YUCCA MOUNTAIN PROJECT OFFICE
DOCUMENT APPROVAL SHEET

Y-AD-002
4/90

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NO. 222
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Title
QUALITY MANAGEMENT PROCEDURE: STOP WORK ORDER

NO. QMP-01-02
[X] Q
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APPROVAL

PROJECT MANAGER: Original signed by	Mitchell P. Kunich Signature	3/21/88 Date
DIRECTOR OF QUALITY ASSURANCE:	James Blaylock Signature	3/21/88 Date
T&MSS Proj Mgr (OTHER, AS REQUIRED)	W. V. Macnabb Signature	3/7/88 Date

REVISION 0 EFFECTIVE DATE: 4/11/88

REVISIONS

	INITIAL AND DATE			
	REVISION 1	REVISION 2	REVISION 3	REVISION 4
PROJECT MANAGER:	10/5/90			
DIRECTOR, QA:	Signature for D HORTON 10/4/90			
N/A (OTHER, AS REQUIRED)	N/A			
EFFECTIVE DATE:	10/9/90			

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WM-11 PDR

1.0 PURPOSE AND SCOPE

1.1 PURPOSE

This procedure establishes the responsibilities and methodology for preparation, approval, issuance, and lifting of a Stop Work Order (SWO) by the Yucca Mountain Project Office (Project Office) Director, Quality Assurance (DQA).

1.2 SCOPE

This procedure provides the methodology for Project Office implementation of Office of Civilian Radioactive Waste Management (OCRWM) Quality Assurance (QA) Requirements Document, Section 1, paragraph 1.5 and the OCRWM Quality Assurance Program Description.

2.0 APPLICABILITY

This procedure is applicable to all Project personnel and Project affected organizations performing quality affecting activities under the OCRWM Quality Assurance Program Description Document (QAPD) Section 1.1.14.

3.0 DEFINITIONS

NOTE: Terms in this procedure are used as defined in the Project Glossary.

4.0 RESPONSIBLE PARTIES

The following Project Office individuals or organizations are responsible for activities identified in Section 5.0 of this procedure:

1. Project Manager (PM)
2. Director, Quality Assurance
3. Project Office QA Program Control Designee (PQA-PCD)
4. Project Office QA Program Verification Designee (PQA-PVD)
5. Project Office Staff
6. Project Participant's Technical Project Officer (TPO)

5.0 PROCEDURE

NOTE: A flowchart of the following processes described in this procedure is attached as Figure 1.

INITIATION

RESPONSIBLE PARTY	STEPS	PROCEDURE
Project Office Staff	1.	Immediately notify the Project Office QA Program Control Designee of a potential stop work condition. Potential stop work conditions include, but are not limited to, a. Repetitive deficiencies affecting items or activities important to radiological safety or waste isolation that previous corrective actions have not precluded recurrence b. Significant deficiencies that could affect activities important to radiological safety or waste isolation c. Quality-affecting activities are being performed without approved procedures or by unqualified personnel
PQA-PCD	2.	Evaluate whether the affected activity must be stopped. If work must be stopped, prepare SWO form, enter information in SWO log, and obtain SWO number. The SWO log shall provide the status of each SWO.
	3.	If work is not to be stopped, prepare a Corrective Action Request (CAR) or Nonconformance Report (NCR), in accordance with the requirements of QMP-16-01 or QMP-15-01, as applicable.

RESPONSIBLE PARTY	STEPS	PROCEDURE
	4.	Indicate concurrence on SWO form and transmit to DQA for approval.
DQA	5.	Approve the SWO by signing and dating the form and transmit it to the PM.
		SWO WRITTEN AGAINST PROJECT OFFICE
PM	6.	Upon receipt of an SWO written against the Project Office, respond in writing within 24 hours that the affected work has been stopped. Within 5 working days, complete the appropriate portions of the SWO form and transmit it to the DQA.
		SWO WRITTEN AGAINST PARTICIPANT ORGANIZATION OR PROJECT OFFICE SUPPLIER
	7.	Upon receipt of an SWO written against a Participant Organization or a Project supplier, take action to stop work or ensure work is stopped.
Responsible Organization	8.	Respond in writing within 24 hours that the affected work has been stopped. Within 5 working days, complete the appropriate sections of the SWO form and transmit to the DQA.
DQA	9.	Elevate the SWO to the Director OCRWM Office of Quality Assurance (OQA) for resolution, should the organization affected by the SWO fail to respond within the required time allotments.
		EVALUATION OF RESPONSE
DQA or Designee	10.	Review the SWO response to determine its acceptability. If the response is acceptable, indicate approval on the SWO form and transmit copy to the responsible organization. If unacceptable, prepare a letter to the responsible organization, which delineates necessary action to make response accceptable.

RESPONSIBLE PARTY	STEPS	PROCEDURE
		a. Delineating what portions of the response are unacceptable
		b. Recommending actions to make the response acceptable
DQA		c. Requiring response within 5 working days of receipt
	11.	Upon receipt of an acceptable response, notify the responsible organization in writing.
		CLOSURE
Responsible Organization	12.	Notify the DQA when all actions have been completed. If all actions cannot be completed as scheduled, submit an extension request in writing a minimum of 10 days in advance of scheduled completion containing sufficient justification for the Project Office to evaluate for acceptance.
DQA	13.	Respond in writing accepting or rejecting the extension request.
PQA-PVD	14.	Based on the completion of corrective action, schedule a surveillance or audit to verify implementation of required actions. Notify the responsible organization in writing of the results of the surveillance. Recommend to the DQA whether activities covered by the SWO may be resumed.
DQA	15.	Upon satisfactory verification of corrective action completion and recommendation of Project Office QA Verification Designee, close SWO. Formally transmit copy of the closed SWO along with letter authorizing work to restart to the responsible organization.

RESPONSIBLE PARTY	STEPS	PROCEDURE
Project Office QA Staff	16.	Formally transmit all QA records generated as a result of implementing this procedure to the Project Office Local Records Center (LRC).
		DISPUTE RESOLUTION
DQA	17.	Resolve disputes concerning the approval, issuance, adequacy of response, and closure of an SWO during the implementation of any step of this procedure. If not satisfactorily resolved, the dispute shall be documented and elevated to the Director OCRWM OQA and to the Director of OCRWM, if necessary. Documentation of a dispute shall consist of a. Exact delineation of dispute b. Justification for both positions of the dispute c. Signature of the disputing parties
	18.	Once a dispute is documented, formal notes of conference shall be generated and agreed to by all parties attending subsequent dispute resolution meetings.

6.0 REFERENCES

NOTE: Refer to the latest revision of the below listed document unless otherwise stated.

6.1 REQUIREMENTS DOCUMENTS

OCRWM Quality Assurance Requirements Document, DOE/RW-0214

OCRWM Quality Assurance Program Description Document, DOE/RW-0215

Project Management Plan, YMP/88-2

6.2 INTERFACE DOCUMENTS

QMP-15-01, Control of Nonconformances

QMP-16-01, Corrective Action Requests

QMP-17-01, Records Management: Records Source Implementation

7.0 FIGURES AND ATTACHMENTS

Figure 1, Stop Work Order Flowchart

Attachment 1, Stop Work Order Form

8.0 RECORDS

The following listed documents are QA records and are collected, maintained, and submitted to the LRC in accordance with QMP-17-01, Records Management: Records Source Implementation:

1. Completed SWO Forms and Attendant Correspondence
2. Extension Request Correspondence
3. Documentation of Disputes and Resolutions Thereof

Title

QUALITY MANAGEMENT PROCEDURE: STOP WORK ORDER

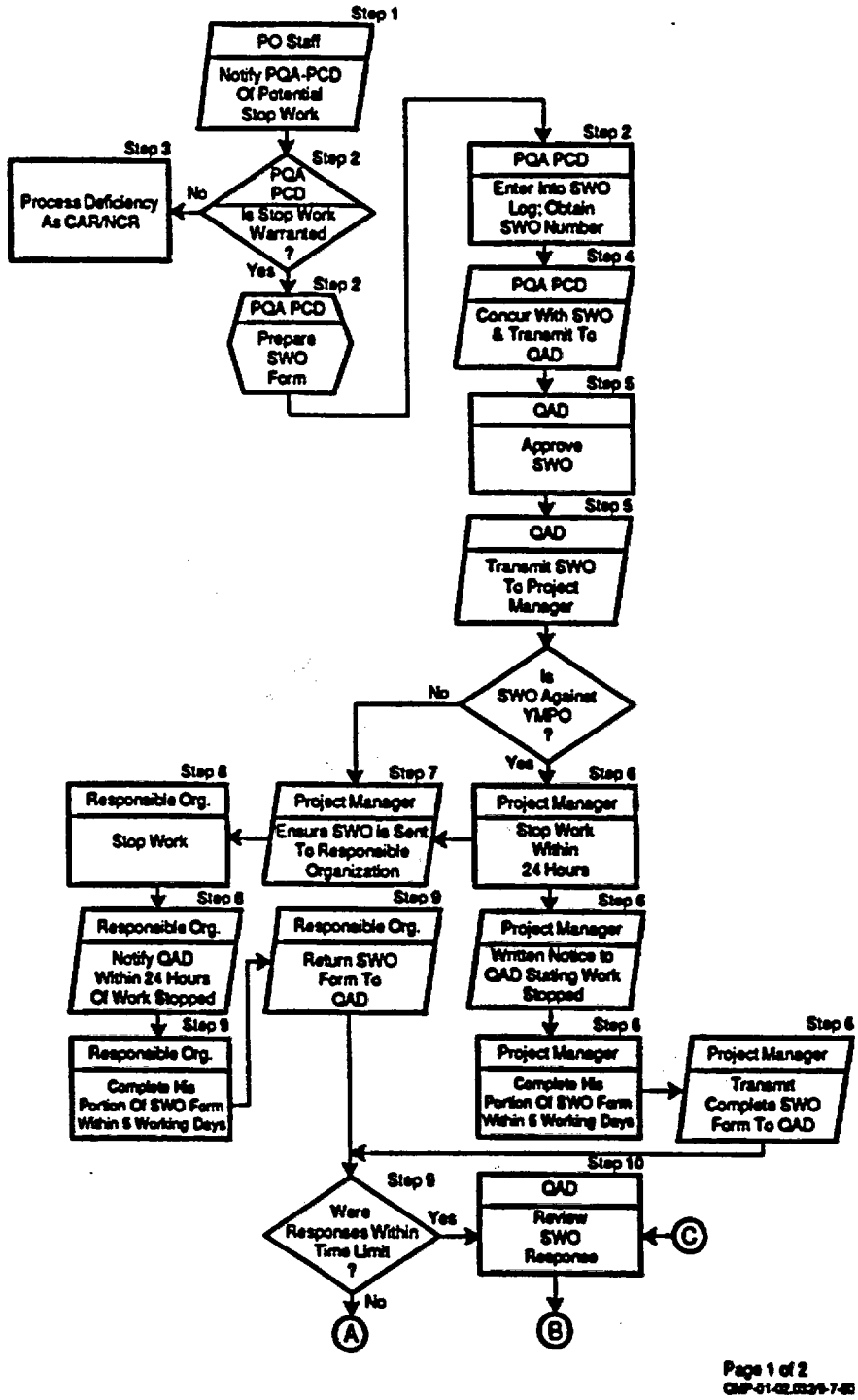

Figure 1 - Stop Work Order Flowchart

Title
QUALITY MANAGEMENT PROCEDURE: STOP WORK ORDER

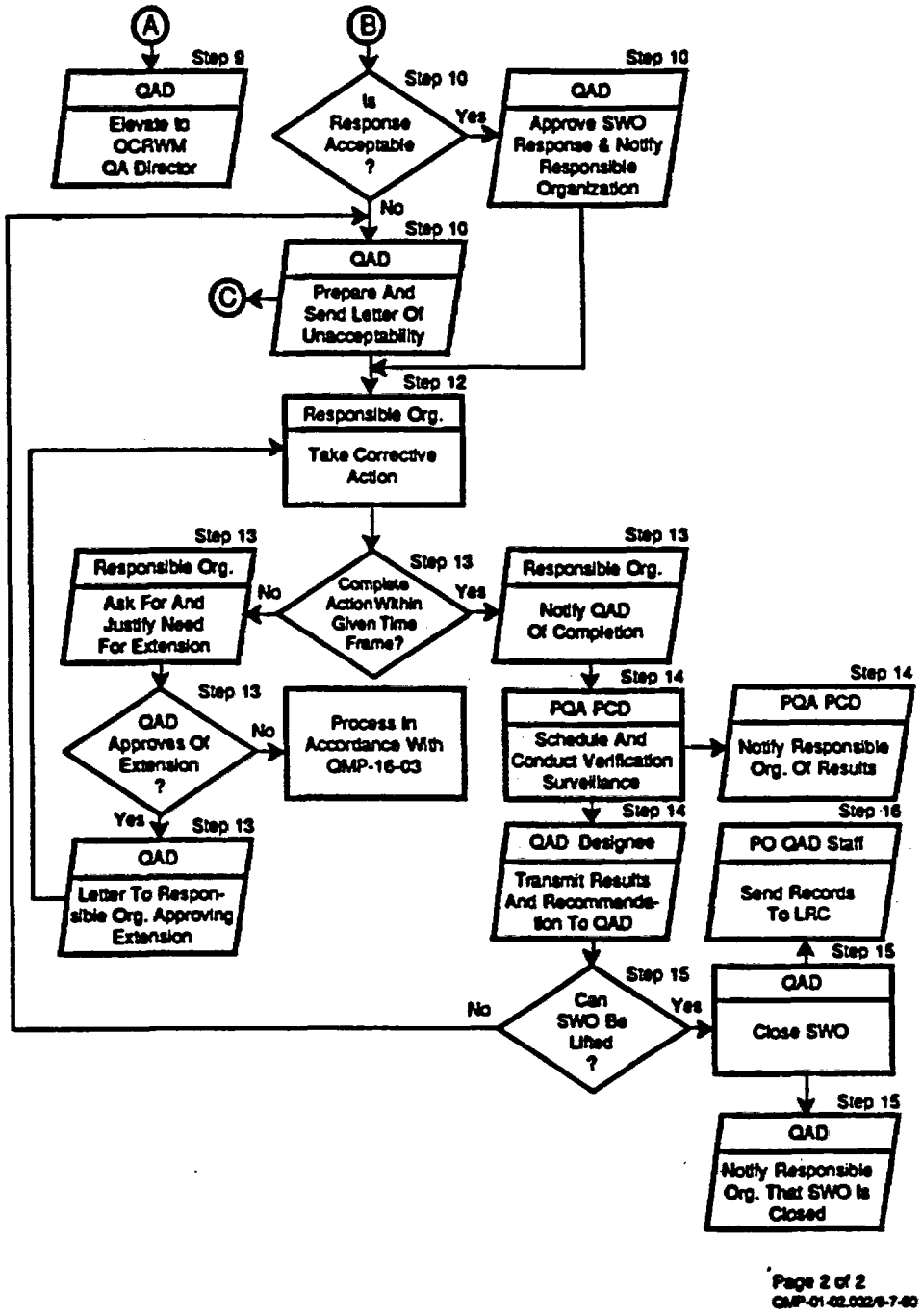

Figure 1 - Stop Work Order Flowchart (continued)

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1. RESPONSIBLE ORGANIZATION:

2. RELATED DEFICIENCY DOCUMENTS:

3. ACTIVITY AFFECTED:

4. VIOLATION:

5. INSTRUCTIONS:

6. INITIATOR _____ DATE _____

7. PROGRAM CONTROL DESIGNEE _____ DATE _____

8. PROJECT OFFICE DIRECTOR, QA _____ DATE _____

10. VERBAL NOTIFICATION BY _____ DATE _____ TIME _____

11. CORRECTIVE ACTION:

12. ACTION TO PREVENT RECURRENCE

13. ROOT CAUSE

SIGNATURE _____ DATE _____ TIME _____

14. RESPONSE APPROVAL:

SIGNATURE _____ DATE _____

15. VERIFICATION OF CORRECTIVE ACTION:

SIGNATURE _____ DATE _____

16. CLOSURE APPROVAL:

SIGNATURE _____ DATE _____

Attachment 1 - Stop Work Order Form

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Attachment 1 - Stop Work Order Form (continued)

INSTRUCTIONS FOR PREPARATION OF YUCCA MOUNTAIN PROJECT OFFICE STOP WORK ORDER N-QA-108

INITIATOR

1. Enter the name of the organization expected to respond to the SWO.
2. Enter the sequential number of any NCRs or CARs written concerning the deficiency or related deficiencies cited in the SWO.
3. Describe precisely the affected activity. Include a description of which portions of work are to be stopped and which portions of the activity may continue.
4. State the applicable requirement(s) and describe how they were violated. Describe how these violations meet the criteria for issuing a SWO.
5. If required, enter any specific instructions concerning how or in what sequence work is to be stopped or recommended actions to be taken.
6. Sign and date the form.

PROGRAM CONTROL DESIGNEE

7. Sign and date form indicating concurrence.
8. Enter pertinent information in SWO log and obtain sequential number.

PO DIRECTOR QA

9. Sign and date the form indicating approval.
10. Sign and date the block if responsible party was given verbal notification of SWO prior to formal transmittal.

TPO RESPONSIBLE ORGANIZATION

11. Enter all corrective actions that are to be taken to lift the SWO.
12. State action to prevent recurrence and completion dates for each item in 11.
13. State root cause of deficiency.
14. Sign and date the form.

VERIFICATION DESIGNEE

15. Enter surveillance report number and state if all corrective actions have been completed. Make recommendation if SWO should be lifted. Sign and date form.

PO DIRECTOR OF QA

16. Sign and date form when SWO is to be lifted.

Attachment 1 - Stop Work Order Form (continued)