

PHILADELPHIA ELECTRIC COMPANY

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SHIELDS L. DALTROFF
VICE PRESIDENT
ELECTRIC PRODUCTION

(215) 841-5001

October 9, 1979

Re: Docket Nos.: 50-277
50-278

Inspection No.: 50-277/79-13
50-278/79-15

Mr. Boyce H. Grier, Director
Office of Inspection & Enforcement
U.S. Nuclear Regulatory Commission
Region I
631 Park Avenue
King of Prussia, PA 19406

Dear Mr. Grier:

Your letter of September 17, 1979 forwarded combined Inspection Reports 50-277/79-13 and 50-278/79-15. Appendix A to your letter addresses four items which did not appear to be in full compliance with Nuclear Regulatory Commission requirements. These four items are categorized as infractions and are restated below with our response.

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

Procedure A-2, for the control of procedures, Revision 14, Paragraph 5(A) states that shift personnel shall follow the controlled procedures to perform plant operations.

Surveillance test (ST) 10.4, relief valve manual actuation, test results, section A, states that the signatures of this section signify that all the asterisked and "ISI letter I" steps were completed satisfactorily; and section B states that if any asterisked or ISI letter I step was completed unsatisfactorily then shift supervision and the plant

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superintendent or alternate shall be notified immediately. ST 10.4 also states that Table 2 required data be recorded before and after the relief valve test.

Contrary to the above:

- ST 10.4, performed May 19, 1978, was signed off as being satisfactorily complete by the control room operator, who performed the test, shift supervision, and plant staff supervision without the required data being recorded in Table 2.
- ST 10.4, performed June 16, 1979, was signed off as being satisfactorily completed by the performer of the test and shift supervision without the acceptance criteria of the only asterisked I step in the test not being satisfied. Further, the notifications required as a result of the unsatisfactory completion of an asterisked I step were not made.
- ST 10.4, performed June 21, 1979, as a result of the unsatisfactory completion of the June 16, 1979 test was signed as being completed satisfactorily by the person who performed the test and shift supervision without the required post test table 2 data being recorded. Also, Table 3 acceptance data was not intelligible.

Response

This item of noncompliance was investigated and it was determined that the shift personnel involved failed to properly follow the procedure.

The personnel involved with this performance of the surveillance test have been instructed on the importance of completely, legibly, and accurately signing off surveillance tests and of prompt notification of plant staff, if required.

In addition, the surveillance test was revised on August 1, 1979 to more clearly define within the procedure the steps that must be taken by the personnel performing the test to assure acceptance criteria are satisfied. This revision has been discussed with the shift personnel responsible for performing this test.

Finally, the test format was completely revised to clarify the test and clearly define the data to be recorded for each portion of the test. The surveillance test revisions and the instructions given to shift personnel should prevent any recurrence of this item.

1509 224

- B. 10 CFR 50, Appendix B, Criterion XVI states in part: "Measures shall be established to assure that conditions adverse to quality...are promptly...corrected..." The accepted Quality Assurance Program Description, FSAR Section 17.B.9.d states in part: "...The PECO QA Program accepts for close out of an audit finding of an unsatisfactory situation only completed corrective action...The audited organization is required to report to PECO the action taken, normally within 45 days or the date of the audit transmittal letter...."

QAI 18-6, Revision 0, July 10, 1978, Section 6.9.3 states in part: "...if requested by the audited organization...the Audit Team Chairman may extend the due date...." Section 6.9.5 states in part: "When a response becomes 30 days overdue the Audit Team Chairman shall prepare a letter for signature by the Manager, Quality Assurance, requesting the audited organization...to take immediate action to report corrective action taken." and Section 6.8.5.6 states "The transmittal letter shall include the number of days from the date of the transmittal letter when corrective action taken must be reported (normally 30 days)."

Contrary to the above, corrective action with respect to findings on the following audit reports were not received within 45 working days, or the time frame specified on the transmittal letter, did not have requests for extension submitted by the audited organization, and did not have followup letter submitted by the auditing organization requesting corrective action reports.

Audit Report

Report Issued

OP-34	June 6, 1978
OP-36	June 2, 1978
OP-57	February 14, 1979
OP-50	February 14, 1979
OP-26	*June 30, 1977

- * For the purpose of this inspection, corrective action time "0" was July 10, 1978 which was the date QAI 18.6 was issued.

Response

Engineering and Research Quality Assurance has taken the following steps to correct this situation. 1509 225

- By memo of July 19, 1979 the Manager, Engineering & Research/Quality Assurance notified PECO Engineering &

Research Division heads of the necessity for timely responses to audit finding reports.

- Quality Assurance Instruction 18-6 was revised on July 29, 1979 to clarify the requirements for follow up of issued finding reports. Computerized open finding logs are now used as a monthly reminder of open finding reports: a standardized follow up letter has been provided for routine use; and periodic status reports are now required from the responsible organization when there is a delay in reporting corrective action associated with the finding.
- Quality Assurance Instruction 17-3 was revised on July 27, 1979 to require timely updating of the computerized finding report data base and monthly issuance of open finding logs to the responsible quality assurance engineers.
- The Manager E & R Quality Assurance has instructed quality assurance engineers in a specially called meeting as to the necessity of follow up of open finding reports as required by the Quality Assurance Instructions.

Since the above steps have been taken, there has been improvement in the timeliness of both QA follow up of open findings and responses by audited organizations. Continuing QA management monitoring of this area is expected to result in full compliance by November 1, 1979.

- C. 10 CFR 50, Appendix B, Criterion II states in part: "The applicant shall establish...a quality assurance program... This program shall be documented by written policies...and shall be carried out in accordance with those policies...."

"The Accepted Quality Assurance Program Description, FSAR Section 17.2.B.9 states in part: "the engineering and research department follows the guidance of ANSI N45.2.12...."

ANSI N45.2.12, section 4.4.6 states in part: "The audit report shall be issued within 30 days after the audit."

Contrary to the above the following audit reports were issued in excess of 30 working days after the audit.

Audit Reports

Audit Ended

Report Issued

OP-35

6-6-78

8-1-78

1509 226

OP-49	12-5-78	3-12-79
OP-50	10-4-78	2-14-79
OP-53	11-9-78	1-3-79
OP-54	11-29-78	2-27-79
OP-58	2-7-77	5-1-79

Response

In a special meeting, the Manager Quality Assurance has reminded Quality Assurance engineers of the PECO commitment to ANSI N45.2.12 and of the requirements for issuing audit reports contained in Quality Assurance Instruction 18-6. Continuing QA management monitoring of this area is expected to result in full compliance for audits conducted on or after October 1, 1979.

It should be noted that the infraction states that Audit Report OP-58 ended on 2-7-77 with the report issued 5-1-79. We believe this is a typographical error because our records show audit OP-58 ended on 2-7-79.

- D. 10 CFR 50, Appendix D, Criterion XIII, states in part: "measures shall be established to control the...storage...of material and equipment...to prevent damage or deterioration..." PBAPS FSAR, section 17.2, Appendix 17.2.A, paragraph 9, states in part: "PECO shall comply with Regulatory Guide 1.38, 3/16/73, and ANSI N45.2.2-1972..." ANSI N45.2.2, paragraph 6.2.2 states in part: "cleanliness and good housekeeping practices shall be enforced at all times in the storage areas. The storage areas shall be cleaned as required to avoid the accumulation of trash, discarded packaging materials..." Paragraph 6.3.1 states in part: "All items shall be stored in such a manner as to...minimize risk of damage." Paragraph 6.3.3 states in part that "hazardous chemicals, paints, solvents, and other materials of a like nature shall be stored in well ventilated areas which are not in close proximity to important nuclear plant items."

Contrary to the above, the following general conditions existed in the Stores Division Storeroom in the South Warehouse on June 18, 1979:

- Used beverage containers, discarded packing material, and other trash consisting of paper and cardboard littered the storeroom.
- Several containers of flammable liquid was stored next to acceptable Q-listed material and in close proximity to the above mentioned accumulation of trash.

1509 227

- Many accepted Q-listed items (O-rings, small electrical components) were stored in a large cardboard box. Larger heavy metal items were stored on top in this same container in such a manner as to easily cause damage to the other items stored.

Response:

The cause of the occurrence is personnel oversight. The personnel involved failed to follow Stores Division Procedure (SD-1), which describes the proper handling of credit material. The General Storekeeper has reviewed this procedure with storeroom personnel and stressed its importance. He also discussed the need for good housekeeping in areas containing Quality Assured material. The QA material was immediately removed to the QA hold area and tagged with "Hold for QA Clearance" tags. It has subsequently been inspected to insure its undamaged condition and traceability, and placed in stock.

The housekeeping deficiencies were corrected immediately, as noted by the inspector in his report. Housekeeping in storage areas containing Quality Assured material is a major part of procedure SDA-5, which is regularly checked by stores division supervision. The general storekeeper, who is responsible for housekeeping in the warehouse areas, has been instructed to assign a high priority to the maintenance of good housekeeping in the QA storage areas.

The actions described above in each response will compliment and strengthen the management control system.

Very truly yours,

