



**Department of Energy**  
Carlsbad Field Office  
P. O. Box 3090  
Carlsbad, New Mexico 88221  
**JUN 06 2019**

 **ENTERED**

Mr. Dennis Ivey, Manager  
Quality and Contractor Assurance  
Nuclear Waste Partnership LLC  
P.O. Box 2078  
Carlsbad, NM 88221-2078

Subject: Issuance of Carlsbad Field Office Corrective Action Reports 19-060 and 19-061  
Identified During Audit A-19-18

Dear Mr. Ivey:

The Carlsbad Field Office (CBFO) performed Recertification Audit A-19-18 of the Los Alamos National Laboratory/Nuclear Waste Partnership LLC Central Characterization Program on May 21 – June 3, 2019. Enclosed are Corrective Action Reports (CARs) 19-060 and 19-061 addressing the conditions adverse to quality identified during the audit.

Please provide a documented response for each CAR, ensuring that the required actions indicated in Block 12 are addressed, including a schedule for completion of corrective actions. Please return your responses to me on or before the due date identified in Block 14a of the CAR forms.

If you have any questions concerning the CARs, please contact me at (575) 234-7491.

Sincerely,



Dennis S. Miehl  
Senior Quality Assurance Specialist

Enclosure



cc: w/enclosure

R. Murray, EM

D. Nickless, EM-LA

T. Shrader, CBFO

K. Lachman, CBFO

C. Fesmire, CBFO

D. C. Gadbury, CBFO

M. Navarrete, CBFO

M. Stapleton, CBFO

N. Castaneda, CBFO

B. Covert, NWP

M. Percy, NWP

R. Lee, NWP

T. Groover, NWP

J. Carter, NWP

V. Ballew, NWP

S. Saiz, NWP

A. Boyea, NWP

R. Reeves, NWP

P. Tilmon, NWP

L. Turner, NWP

J. Walsh, EPA

J. Ellis, EPA

T. Peake, EPA

E. Feltcorn, EPA

J. Kieling, NMED

R. Maestas, NMED

D. Biswell, NMED

M. McLean, NMED

T. Runyon, CTAC

P. Martinez, CTAC

C. Castillo, CTAC

H. Tellez, CTAC

R. Castillo, CTAC

P. Hinojos, CTAC

G. White, CTAC


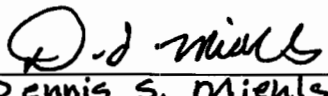
Site Documents

CBFO QA File

CBFO M&RC

\*ED denotes electronic distribution

**CBFO CORRECTIVE ACTION REPORT**

1. CAR No.: 19-060	2. Activity Report No.: A-19-18	3. Page 1 of 2
4. Controlling document: DOE/CBFO-94-1012, Rev. 13 CCP-QP-043, Rev. 3 CCP-TP-053, Rev. 16 CCP-PO-005, Rev. 30	5. Responsible CBFO Manager: N/A	
6. Responsible organization: NWP/CCP	7. CAQ discussed with: Ron Reeves, Pat Tilmon, Ronnie Lee	
8. Requirement: See CAR Continuation Sheet		
9. Condition Adverse to Quality (CAQ): See CAR Continuation Sheet		
10. CAR Initiator:  <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;">             Printed Name: Berry D. Pace         </div> <div style="text-align: center;">           Date: 6/5/19         </div> </div>		
11. Deficiency classification:		12. Type of actions required:
11a. Significant CAQ? (If "Yes", go to block 15b)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	12a. Remedial? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
11b. Work Suspension recommended? (If "Yes", go to block 15b)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	12b. Investigative? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
11c. WAP-related Deficiency?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	12c. Causal Analysis? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
11d. Accelerated corrective action required? (If "Yes", go to block 14b)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	12d. Actions to Preclude Recurrence? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
13. Trend Code: RT-05		
14a. Response due date: 7-5-19		
14b. Required corrective action completion date: N/A		
15. Concurrence:		
a. Quality Assurance Director/Quality Assurance Representative:		
<div style="display: flex; justify-content: space-between;"> <div style="text-align: center;">             Printed Name: Dennis S. Miehls         </div> <div style="text-align: center;">           Date: 6-6-19         </div> </div>		
b. CBFO Office of Quality Assurance Director: (If SCAQ, work suspension, or accelerated corrective action; otherwise mark as "N/A")		
<div style="display: flex; justify-content: space-between;"> <div style="text-align: center;">           Printed Name: N/A         </div> <div style="text-align: center;">           Date:         </div> </div>		
16. Acceptance of Proposed Corrective Actions:		
Printed Name and Title: _____		Date: _____
17. Acceptance of Corrective Action Completion:		
Printed Name: _____		Date: _____
18. Closure:		
Printed Name: _____		Date: _____

### CAR CONTINUATION SHEET

1. CAR No: 19-060

2. Activity No: A-19-18

3. Page 2 of 2

**Requirement(s) (Block #8):**

DOE/CBFO-94-1012, *Quality Assurance Program Document*, Rev. 13, section 2.1[A] states: "Work shall be performed under controlled conditions using approved instructions, procedures, or other appropriate means."

CCP-TP-053, *CCP Standard Real-Time Radiography (RTR) Inspection Procedure*, Rev. 16, section 3.1.1 states: "[Real-Time Radiography (RTR) Operator] Operates the RTR system to determine the attributes of the waste content of a waste container."

CCP-QP-043, *CCP Operations Level Training and Qualification*, Rev. 3, section 5.4.9 (NOTE) states: "Radiography Training Containers for contact-handled (CH) waste streams must be examined using the same processes and procedures as those used for examining transuranic (TRU) and TRU-mixed waste\*. The procedures may be modified as necessary to allow the use with the Training Containers."

CCP-PO-005, *CCP Conduct of Operations*, Rev. 30, section 18.7 states: "Procedures will be adhered to at all times. \*\*\* All CCP operations will be conducted with the procedure open and followed step-by-step."

**Condition Adverse to Quality (Block #9):**

There was no evidence provided that CCP-TP-053 had been modified to allow for the use of a second operator to complete the semi-annual training container scan. Historically, the operator completing the required semi-annual scan identifies items while simultaneously operating the RTR unit. During the review of a Training Container scan video for container NDE-TRAINING-92, performed on 4/8/19, the audit team determined two operators were performing the scan; one operator (required to complete semi-annual scan) was identifying items observed during the scan, and the other operator was manipulating the RTR unit.

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

**INSTRUCTIONS FOR PROVIDING A CORRECTIVE ACTION PLAN**

You are requested to provide a corrective action plan (CAP) in response to this corrective action report (CAR) by the date identified in block 14a of the CAR. If this date cannot be met, provide a written request for extension to the Quality Assurance Representative with courtesy copy to the Office of Quality Assurance Director. This request must include justification for the delay and must be provided seven calendar days prior to the response due date (CAR block 14a).

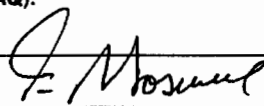
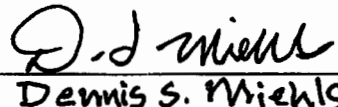
The CAP shall address the corrective actions indicated in CAR block 12. As appropriate, develop the plan in accordance with the following sequence and format:

In order to develop the CAP, perform an investigative action to determine the extent and impact of the deficiency and to identify the causal factors. 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 # 19-060
  - A. **Remedial Actions**-Describe actions required or taken to correct the specific conditions noted and any similar conditions identified during discovery.
  - 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. **Causal Analysis**-Identify the causal factor(s) of the CAR condition. Refer to Step 5.3.2 if the CAR was issued to CBFO or Step 5.3.3 if the CAR was issued to a participant organization.
  - D. **Actions to Preclude Recurrence**-Identify the corrective actions required to address the causal factors of the condition in order to preclude recurrence.

NOTE: Schedule for completion of corrective actions is always required.
2. For each action above, identify 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.

**CBFO CORRECTIVE ACTION REPORT**

1. CAR No.: 19-061	2. Activity Report No.: A-19-18	3. Page 1 of 2
4. Controlling document: CCP-TP-113, Rev. 22	5. Responsible CBFO Manager: N/A	
6. Responsible organization: NWP/CCP	7. CAQ discussed with: Laura Turner	
8. Requirement: See CAR Continuation Sheet		
9. Condition Adverse to Quality (CAQ): See CAR Continuation Sheet		
10. CAR Initiator:  Printed Name: Tim Boswell Date: 6-5-19		
11. Deficiency classification:		12. Type of actions required:
11a. Significant CAQ? (If "Yes", go to block 15b)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	12a. Remedial? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
11b. Work Suspension recommended? (If "Yes", go to block 15b)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	12b. Investigative? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
11c. WAP-related Deficiency?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	12c. Causal Analysis? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
11d. Accelerated corrective action required? (If "Yes", go to block 14b)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	12d. Actions to Preclude Recurrence? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
13. Trend Code: VE-06		
14a. Response due date: 7-5-19		
14b. Required corrective action completion date: N/A		
15. Concurrence:		
a. Quality Assurance Director/Quality Assurance Representative:		
 Printed Name: Dennis S. Michls		Date: 6-6-19
b. CBFO Office of Quality Assurance Director: (If SCAQ, work suspension, or accelerated corrective action; otherwise mark as "N/A")		
Printed Name: N/A		Date:
16. Acceptance of Proposed Corrective Actions:		
Printed Name and Title: _____		Date: _____
17. Acceptance of Corrective Action Completion:		
Printed Name: _____		Date: _____
18. Closure:		
Printed Name: _____		Date: _____

### CAR CONTINUATION SHEET

1. CAR No: 19-061

2. Activity No: A-19-18

3. Page 2 of 2

**8. Requirement:**

CCP-TP-113, Rev. 22, section 4.6.6 states: "Save Attachment 3 in accordance with VEE instructions THEN print AND record the following in the approvals section:

**VEO 1**

[A] Print name, sign, and date to annotate that the VE process has been completed.

**VEO 2**

[B] Print name, sign, and date to annotate that the VE process has been completed."

**9. Condition Adverse to Quality:**

During the review of Visual Examination (VE) Batch Data Report (BDR) LAVE030144, the audit team discovered that Attachment 3, *CCP Waste Visual Examination Data Form*, page 4 of 4, for Container or Package ID #72905 was not included in the BDR.

In its place, Attachment 2, *Visual Examination Loading Form*, page 4 of 4, for Container or Package ID #72905 was incorporated. VEO 1 and VEO 2 approvals on Attachment 3 could not be verified.

## INSTRUCTIONS FOR PROVIDING A CORRECTIVE ACTION PLAN

WASTE ISOLATION PILOT PLANT  
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The CAP 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 CAP, perform an investigative action to determine the extent and impact of the deficiency and to identify the causal factors. 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 # 19-061
  - A. **Remedial Actions**-Describe actions required or taken to correct the specific conditions noted and any similar conditions identified during discovery.
  - 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. **Causal Analysis**-Identify the causal factor(s) of the CAR condition. Refer to Step 5.3.2 if the CAR was issued to CBFO or Step 5.3.3 if the CAR was issued to a participant organization.
  - D. **Actions to Preclude Recurrence**-Identify the corrective actions required to address the causal factors of the condition in order to preclude recurrence.

NOTE: Schedule for completion of corrective actions is always required.
2. For each action above, identify 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.