Dear Mr. Hoff:

The Carlsbad Field Office (CBFO) conducted Surveillance S-15-09 to evaluate the performance of Nuclear Waste Partnership LLC (NWP) Quality Assurance internal audit I15-01 conducted at the Oak Ridge National Laboratory (ORNL). The surveillance was conducted November 18-20, 2014, at the ORNL TRU Waste Processing Center. The results of the surveillance concluded that the NWP assessment program, procedures, and activities evaluated are adequately established, satisfactorily implemented and effective in achieving the desired results, as documented in the enclosed report.

If you have any questions concerning the surveillance report, please contact me at (575) 234-7483.

Sincerely,

Martin P. Navarrete
Senior Quality Assurance Specialist

Enclosure

cc: wenclosure
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CBFO SURVEILLANCE REPORT

Surveillance Number: S-15-09 Date of Surveillance: November 18 – 20, 2014

Surveillance Title: Nuclear Waste Partnership LLC (NWP) Quality Assurance (QA) Internal Audit I15-01, CCP at ORNL

Organization: NWP/QA/Assurance Programs

Surveillance Team:

Martin P. Navarrete  Management Representative, Carlsbad Field Office (CBFO)
Quality Assurance Division

Berry Pace  Surveillance Team Leader, CBFO Technical Assistance Contractor (CTAC)

Surveillance Purpose/Scope:

The purpose of the surveillance was to evaluate NWP QA Internal Audit I15-01, performed at the Oak Ridge National Laboratory (ORNL) TRU Waste Processing Center. The scope of the surveillance included an evaluation to determine the degree to which Audit I15-01 was performed in accordance with established NWP QA assurance program and procedure requirements.

Governing Documents/Requirements:

Evaluation of program effectiveness was based on the current revisions of the following documents:

- DOE/CBFO-94-1012, Quality Assurance Program Document (QAPD)
- WP 13-1, Nuclear Waste Partnership LLC Quality Assurance Program Description
- WP 13-QA.03, Quality Assurance Independent Assessment Program
- WP 13-QA.04, Quality Assurance Department Administrative Program

Activities Evaluated:

Tuesday, November 18

The audit commenced with an entrance meeting with the lead auditor introducing the members of the audit team and clearly communicating the purpose and scope of the audit as well as the activities that would be evaluated. Attendance sheets were routed and collected. Activities to be observed included waste characterization processes such as real-time radiography (RTR), nondestructive assay (NDA), flammable gas sampling and analysis (FGA), container management, and selected elements of the QA program. No visual examination (VE) activities were performed during the audit due to the lack of container inventory subject to VE.

Subsequent to the entrance meeting, the audit team was escorted to the RTR trailer located next to the waste processing facility; building 7880. The audit team witnessed the RTR scan of container X10C0402813B in Unit #6. This container consisted of Summary Category Group
The audit team was observed using prepared checklists and interviewing the operator and RTR subject matter expert (SME) about the specifics of the items being scanned. The team reviewed randomly selected pages from the RTR operations logbook, verified the use of the current Acceptable Knowledge (AK) Summary Reports for reference by the operator, took note of the Central Characterization Program (CCP) RTR procedure and Standing Orders, and verified the current training/qualification of the operator and SME through review of the current List of Qualified Individuals (LOQI).

The audit team was then escorted to the NDA trailer to witness the assay of container X10C0402820M1 on the IQ3 system. Again, the audit team was observed using prepared checklists and interviewing the operator and NDA SME about the specifics of the assay activity. Reviews of the operator logbook by the team were observed, as well as the verification of the training/qualification of the operator on the LOQI. Questions included the identification of the assay software, its purpose and use, and verification of the versions installed in comparison to the Software Inventory List (SIL).

The audit team was then escorted to the In-Situ Object Counting (ISOC) system located next to building #7880QQ to observe the assay count on container X10CSATN02612J. This unit is also referred to as the Mobile In-Situ Large Container Counter (MILCC), designated as unit #2. The operating procedure being used for the count was verified to be current by the team, and the operator's training/qualifications were verified to be current with the LOQI.

**Wednesday, November 9**

The audit team attended the plan-of-the-day (POD) meeting and safety briefing at 6:30 a.m. Representatives from the host site operations organization briefed personnel on the status of the facility and various equipment. Audit activities included FGA activities, container management, and document reviews of characterization batch data reports (BDRs), nonconformance reports and training records. Members of the team were observed verifying document control and records requirements for documentation subject to the audit.

During these reviews, the team discovered a concern relating to question #12 on the Site Project Manager (SPM) checklist completed for RTR BDR OR-RTR6-0556. Question #12 asks "Does observable liquid, if present, meet the criteria of the TSDF-WAC?" The answer provided by the SPM was "Yes." However, after review of the BDR the audit team discovered through examination of the individual data sheets that no containers in the batch contained observable liquid. The team discussed this concern at length and although it did not appear to pose a condition adverse to quality since the TSDF-WAC limits for liquids had not been exceeded, further discussion with the assurance program manager would be necessary upon conclusion of the audit regarding the classification of this concern.

**Thursday, November 20**

The audit team was escorted to the waste storage facility adjacent to building 7880 to verify the hold-tag placement on three randomly selected nonconforming containers. The team was observed interviewing responsible personnel regarding other administrative controls used for controlling nonconforming containers when conditions would otherwise prevent the placement of a hold-tag.
At 11:20 a.m. the audit team leader assembled his team and responsible management of CCP and conducted an out-brief meeting. The team expressed its gratitude for the support provided prior to and during the audit as well as the results of the activities performed during the week. The concern regarding the SPM checklist was once again presented, but it's classification would be deferred until the audit team could discuss the condition with the assurance programs manager. The entrance meeting was adjourned.

Surveillance Results:

The results of the surveillance confirmed that NWP QA Audit 115-01 was performed in compliance with established assessment procedures. Audit team members conducted themselves professionally, and it was apparent through observation of assessment activities and review of the lines of inquiry included in the checklists that the team appropriately and thoroughly prepared for the audit. No concerns were identified as a result of this surveillance.

Corrective Actions:

None.

Corrected During the Surveillance:

None.

Observations:

None.

Recommendations:

None.

Surveillance Team Leader: [Signature] Berry D. Pace Date: 11/24/14

Assistant Manager/Office Director: N/A Date: N/A

CBFO QA Approval: [Signature] Date: 12-2-14