procedures for adequacy was based on the CBFO QAPD, Rev. 11.

3.0 AUDIT TEAM

R. Farrell	QA Management Representative, CBFO
G. Knox	Audit Team Leader, CBFO Technical Assistance Contractor (CTAC)
P.Y. Martinez	Auditor, CTAC
K. Martin	Auditor, CTAC
N. Frank	Auditor, CTAC
E. Bradford	Auditor, CTAC
H. Kirschenmann	Auditor, CTAC
M. Mager	Auditor-in-training, CTAC

4.0 AUDIT PARTICIPANTS

Individuals contacted during the audit are identified in Attachment 1. A pre-audit conference was held in the WIPP Support Building large conference room on April 3, 2012. The audit was concluded with a post-audit conference in the WIPP Support Building large conference room on April 5, 2012.

5.0 SUMMARY OF AUDIT RESULTS

5.1 Program Adequacy, Implementation, and Effectiveness

The audit team evaluated the associated implementing procedures to verify the adequate flow-down of upper-tier requirements, conducted interviews with responsible personnel, examined storage locations, and reviewed randomly selected records to determine the degree to which WTS records processing requirements are implemented and the effectiveness of the overall program.

The audited areas are described below. Seven identified concerns were deemed to be CAQs, as described in detail in sections 6.0 and 7.0.

Attachment 2 is a list of the documents reviewed and Attachment 3 is the summary of the audit results.

The audit team concluded that the WTS records processing activities are adequately established for compliance with upper-tier requirements, satisfactory in the implementation of these requirements, and effective in achieving the desired results.

5.2 Audit Details

The audit team evaluated records control processes in six areas of the WTS WIPP operations: Quality Assurance, Operations, Technical Training, Safety, Environmental Resource Conservation and Recovery Act (RCRA) Operating Record, and Engineering (including the Engineering file room). The team requested all records inventory and disposition schedules (RIDS) for the identified areas and chose random records to evaluate for compliance to procedures and the appropriate RIDS requirements. Objective evidence examined to verify compliance with the requirements for records processing included records submittals, retrieval requests, transmittal/receiving forms, the RIDS, records inventory worksheets, and operational logbooks/notebooks. Records storage arrangements were evaluated to verify compliance with requirements for the preservation of in-process and completed records. Further, records were reviewed to verify accuracy, completeness, legibility, and appropriate annotations for corrections when necessary.

Seven concerns were identified during the audit; resulting in the issuance of three CARs (see section 6.0).

Overall, the audit team verified that WTS records processing, except for the areas identified in the CARs, continues to be adequately established for compliance with upper-tier

requirements, satisfactory in the implementation of these requirements, and effective in achieving the desired results.

6.0 SUMMARY OF DEFICIENCIES

6.1 Corrective Action Reports

During the audit, the audit team may identify conditions adverse to quality (CAQs) and document such conditions on corrective action reports (CARs).

Condition Adverse to Quality (CAQ) – An all-inclusive term used in reference to any of the following: failures, malfunctions, deficiencies, defective items, nonconformances, and technical inadequacies.

Significant Condition Adverse to Quality (SCAQ) – A condition which, if uncorrected, could have a serious effect on safety, operability, waste confinement, transuranic (TRU) waste site certification, regulatory compliance demonstration, or the effective implementation of the QA program.

Seven CAQs were identified during the audit. Because the four procedures controlling the RIDS process are used by all areas of WIPP site activities, these seven CAQs were consolidated into three CARs covering the three general sections of records processing at WTS: identification of records (CAR 12-012), generation of records (CAR 12-013), and processing and storing of records (CAR 12-014). The three CARs are described below and were transmitted to WTS under separate cover.

CAR 12-012

Requirement(s)

1. WP 15-RM3005, Rev. 4, section 1.1, states in part, “Records Coordinator...[shall] Review the Disposition Authorities and Transfer Instructions found in columns 9 and 10 on the RIDS, at least once annually...[and] ...Determine which records series are eligible for transfer.”
2. WP 15-RM, Rev. 4, section 7.5, states in part, “Employees responsible for storing, maintaining, and protecting QA records will store QA records in one of the following ways:
 - In a nationally recognized testing laboratory (example: Underwriter Laboratories) listed one hour fire rated (or equivalent) container, or a container certified by a person competent in the technical field of fire protection;”

Condition

The following issues (numbered corresponding to the requirements listed above) were identified in the area of records identification, determinations and classifications for management and protection/retentions purposes.

1. Subsidence monitoring survey files are not being transferred to WIPP Records Archives (WRA) as stated in Item #25 on the WTS/Geotechnical & Mine Engineering RIDS:

- These records are electronic, but the RIDS addresses only hardcopies
- Records are not being transferred after 90 days, as required by the RIDS, as they become an annual report.
- The audit team was unable to identify a RIDS item for the annual report.

2. Nuclear Safety Management Assessment Reports are not being maintained as Quality Assurance Records as required by the Nuclear Safety (NS) RIDS item #15. The audit team found that the Management Assessment Reports are being maintained as correspondence files [RIDS Item 1(Q)], which are disposed of after two years and are not stored in controlled access fire rated cabinets. The Records Coordinator confirmed that these correspondence records were the only record of NS management assessments being maintained.

CAR 12-013

Requirement(s)

1. WP 15-RM3002, Rev. 5, section 3.1.2, states in part, "Complete the RIDS per Attachment 3, 'Instructions for Preparing the RIDS', and referring to Attachment 2, 'Sample RIDS', or Contact WRMS."

WP 15-RM3002, Rev. 5, Attachment 3, Item 3, states in part, "If the record series is designated as 'Quality Assurance' then list the following at the end of the record series description: Description of method of validation."

WP 15-RM, Rev. 4, section 7.3, states in part, "Records become QA records once they are completed and validated."

2. WP 15-RM, Rev. 4, section 3.2, states in part, "Records generators will ensure that documents designated to become records are completed ...as follows:

- Blank spaces are filled in where information is required to be entered.
- 'N/A' is entered in spaces where information is applicable, or as otherwise indicated."

WP 15-RM, section 5.1, states in part,

- "All records will be inspected for errors."

- “Errors will be corrected by drawing a single line through the incorrect information..., entering the correct information, and initialing and dating the correction using reproducible ink.”

Condition

The following issues (numbered corresponding to the requirements listed above) were identified in the area of records handling and processing.

1. Method of validation of WTS Engineering/NS RIDS Item #13, Documented Safety Analysis – Unreviewed Safety Question files, is not being performed in accordance with the method indicated on the RIDS.
2. Safety & Health Records are not being completed by generators as required prior to submittal to Records Coordinator.

CAR 12-014

Requirement(s)

1. WP 15-RM, Rev. 4, section 7.5, states in part, “Employees responsible for storing, maintaining, and protecting QA records will store QA records in one of the following ways:
 - In a nationally recognized testing laboratory (example: Underwriter Laboratories) listed one hour fire rated (or equivalent) container, or a container certified by a person competent in the technical field of fire protection.”
2. WP 15-RM, Rev. 4, section 6.5, states in part, “A network backup copy is not acceptable for records management requirements. Electronic records will be backed up on a regular basis to safeguard against the loss of information due to equipment malfunctions or human error.”
3. WP 15-RM, Rev. 4, section 4.1, states in part, “A list of authorized personnel will be posted outside each storage location.”

WP 15-RM, Rev. 4, section 7.5, states in part, “Employees responsible for storing, maintaining, and protecting QA records will store QA records in one of the following ways:

- In a nationally recognized testing laboratory (example: Underwriter Laboratories) listed one hour fire rated (or equivalent) container, or a container certified by a person competent in the technical field of fire protection.”
4. WP 15-RM, Rev. 4, section 7.5, states in part, “Employees responsible for storing, maintaining, and protecting QA records will store QA records in one of the following ways:

- In a nationally recognized testing laboratory (example: Underwriter Laboratories) listed one hour fire rated (or equivalent) container, or a container certified by a person competent in the technical field of fire protection.”

Condition

The following issues (numbered corresponding to requirements stated above) were identified in the area of records storage and protection:

1. QA records are not being protected in accordance with the procedure requirements. Completed QA records, after submittal to the Records Coordinator, are being held temporarily in non-fire-rated cabinets prior to filing in fire-rated cabinets.
2. The volatile organic compound (VOC) database kept by Regulatory and Environmental Services (RES) is retained on the Gallina server. Gallina, including the VOC database, is backed up nightly, Monday –through Friday. No other back-up of the VOC database is performed. This does not meet the storage requirements of WP 15-RM, section 6.5, which states that network backup copy is not acceptable for records management requirements.
3. Two separate QA records (OPPS/Repository Development Project RIDS Item #13 and OPSS/Emergency Management RIDS Item #11) were stored in two separate storage areas that did not meet minimum requirements for storage of QA records, i.e., NOT protected for controlled access, NOT in a controlled access area, and NOT stored in fire-rated cabinets.
4. NS management assessment reports are not being maintained as QA records as required by NS RIDS Item #15. The audit team found that the management assessment reports are being maintained as correspondence files [RIDS Item 1(Q)], which are disposed of after two years and are not stored in controlled access fire rated cabinets. The Records Coordinator confirmed that these correspondence records were the only record of management assessments being maintained.

6.2 Deficiencies Corrected During the Audit

Corrected During the Audit (CDA) – Isolated deficiencies that do not require a root cause determination or actions to preclude recurrence, and where correction of the deficiency can be verified prior to the end of the audit. Examples include one or two minor changes required to correct a procedure (isolated), one or two forms not signed or dated (isolated), and one or two individuals who have not completed a reading assignment.

During the audit, the audit team may identify CAQs. The audit team members and the Audit Team Leader (ATL) evaluate the CAQs to determine if they are significant. Once a determination is made that the CAQ is not significant, the audit team member, in conjunction with the ATL, determines if the CAQ is isolated requiring only remedial action and therefore can be corrected during the audit. Deficiencies that can be classified as CDA are those isolated deficiencies that do not require a root cause

determination or actions to preclude recurrence, and those for which correction of the deficiency can be verified prior to the end of the audit.

Upon determination that the CAQ is isolated, the audit team member, in conjunction with the ATL, evaluates/verifies any objective evidence/actions submitted or taken by the audited organization and determines if the condition was corrected in an acceptable manner. Once it has been determined that the CAQ has been corrected, the ATL categorizes the condition as CDA.

No CDAs were identified during the audit.

7.0 SUMMARY OF OBSERVATIONS AND RECOMMENDATIONS

During the audit, the audit team may identify conditions that warrant input by the audit team to the audited organization regarding potential problems or suggestions for program improvement. The audit team members, in conjunction with the ATL, evaluate these conditions and classify them as observations or recommendations (using the following definitions). Once a determination is made, the audit team members, in conjunction with the ATL, categorize the conditions appropriately.

Observation – A condition that is determined not to be a violation of procedure or requirement at the time but, if not controlled or addressed, may result in a CAQ during future activities.

Recommendation – A suggestion that is directed toward identifying opportunities for improvement and enhancing methods of implementing requirements.

7.1 Observations

No Observations were offered during the course of this audit.

7.2 Recommendations

No Recommendations were provided to WTS Management during the course of this audit.

8.0 LIST OF ATTACHMENTS

Attachment 1: Personnel Contacted During the Audit

Attachment 2: WTS Implementing Procedures Evaluated

Attachment 3: Summary Table of Audit Results

PERSONNEL CONTACTED DURING THE AUDIT				
NAME	ORGANIZATION/ DEPARTMENT	PRE-AUDIT MEETING	CONTACTED DURING AUDIT	POST-AUDIT MEETING
Allen, P.	WTS/Maint. Metrology		X	
Ater, E.	WTS/Manager Oversight	X		X
Balderrama, M	RES/Land Manager	X	X	
Beeman, B.	WTS/Eng.	X		
Boatwright, W.	WTS/RES/VOC Manager/EM&H	X	X	X
Bostick, L.	WTS/Maint. Manager	X		X
Britain, R.	WTS/Integrated Manager			X
Bryan, W.	WTS/Site OPs & Disp. Manager	X		
Byrd, R.	WTS/Maint. Metrology		X	
Carrasco, R.	WTS/Manager	X	X	
Chambers, T.	WTS/IWHE Manager		X	
Cullum, B.	WTS/CM Manager	X		
Dearing, M.A.	WTS/HR Training Admin.		X	
Fierro, S.	WTS/GeoTech/Eng Support	X	X	X
Fox, M.	WTS/WIPP Records Manager	X		
Frank-Supka, L.	RES/Eng.		X	X
Garcia, J.	WTS/Eng.			X
Garcia, O.	WTS/VOC RC		X	
Gonzalez, J.	WTS/NS Analyst		X	
Hayes, R.	WTS/Prin. Eng.		X	
Hernandez, L.	WTS/QA		X	X
Johnson, R.L.	WTS/RES - SEC RC		X	
Jones, S.B.	RES/SEC Manager	X	X	X
Juarez, C.	WTS/RC Dosimetry		X	
Jungclaus, G	WTS/Admin.	X		X
King, C	WTS/Maintenance RC		X	
Lichty, T.	WTS/HR Training Coordinator		X	
McCormick, J.	WTS/NS Manager		X	X
McLemore, J.	WTS/RES Env. Spec.	X		
Meeker, C.	WTS/Integrated Waste Ops RC		X	
Miller, A.	WTS/GeoTech Eng.		X	
Mitchell, J.	WTS/OPs Support	X	X	X
Moffatt, T	WTS/GeoTech Eng.		X	

PERSONNEL CONTACTED DURING THE AUDIT				
NAME	ORGANIZATION/ DEPARTMENT	PRE-AUDIT MEETING	CONTACTED DURING AUDIT	POST-AUDIT MEETING
Montejano, O.	WTS/Eng. Records Clerk		X	
Moore, H.	WTS/Admin Support	X	X	X
Mullins, M.A.	WTS/Sr. Staff Assnt.	X	X	X
Nance, C.	WTS/HR Training Coordinator		X	
Neatherlin, J.	WTS/RDP	X		
Pacazo, E.	WTS/RES Land Use	X		X
Parrish, D.	WTS Fac. OPs	X		X
Pomroy, G.	WTS/Emergency Management.		X	
Proctor, T.	WTS Lead Auditor	X		
Salness, R.	WTS/EM&A Manager			X
Santo, J.	WTS/Eng. Records Clerk		X	
Sjomeling, D.	WTS/RDP			X
Spoon, R.	WTS/Env. Specialist			X
Squires, D.	WTS/Eng.		X	
Strait, A.	WTS/Site Operations		X	
Tidwell, S.	WTS/OPs RC	X	X	X
Urioste, C.	WTS/Admin.		X	X
VandeKraats, J.	WTS/Manager	X	X	
Walker, R.	WTS/NS Project Management		X	
Wayne, C.	WTS/Sr. Safety Pro	X		X
Wiedenhoff, D.	WTS/Software QA Coordinator		X	

WTS Implementing Procedures Evaluated		
Number	Doc. Number	Applicable WTS Document
1	WP 13-1, Rev. 31	WTS Quality Assurance Program Description
2	WP 15-RM, Rev. 4	WIPP Records Management Program
3	WP 15-RM3002, Rev. 5	Records Filing, Inventorying, Scheduling, and Dispositioning
4	WP 15-RM3003, Rev. 1	Disposal of Nonpermanent Records in Office
5	WP 15-RM3005, Rev. 4	Records Transfer and Retrieval

Summary Table of Audit Results

Audit Elements	Concern Classification				QA Evaluation		
	CARs	CDAs	Obs	Rec	Adequacy	Implementation	Effectiveness
Records	3				A	S	E
TOTALS	3				A	S	E

Definitions

A = Adequate
 I = Indeterminate
 NA = Not Adequate
 S = Satisfactory

E = Effective
 M = Marginal
 NE = Not Effective

CAR = Corrective Action Report
 CDA = Corrected During the Audit
 Obs = Observation
 Rec = Recommendation