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November 30, 1984

Mr. James P. O'Reilly, Regional Administrator
U. S. Nuclear Regulatory Commission
Region II
101 Marietta Street, NW, Suite 2900
Atlanta, Georgia 30323

Re: RII:PHS/PKV
50-413/84-87
50-414/84-38

Dear Mr. O'Reilly:

Please find attached responses to Violation No. 413/84-87-01 and Violation No. 413/84-87-04 as identified in the above referenced inspection report. Also attached are responses to Deviation No. 413/84-87-05 and Deviation No. 414/84-38-01 from the same report.

Very truly yours,

H. B. Tucker

Hal B. Tucker

LTP:slb

Attachment

cc: NRC Resident Inspector
Catawba Nuclear Station

Robert Guild, Esq.
P. O. Box 12097
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Violation 413/84-87-01 (Failure to Follow Procedure for Control of keys).

Technical Specification 6.8.1 requires that written procedures shall be implemented and maintained covering the activities of procedures recommended in Appendix A of Regulatory Guide 1.33, Revision 2, February 1978. Per Appendix A of Regulatory Guide 1.33, administrative procedures are required for equipment control. Operations Management Procedure 2-9, Revision 8, Administration and Control of Keys, requires the following:

a. Paragraph 3.2 requires access to site keys to be under direct control of the Shift Supervisor or his designee and also requires the key locker to be kept locked at all times.

b. Paragraph 6.4.B requires that, for long term removal keys, the reason for removal be logged in the Key Log and Master Key Index.

c. Paragraph 7.1.D requires all keys to be logged out in the Key Log when removed from the key locker.

Contrary to the above, on September 13, 1984, key control was not performed in accordance with procedure requirements, in that:

a. The key locker was left unlocked and unattended.

b. Reasons for long term removal of keys were not logged in either the Key Log or Master Key Index.

c. Key No. 695 was not in the key locker and was not logged out on either the Key Log or Master Key Index. Kirk keys were not logged out on the Key Log. Examples are Nos. 690, 692, 693, 694, 697, 699, 703, and 704.

Response to the Violation

1. Duke Power Company admits the violation.

2. In regard to the locker being left unlocked and unattended, the supervisor was called away from the office on several occasions and simply failed to lock the key locker prior to exit.

   Key No. 695 was in use on the electrical switchgear and had not been properly checked out. This same situation was true on the remaining kirk-keys as well. There is no requirement to log key No. 695 out in the Master Key Index. These problems were due to an inadequacy in our procedure which failed to provide accountability for keys left in electrical switchgear past shift turnover. Rather than have the key signed out to a person who was not on-site, people elected to not even sign it out.

3. On the key locker problem, we have assigned only two keys to each shift. The Shift Supervisor has one and the Shift Support Technician (who is the Shift Supervisor's Designee) has one. The Shift Support Technician has been directed to issue keys only to people who have a real need, and to ensure the log is completed properly prior to their leaving the areas. The locker is to be closely monitored by the Shift Support Technician and will be verified locked after each transaction. Maintaining control is no longer a problem. The procedural problem with the kirk-keys has been corrected through a procedure revision.

4. We will implement the procedure changes described above.

5. The procedure changes will be in place and all operators will be updated on the change no later than January 2, 1985. We will be in full compliance at that time.

Violation 413/84-87-04 (Failure to follow procedure for RHR pump surveillance testing).

Technical Specification 6.8.1 requires that written procedures shall be implemented. Performance Test PT/1/A/4200/10A, Residual Heat Removal (RHR) Pump 1A, step 12.20.3 requires that if inservice test quantities fall within the required action range of the acceptance criteria that the control room SRO and the test supervisor be notified of pump inoperability.

Contrary to the above, the RHR pump test was performed per procedure PT/1/A/4200/10A on September 8, 1984 and the test data fell within the required action range. The test technician failed to recognize this discrepancy and the pump was not declared inoperable until September 18, 1984.

Response to the Violation

1. Duke Power Company admits the violation.

2. The cause of this violation is Personnel/Procedural, because the technician conducting the test declared the pump operable due to misinterpretation of test data. Differential pressure is determined twice in the procedure, once in the recirculation flow mode to verify Technical Specification 4.5.2.F.3 and a second time at full flow to verify ASME Code Section XI, IWP requirements. The test procedure was not explicit in specifying which recorded differential pressure is used to verigy the two acceptance criteria.

3. The error was discovered on September 17, 1984 during a review of the completed procedure by the Performance Supervisor at which time the Test Engineer and Operating Engineer were notified.

   The Test Engineer and Operating Engineer questioned if ND Pump 1A had to be declared inoperable. The surveillance item requiring the IWP differential pressure is in Tech Spec 4.5.2, which is applicable to Modes 1, 2, and 3. Operations requested an interpretation by Licensing. Licensing researched the issues and concluded on the following day that the pump must be declared inoperable. The reason ND Pump 1A was not declared inoperable immediately on September 17, was that the action statement for Tech Spec 3.4.1.4.1 was already being fulfilled. Even if the pump were declared inoperable, no further corrective action was required.

   After further review of the test results in PT/1A/4200/10A and comparison of the baseline acceptance criteria to the ND Pump 1A Performance Curve, it was thought that the process guages used to establish the baseline acceptance criteria and run the first quarterly test may have been out of tolerance and needed to be recalibrated. Because of this, Performance re-established the baseline acceptance criteria for PT/1/A/4200/10A. Once the baseline acceptance criteria was established per IWP and reviewed for expected parameters, test procedure PT/1/A/4200/10A was completed and ND Pump 1A was declared "Operable".

4. To prevent similar occurences of this nature, the Employee Training and Qualification System will be used to qualify Performance Technicians on tasks/procedures before beginning a job. First line supervisors will review completed periodic test procedures in a timely manner to minimize the time lapse between test performance and detection of any possible procedural errors. In addition, first line supervisors will spend more time in the field observing first hand the performance of periodic test procedures.

5. The Employee Training Qualification System is under development and implementation will begin by December 1, 1985. First line supervisors are now reviewing procedures upon completion and are required to spend more time in the field observing test performance.

Deviation 414/84-87-05
(Failure to Meet Test Parameters
Specified for Diesel Generators)

The licensee committed in a July 6, 1984 letter to NRR from H. B. Tucker, that two fast starts on the diesel generators would be conducted and the diesel generators would be loaded to a peak of about 4100 kw during these tests.

Contrary to the above, the testing on diesel generator 1A was conducted per procedure TP/1/A/1100/05, using a peak load of 2900-3000 kw.

Response to the Deviation

1. The test procedure deviated from the commitment because it was impractical to achieve a load of 4100 kw without establishing extreme plant conditions. The personnel running the test loaded the diesel generator to the load which was reasonably achievable under the existing plant conditions. Justification for this deviation is explained in H. B. Tucker's letter of October 9, 1984 to H. R. Denton.

2. We believe that this deviation was an isolated case. As explained in the letter referenced above, the load placed on the diesel generator for the testing was adequate; therefore, no further actions are necessary.

3. The diesel generator is in compliance with the intent of testing as outlined in the above referenced letter.

Deviation 414/84-38-01
(Failure to Meet
Commitment for Updated
Construction Deficiency Report)

The licensee committed in Construction Deficiency Report 50-414/84-04 dated April 25, 1984, to submit a complete report on corrective actions pertaining to undersized partial penetration welds by August 15, 1984.

Contrary to the above, the licensee did not issue the updated report until September 6, 1984, when notified by the inspector that the report was overdue.

Response to the Deviation

The committed completion date of August 15, 1984 was omitted through oversight on the Licensing's Inspection and Enforcement Items-Status Summary List. Instead, the committed completion date of August 1, 1984 for the work on Unit 2 was tracked on this List. The letter from Construction stating completion of work and describing corrective actions was received by Licensing on July 16, 1984. After verifying that the Resident Inspector was informed of the completion of work, and after changing the status of the item to that of being Ready for NRC Review on the I&E Status Summary List, the letter was filed.

1. Subsequent to this deviation, an extra effort has been made to ensure that all committed followup reports are tracked and submitted on time. This has also been discussed with key personnel from the various groups that interface with Licensing in the transmittal of information and preparation of reports due to Region II. Meetings are held at the site at least every two weeks to discuss the schedules and status of open items on the I&E Status Summary List. This List is updated and redistributed after every meeting.

2. At the time of this deviation, at approximately the time of Unit 1 Fuel Load, a large number of items were being handled, with the primary focus on Unit 1. Since then, the reduction in outstanding items has resulted in greater attention being given to each item throughout its progression to closeout.

3. Corrective Actions taken should ensure no further deviations of this nature.