

USNRC REGION II  
ATLANTA, GEORGIA



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May 6, 1982  
L-82-185

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

Dear Mr. O'Reilly:

Re: Turkey Point Units 3 & 4  
Docket Nos. 50-250, 50-251  
IE Inspection Report 82-07

Florida Power & Light Company has reviewed the subject inspection report and a response is attached.

There is no proprietary information in the report.

Very truly yours,

A handwritten signature in cursive script, appearing to read "Robert E. Uhrig", with a small "or" written below it.

Robert E. Uhrig  
Vice President  
Advanced Systems & Technology

REU/PLP/mbd

Attachment

cc: Harold F. Reis, Esquire

8205280290

## ATTACHMENT

RE: TURKEY POINT UNITS 3 AND 4  
DOCKET NOS. 50-250, 50-251  
IE INSPECTION REPORT 82-07

### FINDING A:

Technical Specification 6.5.1.6.a requires that the PNSC review changes to safety related maintenance procedures as identified in Appendix "A" of USNRC Regulatory Guide 1.33. Also, 10 CFR 50, Appendix B, Criterion V and the accepted QA Program, TQR 5.0, requires that procedures shall include appropriate quantitative acceptance criteria for determining that important activities have been satisfactorily completed.

Contrary to the above, procedure changes were inadequately reviewed by the PNSC which resulted in a procedure which does not include appropriate quantitative acceptance criteria in that the PNSC review, dated July 7, 1978, and December 10, 1981, of two changes to Maintenance Procedure 1207.1, Pressurizer Safety Valve Repair and Setting, did not adequately evaluate the procedural effects of the changes. Both changes removed the quantitative acceptance criteria for torquing the inlet and outlet flanges of the pressurizer safety valves without providing alternative quantitative acceptance criteria.

### RESPONSE:

1. FPL concurs with the finding.
2. The PNSC reviewed and recommended approval of the procedure change deleting the acceptance criteria for torque values because there is physically no way to use a torque wrench on the bolts involved.
3. As corrective action, an investigation and engineering evaluation was performed into what torque values could be expected from the current bolting practice. It was determined that the present torque value is within safe operating limits and that the present torque value combined with relief conditions does not overstress the studs.
4. As corrective action to prevent recurrence, Maintenance Procedure 1207.1 will be modified to include the specific impact wrench size and the allowable torque value expected within allowable limits.
5. Full compliance was achieved on March 5, 1982.

### FINDING B:

10 CFR 50, Appendix B, Criterion XVI and the accepted QA Program, TQR 16.0, require that measures be established to assure that conditions adverse to quality are promptly identified and corrected.

Contrary to the above, although measures have been established to assure conditions adverse to quality are promptly identified, they were not promptly corrected in that findings for audits QA0-PTP-81-01-328 (conducted January

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1981) and QAO-PTP-81-07-354 (conducted July 1981) have not been corrected as of March 4, 1982. These findings were brought to management's attention in October 1981 (letter QAO-PTP-81-094).

RESPONSE:

1. FPL concurs with the finding.
2. The reason for the finding was that, although action was in progress which would correct the conditions, due to other priority demands on our resources, the actions were not yet completed.
3. As corrective action, we have continued to pursue resolution of the conditions noted in the audits. In addition, we have modified the format of the Corrective Action Status Report to include a section on problem areas in order to facilitate management attention to appropriate items.
4. In order to prevent recurrence, the corrective action area will be reaudited within six months.
5. Full compliance was achieved on April 27, 1982.

FINDING C:

10 CFR 50, Appendix B, Criterion XVII and the accepted QA Program, TQR 17.0, require that sufficient records shall be maintained to furnish evidence of activities affecting quality. Technical Specification Table 4.1-1 requires monthly checks of the power operated relief valve position indicators and the safety valve position indicators.

Contrary to the above, control room operators are observing these valve indicators but they are not documenting their observations.

RESPONSE:

1. FPL concurs with the finding.
2. The reason for the finding was that the license amendment which instituted these new surveillance requirements was not fully implemented in a timely enough manner.
3. As corrective action, a change to Operating Procedure 0204.2 was drafted and reviewed by the Plant Nuclear Safety Committee which will provide for documenting each shift the check of the power operated relief valve position indicators and the pressurizer safety valve position indicators.
4. In order to prevent recurrence, the change to Operating Procedure 0204.2 will be issued and implemented.
5. Full compliance will be achieved when Operating Procedure 0204.2 is issued which will be by May 7, 1982.

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FINDING D:

Technical Specification 6.5 delineates review and audit functions performed by the Plant Nuclear Safety Committee (PNSC).

1. Technical Specification 6.5.1.3 requires alternate members shall be appointed in writing by the PNSC Chairman.

Contrary to the above, PNSC Meeting 81-44 was conducted with an alternate that was not approved for the person he was replacing.

2. Technical Specification 6.5.1.5 requires a quorum of the PNSC shall consist of the Chairman or Vice Chairman and four (4) members including alternates.

Contrary to the above, PNSC Meeting 81-88 was conducted with only four members constituting a quorum.

EXAMPLE 1:

1. FPL concurs with the finding.
2. The finding occurred on July 2, 1981, because the plant management staff had just been significantly temporarily re-organized and the PNSC secretary indicated the alternate was replacing an individual who had just been moved to another position. The alternate had been designated as a substitute for the individual in his old position but not in his new position.
3. No specific corrective action was taken in this single instance of random oversight in designating a bonifide alternate for the inappropriate incumbent for a position. This oversight, which was discovered during an audit performed well after the event, occurred as a result of transitory conditions which are not likely to recur in this manner.
4. Additional corrective action consist of heightened awareness of and attention to verifying and documenting the presence of a legal quorum as the first act of each PNSC meeting.
5. Full compliance was achieved on January 31, 1982.

EXAMPLE 2:

1. FPL concurs with the finding.
2. The finding occurred due to oversight.
3. The corrective action taken was to review and discuss all items discussed during the December 31, 1981 meeting with a fifth PNSC member, who concurred in all cases. This was done prior to issuing the minutes for the meeting and is documented in the minutes.

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4. No additional corrective action to prevent recurrence was necessary because this item was identified and corrected by FPL and is an isolated incident.
5. Full compliance was achieved on January 31, 1982.