

VIRGINIA ELECTRIC AND POWER COMPANY
RICHMOND, VIRGINIA 23261

June 19, 1979

Mr. James P. O'Reilly, Director
Office of Inspection and Enforcement
U. S. Nuclear Regulatory Commission
Region II
101 Marietta Street, Suite 3100
Atlanta, Georgia 30303

Serial No: 431
PO/FHT:baw
Docket No: 50-338
License No: NPF-4

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Dear Mr. O'Reilly:

We have reviewed your letter of May 25, 1979 in reference to the inspection conducted at North Anna Power Station Unit No. 1 on January 29-February 2, 1979, and reported in IE Inspection Report No. 50-338/79-08. Our responses to the specific infractions are attached.

We have determined that no proprietary information is contained in the report. Accordingly, the Virginia Electric and Power Company has no objection to this inspection report being made a matter of public disclosure

Very truly yours,

C. M. Stallings

C. M. Stallings
Vice President-Power Supply
and Production Operations

Attachment

cc: Mr. Albert Schwencer

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RESPONSE TO NON-COMPLIANCE
ITEMS REPORTED IN THE INSPECTION REPORT NO. 50/338-79-08

A. NRC COMMENT

As required by 10 CFR 50, Appendix B, Criterion XVI, "Measures shall be established to assure that conditions adverse to quality such as failures, malfunctions, deficiencies, deviations, defective material and equipment, and the nonconformances, are promptly identified and corrected. The identification of the significant condition adverse to quality, the cause of the condition, and the corrective action taken shall be documented and reported to appropriate levels of management." "Verification of the proper implementation of corrective action measures and closeouts of corrective action documentation is assured through the monitoring and auditing effort . . . and the corrective actions taken are reported to appropriate levels of both offsite and onsite management"

Contrary to the above, procedures have not been established to ensure that prompt corrective action is taken to resolve conditions adverse to quality. This lack of procedures contributed to the lack of response, slow response or corrective action completion dates being exceeded for 30 of 51 audit findings reviewed.

Response

The above infraction is correct as stated. Specifically, pursuant to Section 2.201 of the NRC's "Rules of Practice" Part 2, Title 10, Code of Federal Regulations, the following information is submitted:

1. Corrective steps taken and results achieved:

As indicated in the Notice of Violation referenced above, a number of open audit items which have been inadequately handled in respect to timely corrective action, follow-up, and closing collectively constitute failure to initiate prompt corrective action. Revisions to the Nuclear Power Station Quality Assurance Manual (NPSQAM), Section 18, articles 5.5.2, 5.9 and 6.0, have been approved and implemented which (a) specify that open audit items shall be closed in a manner consistent with ANSI N45.2.12 Draft 3, Rev 4, 1974, and (b) establishes a mandatory escalation of all items for which a timely and satisfactory course of corrective action is not forthcoming. An escalated item will reach the highest levels of corporate management in no less than 60 days if not resolved at lower levels of station or corporate management.

2. Corrective steps which will be taken to avoid further non-compliances:

We believe that the above listed corrective action will be sufficient.

3. Date when full compliance will be achieved:

Full compliance has been achieved by June 15, 1979.

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B. , NRC COMMENT

As required by 10 CFR 50, Appendix B, Condition XVIII, "A comprehensive system of planned and periodic audits shall be carried out to verify compliance with all aspects of the quality assurance program and to determine the effectiveness of the program. The audits shall be performed in accordance with the written procedures or check lists by appropriately trained personnel not having direct responsibilities in the areas being audited". The accepted Quality Assurance Program (Section 17.2.18) states in part: "The general audit policy specifies that station and system quality assurance audits be conducted in accordance with a formal preplanned and scheduled system to ensure an adequate and meaningful quality assurance/control program is in effect. . . ."

1. ANSI-N45.2.11-1974, as committed to by the accepted Program, states in part: "Audits shall include an evaluation of design quality assurance policies, practices, procedures and instructions; the effectiveness of implementation; and actions taken to correct deficiencies in the program.

Contrary to the above, the design change audit check list is inadequate in that it does not include the evaluative considerations required by Section 11.4 of ANSI N45.2.11.

2. ANSI-N45.2.12 (Revision 3, Draft 4-1974), as committed to by the accepted Program, states in part: "The audit report shall be issued within thirty days after the post-audit conference. . . 4.5.1 By Audited Organization . . . and shall respond as requested by the audit report, giving results of the review and investigation. . ."

Contrary to the above, the System Nuclear Safety and Operating Committee (SNSOC) annual Quality Assurance-Operations and Maintenance audit program provides no system to delineate the duties and qualification of the auditors, to provide written procedures or check lists, and to specify reporting requirements and response times as required by ANSI-N45.2.12.

Response

The above infraction is correct as stated. Specifically, pursuant to Section 2.201 of the NRC's "Rules of Practice" Part 2, Title 10, Code of Federal Regulations, the following information is submitted:

1. Corrective steps which have been taken and results achieved:

With respect to the item of non-compliance dealing with the failure to provide adequate check lists for auditing the design change program; checklists conforming to the above mentioned requirements have been prepared and are in use.

With respect to the failure to establish an auditing program for the SyNSOC a qualified individual will be assigned to prepare such a program prior to the next scheduled SyNSOC audit.

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Response (cont'd.)

In addition, the SyNSOC bylaws have been changed to insure that:

Procedures and checklists by which the audit will be conducted will be prepared;

Reporting requirements will be specified;

Response times will be specified; and

Corrective action will be addressed.

2. Corrective steps which will be taken to avoid further non-compliance:

Adherence to the checklists which have been established and to the SyNSOC audit program which is in preparation will preclude further non-compliance in these areas.

3. Date when full compliance will be achieved:

With respect to the item of non-compliance dealing with the failure to provide adequate checklists for auditing the design change program, full compliance has been achieved.

With respect to the failure to establish an auditing program for the SyNSOC, full compliance will be achieved upon completion of the next SyNSOC audit which is required by December 31, 1979.

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C. NRC COMMENT

As required by Technical Specifications 6.4.1 "A retraining and replacement training program for the facility staff shall be maintained under the direction of the Superintendent - Station Operations and shall meet or exceed the requirements and recommendations of Section 5.5 of ANSI N18.1-1971 and Appendix A of 10 CFR Part 55." Procedure ADM-12, Paragraph 12.2.1 requires all regular employees receive retraining and recertified in the listed areas at least once per calendar year.

- Company policy
- Station Contingency
- Station Access Control and Security Procedure
- Radiological Health and Safety
- Protective Clothing and Equipment, Use of
- Industrial Safety
- Quality Assurance Control
- Station Familiarization

Contrary to the above, the program did not provide for training to assure that proficiency was maintained in that 28 of 63 regular operations employees had not received the required retraining/recertification.

Response

The above infraction is correct as stated. Specifically, pursuant to Section 2.201 of the NRC's "Rules of Practice" Part 2, Title 10, Code of Federal Regulations, the following information is submitted:

1. Corrective steps taken and results achieved:

The twenty-eight (28) delinquent individuals all received the required retraining by March 13, 1979.

2. Corrective action taken to avoid further non-compliance:

Station supervisors were instructed to insure that their employees attend retraining sessions when scheduled. In addition, the Training Department was instructed to initiate the action required to have an employee's access authorization to the station rescinded if the employee fails to meet the time requirements for retraining.

3. Date when full compliance will be achieved

Full compliance was achieved on March 13, 1979.

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D. NRC COMMENT

As required by 10 CFR 50.59(b), "The licensee shall maintain records of changes in the facility . . . to the extent that such changes constitute changes in the facility as described in the safety analysis report . . ." and ". . . These records shall include a written safety evaluation which provides the basis for the determination that the change . . . does not involve an unreviewed safety question.

Contrary to the above, as of February 2, 1979, the licensee did not maintain records of changes in the facility including a written safety evaluation as follows:

1. Safety-related temporary modification to the chemical and volume control system (Jumper Log Serial 191) had no documented safety analysis.
2. One design change to the bearing cooling water system (DC-78-11) constituted a change to the facility as described in the safety analysis report. This change had no documented safety analysis.

Response

The above infraction is correct as stated. Specifically, pursuant to Section 2.201 of the NRC's "Rules of Practice" Part 2, Title 10, Code of Federal Regulations, the following information is submitted:

In regards to comment D.1 above:

1. Corrective steps taken and results achieved:

A safety analysis on the temporary modification to the Chemical and Volume Control System (Jumper Log Serial No. 191) was conducted and documented on February 8, 1979. Interim measures were instituted to insure that all temporary modifications receive a safety evaluation if required.

2. Corrective action taken to avoid further non-compliance:

A revision to Section 14 of the Nuclear Power Station Quality Assurance Manual (NPSQAM) which will more clearly define when a safety evaluation must be conducted for temporary modifications is being developed.

3. Date when full compliance will be achieved:

Full compliance will be achieved by August 1, 1979.

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Response (cont'd.)

In regards to comment D.2 above:

1. Corrective steps taken and results achieved:

A Safety Analysis for DC-78-11 has been prepared and submitted for review.

2. Corrective action taken to avoid further non-compliance:

A revision to Sections 2 and 3 of the NPSQAM has been approved and implemented to insure that all required 10 CFR 50.59 safety evaluations are performed on design changes.

3. Date when full compliance will be achieved:

Full compliance has been achieved.

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E. NRC COMMENT

As required by 10 CFR 50, Appendix B, Criterion XI, "... all testing required to demonstrate that structures, systems, and components will perform satisfactorily in service is identified and performed in accordance with written test procedures which incorporate the requirements and acceptance limits contained in applicable design documents. . . . Test results shall be documented and evaluated to assure that test requirements have been satisfied." The accepted Quality Assurance Program Section 17.2.11 states in part: "The test program . . . assures that safety related structures, systems, and components will perform satisfactorily when required. . . . The results are documented, evaluated, acceptance status identified. . . ."

Contrary to the above, as of February 2, 1979, the testing required to demonstrate satisfactory performance was not performed or documented in that:

1. Design Change DC-78-09 (Boric Acid Transfer Pump Insulation) was completed and the pumps placed in service in August 1978; however, the test procedure was not performed.
2. The test results of design change DC-78-06 (Casing Cooling Subsystem of Recirculation Spray System) were not evaluated and documented to indicate the acceptability of data which did not meet the specified acceptance criteria.

Response

The above infraction is correct as stated. Specifically, pursuant to Section 2.201 of the NRC's "Rules of Practice" Part 2, Title 10, Code of Federal Regulations, the following information is submitted:

In regards to comment E.1 above:

1. Corrective steps taken and results achieved:

The maximum surface temperature is not included in the testing procedure. The Heat Tracing specification for North Anna Power Station specifies a maximum surface temperature of 140°F. This requirement was waived for this application by a Field Change.

The Final Design Testing Procedure shall be completed on all four Boric Acid Transfer Pumps when the D boric acid transfer pump is installed. The temperature indications of the Boric acid pump enclosures have been included on the log sheets and readings have been recorded every eight hours since October 1978.

2. Corrective action taken to avoid further non-compliance:

Engineering personnel have been instructed to insure that design change test procedures are performed as required.

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Response (cont'd.)

3. Date when full compliance will be achieved

The test procedure for DC-78-09 will be run following a completion of the design change on D boric acid transfer pump.

In regards to comment E.2 above:

1. Corrective steps taken and results achieved:

The test results of DC-78-06 have been evaluated and accepted, with a written evaluation included as part of the Design Change.

2. Corrective action taken to avoid further non-compliance:

Engineering personnel have been instructed to insure that the required evaluation of test results be performed and documented as required.

3. Date when full compliance will be achieved:

Full compliance has been achieved.

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F. NRC COMMENT

As required by Technical Specification 6.8.2, "Each procedure of 6.8.1 above, and change thereto, shall be reviewed by the SNSOC and approved by the Station Manager prior to implementation . . ." Technical Specification 6.8.1 states in part: "Written procedures shall be established. . . covering . . . a. The applicable procedures recommended in Appendix 'A' of Regulatory Guide 1.33, November, 1972. . . ."

Contrary to the above, the following procedures which are listed as requiring SNSOC review on the procedure index were not reviewed and no evidence of such a review was furnished:

Administrative Procedure 8.0, Fire Prevention

Administrative Procedure 19.0, Adherence to the Health Physics Radiation Protection Manual

Administrative Procedure 25.0, Operation of the Station During Hazardous Conditions

Administrative Procedures in the 29.0 series covering Conduct of Operations

Administrative Procedure 32.0, Nuclear Material Control

Administrative Procedure 34.0, Administrative Controls for Fuel Handling

Procedures for Implementing the North Anna Power Station Planned Maintenance System, Electrical

Response

The above infraction is correct as stated. Specifically, pursuant to Section 2.201 of the NRC's "Rules of Practice" Part 2, Title 10, Code of Federal Regulations, the following information is submitted:

1. Corrective steps taken and results achieved:

A review of the minutes of Station Nuclear Safety and Operating Committee (SNSOC) meetings showed that all the above referenced procedures, and all subsequent revisions to these procedures, had been reviewed by the SNSOC prior to implementation, with the exception of Attachment B of ADM-43.0, the latest revision to ADM-34.0, and the Planned Maintenance System Electrical program. These procedures and the program were subsequently reviewed by the SNSOC.

2. Corrective action taken to avoid further non-compliance:

In order to avoid further non-compliance, ADM-43.11, "Procedure for Station Administrative Procedures", has been revised to require that all Administrative Procedures be reviewed by the SNSOC and an

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Response (cont'd.)

instruction has been included in the Planned Maintenance System-Electrical program requiring that all revisions be approved by the SNSOC prior to implementation.

3. Date when full compliance will be achieved:

Full compliance was achieved on May 21, 1979.

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G. NRC COMMENT

As required by 10 CFR 50, Appendix B, Criterion XIII "Measures shall be established to control the handling, storage, shipping, cleaning and preservation of material and equipment in accordance with work and inspection instructions to prevent damage or deterioration." The accepted Quality Assurance Program, Section 17.2.0.2, Table 17.2.0 states in part that it "conforms as clarified in ANSI N45.2.2-1972, . . . "ANSI N45.2.2-1972, Section 7 (Handling), Paragraph 7.3, (Hoisting Equipment) states in part: "Hoisting equipment used for handling shall be certified by the manufacturer"; and Paragraph 7.4 (Inspection of Equipment and Rigging) states in part: "An inspection program shall be established for equipment and rigging."

Contrary to the above, no inspection program had been established for handling equipment and rigging used for safety-related equipment, nor could it be determined that the handling equipment had been certified by the manufacturer.

Response

The above infraction is correct as stated. Specifically, pursuant to Section 2.201 of the NRC's "Rules of Practice" Part 2, Title 10, Code of Federal Regulations, the following information is submitted:

1. Corrective steps taken and results achieved:

A program to identify hoisting and rigging equipment and inspect and certify such equipment is being developed.

2. Corrective action taken to avoid further non-compliance:

Implementation of the above mentioned program should avoid further non-compliance.

3. Date when full compliance will be achieved:

Full compliance will be achieved by July 1, 1979.

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H. NRC COMMENT

As required by 10 CFR 50, Appendix B, Criterion V, "Activities affecting quality shall be prescribed by documented instructions, procedures, or drawings of a type appropriate to the circumstances and shall be accomplished in accordance with these instructions, procedures, or drawings." The accepted Quality Assurance Program, Section 17.2.5 states in part: "Section 5 of the Nuclear Power Station Quality Assurance Manual (NPSQAM), describes the sequence of actions and the requirements for developing, reviewing, approving, and controlling procedures . . ." NPSQAM Section 5, Paragraph 5.0 states in part: "Each nuclear power plant shall be operated and maintained in accordance with written procedures . . ."

1. NPSQAM Section 7, Paragraph 4.3 requires that all material or equipment purchased by receipt inspected by store personnel and accepted by the Quality Assurance Staff.

Contrary to the above, safety related valves and pipe flanges were obtained from Unit 2 construction warehouse for use in Unit 1 without the required receipt inspection or QA acceptance.

2. The accepted Quality Assurance Program (17.2.6) states in part: "Measures are established . . . describing the control of documents, . . . to provide for their review, approval and issue . . . prior to release . . ." and ". . . Instructions require that a copy of the appropriate procedure be available at the activity location prior to the commencement of that activity. . . ."

Contrary to the above, as of February 2, 1979, measures did not assure documents were approved for release and used at the location where the prescribed activity was performed in that the design change DC-78-09 (Boric Acid Pump Insulation) was implemented prior to the approval of the final design controlling procedure.

3. The accepted Quality Assurance Program Section 17.2.6 states in part ". . . Procedures and drawings and changes thereto are processed, distributed and controlled by the Station Records Department . . ." The same Section of the program further states in part ". . . Section 6, 'Document Control of the Nuclear Power Station Quality Assurance Manual lists and defines certain documents that require strict administrative control for distribution, revision and routing . . . These documents are: Station Procedures, . . . Station Drawings. . . ."

Contrary to the above Station Drawings were not controlled in that on February 2, 1979, two of three safety-related drawings selected that were maintained by the Electric Shop contained later revisions than the same drawings in the Station file.

4. The accepted Quality Assurance Program Section 17.2.3 states in part: ". . . The Nuclear Power Station Quality Assurance Manual establishes measures for the selection and review for suitability of application of materials, parts, equipment and processes that are essential to the safety-related functions of the systems,

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NRC COMMENT (cont'd.)

structures and components. The NPSQAM Section 3, Paragraph 5.7.5 states in part: "The materials required to complete the design changes shall be tabulated on the "Materials List" form . . ."

Contrary to the above, as of February 2, 1979, measures were not established for the selection and review for suitability of application of materials in that the final design for design change DC-78-09 (Boric Acid Pump Insulation) required the installation of a calibrated thermometer yet the materials list included no thermometer. It was noted that a metallic strip was installed.

Response:

The above infraction is correct as stated. Specifically, pursuant to Section 2.201 of the NRC's "Rules of Practice" Part 2, Title 10, Code of Federal Regulations, the following information is submitted:

In regards to comment H.1 above:

1. Corrective steps taken and results achieved:

As noted in the Notice of Violation referenced above, the receipt of certain material received from construction program have been improperly processed. Changes to the Nuclear Power Station Quality Assurance Manual, (NPSQAM), Section 7, article 4.1 and 4.3 have been approved and implemented which specify the processing of materials obtained locally and enables Q. C. personnel to perform certain scores functions in certain specified situations. Other existing requirements relative to this infraction have been re-emphasized for all personnel involved in the handling and processing of materials in this regard.

2. Corrective action taken to avoid further non-compliance:

We believe that the above listed corrective steps will be sufficient.

3. Date when full compliance will be achieved:

Full compliance has been achieved.

In regards to comment H.2 above:

1. Corrective steps taken and results achieved:

Immediate corrective action was taken prior to the completion of the inspection and was reviewed by the inspector.

2. Corrective action taken to avoid further non-compliance:

Engineering personnel have been instructed not to release design change material for implementation until the design change package has been approved by the appropriate organization.

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Response (cont'd.)

3. Date when full compliance will be achieved:

Full compliance has been achieved.

In regards to comment H.3 above:

1. Corrective steps taken and results achieved:

Under the document control program in effect at the station, all ESK's and other similar drawings are considered "Controlled Documents" unless they are stamped "Not A Controlled Document". The stamps the inspector observed are "Controlled" stamps used by Stone and Webster (S & W), the project A-E, who presently supplies the station with the latest revisions of drawings. All drawings received from S & W since January 1978 have been stamped with this stamp. Any drawings received prior to January 1978 will not have this stamp. However, this stamp has nothing to do with the station document control program.

A check of the drawings was made following the inspectors exit critique. The Station Records had copies of drawings 11715-ESK-1T, 4JE & 5J were found to be the latest revisions and in agreement with the copies in the Electrical Shop. However, it was discovered that the Station Records file contained both Rev. 4 and 5 of 11715-ESK-4JE, due to the fact that the records clerk had failed to remove the superceded revision, and that the aperture card for this drawing was Rev. 4. In addition, it was discovered that, while the hard copy drawing of 11715-ESK-5J was Rev. 10, there was no aperture card for this drawing. The superceded revision of 11715-ESK-4JE was removed from the file and aperture cards for 11715-ESK-5J, Rev. 10 and 11715-ESK-4JE, Rev. 5 were ordered from S & W.

2. Corrective action taken to avoid further non-compliance:

In order to avoid further non-compliance, Station Records conducted a check of all aperture cards and drawings to insure that the Station Records file contained the latest revision. In addition, a check of the drawings in the Electric Shop was conducted. QA audits of drawings are also conducted on a routine basis.

3. Date when full compliance will be achieved:

Full compliance on control of the above listed drawings was achieved on February 24, 1979.

In regards to comment H.4 above:

1. Corrective steps taken and results achieved:

A field change to the design change adding the temperature indicator to the materials list was initiated and approved.

2. Corrective action taken to avoid further non-compliance:

Engineering personnel have been instructed that all materials required

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Response (Cont'd.)

for a design change are included on the materials list.

3. Date when full compliance will be achieved:

Full compliance has been achieved.

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I. NRC COMMENT

As required by 10 CFR 50, Appendix E, Criterion XVII, Sufficient records shall be maintained to furnish evidence of activities affecting quality. The records shall include at least the following: Operating Logs and the results of reviews, inspections, tests, audits, monitoring of work performance, and materials analysis. "The accepted Quality Assurance Program (17.2.17) states in part: "Quality Assurance records . . . are maintained in accordance with the Technical Specifications and the Nuclear Power Station Quality Assurance Manual. These records include . . . operating logs; results of reviews, inspections, tests, audits and material analysis; monitoring of work performance, . . ." ANSI N45.2.12 (Draft 3 Revision 4-1974), as cited to by the accepted Q₁ Program, states: . . . 4.4.3 Persons contacted during pre-audit, audit and post-audit activities . . ."

Contrary to the above, records documenting activities affecting quality were not maintained for the following items:

1. Records of required design change package reviews were not completed for four (4) design changes, each of which had been implemented from six (6) to nine (9) months prior to this inspection.
2. No documentary evidence existed in 11 of 13 audits identifying those persons contacted for pre-audit conferences.

Response

In regards to comment I.1 above, after evaluation it is our conclusion that we are not in violation of the requirements of 10 CFR 50, Appendix E, Criterion XVII, Section 17.2.17 of the accepted Q₁ program or NPSQM Section 3, Paragraph 5.8, in that the final review of the design change package is not required until the entire design change, including controlled document revision, has been implemented. In the case of the four (4) design changes cited (DC-78-01, DC-78-06, DC-78-09, and DC-78-27), the design had not been fully implemented, in that certain controlled documents, such as System Descriptions, have not yet been revised. Therefore, in accordance with NPSQM Section 3, Paragraph 5.8, the final review of these design changes has not been performed. As soon as the entire design change has been implemented, these design changes will receive the required reviews and these reviews will be documented.

In regards to comment I.2 above, the deficiency is correct as stated. Specifically pursuant to Section 2.201 of the NRC's "Rules of Practice" Part 2, Title 10, Code of Federal Regulations, the following information is submitted:

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Response (Cont'd.)

1. Corrective steps which have been taken and results achieved:

As indicated in the Notice of Violation referenced above, the attendance of preaudit conferences have not been formally documented. Revisions to the Nuclear Power Station Quality Assurance Manual (NPSQAM), Section 18, Articles 5.3, 5.4, and 6.0 have been approved and implemented which provide for a specialized means of recording the names of all significant parties contacted in the course of an audit during the pre-audit conference, conduction of audit activities, and post-audit conference.

2. Corrective steps which will be taken to avoid further non-compliance

We believe that the above listed corrective steps will be sufficient.

3. Date when full compliance will be achieved:

Full compliance has been achieved.

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J. NRC COMMENT

As required by 10 CFR 50, Appendix B, Criterion VI, "Measures shall be established to control the issuance of documents . . . These measures shall assure that documents are reviewed for adequacy . . ." The accepted Quality Assurance Program, Section 17.2.17, states in part: "The requirements . . . for record transmittals . . . conform to Regulatory Guide 1.68, August 1974 . . ." Regulatory Guide 1.68 endorses ANSI N45.2.9-1974, ANSI N45.2.9 Paragraph 4.3 states in part: ". . . As a minimum, a receipt control system shall include: 1. A records check list designating the required quality assurance records . . ."

Contrary to the above, measures had not been established to control the issuance of documents by construction to the licensee in that no methods existed to designate the individual records included in any specific package of records material.

Response

The above deficiency is correct as stated. Specifically, pursuant to Section 2.201 of the NRC's "Rules of Practice" Part 2, Title 10, Code of Federal Regulations, the following information is submitted:

1. Corrective steps taken and results achieved:

Project Operating Procedure (POP) 716, "Quality Assurance Records Turnover" was revised on April 16, 1979 to specify a control mechanism to verify completeness of construction records when received. In addition, an audit of completed microfilm copies of construction records previously received was conducted on April 17, 1979, with no incomplete records found. An inspection conducted by Mr. W. A. Fuhlman (50-339/79-29) on May 15, 1979 closed this same item (50-339/79-11-20) cited against Unit No. 2.

2. Corrective action taken to avoid further non-compliance:

The revision of POP-716, referenced above, will prevent further non-compliance.

3. Date when full compliance will be achieved:

Full compliance was achieved on April 16, 1979.

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NRC COMMENT

As required by 10 CFR 50, Appendix B, Criterion X, "A Program for inspection of activities affecting quality shall be established and executed by or for the organization performing the activity to verify conformance with the documented instructions, procedures, and drawings for accomplishing the activity". The accepted Quality Assurance Program, Section 17.2.10 states in part: "Inspection procedures for those activities affecting quality have been established and are included in the Nuclear Power Station Quality Assurance Manual Section 13, Paragraph 5.2.5 of the NPSQAM states, "Items in storage shall be periodically inspected to ensure the integrity of packaging, including end caps for piping, vapor barrier integrity, or preservatives when used." Additionally, paragraph 5.5.2 (3) states: "Where pipe caps are used, these caps shall be maintained in place until they interfere with the fabrication process."

Contrary to the above, the licensee failed to establish a procedure for the required inspections. Additionally, pipe caps were not installed on safety-related pipe in Level B Storage to provide protection against the elements, airborne contamination, and physical damage.

Response

The above deficiency is correct as stated. Specifically, pursuant to Section 2.201 of the NRC's "Rules of Practice" Part 2, Title 10, Code of Federal Regulations, the following information is submitted:

1. Corrective action which have been taken and results achieved:

Immediate corrective action was taken and verified by the involved NRC inspector.

2. Corrective steps which will be taken to avoid further non-compliance:

To insure QC inspection in this area, a question directed at the subject of capping safety related pipe in storage has been submitted for inclusion in the standardized audit checklist for the area of material receipt and storage. The need for periodic surveillance in this area has been brought to the attention of station Q. C. personnel responsible for quality control functions in the areas of procurement and material receipt/storage.

3. Date when full compliance will be achieved:

Full compliance has been achieved by June 15, 1979.

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L. NRC COMMENT

As required by 10 CFR 50, Appendix B, Criterion I, "... The authority and duties of persons ... performing activities. ... shall be clearly established and delineated in writing. ... The quality assurance functions are those of (.) assuring that an appropriate quality assurance program is established and effectively executed. ...". The accepted Quality Assurance Program, Section 17.2.1.3.3 states in part under the duties and responsibilities of the Resident Quality Control Engineer, that he "4) perform specific quality assurance functions for the Station Manager (i.e. ... procedure review ...) as specified in the Nuclear Power Station Quality Assurance Manual (NPSQAM). Section 4.3.b states in part that the role of the Station Resident Quality Control Engineer is to "Provide on a continuous basis, objective specified quality assurance and quality control services. ... (Examples: ... procedure reviews ...)".

Contrary to the above, the quality assurance function of assuring that an appropriate quality assurance program is established and executed had not been performed as of January 31, 1979, in that procedures implementing that quality assurance program had not been reviewed by the quality assurance organization. Specifically, Administrative Procedures 12.0 (Station Training), 37.0 (Control of Work and Special Processes), 39.0 (Station Drawing Revision Distribution), 43.0 (Records Management), and 45.0 (Housekeeping) had not been reviewed.

Response

The above deficiency is correct as stated. Specifically, pursuant to Section 2.201 of the NRC's "Rules of Practice" Part 2, Title 10, Code of Federal Regulations, the following information is submitted:

1. Corrective steps which have been taken and results achieved:

Immediate corrective action was taken and verified by the involved NRC inspector.

2. Corrective steps which will be taken to avoid further non-compliance:

To prevent recurrence, a revision to the Nuclear Power Station Quality Assurance Manual (NPSQAM), Section 5, article 5.9 has been approved and implemented which modifies the routing for review and approval of all completed procedure change proposals to require the review of same by the Station Resident Quality Control Engineer.

3. Date when full compliance will be achieved:

Full compliance has been achieved by July 1, 1979.

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