United States Government

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Department of Energy

memorandum

Carlsbad Field Office
Carlsbad, New Mexico 88221

DATE:

NOV 0 2 2018

REPLY TO ATTN OF:

CBFO:OQA:MPN:JM:18-2517:UFC 2300.00

SUBJECT:

Verification of the CAR Closure for CBFO CAR 18-054, Resulting from CBFO Audit A-18-04

то: Jim Malmo, DOE-ID

The Carlsbad Field Office (CBFO) has completed its verification of the Corrective Action Report (CAR) associated with CBFO CAR 18-054, resulting from Audit A-18-04, Recertification of the Advanced Mixed Waste Treatment Project (AMWTP). The audit was conducted August 27 – 30, 2018. As documented on the attached CAR Continuation Sheets, the evaluation indicates that the CAR is closed.

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

Martin P. Navarrete

Senior Quality Assurance Specialist

Attachment

cc: w/attachment	
R. Murray, EM-43	*EC
T. Shrader, CBFO	ED
D. Gadbury, CBFO	ED
K. Princen, CBFO	ED
C. Fesmire, CBFO	ED
D. Miehls, CBFO	ED
M. Stapleton, CBFO	ED
H. Cruickshank, CBFO	ED
J. Zimmerman, DOE-ID	ED
T. Jenkins, DOE-ID	ED
J. Vliet, DOE-ID	ED
D. Pruitt, DOE-ID	ED
G. Byram, AMWTP	ED
J. McCoy, AMWTP	ED
E. Gulbransen, AMWTP	ED
E. Dumas, AMWTP	ED
S. Poling, AMWTP	ED
R. Hubler, AMWTP	ED
A. Morse, AMWTP	ED
G. Tedford, AMWTP	ED
J. Walsh, EPA	ED
J. Ellis, EPA	ED
T. Peake, EPA	ED
E. Feltcorn, EPA	ED
J. Kieling, NMED	ED
R. Maestas, NMED	ED
D. Biswell, NMED	ED
H. Tellez, NMED	ED
M. McLean, NMED	ED
T. Runyon, CTAC	ED
P. Martinez, CTAC	EC
C. Castillo, CTAC	EC
M. Leroch, CTAC	ED
P. Hinojos, CTAC	EC
J. Vernon, CTAC	EC
P. Gomez, CTAC	ED
G. White, CTAC	ED
Site Documents	EC
CBFO QA File	
CBFO M&RC	
*ED denotes electronic distribution	

CAR CONTINUATION SHEET

1. CAR No: 18-054	2. Activity No: A-18-04	3. Page 1 of 3
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Blocks 17 & 18 Acceptance of Corrective Action Completion and Closure

The Carlsbad Field Office (CBFO) has reviewed the closure package for Corrective Action Report (CAR) 18-054, including objective evidence and supporting documentation, submitted via Fluor Idaho letter CCN 322789, dated October 25, 2018, from John C. McCoy, Manager, RH/CH Transuranic Waste Programs to Mr. James A. Malmo, Assistant Manager, Waste Disposition Project, Department of Energy, Idaho Operations Office (DOE-ID), with concurrence from DOE-ID received 11/1/18.

Italicized text, taken verbatim from the Corrective Action Plan (CAP), is used to reflect the correlation between the actions required by the CAR and the method used for evaluation.

REMEDIAL ACTIONS

Schedule surveillances to conduct make up batch validations for the 4th quarter of 2016 and 2017.

• QA Surveillances 122173 and 122174 were performed and documented on randomly chosen waste containers from Visual Examinations for the 4th quarter of 2016 and 2017. No issues were noted.

Verification:

The completion of Remedial Action has been verified via review of the Fluor Idaho Quality Assurance (QA) Surveillance Schedule, Fluor Idaho ICP Surveillance Report 122173 titled: 4th Quarter 2016 Level I TRU Programs Data Generation and Validation – VEB, and Fluor Idaho ICP Surveillance Report 122174 titled: 4th Quarter 2017 Level I TRU Programs Data Generation and Validation – VEB. As described in the report, no issues were found during the surveillances. The remedial actions taken resolve the issue encountered during the A-18-04 recertification audit.

INVESTIGATIVE ACTIONS

Conduct a review of the QA surveillance schedule to ensure Level 1 review, validation, and verification is repeated on the data for a randomly chosen waste container from a Visual Examination (VE) or Real-Time-Radiography (RTR) Batch Data Report to be performed through a QA Surveillance every 3 months.

• A review of the QA Surveillance schedule was conducted and the schedule revised to require a Level 1 review, validation, and verification is repeated on the data for a randomly chosen waste container from a Visual Examination (VE) or Real-Time-Radiography (RTR) Batch Data Report to be performed through a QA Surveillance every 3 months.

Extent and Impact:

- During Investigation, the extent and impact of this deficiency was evaluated. This deficiency occurred twice, once in the 4th quarter of 2016 and once in the 4th quarter of 2017; however, surveillances were performed that bounded the impact of the deficiency:
 - o Surveillances for 3rd quarter 2016 and 1st quarter 2017 had been performed from Visual

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Examination with no issues identified and,

o Surveillances for 3rd quarter 2017 and first quarter 2018 had been performed form Visual Examination with no issues identified

Completion of previous surveillances and surveillances completed from Remedial Action 1 identified no issues, therefore it has been determined there is no impact to program requirements or acceptability of any data generated prior to resolution of the deficiency.

Verification:

Investigative actions and extent of condition were evaluated and found to be acceptable, as documented in CBFO CAP acceptance memorandum CBFO:OQA:MPN:JM:18-2098:UFC 2300.00.

CAUSAL ANALYSIS

Cause Code A3B2C04 – Human Performance Less than Adequate (LTA), Rule Based Error, Previous Success in use of rule reinforced continued use of rule.

• The documented apparent cause analysis determined the failure to perform the quarterly review supporting either a Visual Examination or Real-Time-Radiography data report was due to a misinterpretation of the requirement from the WIPP Waste Analysis Plan. This misinterpretation was applied during the quarterly QA Surveillance planning by including selection of a Non-destructive Assay (NDA) data report from a randomly chosen waste container for performance of the 4th quarter review. The performance of the NDA data review had been mistakenly applied to the requirement from the WIPP WAP.

Cause Code A4B1C01 – Management Problem, Management Methods LTA, Management policy guidance/expectations not well defined, understood, or enforced.

• Several QA surveillances were scheduled by QA management without recognition of the misinterpretation

Cause Code A5B2C08 – Communication LTA, Written Communication Content LTA, Incomplete/situation not covered.

- WIP-3, Level II Data Validation distinguishes data reporting basis between PLN-5199, Quality Assurance Project Plan (QAPjP) for WIPP WAP requirements specifically for VE and RTR and PLN-5198, AMWTP CH TRU Waste Certification addressing RTR, VE, and NDA to meet the DOE/CBFO QAPD.
- MCP-4014, Reports to Management section 4.3 which directs the performance of QA surveillances performed for CH-TRU Program quality affecting activities does not include specific requirements to the conduct of the quarterly surveillance which reinforced the misinterpretation applying the WIPP WAP requirement to surveillance of NDA data reporting.

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Verification:

The causal analysis was evaluated and found to be acceptable, as documented in CBFO CAP acceptance memorandum CBFO:OQA:MPN:JM:18-2098:UFC 2300.00.

ACTIONS TO PRECLUDE RECURRENCE

Revise MCP-4014 to clarify the objectives of the QA quarterly surveillance to meet the requirements of the WIPP Waste Analysis Plan. The revision will require the selection of container data on a randomly chosen waste container to repeat the Level I review, validation, and verification from either a VE or RTR data report every 3 months.

COMMITMENTS

Revise MCP-4014, Reports to Management

DUE DATES

October 26, 2018

AMWTP Fluor Idaho QA, transmit closure documentation to the CBFO.

October 26, 2018

Verification:

Verified via review of MCP-4014, Revision 2. Step 4.3.5, which instructs the QA Manager or Designee: to "Perform and document a quarterly (every 3 months) QA surveillance on a randomly chosen container repeating the Level 1 review, validation, and verification from either VE or RTR, as required by WIP-3. All commitments listed in the approved CAP have been verified to be complete.

ACCEPTANCE

Based on the results of the review and verification of the objective evidence included in the CAR 18-054 closure package, it is recommended that CAR 18-054 be closed.

Verification Performed By: Paul C. Gomez, CTAC

Date