

TENNESSEE VALLEY AUTHORITY
ATLANTA REGION
CHATTANOOGA, TENNESSEE 37401
400 Chestnut Street Tower II

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October 14, 1982

U.S. Nuclear Regulatory Commission
Region II
ATTN: James P. O'Reilly, Regional Administrator
101 Marietta Street, Suite 3100
Atlanta, Georgia 30303

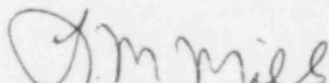
Dear Mr. O'Reilly:

Please reference my letters to you dated June 10 and August 18, 1982 regarding Browns Ferry Inspection Report Nos. 50-259/82-10, -260/82-10, -296/82-10. Enclosed is our supplemental response to Item B of the Notice of Violation. This supplemental response was discussed with Ross Butcher of your staff on October 1, 1982. If you have any questions, please call Jim Domer at FTS 858-2725.

To the best of my knowledge, I declare the statements contained herein are complete and true.

Very truly yours,

TENNESSEE VALLEY AUTHORITY


L. M. Mills, Manager
Nuclear Licensing

Enclosure

SUPPLEMENTAL RESPONSE - NRC INSPECTION REPORT NOS.
50-259/82-10, 50-260/82-10, AND 50-296/82-10
F. J. LONG'S LETTER TO H. G. PARRIS
DATED APRIL 29, 1982

APPENDIX A

Item B - (259/82-10-02, 260/82-10-02, 296/82-10-02)

10 CFR 50, Appendix B Criterion V and the accepted QA Program Section 17.2.5 require that activities affecting quality be accomplished in accordance with documented procedures. Implementing procedure QAAS-QAP-3.1, Quality Audit Program, Revision 8, and ANSI N45.2-12, Draft 3, Revision 4, committed to by the accepted QA Program require the audited organization to provide the date when corrective action will be completed.

Contrary to the above, in three out of six audits reviewed by the inspector, the audited organization's response did not provide the expected completion date for each proposed correction action nor did the auditing organization request a supplemental response to provide this missing information. The deficient responses involved the following audits: OPQAA-BF-81TS-02, Findings A1, A2, A6; OPQAA-BF-81TS-05, Finding A2; and OPQAA-CH-8100-05, Finding A15, A16.

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

1. Admission or Denial of the Alleged Violation

TVA admits the violation occurred as stated.

2. Reasons for the Violation if Admitted

The plant failed to promptly identify and incorporate the June 30, 1981 revision to OQAM Part III, Section 5.1 concerning assignment of corrective action into either a plant standard practice or administrative instruction implementing procedure, although the OQAM gave sufficient detail to identify the requirement for assigning due dates. The Division of Nuclear Power Central Office (NCO), which performs response verification functions associated with such audits, failed to place adequate enforcement emphasis on assignment of due dates associated with Office of Power Quality Assurance and Audit Staff (OPQA&AS) audits. Requests were not made by OPQA&AS for supplemental responses requiring due dates, due to failure of OPQA&AS personnel to enforce their guiding documents. At the time of the violation, both the plant and the NCO were already in the process of reviewing all audit findings, including OPQA&AS, and incorporating administrative due dates where target or commitment dates were missing. In addition, interface between OPQA&AS and NCO had already been established to address this concern.

3. Corrective Steps Which Have Been Taken and the Results Achieved

As an interim measure, the plant issued on March 30, 1982 Standard Practice BF 15.17, establishing a standard format for responding to OPQA&AS audit findings. This change to the standard practice to correct this deficiency had been initiated before this inspection recognized the inconsistency in past responses to OPQA&AS audits. The plant has completed making administrative assignments for all outstanding OPQA&AS actions having site responsibility. The NCO completed making administrative assignments to all auditing areas on September 1, 1982. The NCO also established a division-level policy on program matrices and schedule for implementing the policy on October 1, 1982. This policy identifies source documents and related implementing documents.

Several OPQA&AS training sessions have been held covering acceptable responses per OP-QAP-3.1, with due dates being a prime requirement.

4. Corrective Steps Which Will Be Taken To Avoid Further Violations

To establish a division-level policy for correctly and consistently responding to Office of Quality Assurance (OQA) audit responses, Division Procedures Manual (DPM) N82A3, Compliance Management, will be revised by January 1, 1983 to include the required content, format, and reporting requirements that all organizations will follow in responding to OQA audits.

5. Date When Full Compliance Will Be Achieved

Full compliance for this item was achieved on March 30, 1982 when the revision to Standard Practice BF 15.17 was implemented to correct this deficiency.