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April 6, 1984

Dr. Thomas Murley
Regional Administrator
U. S. Nuclear Regulatory Commission
Region I
631 Park Avenue
King of Prussia, Pennsylvania 19406

Subject: Inspection 50-244/84-03

Dear Dr. Murley:

This letter is in response to Inspection Report 84-03 regarding handling of alleged audit findings. The report identified draft audit findings from one internal Quality Assurance audit report that were deleted from the final audit report.

It should be noted that potential audit findings presented at an audit exit on a draft AFCAR form are considered part of the preliminary summation of the auditor's investigation. Before becoming valid, a finding is acknowledged at the exit by the audited supervision and concurred with by QA supervision responsible for releasing the final report. More in-depth knowledge by the supervisor of corrective action already in progress to correct a previous finding is consideration for not evaluating a related concern further. Provisions to enhance investigation of a subject more fully in other audits is also consideration for not exploring a concern further during a current audit. The audit program also recognizes that the Ginna Corrective Action System is available for auditor referral of valid findings necessitating immediate corrective action, as well as the preferred alternative for investigating apparent findings found during the audit, but unrelated to the audit scope. In either situation auditors are instructed to monitor the audited organization's handling of the auditor concerns and to make appropriate reference in the audit report.

With regard to the four specific audit-related allegations, the aforementioned considerations were applied as follows.

Allegation A: A Quorum Of PORC Members Was Not Present For Meeting 33-114.

PORC activities were beyond the audit scope entitled Records and Document Control. PORC activities had been audited by the same auditor two months previously. This is an example of an

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out-of-scope concern which the auditor should have forwarded for further investigation and tracking by the Ginna Corrective Action System. Lack of followup by the auditor precluded timely identification that investigation at Ginna had not commenced. The subject inspection report correctly reports the failure to document this deficiency in a CAR. CAR 1537 has been initiated to investigate the apparent PORC quorum deficiencies and track the appropriate corrective action. Internal audit 82-36 documents the proper handling of previous out-of-scope findings in that two document control problems were tracked and corrected by CAR 1413.

Allegation B: A Surveillance Test Procedure Was Used Prior To Approval.

This draft finding was eliminated as invalid during supervisory review, since the actions associated with procedure review and approval were consistent with established Administrative Procedures. Superintendent approval of procedures is documented on the cover sheet immediately following review by PORC. The date on the procedure is an effective date, inserted by the procedure distributor, to indicate that beyond this date previous revisions are superseded and may not be utilized. Use of a current procedure after PORC approval but in advance of the effective date is a practice authorized in the procedure adherence guidelines delineated in A-503. The "PT" Procedure identified in the inspection report was not only utilized after approval, but after distribution. Subsequent refinements to the procedure distribution practice involved establishing the effective date concurrent with procedure distribution and therefore reducing confusion in this regard. Based on these facts, we request that this finding be withdrawn.

Allegation C: Plant Procedures Are Overdue For Required Periodic Review.

The procedure currency concern was not validated as a finding for several reasons made known to the auditor during the audit. A finding issued during a 1982 management audit had been closed out several weeks prior to this audit, based on Quality Assurance satisfaction with the implementation of the new system for tracking procedures coming due and overdue. The computer printout used by the auditor does not reflect the latest actual status of those procedures undergoing review within each section and, therefore, further checking in each section is required to characterize the nature and extent of the situation. Previous practice, which was further discussed in a QA Group meeting following the audit, would continue with regard to including procedure currency in each section audit (e.g., health physics, maintenance, operations). Subsequent audits have verified that responsible supervisors are maintaining their procedures current.

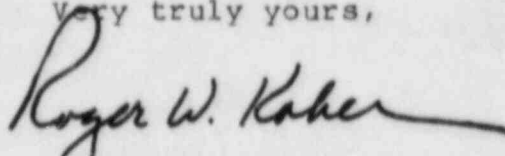
Allegation D: The Licensee Is Taking Untimely Corrective Action In Establishing Vendor Manual Controls.

This finding was identified as AFCAR 5 in formal report 83-36. Corrective action has been developed and is being implemented with regard to the finding.

In conclusion, this reply should clarify that the actions taken by cognizant supervisors during and immediately following the audit were generally prudent and consistent with established audit procedures and practices. Auditor action with regard to handling identified deviations not within the scope of the audit being conducted was not totally satisfactory in one instance. As a result, the current practice will be subject to management review to ascertain need for clarification or change.

In addition, RG&E is currently undertaking an internal review of the status and adequacy of the Quality Assurance Program. This review, augmented by the biennial management audit later this year, is intended to identify any programmatic improvements which may be needed or desired. We will keep you informed of the progress and results of our reviews.

Very truly yours,



Roger W. Kober