10CFR50.54(a)(3)

PECO ENERGY

PECO Energy Company
Nuclear Group Headquarters
965 Chesterbrook Boulevard
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Docket Nos. 50-277
50-278
50-352
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License Nos. DPR-44
DPR-56
NPF-39
NPF-85

U. S. Nuclear Regulatory Commission
Attn: Document Control Desk
Washington, DC 20555

Subject: Peach Bottom Atomic Power Station, Units 2 and 3
Limerick Generating Station, Units 1 and 2
Request for Approval to Change the Quality Assurance Program Description by Transferring the Closure Reviews of Non-Conformance Reports

Dear Sir:

This letter is submitted in accordance with 10CFR50.54(a)(3), which requires prior NRC approval for any change which reduces the commitments in a previously accepted Quality Assurance (QA) Program description.

PECO Energy Company is proposing to transfer the review of non-conformance reports (NCR) closure from the independent Nuclear Quality Assurance (NQA) organization to the line organization. This proposed change is a reduction in commitment in the NRC approved Peach Bottom Atomic Power Station (PBAPS) and Limerick Generating Station (LGS) QA Program Descriptions. However, this change does not decrease the PECO Energy Company commitment to 10CFR50, Appendix B. We are, therefore, requesting NRC approval of this change in accordance with 10CFR50.54(a)(3). These commitments are specifically described in Appendix D of the PBAPS Updated Final Safety Analysis Report (UFSAR) and Chapter 17.2 of the LGS UFSAR.

We have determined that assigning this review responsibility entirely to the line organizations will result in more efficient and effective use of resources as well as ensuring that the reviews are done by those personnel who are accountable for the adequacy of decisions made in the NCR process.

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Under the current NCR process, NQA reviews NCRs prior to closure. This NQA review is redundant to the line organizations' disposition and review process. Our experience at both PBAPS and LGS is that the line organizations' execution of this important element has resulted in few NQA review comments over time. Therefore, the value added by the NQA review is low. The goal of this new plan is to ensure continued high quality performance by the line organizations and to eliminate the redundant review by NQA.

NQA is working closely with the line organizations to develop and implement a transition plan for assigning review responsibility entirely to the line organizations. This transition plan will ensure that the quality of NCRs at final closure remains at or above the level currently provided. The line organizations will continue to review each NCR to assure the approved disposition adequately addresses the concerns and has been properly implemented, and to identify significant conditions requiring further action. The line organization review of quality related NCRs is similar to the line organization review of 50.59 evaluations. Upon NRC approval, NQA will begin reviewing samples of NCRs to confirm the adequacy of the line organizations' reviews. The controlling administrative procedures will be revised prior to implementing the change.

As part of the transition plan, training will be implemented to reinforce the line organizations' responsibilities for proper closure review for NCRs. The transition plan includes the development of self-assessment criteria for use by line organizations to evaluate their performance. After the transition period, NQA will continue to periodically assess this area as part of their assessment of the QA Program.

The proposed changes to the QA Program Descriptions are provided in Attachments 1 and 2.

If you have any questions or need additional information, please contact us.

Very truly yours,

G. A. Hunger, Jr.

G. A. Hunger, Jr.
Director - Licensing

Attachments

cc: T. T. Martin, Administrator, Region I, USNRC
W. L. Schmidt, USNRC Senior Resident Inspector, PBAPS
N. S. Perry, USNRC Senior Resident Inspector, LGS
M. C. Modes, Region 1, USNRC

ATTACHMENT 1

PEACH BOTTOM ATOMIC POWER STATION
MARK UP OF QA PROGRAM DESCRIPTION REVISION 12

5. Identify the need for the preparation of NQA procedure supplements relating to QV activities.

6. Ensure that the personnel involved in the implementation of the Quality Verification Activities are trained, qualified, and certified to perform assigned activities.

7. Ensure that verification results are documented in accordance with NQA procedures, and unacceptable results are identified and rescheduled in verifications, as appropriate.

8. Review of work requests for inclusion of QA Program requirements and QV activities.

9. Document conditions adverse to quality resulting from QV activities and verify corrective action.

10. Provide independent verifications in mechanical, electrical, I&C and welding disciplines.

17.2.1.2.3.1.3 Quality Support Section

The Quality Support Section is under the supervision of the site Quality Division Manager. The Manager has the following responsibilities:

1. Provide administrative supervision of the activities of the Quality Support Section.

2. Review and coordinate revision of NQA Procedures.

3. Review of selected Station Administrative Procedures and implementing procedures.

4. Review and approval of technical receipt inspection documents for safety- related items and services.

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~~5. Review NCRs for conditions adverse to quality.~~

6. Tracking and trend analysis of Verification and Surveillance Activity reports and CARs.

7. Document conditions adverse to quality identified during Quality Support activities.

8. Resolve identified training deficiencies.

2. Directing the planning and performance of internal assessments and surveillances to assure compliance with the QA Program.

3. Engineering programs overview and modifications interface.

4. Providing administrative direction for the performance of vendor evaluation activities including assessments, surveillances and commercial grade surveys.

5. Maintaining the Evaluated Vendors List.

6. Technical direction for the Nuclear Fuel QA Program.

7. Trending of quality deficiencies, generation of trend reports, and analysis of trend information.

17.2.1.2.3.3.2 Administration Section

The Administration Section is under the supervision of the Manager, Corporate Nuclear Quality. The Manager is responsible for:

1. Generation and distribution of NQA reports;

DELETE → ~~2. Maintenance of the quality assurance tracking and trending system for nonconformances;~~

3. Resolving identified training deficiencies;

4. Maintenance of Corporate Nuclear Quality personnel qualification records,

5. Maintaining current codes, standards, and regulations pertaining to the Quality Assurance Program,

6. Entering NQA records into the Nuclear Records Management System,

7. Review of NQA administrative procedures,

8. Review of Nuclear Generation Group administrative procedures,

9. Review and revision of the UFSAR QA Program Description (QAPD),

17.2.1.2.4 Plant Operation Review Committee (PORC)

and controlled through the use of Administrative Procedures, procedure check list, and logs to prevent inadvertent operation.

17.2.14.4 Inspection status and test status for the receipt and storage of purchased material or components is through the Inspection Report status in the PIMS database. Items which have satisfactorily passed receipt inspection are statused as "accept". Incomplete receipt and storage status of items is noted by application of "hold" tags and by physical segregation.

17.2.14.5 Defective material, parts or components are promptly identified, tagged and recorded to indicate operating status of such equipment and to prevent its inadvertent use.

17.2.14.6 The PBAPS Technical Specifications establish the requirements for the safe operation of the plant, including provisions for periodic and non-periodic tests and inspections of various structures, systems and components. Periodic tests are those tests delineated in the PBAPS Surveillance Testing Activity and non-periodic tests are those proof tests which are performed following modifications or maintenance.

17.2.14.7 Implementation of these measures shall be verified through NQA Assessments, and surveillances Quality Verification conducted in accordance with the QA Program. These NQA activities shall assure that the required inspections and tests are procedurally controlled as required.

17.2.15 Nonconforming Materials, Parts, or Components

17.2.15.1 Measures are established and implemented by means of Administrative Procedures, to control materials, parts, or components which do not conform to requir ments to prevent their inadvertent use or installation. These measures include activities such as receipt inspection, document control, equipment repairs, testing and operations. Procedures require the use of appropriate forms such as the Work Order, ETT (Equipment Trouble Tag), "Hold for Clearance"tag for receipt inspection, document change forms, ~~QA~~ Nonconformance forms and operating report forms. The control measures established shall include, as appropriate, procedures for the following functions: DELETE

1. Identification.

17.2.15.4 Identified Nonconforming materials, parts or components shall be reported to Station Management in accordance with applicable procedures.

17.2.15.5 Nonconformances are reviewed and analyzed on an "as occurring" basis according to administrative procedures. Reviews are performed to confirm that the approved disposition adequately addresses the concern and has been properly implemented, and to identify significant conditions requiring further action.

ADD →

17.2.15.6 Vendors supplying materials, parts, or components are required to notify PECO Energy of a nonconformance to the Purchase Order requirements and to obtain approval from PECO Energy prior to disposition.

17.2.16 Corrective Action

17.2.16.1 Measures are established, by means of Administrative Procedures, to assure that conditions adverse to quality are promptly identified and corrected. PECO Energy defines conditions adverse to quality as failures, malfunctions, deficiencies, deviations, defective material and equipment, and nonconformance to specified requirements. The measures established are consistent with their importance to safety and include the following:

1. In cases of conditions adverse to quality, the cause of the condition is determined and documented, resolution determined and documented, and corrective action taken and documented to preclude repetition.

2. Reports to appropriate levels of management of each condition adverse to quality and documentation of such reports.

17.2.16.2 The responsibility for the above is assigned to a cognizant staff member in the affected activity. It is the responsibility of these cognizant staff members to identify root cause and correct conditions adverse to quality and inform Station Management.

17.2.16.2.1 Administrative Procedures require that modification and repair procedures include the reworking of components, systems or structures in accordance with original specifications, instruction manuals, instructions, prints, codes and standards. Appropriate testing and inspection requirements are included to verify acceptability of the repairs or modifications.

ATTACHMENT 2

LIMERICK GENERATING STATION
MARK UP OF QA PROGRAM DESCRIPTION REVISION 3

g. Ensure that verification results are documented in accordance with NQA procedures, and unacceptable results are identified and rescheduled in inspections, as appropriate.

h. Review of work requests for inclusion of QA Plan requirements and QV activities.

i. Document conditions adverse to quality resulting from QV activities and verify corrective action.

j. Provide independent verifications in mechanical, electrical, I&C and welding disciplines.

k. Provide visual, liquid penetrant, magnetic particle, and ultrasonic inspections.

l. Coordinate NDE activities with appropriate plant technical and craft supervision personnel.

17.2.1.2.3.1.3 Quality Support Section

The Quality Support Section is under the supervision of a Superintendent who reports to the site Quality Division Manager. The Superintendent has the following responsibilities:

a. Provide administrative supervision and technical direction of the activities of the Quality Support Section.

b. Consult with the Quality Verification Superintendent, Assessment Superintendent, and the site Quality Division Manager, on significant problems affecting quality.

c. Ensure that personnel involved in performing NQA Quality Support activities are trained and qualified.

d. Review and coordinate revision of NQA Procedures.

e. Review of selected Station Administrative Procedures and Implementing Procedures.

f. Review and approval of procurement documents and technical receipt inspection documents for safety related items and services.

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~~g. Review NCRs for conditions adverse to quality.~~

h. Tracking and trend analysis of Verification and Surveillance Activity reports and CARs.

i. Document conditions adverse to quality identified during Quality Support activities.

17.2.1.2.3.3.2 NDE Support Section

The NDE Support Section is under the supervision of a Superintendent, who reports to the Manager, Corporate Nuclear Quality Division. The Superintendent is responsible for:

a. Supervision and administration of the Section, with NDE Level III capability in visual, liquid penetrant, magnetic particle, ultrasonic and radiographic inspection techniques.

b. Providing technical oversight and assistance in analysis and interpretation of NDE data.

c. Training, qualification and certification of Company personnel who perform visual, liquid penetrant, magnetic particle, and ultrasonic inspections.

d. Developing and maintaining NDE procedures for code compliance.

e. Procuring vendors to perform all NDE disciplines.

f. Reviewing and approving vendor NDE procedures, personnel certifications and equipment certifications.

g. Assessing performance of NDE vendor personnel.

h. Providing incidental NDE, as requested by the Nuclear Group.

17.2.1.2.3.3.3 Administration Section

The Administration Section is under the supervision of a Superintendent who reports to the Manager, Corporate Nuclear Quality. The Superintendent is responsible for:

a. Generation and distribution of NQA reports.

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~~b. Maintenance of the quality assurance tracking and trending system for nonconformances.~~

c. Keeping the appropriate NQA Superintendents current on the recertification requirements for their personnel.

d. Resolving identified training deficiencies.

e. Notification to station management and other responsible organizations of equipment malfunctions or deviations. The notification system shall include provisions for initial and follow-up information until the item is finally dispositioned.

f. The responsibility and authority for the disposition of nonconforming items shall be defined for each responsible organization.

g. Documentation of each item from first identification to final disposition.

h. Be included or referenced in the records package for the affected item.

17.2.15.2

Procurement documents shall require that vendors report deviations from purchase order requirements to PECo. This includes deviations from vendor drawings and procedures that have been approved by PECo.

17.2.15.2.1

Vendor corrective action shall be evaluated and approved by Engineering (for "use-as-is" and "repair" dispositions involving technical requirements), ~~and by NQA.~~ For "use-as-is" and "repair" dispositions which affect particular hardware, a copy of the dispositioned report shall be included in the records package for the affected item.

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17.2.15.2.2

Deficiencies identified by PECo during source surveillances/audits shall be reported in accordance with applicable procedures.

17.2.15.3

Nonconforming items identified during receipt inspection shall be "hold tagged" and reported in accordance with written procedures. Nuclear Engineering or Site Engineering is responsible for providing/approving the disposition.

17.2.15.4

Nonconforming items identified during installation activities and postinstallation testing activities shall be identified and reported in accordance with administrative procedures. A copy of the dispositioned report shall be included in the records package for the affected item.

17.2.15.5

Nonconforming materials, parts, or components shall be reported to station management in accordance with applicable procedures.

17.2.15.6

Reword

~~NQA reviews~~ nonconformance reports ARE REVIEWED to confirm that the approved disposition adequately addresses the concern and has been properly implemented, and to identify significant conditions requiring further action IN ACCORDANCE WITH ADMINISTRATIVE PROCEDURES.

17.2.15.7

Procedures shall provide for analyzing nonconformances for trends, for performing a periodic review and assessment of the trending data, and for reporting the results of such reviews to the appropriate level of management.

17.2.15.8

It is PECO's policy and intent that nonconforming materials, parts, or components not be installed in LGS. Where technical adequacy is demonstrated to PECo's satisfaction, use of some nonconforming materials, parts, or components may be permitted. When this is done, a complete record shall be available throughout the life of the material, part, or component. In no case will use of nonconforming materials, parts, or components be permitted if a hazard to the health and safety of the public could result from their use. Administrative Procedures shall delineate acceptance and approval mechanisms for permitting use of nonconforming materials, parts, or components.

17.2.15.9

Where rework of a nonconforming item invalidates a previously completed test or inspection, the test or inspection shall be reperformed unless the approved disposition specifies otherwise. The testing and inspection of a repair shall be as given in the approved disposition of the nonconforming item.

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17.2.16.6

~~Procedures shall require NQA review and concurrence with the adequacy of prescribed corrective action for nonconformance reports.~~ NQA periodic audits of the NCR procedure include verification of proper implementation of corrective action.

17.2.17 QUALITY ASSURANCE RECORDS

17.2.17.1

Sufficient records shall be maintained in accordance with Administrative and Implementing Procedures to provide documentary evidence that activities affecting quality are performed adequately and in compliance with the Quality Assurance Program. The requirements shall include required records, collection, filing, storing, and disposition including transmittal responsibilities and processing requirements. These requirements shall comply with the QA Plan and applicable codes, standards, specifications, or regulatory requirements and shall be specified in procurement documents, drawings, and procedures. The procedures to be employed to perform the required activities shall be planned and documented.

17.2.17.2

QA records shall include results of reviews, inspections, tests, and material analysis; operating logs; QA surveillances or audits; qualification of personnel, procedures, and equipment; and other documentation such as drawings, specifications, procurement documents, calibration procedures and reports, reportable occurrences, maintenance and modification procedures, nonconformance and corrective action reports, and other records required by technical specifications.

17.2.17.3

The significance of the event covered by a record type and the contribution of the record to the ability to reconstruct significant events shall be considered in establishing retention periods.

Retention periods shall satisfy applicable statutory requirements. Some types of quality records with minimum retention periods are listed in LGS Technical Specifications. For records not listed in the Technical Specifications, the type most nearly describing the record in question should be followed with respect to its retention period.