



MAR 08 2000

Reply to Attn of: DA01

TO: Distribution

FROM: DA01/A. G. Stephenson

SUBJECT: Minutes of the MSFC Quality Council Meeting

The MSFC Quality Council (MQC) met on Wednesday, February 23, 2000. The meeting began at 2:30 p.m., in Building 4200, Conference Room P110. The roster of attendees for the meeting is attached as Enclosure 1. The presentation charts for the meeting are included as Enclosure 2. The agenda for the meeting is on page 2 of Enclosure 2.

OPENING REMARKS (A. STEPHENSON/DA01; J. ELLIS/QS01)

A status was provided for each of the challenges identified during the last MQC meeting.

There has been some loss in momentum due to the impact of other initiatives currently in progress. The schedule for registration to the expanded scope has been delayed by 6 months. However, work on completion of Directives and Organizational Issuances has continued to be a priority.

Internal audits have been conducted to full scope, with the emphasis still on the scope of registration (flight hardware, flight software, and flight associated ground support equipment). Additionally, most organizations have also conducted self-assessments. The Center is prepared for the surveillance audit by NQA on March 6-8.

The presentation charts are included as pages 3-6 of Enclosure 2.

NQA SURVEILLANCE AUDIT REPORT STATUS (M. DEMURRAY/HEI)

The last National Quality Assurance (NQA) Surveillance Audit was conducted at the Center on August 23-25, 1999. During the visit, the NQA auditor documented a total of three findings. Two of the findings were observations and one was a minor nonconformance. One additional minor nonconformance was generated internally to address the potential for generic implications of one of the NQA findings. As of this date, 2 findings have been closed. One observation, NCR #3 remains open, and the internal generic nonconformance NCR#1-1 remains open. Corrective actions are in progress, and additional follow-ups will be performed.

There has been some improvement in the consistency of auditors' notes; however, the audit notes for at least one audit do not provide adequate objective evidence of the audit. Results will continue to be unpredictable due to the use of volunteer internal auditors from across the Center. If an auditor is identified as not being well suited for auditing and keeping the detailed notes required, they will not be called on again for any future audits.

The presentation charts are included as pages 7-10 of Enclosure 2.

MQC ACTION ITEMS STATUS (R. MCBRAYER/VS01, J. SAXON/RS40)

The four open actions from previous MQC meetings were presented and discussed. The actions were:

MQC-0022 – Directorate Leads are to review all projects and assure each has a good Project Plan.

MQC-0023 – Directorate Leads should assess their projects for consistency with NPG 7120.5a.

R. McBrayer/VS01 provided the status for these two action items. The Systems Management Office (SMO) issued a memo on January 25 to all Directorate Heads to identify initiatives in progress. The deadline for submission of this information was February 4. Some organizations have not responded yet. There used to be only three or four big projects being worked at the Center at any one time, but now there are at least 150-250 different initiatives in place. We need help from everyone in closing these actions.

The Systems Management Office (SMO) was established after the MQC actions were initiated. Directorates have identified Projects that do not have appropriate plans in place, and this information has been provided to the SMO. Follow-up actions will include identification of the level of planning required for each initiative and completion dates for the plans. Directorates are responsible for working issues to completion in accordance with identified schedules. These actions were closed.

MQC-0020 – Review the Internal Task Agreement process at the Center.

J. Saxon/RS40 provided the status for this action item. Final content and format revisions of MPG 1230.1, "Center Resources Management Process", are being worked. The DCB submission date may be as late as April 1, instead of March 1, as indicated on the presentation chart. The document is in review by the Business Management Council now.

C. Griner/DD01 stated that the process can not be changed without coming back to the Center Director for approval. The Center is already working to the process. As long as the issues being worked are just for format, there's no problem with the extension to complete the document. This is an important process, so the extra investment in ensuring it is documented correctly is worthwhile. This action remains open.

MOC-0024 – Directorates should review how they are getting customer feedback. This should be a topic for the Cross-cutting team.

J. Saxon/RS40 provided the status for this action item. Directorates have submitted their processes for receiving customer feedback. This input has been provided to the cross-cutting subteam, "Customer Values," chaired by Dave Bates/RS01. This team will review the input and will bring their results back for further action if required. This action was closed.

The presentation charts are included as pages 11-14 of Enclosure 2.

INTERNAL QUALITY AUDIT REPORT (W. WOODS/OS10)

Since the last MQC meeting, there have been ten internal audits at the Center. Staffing for the audits has continued to be a problem. None of the audits were completed with the planned staff. Currently, there are 30 open nonconformance reports (NCR's) from the audits, 19 unapproved draft NCR's, and additional NCR's will be input from two recently completed audits. The next round of audits will require one audit to be performed every 3 weeks, with the last audit to be completed the week of October 23.

S. Cloud/CD01 expressed two concerns based on the recent completion of an internal audit of the Customer and Employee Relations Directorate. The first concern is that there seems to be some inconsistency in the categorization of NCR's as major vs. minor. There needs to be some calibration of these categories of NCR's across the Center. The categories of NCR's are defined in the procedure for conducting internal audits, and auditors are trained on these definitions. The audit manager also does some calibrating as part of the screening and approval of NCR's.

The second concern is that a system is not in place to automatically update citations of documents when they change. These updates have to be done manually. A Centerwide notification does go out when Directives are revised/canceled. No special notice goes out to document OPR's to notify them that there may be an impact to their document(s). Applicable document data is already part of the requirements for master lists, so the data is available to create a system to address this problem.

ACTION:

Implement a system to provide an automatic notification specifically to affected document OPR's when applicable documents are changed/canceled.

(MQC-0026, A. Tingle/AD30, Due: TBD – A status will be provided at the next MQC meeting)

A concern was raised that the planned schedule to complete audits in October would leave us vulnerable to receive a major nonconformance during the preregistration audit for the expanded scope in August. After some discussion, it was decided to compress the audit schedule.

ACTION:

Change the internal audit schedule to complete internal audits to the full scope prior to the preassessment in order to prevent a major nonconformance.

(MQC-0027, S. Saucier/DE01 and W. Woods/QS10, Due: March 15, 2000)

The presentation charts are included as pages 15-16 of Enclosure 2.

CORRECTIVE AND PREVENTIVE ACTION PROGRAM (W. WOODS/QS10)

Currently, there are 17 open Recurrence Control Action Requests (RCAR's). Since the last MQC meeting, 22 Quality System Deficiency Notices (QSDN's) have been submitted. Fifteen of those were elevated to RCAR's. Sixty-one Discrepancy Reports (DR's) have been generated with 6 resulting in new RCAR's. Eighteen RCAR's have been closed. There have been 9 Customer Comments received, all compliments.

It was pointed out that 36 of the 61 DR's generated were the result of reclaiming MIR Glovebox hardware. None of these were elevated to RCAR's. This was an unusual use of the DR system, so the total number of DR's was skewed for this period. Without the Glovebox hardware issues, there were 25 DR's since the last MQC, with only 6 of those being elevated to RCAR's.

ACTION:

Identify/develop a method to address field use hardware problems instead of using the DR system.

(MQC-0028, H. Shivers/QS10, Due: 03-15-00)

The presentation charts are included as pages 17-19 of Enclosure 2.

PLAN TO IMPLEMENT THE "NEW SCOPE" (M. DEMURRAY/HEI)

The new scope for the Center will include all products and services provided by MSFC. Significant activities for the implementation of this scope were discussed. Included were the formation of Documentation Support Teams, the MSFC Management Documentation System, ISO 9000 Training, Internal Audits, and Management Reviews. The new scope application has been completed, and the new contract with the registrar, NQA, should be in place by March 3. The NQA surveillance audit has been scheduled for the current scope on March 6-8, 2000. A surveillance audit of the current scope and a preassessment of the new scope are planned for August 2000, with the registration audit to the new scope in November 2000.

The presentation charts are included as pages 20-25 of Enclosure 2.

ISSUES (J. ELLIS/QS01)

Audit support has continued to be a problem. The same chart that was presented to the Center Staff on January 24 was shown again. Since that information was provided in January, no auditors have dropped out of their assigned audits. The level of participation in audit planning and preparation has been sporadic.

There was considerable discussion about the audit program, level of support, the necessary time commitments for auditors, and communications. Participation in audits allows a person to get to know the Center better and is an important part of training development. Any candidates for promotion that are reviewed by the Center Director will be looked at to see if they have performed internal audits. Participation as auditors should be encouraged as a positive part of the personal development plan. It was noted that participation in audits should be viewed as beneficial but not sufficient for getting a promotion.

ACTION:

Put out a letter discussing the value of participating as an internal auditor to encourage increased auditor participation and commitment.

(MQC-0029, S. Cloud/CD01, W. Woods/QS10, J. Ellis/QS01, A. Stephenson/DA01, Due: March 15, 2000)

ACTION:

Ensure Individual Development Plans include auditor support.

(MQC-0030, S. Cloud/CD01, Due: TBD – A status will be provided at the next MQC meeting.)

ACTION:

Provide out-standing requests for auditor support to each Organization Director.

(MQC-0031, W. Woods/QS10, Due: March 8, 2000)

ACTION:

Provide a status report on auditor support to the Center Director in 1 month.

(MQC-0032, S. Saucier/DE01 and W. Woods/QS10, Due: March 27, 2000)

There was also some discussion about the problems inherent in solely using volunteers from across the Center as internal auditors. Some other organizations use a core group of lead auditors and some use contractors to perform audits. Rotational assignments were also suggested as a possible alternative approach. It was agreed that this topic warrants further discussion.

The top six areas of audit findings were also presented and discussed. These areas are document and data control, control of quality records, management responsibility, training, and calibration. It was pointed out that the master lists that are not being kept up-to-date are at the organizational level. The internal audits have identified a high incidence of missing safety records. This will also affect the Center's VPP efforts. A question was raised about where training records should be maintained for "overhead" training, such as ISO 9000 and IT Security.

ACTION:

Consolidate training records for "overhead" training, affecting 100 percent of the Center, into one central location.

(MQC-0033, T. Washington/CD01 and S. Cloud/CD01, Due: TBD – A status will be provided at the next MQC meeting.)

The issues related to calibrated equipment lists were also discussed in some detail. As of 2/23/00, there were 3,670 Category I items overdue for calibration. This is down from more than 5,000 in mid-December when a request to respond to a delinquent items list was sent out to appropriate organizations. The responses to the delinquent items lists have resulted in 5,070 corrections to the MCMS database. These corrections are for equipment listings, contact codes, and category codes. As of 2/23/00, there have been 2,722 items removed from Category I standing.

ACTION:

**Provide a status on the calibration system to the Center Director in 1 month.
(MQC-0034, S. Saucier/DE01 and M. Haynes/AD23, Due: March 27, 2000)**

The Center has created the system that has been put in place and documented in our procedures. This is a part of our "excellence" value. We are going to do what we say we are going to do. If the procedures do not reflect how we want to do business, then we need to change them. ISO allows you to understand where you are so that you can improve.

The presentation charts are included as pages 26-30 of Enclosure 2.

CLOSING REMARKS (J. ELLIS/OS10)

For the NQA Surveillance Audit March 6-8, the following six Programs/Projects have been selected for Audit:

- Dynamically Controlled Protein Crystal Growth (DCPCG)
- Express Rack
- g-LIMIT
- ISS Propulsion Module
- ECLSS – Oxygen Generation System
- ECLSS – Water Recovery System

The elements to be audited are:

- 4.1 Management Responsibility
- 4.2 Quality System
- 4.4 Design Control
- 4.6 Purchasing
- 4.12 Inspection and Test Status
- 4.14 Corrective and Preventive Action
- 4.15 Handling, Storage, Packaging, Preservation, and Delivery
- 4.17 Internal Quality Audits

Some of the challenges ahead include recognizing the importance of ISO at the working and midmanagement levels, training on the new/revised Directives, readiness for the upcoming audits, implementation of ISO 9001 rev 2000, auditor support, and maintaining our momentum.

The presentation charts are included as pages 31-33 of Enclosure 2.

OTHER (J. ELLIS/QS01)

No other items for record were discussed at the meeting.

A handwritten signature in black ink, appearing to read 'A. G. Stephenson', with a long horizontal flourish extending to the right.

A. G. Stephenson
Chairman
MSFC Quality Council

Enclosures

Distribution:
Council Members
Meeting Attendees

ISO 9000 MSFC QUALITY COUNCIL MEETING

DATE: WEDNESDAY, February 23, 2000 LOCATION/ TIME: BLDG. 4200/P110, 2:30 P.M.

MEETING ATTENDANCE: [Please Check (X) Your Name to Record Meeting Attendance.]

<u>NAME</u>	<u>ORGANIZATION</u>	<u>PHONE</u>	<u>FAX</u>
Director's Office			
<input checked="" type="checkbox"/> Art Stephenson	DA01	544-1912	544-5228
<input checked="" type="checkbox"/> James W. Bilbro	DA01	544-3467	544-8345
<input type="checkbox"/> Bob L. Sackheim	DA01	544-1938	
<input type="checkbox"/> Andrew Smith	DA01	544-4932	544-1401
<input checked="" type="checkbox"/> Carolyn Griner	DD01	544-1914	544-7580
<input checked="" type="checkbox"/> Sid Saucier	DE01	544-1919	544-7920
Center Operations Directorate			
<input type="checkbox"/> Paul Allison	AD01	544-5697	544-7920
<input checked="" type="checkbox"/> Jim Carter	AD01	544-6630	544-7920
<input checked="" type="checkbox"/> Sheila Cloud	AD01	544-0120	544-5893
<input checked="" type="checkbox"/> Linda Carpenter	AD02	544-8236	544-5867
<input checked="" type="checkbox"/> Dan Adams	AD10	544-1614	544-8259
<input type="checkbox"/> Clark Boaz	AD20	544-4923	544-4435
<input checked="" type="checkbox"/> Michael W. Haynes	AD23	544-7933	544-8890
<input checked="" type="checkbox"/> Annette Tingle	AD30	544-4522	544-8752
<input checked="" type="checkbox"/> Amanda Wilson	AD33	544-4511	544-8752
<input type="checkbox"/> Lisa Adkins	AD40	544-7546	544-6570
<input checked="" type="checkbox"/> Roy Malone	AD40	544-0506	544-9190
<input type="checkbox"/> Polly Edwards	AD50	544-4536	544-2101
<input type="checkbox"/> Brad Garland	AD50	544-4537	544-2101
Customer & Employee Relations Directorate			
<input checked="" type="checkbox"/> Susan Cloud	CD01	544-5377	544-2610
<input type="checkbox"/> Tereasa Washington	CD01	544-7491	544-6420
<input type="checkbox"/> Pat Shultz	CD20	544-7559	544-4809
<input checked="" type="checkbox"/> Caroline Wang	CD30	544-3887	544-6030
Engineering Directorate			
<input checked="" type="checkbox"/> Jim Kennedy	ED01	544-1000	544-4100
<input type="checkbox"/> Bill Kilpatrick	ED01	544-1001	544-5896
<input checked="" type="checkbox"/> Jim Blanche	ED16	544-3707	544-0900
<input type="checkbox"/> Terry Roberts	ED16	544-3717	544-0900
<input checked="" type="checkbox"/> Rod Stallworth	ED23	544-7189	544-8838
<input checked="" type="checkbox"/> Jim Lindsay	ED27	544-1301	544-0236
<input type="checkbox"/> Dawn Cross	ED36	544-1835	544-5877
<input type="checkbox"/> Richard Lamb	ED37	544-1037	544-4307
<input type="checkbox"/> Don Szymczak	ED43	544-1923	544-7292
<input checked="" type="checkbox"/> Sonya Hutchinson	ED42	544-3312	544-5178
Flight Projects Directorate			
<input checked="" type="checkbox"/> Axel Roth	FD01	544-0451	544-7580
<input type="checkbox"/> Jan Davis	FD01	544-0455	544-7580
<input checked="" type="checkbox"/> Jackie Steadman	FD10	544-1940	544-5590
<input type="checkbox"/> Jack Stokes	FD22	544-1764	544-5194
<input type="checkbox"/> Michael Nelson	FD41	544-2059	544-9353

	Chief Counsel		
<input checked="" type="checkbox"/> Bill Hicks	LS01	544-0010	544-0258
<input type="checkbox"/> Jim Frees	LS01	544-0123	544-5867
<input type="checkbox"/> Gray Marsee	LS01	544-0016	544-0258
<input type="checkbox"/> Jim McGroary	LS01	544-0013	544-0258
	Space Shuttle Projects Office		
<input type="checkbox"/> Alex McCool	MP01	544-0718	544-2432
<input type="checkbox"/> Jeff Spencer	MP21	544-7498	544-7713
<input checked="" type="checkbox"/> John Pea	MP71	544-8437	544-5799
	Equal Opportunity Office		
<input checked="" type="checkbox"/> Charles Scales	OS01	544-4927	544-2411
<input type="checkbox"/> Billie Swinford	OS01	544-0087	544-2411
	Procurement Office		
<input checked="" type="checkbox"/> Steve Beale	PS01	544-0257	544-3214
<input type="checkbox"/> Byron Butler	PS01	544-0253	544-4400
<input checked="" type="checkbox"/> Ray Woods	PS10	544-0384	544-3223
<input type="checkbox"/> Jerry Williams	PS10	544-0295	544-4401
	Safety and Mission Assurance		
<input checked="" type="checkbox"/> Jim Ellis	QS01	544-0721	544-3893
<input type="checkbox"/> Amanda H. Goodson	QS01	544-2353	544-2053
<input type="checkbox"/> Ron Mize	QS01	544-2485	544-8101
<input type="checkbox"/> Terry Hamm	QS10	544-7402	544-3241
<input checked="" type="checkbox"/> Don Miller	QS10	544-8361	544-4857
<input type="checkbox"/> Mark Strickland	QS10	544-7432	544-4155
<input checked="" type="checkbox"/> Warren Woods	QS10	544-2275	544-5685
	Office of Financial Officer		
<input type="checkbox"/> Dave Bates	RS01	544-0052	544-0635
<input type="checkbox"/> Sandy Coleman	RS01	544-0795	544-3536
<input type="checkbox"/> Frank D. Mayhall	RS01	544-7266	544-4479
<input checked="" type="checkbox"/> Sharal Huegele	RS30	544-7286	544-9055
<input type="checkbox"/> Sheila Jandebour	RS30	544-3061	544-9055
	Science Directorate		
<input type="checkbox"/> Frank Rose	SD01	544-7721	544-9243
<input checked="" type="checkbox"/> Julia Goldberg	SD10	544-2429	544-9258
<input type="checkbox"/> Robin Henderson	SD10	544-1738	544-8639
<input type="checkbox"/> Lloyd Love	SD20	544-7702	544-2559
<input type="checkbox"/> Roger Chassay	SD30	544-1969	544-5975
<input type="checkbox"/> Rex Geveden	SD30	544-9335	544-5975
<input type="checkbox"/> Clark Darty	SD40	544-2728	544-5892
<input checked="" type="checkbox"/> Tom Dollman	SD40	544-6568	544-8500
<input type="checkbox"/> Mike McCollough	SD50	544-4368	544-5800
<input type="checkbox"/> Ed Reichmann	SD50	544-7603	544-5800
<input type="checkbox"/> Tim Miller	SD60	922-5882	922-5823
<input type="checkbox"/> Diane Samuelson	SD60	922-5832	922-5723
<input type="checkbox"/> Joe Stroud	SD70	544-3529	544-2659
<input type="checkbox"/> Roy Young	SD70	544-4965	544-2659
<input checked="" type="checkbox"/> Tom Fleming	SD01	544-3962	544-5975
<input type="checkbox"/> Don Thurman	SD80	544-1908	544-9243
<input type="checkbox"/> Wes Darbro	SD92	544-7742	544-2559

Space Transportation Directorate

<u> </u>	Row Rogacki	TD01	544-3551	544-4103
<u> </u>	Paul McConnaughey	TD01	544-1599	544-3278
<u> X </u>	David Harris	TD03	544-0057	544-3960
<u> </u>	Dennis Smith	TD03	544-9119	544-4103
<u> X </u>	Steve Stoyanof	TD03	544-2302	544-8148
<u> </u>	Stephan Davis	TD11	544-3202	544-5975
<u> X </u>	Robert Hughes	TD12	544-6624	
<u> </u>	Phil Best	TD13	544-1602	544-8109
<u> X </u>	Bob Armstrong	TD14	544-1863	544-5861
<u> X </u>	Nikhat Shahzad	TD15	544-2496	544-4166
<u> X </u>	Philisha Matthews	TD40	544-6997	544-5926
<u> X </u>	Ed Reske	TD64	544-1753	544-1215
<u> </u>	Van Blankenship	TD73	544-1188	544-5533

Systems Management Office

<u> X </u>	Robert O. McBrayer	VS01	544-1926	544-2053
<u> </u>	Bob McKemie	VS10	544-2266	544-5178
<u> </u>	Neil Rainwater	VS10	544-8918	544-5178

Chandra X-Ray Observatory Program

<u> </u>	Tony Lavoie	XP01	544-2332	
<u> X </u>	Marc Osborne	XP11	544-2300	544-5858
<u> </u>	Mike Smith	XP11	544-0692	544-5858

Contractors

<u> X </u>	Mary DeMurray	HEI	544-1342	544-4470
<u> </u>	Brent Heard	HEI	544-6025	544-8615
<u> X </u>	John McPherson	HEI	544-7479	544-9257
<u> </u>	Randy Reed	HEI	544-6056	544-4470
<u> </u>	Sid Smith	HEI	544-5930	544-4470
<u> </u>	Jeff Robinson	SCSC	544-4589	544-8990

VISITORS

NAME	ORGANIZATION	PHONE	FAX
Herb Shivers	QS10	544-8903	544-4155
Jeff Saxon	RS40	544-0109	544-5867
John Howell	RS30	544-5219	544-5867
Sandy Kirkindall	TD40	544-7233	544-5926

Marshall Quality Council

February 23, 2000



Agenda

- **Opening Remarks (Art Stephenson, Jim Ellis)**
- **NQA Surveillance Status (Mary DeMurray)**
- **MQC Action Items Status (Bob McBrayer and Jeff Saxon)**
- **Internal Quality Audit Report (Warren Woods)**
- **Corrective and Preventive Action Program (Warren Woods)**
- **Overall Plan to Implement the “New Scope” (Mary DeMurray)**
- **Issues (Jim Ellis)**
- **Closing Remarks (Jim Ellis)**
- **Other**

Opening Remarks

Art Stephenson – Jim Ellis



Opening Remarks

Status of Challenges from Last MQC — Jim Ellis

- **Recognize the importance of ISO at the working and mid-management levels**
 - Lost some momentum to other Initiatives (VPP, IFMP, etc.)
 - Not much progress in this area

- **Expanded scope of ISO - Understanding how the standard applies to new areas**
 - Learning while generating the new documents
 - First round of audits created a learning experience



Opening Remarks

Status of Challenges from Last MQC (cont) — Jim Ellis

- **Readiness for our next surveillance audit in March 2000, with full registration in May 2000**
 - Continued Internal Audits to the full scope, with emphasis on the original scope
 - Recommended Self Assessments prior to the March Surveillance
 - Six month slip to the full registration due to other Initiatives

- **Implementation of ISO 9001 rev 2000**
 - HQ recommends this item be put on hold due to major comments to the existing draft



Opening Remarks

Status of Challenges from Last MQC (cont) — Jim Ellis

- **Effectiveness of the revised Audit Process**
 - We continue to have audit support problems. (This issue will be discussed in detail later in this presentation.)

- **Maintaining our momentum**
 - Six month delay has had some impact
 - Have been statusing the completion of Directives and Organizational Issuances as a part of the weekly ISO team meetings

***Status of NQA Aug. '99 Surveillance
Findings***

Mary DeMurray



Status of NQA Aug. '99 Surveillance Findings

Mary DeMurray

- **NQA Surveillance Audit Findings**

Observations	2
Minor Nonconformances	1
Total Findings	3

- **One additional generic nonconformance issued by MSFC**
- **Two (2) NQA findings have been closed to date**
- **One (1) NQA observation and the MSFC generic nonconformance remain open**
 - **Corrective action and follow-ups are in progress**



Status of NQA Aug. '99 Surveillance Findings
NCR # 1-1 - (Minor Nonconformance) - Mary DeMurray

- The system back-up procedure is not a controlled document.

Cause: Failure to follow procedures to control work instructions.

Corrective Action Taken: Each organization will review their computer systems which are backed up to verify that any necessary instructions are available and controlled.

Corrective actions and follow-ups are in progress.



Status of NQA Aug. '99 Surveillance Findings

Open NCR # 3 - (Observation) - Mary DeMurray

- Internal Audits reviewed exhibit inconsistent recording of objective evidence.

Cause: Auditors are trained; however, keeping a clear understanding of the definition and how to document objective evidence has been difficult for part-time auditors.

Corrective Action Taken: MSFC-P17.1 was revised to add examples of objective evidence that should be recorded on audit checklists/interview notes. Review of the procedure is also required during pre-audit team meetings.

Corrective action was taken, but internally determined as not effective.

Additional Corrective Action: Lead Auditors will review auditor notes at the daily audit briefings during each audit to ensure adequate recording of objective evidence.

Corrective action and follow-ups are on-going.

MQC Action Items Status

Bob McBrayer and Jeff Saxon



MQC Action Items Status

MQC-0022 & 23 – Robert McBrayer

MQC-0022 - *Directorate leads are to review all projects and assure each has a good project Plan.*

MQC-0023 - *Directorate leads should assess their projects for consistency with NPG 7120.5a*

- **Responses received from all Directorates and CAITS action officially closed.**
 - Responses indicated that a wide variety of maturity exists
 - VS01 is initiating a follow-up action to further assess the status
- **Follow-up Action will include:**
 - Determining a specific list of initiatives
 - The person responsible for the initiative
 - The level of planning required for the initiative
 - Completion date for the plan



MQC Action Items Status (cont)

MQC-0020 - Jeff Saxon

MQC-0020 - Review the Internal Task Agreement process at the Center.

- **Status - The draft MPG 1230.1, “Center Resources Management Process” was presented to the Cross Cutting Team on January 24th. To reduce the volume of DCB cycle comments, the document is currently being reviewed by the Business Management Council. Final content and format revisions will be made by the CFO Office, with planned DCB submission by March 1st.**



MQC Action Items Status (cont)

MQC-0024 – Jeff Saxon

MQC-0024 - Directorates should review how they are getting customer feedback. This should be a topic for the Cross Cutting team.

- **Status - All Directorates submitted their processes for receiving customer feedback. This input was provided to the cross cutting sub-team, “Customer Values” chaired by Dave Bates. The Customer Values Team is currently reviewing the input and will provide direction on how to proceed.**

Internal Quality Audit Report

Warren Woods



Internal Quality Audit Report

Audit Status - Warren Woods

- **Ten additional Internal Audits since the last MQC**
- **One planned for next week**
- **Staffing continues to be a problem. Only one of the audits occurred with planned staff.**
- **Full round of Internal Audits requires one audit every 3 weeks through November 2000**
- **Status of Open NCR's**
 - **30 Open Non-Conformance Reports (NCR's)**
 - **19 Unapproved Drafts**
 - **Awaiting NCR's from 2 recently completed audits**

Corrective & Preventive Action Program

Warren Woods



Corrective & Preventive Action Program

Status - Warren Woods

- **Status of Open Recurrence Control Action Requests (RCARs)**
 - 17 currently open RCARs
 - 4 Draft RCARs currently in review
 - 1 Delinquent responses from Points of Contact (POCs)
 - 2 RCARs in Corrective Action Board (CAB) review
- **RCAR Activity Since Last MQC 8/7/99**
 - 22 Quality System Deficiency Notices (QSDNs) submitted; 15 Elevated to RCARs
 - 61 Discrepancy Reports (DRs) generated; 6 Elevated to RCARs
 - 9 Quality Comments (QUALCOMMs) ; 0 evaluated as RCARs
 - 18 RCARs have been Closed
 - 0 Corrective/Preventive Action Notice (CAN)



● **Generalities from RCAR Processing**

– **Quality Comments**

- All have been compliments
- All have been from testing, software, or educational aids provided by MSFC

– **Discrepancy Reports**

- 36 DRs resulted from reclaiming of MIR Glovebox hardware

– **Age of Open RCARs**

- Mean age is 167 days
- Median age is 109 days

***Overall Plan to implement the
“New Scope”
- Key Activities***

Mary DeMurray



***Overall Plan to implement the “New Scope”
New Scope Statement - Mary DeMurray***

The Marshall Management System shall apply to all products and services provided by the Marshall Space Flight Center.



Overall Plan to implement the "New Scope"
Key Activities - Mary DeMurray

- **Documentation Support Teams (4/9/99)**
 - Teams formed as necessary
- **Marshall Integrated Document Library (MIDL) (4/26/99)**
 - Implemented in May
- **New Scope Documentation (6/4/99 - 12/3/99)**

Directives:

57 Complete

18 In DCB review nearing completion

6 Not yet submitted

81 Total

QI's:

516/546

95% Complete



Overall Plan to implement the "New Scope"
Key Activities (cont) - Mary DeMurray

- **ISO 9000 Training (9/16/98 - ongoing)**
 - **Auditor and Lead Auditor**
 - Periodic classes already set up and ongoing
 - **General Employee - Refresher/New Scope Impact**
 - Includes QSDN's, QUALCOMM's, calibration database and the new Directives system
 - Approximately 90% complete
 - **Procedures/ Instructions**
 - Some training has been done in the past
 - Further training needs to be developed
 - Much of this will continue at the organization level or by functions



Overall Plan to implement the “New Scope”
Key Activities (cont) - Mary DeMurray

- **Internal Audits to New Scope (9/6/99 - ongoing)**
 - Continue audits of current scope for registration
 - Audits will include new scope documents as they are approved and released
- **Management Reviews (2/year minimum)**
- **Coordination with Registrar (4/2/99-11/19/99)**
 - New scope application completed
 - Contract change is scheduled to be completed by 3/3/00
 - Schedule document review, pre-assessment, and registration assessment



Overall Plan to implement the “New Scope”
Key Activities (cont) - Mary DeMurray

- **Registrar Audits (2/26/98 - ongoing)**
 - **Surveillance to current scope (3/00)**
 - **Surveillance to current scope and pre-assessment of new scope (8/00)**
 - **Registration audit to new scope (11/00)**

ISSUES

Jim Ellis



Issues

Audit Support – Jim Ellis

- **Auditor Support (11/99 – 1/00)**
 - **100% of Audits have had personnel changes**
 - **3 completed Audits since November '99**
 - **1 out of 3 had a Lead Auditor change**
 - **5 out of 10 Auditors did not support their assigned Audit**
 - **1 out of 3 “Under Instruction” Auditors did not support their Audit**
 - **5 Planned Audits**
 - **3 out of 5 had Lead Auditor changes**
 - **16 out of 21 Auditors can not support their assigned Audit**
 - **3 Out of 4 “Under Instruction” Auditors can not support their Audit**



Issues

Audit Support – Jim Ellis

- **Auditor Support (2/00)**
 - **100% of Audits have had personnel changes (no dropouts since the report to staff)**
 - **Four Audits Completed**
 - **Sporadic participation in the planning and preparations for the Audits**
 - **1 Planned Audit**
 - **Sporadic participation in the planning and preparations for the Audits**
- **Audit Support Feedback (action item due 02/09/00)**
 - **Only received feedback from 4/13 Organizations for the schedule (approved in the ISO 9000 Meeting last week)**
 - **Only received feedback from 5/13 for Auditor Support**



Issues

Audit Findings – Jim Ellis

- **4.5 Document and Data Control**

- Master List not kept up to date
- Broken references in document
- Broken web links within documents
- General awareness of document content

- **4.16 Control of Quality Records**

- Quality records not being maintained as required
- Quality records not identified as such
- General awareness of what constitutes a quality record



Issues
Audit Findings – Jim Ellis

- **4.2 Management Responsibility**
 - General unawareness of the contents of documents that are not directly connected to an ISO element
 - Missing safety records
- **4.18 Training**
 - Training not conducted as required by documentation
- **4.5 Document and Data Control**
 - Out-dated organization codes
- **4.11 Inspection, Measuring & Test Equipment**
 - Organizational and Calibration Lab Equipment lists have conflicting information (RCAR # 140 has been written)

CLOSING REMARKS

Jim Ellis



Next Surveillance
March 6 – 8 – Jim Ellis

- **Preferred Programs/Projects Selected for Audit**
 - Dynamically Controlled Crystal Growth (DCPCG)
 - Express Rack
 - g-Limit
 - ISS Propulsion Module
 - ECLSS - Oxygen Generation System
 - ECLSS - Water Recovery System
- **Elements to be Audited**
 - 4.1 Management Responsibility
 - 4.2 Quality System
 - 4.4 Design Control
 - 4.6 Purchasing
 - 4.12 Inspection and Test Status
 - 4.14 Corrective and Preventive Action
 - 4.15 Handling, Storage, Packaging, Preservation, and Delivery
 - 4.17 Internal Quality Audits



- **Recognize the importance of ISO at the working and mid-management levels**
- **Training on new/revised Directives**
- **Readiness for our next surveillance audit in August 2000, with full registration in November 2000**
- **Implementation of ISO 9001 rev 2000**
- **Auditor Support**
- **Maintaining our momentum**

OTHER

Jim Ellis