

ACCELERATED DISTRIBUTION DEMONSTRATION SYSTEM

REGULATORY INFORMATION DISTRIBUTION SYSTEM (RIDS)

SESSION NBR: 9207170009 DOC. DATE: 92/07/10 NOTARIZED: NO DOCKET #
 FACIL: 50-397 WPPSS Nuclear Project, Unit 2, Washington Public Powe 05000397
 AUTH. NAME AUTHOR AFFILIATION
 GRUMME, L.L. Washington Public Power Supply System
 RECIP. NAME RECIPIENT AFFILIATION
 Document Control Branch (Document Control Desk)

SUBJECT: Responds to NRC 920610 ltr re violations noted in insp rept
 50-397/92-01. Corrective actions: util analyzed each FSAR
 deficiency in rept.

DISTRIBUTION CODE: IE01D COPIES RECEIVED: LTR 1 ENCL 1 SIZE: 19
 TITLE: General (50 Dkt)-Insp Rept/Notice of Violation Response

NOTES:

	RECIPIENT ID CODE/NAME	COPIES LTTR ENCL	RECIPIENT ID CODE/NAME	COPIES LTTR ENCL
	PD5 PD	1 1	DEAN, W.	1 1
INTERNAL:	ACRS	2 2	AEOD	1 1
	AEOD/DEIIB	1 1	AEOD/DSP/TPAB	1 1
	DEDRO	1 1	NRR MORISSEAU, D	1 1
	NRR/DLPQ/LHFBPT	1 1	NRR/DLPQ/LPEB10	1 1
	NRR/DOEA/OEAB	1 1	NRR/DREP/PEPB9H	1 1
	NRR/DST/DIR 8E2	1 1	NRR/PMAS/ILRB12	1 1
	NUDOCS-ABSTRACT	1 1	OE DIR	1 1
	OGC/HDS1	1 1	<u>REG FILE</u> 02	1 1
	RGN5 FILE 01	1 1		
EXTERNAL:	EG&G/BRYCE, J.H.	1 1	NRC PDR	1 1
	NSIC	1 1		

Cont no
 pg 71600455

NOTE TO ALL "RIDS" RECIPIENTS:

PLEASE HELP US TO REDUCE WASTE! CONTACT THE DOCUMENT CONTROL DESK,
 ROOM P1-37 (EXT. 20079) TO ELIMINATE YOUR NAME FROM DISTRIBUTION
 LISTS FOR DOCUMENTS YOU DON'T NEED!

TOTAL NUMBER OF COPIES REQUIRED: LTTR 23 ENCL 23



WASHINGTON PUBLIC POWER SUPPLY SYSTEM

P.O. Box 968 • 3000 George Washington Way • Richland, Washington 99352-0968 • (509) 372-5000

July 10, 1992
G02-92-162

Docket No. 50-397

U. S. Nuclear Regulatory Commission
Attn: Document Control Desk
Mail Station P1-137
Washington, D. C. 20555

Gentlemen:

Subject: NUCLEAR PLANT NO. 2, OPERATING LICENSE NO. NPF-21
NRC INSPECTION REPORT 92-01
RESPONSE TO NOTICE OF VIOLATIONS

The Washington Public Power Supply System hereby replies to the Notice of Violations contained in your letter dated June 10, 1992. Our reply, pursuant to the provisions of Section 2.201, Title 10, Code of Federal Regulations, consists of this letter and Appendices A and B (attached).

In Appendix A, the violations are addressed with an explanation of our position regarding validity, corrective action and date of full compliance. Appendix B provides a listing of the open items from the EDSFI report and the Supply System plans to address these items.

Very truly yours,

L. L. Grumme, Acting Director
Licensing & Assurance

DAS/bk
Attachments

cc: JB Martin - NRC RV
NS Reynolds - Winston & Strawn
RR Assa - NRR
DL Williams - BPA/399
NRC Site Inspector - 901A

9207170009 920710
PDR ADDCK 05000397
Q PDR

Chit No
7871000955
IE01
11

APPENDIX A

During an NRC inspection conducted from January 13 through February 14, 1992, violations of NRC requirements were identified. In accordance with the "General Statement of Policy and Procedure for NRC Enforcement Actions," 10 CFR Part 2, Appendix C, the violations are listed below:

- A. 10 CFR Part 50, Appendix B, Criterion V, "Instructions, Procedures, and Drawings," states: "Activities affecting quality shall be prescribed by documented instructions, procedures, or drawings...and shall be accomplished in accordance with these instructions, procedures, or drawings..."

WNP-2 Administrative Procedure 1.2.3, Revision 17, dated November 14, 1991, "Use of Controlled Plant Procedures," paragraph 5.5.7, states that "any person performing a task for which there is a procedure is responsible for doing the job as described by the procedure."

WNP-2 Administrative Procedure 1.5.1, Revision 16, dated February 6, 1991, and Deviation 91-1009, dated October 11, 1991, "Technical Specification Surveillance Testing Program," prescribes the following requirements:

Paragraph 1.5.1.5 requires that "Any test results found to be outside those designated in the procedure or any abnormal circumstances that prevent completion of the procedure shall be denoted in the "Comments" section of the cover sheet by the personnel performing the test," and "...the Shift Manager or appropriate Craft Supervisor responsible for the testing shall verify that all blanks have been properly completed and that any significant observations made during the test are recorded. Any additional actions necessary for Technical Specification (TS) compliance...will be determined and referenced on the cover sheet. The Shift Manager's review and approval signifies acknowledgement of test completion..."

Paragraph 1.5.1.6.A requires that "Completed surveillance tests shall be reviewed for completeness and accuracy within each Department...by supervisors or alternates," including "review [or] the test results against acceptance criteria...[I]f an item has been omitted...investigate ...and review to determine if a Problem Evaluation Report (PER) is required to document a personnel error, programmatic failure, etc."

1. Surveillance Procedure 7.4.9.2.1.24, "Quarterly Battery Testing 250 VDC B2-1," Step 6.H, requires the water level of each cell to be recorded on Attachment A, Column D. Completion of this step is required to satisfy TS surveillance requirement 4.8.2.1.b.1.

Contrary to the above, on data dated December 22, 1991, this step was marked NA on Attachment A, Column D for cells 1 through 20, but this incomplete item was not noted or resolved on the test cover sheet as required by procedure. A Craft supervisor signed for review of the surveillance procedure and a Shift Manager signed that the surveillance procedure was completed.

2. Surveillance Procedure 7.4.8.2.1.12, "18 Month Battery Testing of E-BO-1A," Step 6.A.7 and 6.A.8, requires that for load discharge tests of battery chargers, the load be a minimum of 25 amps for four hours, and that the load current be measured and recorded every 15 minutes. Completion of this step is required to satisfy TS surveillance 4.8.2.1.c.4.1.

Contrary to the above, on data dated May 17, 1990, the initial current was recorded as 2.6 amps, all remaining data was below the required 25 amps, but the out of tolerance test results were not noted or resolved on the test cover sheet as required by procedure. A Craft Supervisor signed for review of the surveillance procedure and a Shift Manager signed that the surveillance procedure was completed.

3. Surveillance Procedure 7.4.8.2.1.13, "18 Month Battery Testing of E-BO-1B," Step 6.B.27 and 6.B.28, requires recording of intercell resistance readings and verification that the readings are less than or equal to 250 micro-ohms. Completion of these steps is required to satisfy TS surveillance 4.8.2.1.c.3.

Contrary to the above, on data dated may 28, 1990, all of the intercell resistance readings were recorded as greater than 250 micro-ohms with a maximum recorded resistance of 0.053 ohms (53,000 micro-ohms), but these out of tolerance values were not noted or resolved on the test cover sheet as required by procedure. A Craft Supervisor signed for review of the surveillance procedure and a Shift Manager signed that the surveillance procedure was completed.

4. Surveillance Procedure 7.4.8.2.1.12, "18 Month Battery Testing of E-BO-1A," Step 6.B.25, requires a visual inspection of the battery and the results of the inspection recorded in Attachment B, column A (titled "Internal Cell Inspection") and column B. completion of this step is required to satisfy TS surveillance 4.8.2.1.c.1.

Contrary to the above, on data dated may 17, 1990, Column A was left blank, but the failure to record the results of the internal cell inspections was not noted or resolved on the test cover sheet as required by procedure. A Craft Supervisor signed for review of the surveillance procedure and a Shift Manager signed that the surveillance procedure was completed.

5. Surveillance Procedure 7.4.8.2.1.24, "Quality Battery Testing 250 VDC B2-1," Step 6.R, requires the specific gravity of each cell to be compared to the average specific gravity of all the cells to verify that no single cell has a specific gravity more than 0.02 below the average.

Contrary to the above, on data dated May 24, 1991, cell 8 was recorded as having a specific gravity of 0.023 below the average, but the out of tolerance reading was not noted by the technician on the test cover sheet as required by procedure. A Craft Supervisor signed for review of the surveillance procedure and a Shift Manager signed that the surveillance procedure was completed.

6. Surveillance Procedure 7.4.8.2.1.21, "Quarterly Battery Testing 24 VDC B0-1A, B0-1B, B0-2A, B0-2B," Step 7.6.14, requires the battery float voltage to be measured, and if below a minimum value (26.8 VDC) the Shift Manager is to be contacted, the voltage adjusted and the results recorded on the "comments" section of the data sheet.

Contrary to the above, on data dated on September 10, 1991, an out of tolerance float voltage (26.63 VDC) was recorded; however, the out of tolerance reading was not noted in the comments section of the procedure and the voltage was not readjusted as required by the procedure. A craft supervisor signed for review of the surveillance procedure and a Shift Manager signed that the surveillance procedure was completed.

7. Surveillance Procedure 7.4.8.2.1.24, "Quarterly Battery Testing 250 VDC B2-1," Step 6.H, requires level to be recorded as a deviation from center line in one-quarter inch increments, with 0 being the midpoint between the high and low level.

Contrary to the above, on data dated December 22, 1991, the level for cells 21 through 171 and cells 173 through 232 was recorded as "OK" rather than in one-quarter inch increments. A Craft Supervisor signed for review of the surveillance procedure, and a Shift Manager signed that the surveillance procedure was completed.

8. Surveillance Procedure 7.4.8.2.1.24, "Quarterly Battery Testing 250 VDC B2-1," Step 6.Q requires the performance of a specific gravity calculation and the recording of the results of that calculation as a specific gravity deviation in Attachment A, Column H.

Contrary to the above on data dated May 9, 1991, the technician recorded "OK" rather than a calculated specific gravity deviation in Attachment A, Column H. A Craft Supervisor signed for review of the surveillance procedure and a Shift Manager signed that the surveillance procedure was completed, even though the results of the specific gravity calculation had not been properly recorded.

9. Surveillance Procedure 7.4.8.2.1.22, "Quarterly Testing 125 VDC B1- and B1-2," Step 17, requires the technician to initial the step signifying the completion and the recording of the results of a calculation for battery specific gravity; Step 25 requires the technician to initial the step signifying that the Shift Manager has been notified after the testing of the battery is completed.

Contrary to the above, on the data dated May 30, 1991, the technician marked Step 17 as NA and Step 25 was left blank. A Craft supervisor signed for review of the surveillance procedure and a Shift Manager signed that the surveillance procedure was completed, even though all the procedure steps had not been completed as required by the procedure's instructions.

10. Surveillance Procedure 7.4.8.2.1.12, "18 Month Battery Testing to E-BO-1A," Step 6.B.3, requires that for battery discharge tests, the load current that was recorded in the load current test of step 6.B.2, is to be subtracted from 24 amps and that the step 6.B.3 value is to be used for the discharge test.

Contrary to the above, on data dated May 17, 1990, the current measured and recorded in Step 6.B.2 was 3.8 amps; however, 3.0 amps instead of 3.8 amps was used in the calculation of Step 6.B.3. A Craft Supervisor signed for review of the surveillance procedure and a Shift Manager signed that the surveillance procedure was completed, even though a wrong value was used in Step 6.B.3.

11. Surveillance Procedure 7.4.8.2.1.24, "Quarterly Battery Testing 250 VDC B2-1," Step 6.G requires a temperature correction factor to be recorded, and Step 6.M requires the measured specific gravity to be corrected by the factor recorded in Step 6.G, and recorded

Contrary to the above, on data dated December 22, 1991, Steps 6.G and 6.M were not accomplished. The temperature corrected factor was not recorded and the specific gravity was not corrected and recorded. This incomplete item was not noted or resolved on the test cover sheet as required by procedure. A Craft Supervisor signed for review of the surveillance procedure and a Shift Manager signed that the surveillance procedure was completed.

This is a Severity Level IV violation (Supplement I).

Validity of Violation

The Supply System acknowledges the validity of this violation. The multiple instances of procedure completion inadequacies cited were the result of a lack of attention to detail. In each case it appears, based on a review of available information, that Plant equipment was operable and satisfied the surveillance requirements. However, the procedural paperwork was not completed in a thorough enough manner to provide the necessary documentation. The root causes for this event include:

- Work practices were less than adequate in that specific instructions were not followed during the conduct and review of surveillance tests.
- Supervisory methods did not ensure that job performance and self checking standards were properly communicated.
- Procedures were less than adequate in that they did not ensure correct information was recorded on battery data sheets.

Supply System management is concerned with the examples of procedural non-compliances identified in this violation. This is indicative of a failure of performance expectations that documentation must be accurately and thoroughly completed. Many of the corrective actions described below go beyond the electrical procedure deficiency problems identified. It is clear we must assure strict and accurate adherence to procedures. Previously established programs, along with those actions described below, should produce these necessary changes.

Corrective Steps Taken/Results Achieved

The identified procedures which did not contain sufficient information were either: 1) immediately performed to verify the status and operability of the affected equipment; or 2) for those surveillances which had been performed since the unacceptable procedure was completed the latest completed surveillance was reviewed to verify acceptability. Technical Specification compliance was verified in each case.

- Based on a review of equipment condition and the results of subsequent surveillance testing, it was determined that the equipment was operable, but the procedure documentation was inadequate. The procedures in question have been revised to include human factors considerations that should facilitate proper completion. The Maintenance Procedure Upgrade Program will be used to address similar problems which may exist in other maintenance procedures.

The Operations Manager and the Electrical Supervisor have reviewed performance standards with the Shift Managers and Electrical Supervisors and workers. The importance of attention to detail and proper documentation were emphasized.

As part of a more immediate effort to determine whether the problems noted in the EDSFI findings are localized to Electrical Maintenance or may be more widespread, 70 recently completed maintenance procedures were checked for attention to detail and proper documentation of completed surveillances. This review found the highest error rate associated with the Electrical Maintenance Department, but did find errors in the Mechanical and I&C Departments. These problems were identified on a PER and will be addressed through that process.

Three supervisors have recently been added to the Electrical Maintenance shop raising the number from two to five. These additions will allow the supervisors to spend more time in the Plant with the electricians and in the review of documentation.

Corrective Action to be Taken

Since the findings cited reflect specific problems with individual procedures, as well as management tolerance of performance that does not measure up to acceptable standards, extensive additional corrective actions are planned to resolve these problems and prevent their recurrence.

The Supply System has initiated a self-assessment of procedural compliance within each department at WNP-2 and the major support organizations to WNP-2. The results of this assessment, including identification of corrective actions, will be completed by September 30, 1992. In addition, each organization has been tasked with development and implementation of a performance monitoring program to assure the corrective actions implemented result in maintained performance.

To better determine the scope of the problems noted in the inspection findings, as well as other Supply System identified issues, a technical assessment was initiated in April 1992 to analyze procedure compliance issues. This assessment included a review of procedure related PERs from January 1991 to March 1992. This assessment, which will be completed by July 17, 1992, preliminarily concluded that similar procedure compliance problems exist in other plant and site departments. The product of the assessment will be the identification of generic causes of procedural compliance problems. It was concluded, based on a review of the preliminary draft of the assessment, that the corrective actions proposed in this response, and other actions already implemented by the Supply System, should result in the desired changes needed to resolve procedure compliance problems.

Blanks marked "N/A" as being outside the scope of the original surveillance procedure are now required to be initialed by a Shift Manager. This requirement is being incorporated as a permanent change in PPM 1.5.1, Technical Specification Surveillance Testing Program, and in the interim has been implemented as a night order. The revision to this procedure is currently in the review and approval cycle.

As part of a long-term solution directed at the root causes of the problems noted, the Supply System will undertake the following steps intended to improve job performance and strengthen procedure compliance:

- Write and adopt a "Conduct of Maintenance" procedure applicable to each of the maintenance shops with provisions for procedure adherence and professional conduct similar to those in the existing "Conduct of Operations" procedure, PPM 1.3.1. This procedure will provide strong guidelines regarding management expectations and professional conduct including adherence to the administrative requirements of procedures. One of the primary concepts in this procedure will be that supervisors will be held accountable for both their workers' and their own actions. This procedure will be issued by September 30, 1992.

The Conduct of Maintenance procedure will provide guidelines for supervisors to set an example of professional conduct, including adherence to the administrative requirements of procedures and use of self checking practices. The Plant Manager and department managers, using the Conduct of Maintenance procedure, will discuss these concepts with first line supervisors who will then discuss them with their workers.

- The "self-checking" training program will be expanded to include all members of the Maintenance department. The program will establish the department supervisors as owners of the program. This program will train craftsmen to self-check their work and will encourage immediate discussion of errors caused by failure to self-check with the responsible individuals and as part of the weekly department meetings. Self-checking successes will also be discussed and highlighted in these meetings. Self-checking training for Maintenance shop personnel will be completed by November 30, 1992.
- The "personally preventable" approach, which has been incorporated successfully into Health Physics activities, will be expanded to the Maintenance shops following completion of training on self-checking and the Conduct of Maintenance procedure. This approach will be used, where applicable, to achieve management's expectations. Specifically, personnel involved in procedure violations that are personally preventable or repetitive due to a failure to self-check, will be retrained in the appropriate areas. Interaction management techniques will be used for personnel with repetitive personally-preventable problems.

In addition to the above steps which are directed toward improving the work ethic and personal responsibility for a work product, several actions are scheduled or have been completed which will provide additional manpower in key areas, will change the manner of doing business, and will ensure prompt attention to important matters.

- A supervisor or engineer is being assigned to each Volume 7 surveillance procedure performed by Electrical Maintenance between now and September 1992 to ensure management's expectations regarding procedure documentation are understood and met by craft personnel.
- Lessons learned related to procedural compliance in the Electrical Maintenance shop will be applied to the other maintenance shops and departments.

Date of Full Compliance

During the EDSFI the Supply System responded to each concern by either re-performing the affected surveillance procedure or by reviewing documentation to ensure a satisfactory surveillance procedure was currently applicable. Full compliance was achieved for each item as it was brought up. The Supply System is currently in full Technical Specification compliance.

- B. 10 CFR Part 50, Appendix B, Criterion V, "Instructions, Procedures, and Drawings," states: "Activities affecting quality shall be prescribed by documented instructions, procedures, or drawings,...and shall be accomplished in accordance with these instructions, procedures, or drawings...."

Safety Related Plant Procedure 1.6.2, Revision 12, dated January 20, 1992, "Control of Drawings and Support Data," Section 5.2, states that "Controlled Top Tier Drawings are promptly revised to show an up-to-date as-built configuration through the red-lining process."

Contrary to the above, as of February 13, 1992, the following controlled Top Tier Drawings, which were located in the control room, were not promptly revised to show an up-to-date as-built configuration through the red-lining process:

1. Controlled Top Tier Drawing E519, "Motor Valve and Miscellaneous Control Elementary Diagram," Sheet 35, showed fuse F2 to be a 10A fuse; however, RFTS-90-10-13, dated October 10, 1990, identified the fuse installed F2 as a 20A fuse.
2. Controlled Top Tier Drawing E526, "Miscellaneous Equipment Elementary Diagram," Sheet 1, showed a 1A fuse at terminal point 320 (drawing coordinates K,7); however, RFTS-90-08-030, dated October 16, 1990, identified the installed fuse as a 1-4/10A fuse.
3. Controlled Top Tier Drawing EWD-81E-0001, "Electrical Wiring Diagram Reactor Building Emergency Cooling System Sample Room Filter REA-SU-115," showed a 3A fuse for FU1 and FU2 (drawing coordinates E,4); however, RFTS-91-08-030, dated August 6, 1991, identified the installed fuses as 3-2/10 A fuses.

This is a Severity Level IV violation (Supplement I).

Validity of Violation

The Supply System acknowledges the validity of this violation. The root cause for this violation was less than adequate Change Management in that change related documents, in this case the fuse control program, were not revised when the current Problem Evaluation Request (PER) process was implemented in 1988. The fuse control program pre-dates the PER process at WNP-2. With the establishment of the PER process a PER should have been generated to document Top Tier drawing deficiencies followed by a Request For Technical Services (RFTS) to evaluate the condition. The review of the PER would have placed the appropriate priority on the RFTS. However, as identified by the NRC, there were instances where Plant personnel chose to wait for the engineering evaluation of the discrepancy to be performed under the RFTS. Then, if an actual problem existed with the installed fuses or the Top Tier drawings, a PER was generated.

The fuse control program (PPM 1.3.47) normally requires replacement with the identical or an evaluated equivalent fuse. However, if it is known that the installed fuse is of the wrong type, and this is verified on design documents, the PPM permits replacement with the correct fuse. The replacement fuse log sheets are reviewed quarterly to ensure the Plant configuration is being maintained as designed.

Corrective Steps Taken/Results Achieved

An engineering review was performed to determine whether the fuse sizes questioned in the EDSFI report were in fact correct. Of the three NRC identified fuse concerns, one affected a spare fuse and the other two were small increases in fuse size.

Engineering has completed a review of the 15 RFTSs related to fuses identified by the NRC during the EDSFI. In addition, Engineering has reviewed all outstanding fuse RFTSs (161) to determine if a Top Tier drawing discrepancy was involved. Forty-four of the RFTSs identified Top Tier drawing discrepancies. A PER was written to document these discrepancies. Subsequently, the appropriate fuses were installed and the Top Tier drawings were redlined to reflect the Plant configuration.

Recent Interoffice Memorandums from the Plant Manager reiterated management's expectations for the generation of PERs for non-conforming conditions. These expectations have been specifically communicated to personnel involved in the fuse control program.

Corrective Action to be Taken

Clear direction is under development for use in the fuse control program regarding documenting, on PERs, discrepancies between installed fuses and Top Tier drawings. As stated above, expectations on PER generation have already been verbally communicated. Written direction regarding PER generation for fuse concerns will be provided by July 24, 1992.

Date of Full Compliance

Full compliance was achieved on July 3, 1992, when the last of the 44 identified fuses was replaced and the Top Tier drawings were redlined.

- C. 10 CFR Part 50, Appendix B, Criterion V, "Instructions, Procedures, and Drawings," states: "Activities affecting quality shall be prescribed by documented instructions, procedures, or drawings,...and shall be accomplished in accordance with these instructions, procedures, or drawings...."

Safety Related Plant Procedure 1.6.2, Revision 12, dated January 20, 1992, "Control of Drawings and Support Data," Section 5.2, states that "Controlled Top Tier Drawings are promptly revised to show an up-to-date as-built configuration through the red-lining process." Section 5.4 requires that "Top Tier drawings shall be red-lined upon completion of field work and prior to returning equipment to operation."

Contrary to the above, as of February 14, 1992, for equipment which had been modified and returned to operation some time between 1985 to 1991, a controlled Top Tier Drawing was not red-lined to show an up-to-date as-built configuration. Specifically, Controlled Top Tier Drawing E508, "Power and Instrumentation AC Power Panels Schedules," Sheet 1, Revision 80, in the control room, showed that breaker 6 on power panel PP-7A-F supplied power to a chlorine analyzer; however, Breaker 6 was a spare breaker. The breaker was converted to a spare breaker by Project Engineering Directive (PED) 218-E-C358.

This is a Severity Level IV violation (Supplement I).

Validity of Violation

The Supply System acknowledges the validity of this violation. The root cause for this violation was work practices less than adequate in that the appropriate paperwork was generated to have the drawings updated in 1983, but the tracking system identified status of the modification was never changed to reflect the completion of field work. The instance cited involved a Project Engineering Directive (PED) issued during startup which, in 1992 at the time of the EDSFI, was still listed as pending while it should have been designated as field installation complete. This designation would have triggered the required drawing changes. The document used to initiate the Plant design change request, a Startup Deficiency Report (SDR), was initiated and completed. The completion signature on the SDR indicated field work completion. We were unable to determine why this completed information did not get into the Document Control System for posting against affected drawings. This resulted in the Top Tier drawing not being updated in a timely manner.

The PED process in place during startup has been replaced at WNP-2. This violation is not believed to be representative of the current design change process. As stated in the violation, current procedures provide direction for promptly updating Top Tier drawings following completion of a Plant modification.

The Supply System previously recognized that there were transition PEDs which had been implemented and were still statused as pending. A PER was generated and a review of pending PEDs was completed.

Corrective Steps Taken/Results Achieved

The PED has been evaluated and verified not to constitute a safety problem. Electrical Design Engineering has also completed a review of Quality Class I modifications (PEDs, FDIs, and FDDR's) which still show a pending completion status on the document control system (DCS). One additional Top Tier drawing change was identified and corrected during this review.

Corrective Action to be Taken

Sixty-four mechanical and civil transition PEDs were reviewed for completion. A close-out of the associated paperwork will be completed by September 30, 1992. In addition, 12 Class 2 Electrical Transition PEDs were reviewed and appropriate documentation changes have been completed.

Date of Full Compliance

A review of Class 1 transition documents, and necessary drawing changes, will be completed by September 20, 1992. The Supply System is not aware of Top Tier drawing discrepancies caused by pending status PEDs.

- D. Technical Specification 6.8.1 states that written procedures shall be established, implemented, and maintained covering:

"d. Surveillance and test activities of safety-related equipment."

Contrary to the above, as of February 14, 1992, the licensee did not implement administrative controls to maintain updated surveillance procedures for certain facility design changes. Specifically, several thermal overload devices had been changed for motor operated valves, but these changes were not incorporated into the Valve Data Sheets for valves MS-V-20, MS-V-16, RWCU-V-1, HPCS-V-15, SW-V-4C, SW-V-54 and HPCS-V-1 in Surveillance Procedure 7.4.8.4.3.3, Revision 4, dated May 10, 1990.

This is a Severity Level IV violation (Supplement I).

Validity of Violation

The Supply System acknowledges the validity of this violation. The root cause for this violation was less than adequate work practices in that documents were not followed correctly. PPM 1.4.1 requires that a Plant Procedure Checklist be completed for each modification. This checklist was completed for these thermal overload changes but in each case the required surveillance procedure change was not identified. Plant personnel failed to recognize the impact these changes had on Technical Specification surveillance procedures. In addition, one of the overloads had been changed as part of a substitution performed under a type 55BDC (Basic Design Change) package. The 55BDC process, however, is intended to update design documentation to match the as-built configuration of the Plant, not to change the configuration. This process does not require an evaluation of the potential impact on Plant procedures since a 55BDC is intended to update the drawing to match the actual Plant configuration.

Corrective Steps Taken/Results Achieved

During the EDSFI, the Supply System completed a review of Technical Specification thermal overload surveillance procedures and verified that the previously completed testing satisfied the surveillance criteria applicable to the new overloads. Operability was not impacted by these procedural deficiencies.

The required revision of PPM 7.4.8.4.3.3 to include the applicable overload information was completed on June 3, 1992.

Corrective Action to be Taken

A weakness in the Plant Procedure Checklist process is its reliance on personnel knowledge to identify procedure changes associated with Plant modifications. To resolve this weakness in identifying procedures a word searchable computer information base containing the full-text of the procedures will be used to support these reviews. Computer software to support this project is installed, and a large number of plant procedures have been converted into the necessary format for input into the information base. This corrective action will provide a tool to help resolve the specific problem, but will not be effective without appropriate attention to detail. It is expected that the Self-Checking and Personally Preventable programs (applicable to all personnel) which were discussed as long-term corrective actions for Violation A also will improve effectiveness here. Effective programs implemented by personnel dedicated to quality should prevent future occurrences of similar problems. The completion of procedure conversions to the proper format and loading of the files into the word searchable software is scheduled for completion by June 1, 1993.

This response will be provided to the WNP-2 Procedure Coordinators who perform reviews for the Plant Procedure Checklist as a remainder of the importance of performing a thorough review for potentially impacted procedures.

Date of Full Compliance

Full compliance was achieved on June 3, 1992, when the procedure revision was approved. However, compliance with the applicable surveillance requirements was achieved by the original testing performed in 1991.

- E. 10 CFR Part 50, Appendix B, Criterion V, "Instructions, Procedures, and Drawings," states: "Activities affecting quality shall be prescribed by documented instructions, procedures, or drawings,...and shall be accomplished in accordance with these instructions, procedures, or drawings...."

Maintenance Procedure 10.1.5, Revision 13, dated March 9, 1989, "Scheduled Maintenance System," Section 7.2.11, states that "The Maintenance Manager will biennially form a committee...[to] review the scheduled Maintenance Program..." This requirement was unchanged in Revision 14 of this procedure issued May 13, 1991.

Contrary to the above, as of February 14, 1992, no committee had been formed.

This is a Severity Level V violation (Supplement I).

Validity of Violation

The Supply System acknowledges the validity of this violation. The root cause of this violation was work practices were less than adequate in that the Scheduled Maintenance System (SMS) task which required the committee to be convened was not performed or recognized as being late. A contributing cause for this violation was that written procedures and documents placed an inappropriate emphasis on information when this task was classified as an "other" in the SMS system.

The Supply System stated at the Enforcement Conference held on May 27, 1992, that, based on a preliminary review, it appeared that a computer input error was the cause for this violation. However, based on further review it was concluded that the input error occurred after the task had already gone late. There was a window of opportunity for the task to have been recognized and completed in accordance with the SMS program requirements. The task shows up first on the list of items coming due in the next month, then on the list of the items which have gone past their due date, and finally on the overdue list (greater than 25% past the due date). Based on the incorrect entry date for the task completion, this item would have appeared on the coming due and past due lists for about a six month period. The past due lists are reviewed by the Department Manager on a weekly basis.

The ability to identify and complete this task was hindered by the task being classified as an "other" task. There are a large number of tasks which are not Technical Specification, Equipment Qualification, Essential, or Preventive Maintenance related and fall into a single "other" category. The past due report mentioned above contains the past due items from each of the categories mentioned.

On February 26, 1990, Phase I of the Reliability Centered Maintenance (RCM) project was initiated with a team of Supply System engineers in the three major disciplines, headed by a Program Supervisor and dedicated full time for two years. Using the PM Reviewers Guide, the team evaluated the existing Preventive Maintenance Program, a subset of SMS, to minimize scheduling inefficiencies and consolidate work on equipment. Although the RCM review was performed and meets the intent of an SMS committee review, it did not provide strict compliance with the procedural requirements in place at the time.

Corrective Steps Taken/Results Achieved

PPM 10.1.5 has been revised to incorporate the RCM methodology and review criteria. Since the ongoing RCM activities meet the intent of the review committee, the requirement to form a review committee have been deleted from the procedure and removed from the SMS system. The Maintenance Manager has been counseled on the importance of thoroughly reviewing the SMS reports and completing tasks in a timely manner.

Corrective Action to be Taken

The SMS "other" category tasks will be reviewed to determine if there are tasks which, because of their importance, should be moved to another category to improve visibility. This action will be completed by October 31, 1992.

Date of Full Compliance

The Supply System was always in full compliance with the intent of the procedure. Strict compliance was achieved on March 26, 1992, when the procedure revision was implemented which deleted the requirement to form a review committee.

- F. 10 CFR 50.71(e) requires licensees to update the originally submitted Final Safety Analysis Report (FSAR) no less than annually and states that the revision shall reflect all changes up to a maximum of 6 months prior to the date of filing the revision.

Contrary to the above, as of February 14, 1992, the following are examples where the WNP-2 FSAR was not updated to reflect changes:

The FSAR (pg 9.5-50) provides an unreferenced number of 22,000 Btu/min or 1,320,000 Btu/hr for room heat load. The FSAR was not updated to reflect 1989 heat load test results of 1,627,000 Btu/hr.

Section 8.3.1.1.1 of the WNP-2 FSAR, on page 8.3-2, states that "...startup transformer circuit breakers are interlocked to close only after the normal source circuit breakers have opened..." The interlocking arrangement was not installed, and had not been, since startup in 1983, but the FSAR was not revised.

This is a Severity Level IV violation (Supplement I).

Validity of Violation

The Supply System acknowledges the validity of this violation. The root causes for this violation were: 1) written document presentation deficiencies in that the room heat load value was located in a heat exchanger design data table where it was difficult to find; and 2) less than adequate change management in that during the Plant construction period cancellation of a design change, specifically developed to bring the Plant into conformance with the FSAR description, resulted in the observed difference between the FSAR and the Plant configuration. Cancellation of the change did not trigger a FSAR change.

Corrective Steps Taken/Results Achieved

The Supply System analyzed each of the FSAR deficiencies noted in the inspection report. No deficiencies have a significant effect on safety, nor do any represent unreviewed safety questions under 10 CFR § 50.59.

The FSAR deficiencies noted in Attachment 3 of the EDSFI report have been reviewed with DRD personnel to sensitize them to the types of errors being found. It is expected that the DRD effort will identify for resolution other FSAR deficiencies which may exist.

Corrective Action to be Taken

Engineering Instruction 2.15 will be modified to specify the need to identify FSAR sections as interfacing documents when performing calculations. SCNs, when required, will be prepared in conjunction with the calculation effort. This procedure revision is currently in the review process and is expected to be completed by August 14, 1992.

By September 1, 1992, SCNs will be generated to correct the EDSFI identified deficiencies with the FSAR. A FSAR Amendment incorporating these corrections will be submitted to the NRC by November 15, 1992.

The database reconstitution efforts (DRD and calculation upgrade) will continue with enhanced expectations on identification and resolution of FSAR discrepancies.

Date of Full Compliance

The FSAR concerns identified in Inspection Report 92-001 will be addressed. As stated above, a FSAR Amendment will be submitted by November 15, 1992, addressing the NRC concerns documented in the EDSFI report. This Amendment will result in full compliance.

Appendix B

Action Plan to Resolve EDSFI Team Inspection Follow-up Items

1. Follow-up Item (50-397/92-01-02), The maximum SSW (UHS) temperature appears not to have been established.
2. Follow-up Item (50-397/92-01-03), Sufficient data is not available to support the worst case SSW cooling flows to the diesels.
3. Follow-up Item (50-397/92-01-04), Sufficient data is not available to determine the most limiting diesel generator or diesel generator electrical equipment room temperatures.
4. Follow-up Item (50-397/92-01-05), Calculations indicate the #1 Battery Charging Room and the Electric Equipment and Repair Shop may, under worst case accident conditions, exceed WNP-2 Technical Specifications limits.

Planned Action: For items 1 through 4 above, calculations were performed to document the acceptability of the WNP-2 design. The calculations were reviewed with members of the NRC Staff in June 1992. These calculations have been verified and are in the review and approval process with final approval expected by August 14, 1992.

5. Follow-up Item (50-397/92-01-06), Sufficient test data or analysis is not available to support SEVR cabinet cooling under worst case accident conditions.

Planned Action: Testing of the SEVRs was performed in conjunction with the 24-hour run diesel generator testing during the R7 refueling and maintenance outage. This testing revealed that the temperature difference between the SEVR area in the cabinet and the general room temperature, with the cabinet doors removed as required by procedure when room temperatures exceed a preset level, was approximately 5°F. This temperature differential is acceptable.

6. Follow-up Item (50-397/92-01-08), The agreement between BPA and the Supply System for control of the WNP-2 switchyard is not sufficiently detailed to assure switchyard maintenance activities are adequately controlled. This item will be reevaluated when the Supply System and BPA establish a revised agreement.

Planned Action: The Supply System has controls in place to ensure BPA work in the switchyard is performed in a safe and acceptable manner. Preliminary discussions have been held on this subject, and working agreements are in place. The Supply System will work to complete a written agreement with BPA by December 1, 1992.

7. Follow-up Item (50-397/92-01-10), Circuit breaker contact resistance acceptance criteria has not been established. Some WNP-2 EDS circuit breakers may have high contact resistance.

Planned Action: The Supply System will evaluate this item and, if necessary, revise procedures prior to the next refueling outage when most breaker testing is performed. Several options are considered viable, including adding acceptance criteria and/or trending of test results. Breaker manufacturers will be contacted to determine the appropriate approach and applicable acceptance criteria if used.

8. Follow-up Item (50-397/92-01-11), No requirement exists to document and disposition the steps of maintenance or surveillance procedures that are not performed. The present licensee practice bypasses management's review and control of deferred maintenance.

Planned Action: As described in the attached response to NOV 92-01A, PPM 1.5.1, Technical Specification Surveillance Testing Program, will be revised to require that "N/As" in completed surveillance procedures be initialed by a Shift Manager. An evaluation will be made of non-surveillance activities to determine if actions other than the current Shift Manager's review of documentation is necessary. This review and subsequent process changes, if required, will be completed by December 31, 1992.

9. Follow-up Item (50-397/92-01-19), Grounding system resistance is to be verified.

Planned Action: Subsequent to the EDSFI the Supply System located the startup test which verified the acceptability of the Plant grounding system. The system resistance was 0.1 ohms. WNP-2 is located in a dry area with little rainfall or ground moisture. Degradation of the system would therefore not be expected. The Supply System will, however, review common industry practice and will factor this information into a decision on performance of periodic testing of the system. A decision on the need for periodic testing of the Plant grounding system will be made by December 31, 1992.

10. Follow-up Item (50-397/92-01-20), Coordination calculation to be revised to include team finding.

Planned Action: The coordination calculations for the SM-7, SM-8, and SM-4 will be revised to include an evaluation of the concerns raised by this item. These calculation revisions will be completed by December 31, 1992.