



CONNECTICUT YANKEE ATOMIC POWER COMPANY

HADDAM NECK PLANT

362 INJUN HOLLOW ROAD • EAST HAMPTON, CT 06424-3099

June 6, 1997

Docket No. 50-213

CY-97-058

Re: 10CFR2.201

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

Haddam Neck Plant
Reply to Notice of Violation
NRC Integrated Inspection Report No. 50-213/97-01

In a letter dated May 8, 1997,⁽¹⁾ the NRC transmitted to Connecticut Yankee Atomic Power Company (CYAPCO) an inspection report covering the period from January 6, 1997 - April 7, 1997, documenting three (3) Severity Level IV violations for the Haddam Neck Plant (HNP). As discussed in the report, the NRC Staff cited CYAPCO for violation of certain NRC requirements. The violations identified dealt with failure to follow procedures, failure to complete technical specification surveillances, and failure to complete effective corrective actions.

Pursuant to 10CFR2.201, Attachment 1 provides CYAPCO's response to the individual violations. The NRC Inspection Report 97-01 also requested information on how CYAPCO is addressing the issues of performance standards and procedure adherence at the HNP. CYAPCO recognizes that human performance issues and thus, performance standards, will play a key role in the safe and successful storage of spent nuclear fuel and decommissioning at the HNP. The management team has initiated a concerted effort to raise the performance standards for all personnel on site and establish high standards for the decommissioning process. Included in this effort is reinforcing high standards for the core values of honesty, integrity and commitment to the job, including program and procedure ownership and adherence, safe working practices and a questioning attitude. These core values have been established in the management and supervisory team through group meetings and discussions. Group meetings to discuss these core values are also being conducted between senior site management and non-management/supervisory personnel.

(1) NRC letter from J. F. Rogge to T. C. Feigenbaum, "NRC Integrated Inspection Report No. 50-213/97-01" dated May 8, 1997.



The management team has worked with their individual department staff to establish department level standards that reflect these higher core values. All departments have completed draft standards and expectation documents that have been reviewed by senior site management to assure consistency with the core values. Each of the department standards and expectations addresses the expectation of adherence to site procedures. Site-wide and department level standards and expectations will be published by June 30, 1997. This process of ensuring consideration of the input from all site staff will help to ensure site-wide ownership of these core values.

Other actions that have been taken to improve performance standards include holding individuals accountable for unacceptable performance through appropriate counseling and/or disciplinary actions. Additionally, a mission statement has been developed and issued reflecting the high standards necessary for the safe storage of spent nuclear fuel and conducting the decommissioning process. The work observation program at the HNP will be upgraded by June 30, 1997 to provide increased management and supervisory observations of work activities and opportunities for coaching and positive reinforcement. The improved Corrective Action Program has implemented a routine trending report that provides management with timely data regarding performance issues.

In summary, CYAPCO takes these violations very seriously and is committed to implement and complete the broad scope corrective actions to improve station performance. We will continue to keep the NRC Staff informed on our progress in these areas and are committed to demonstrating improving trends in areas of past weakness prior to proceeding with major decommissioning activities.

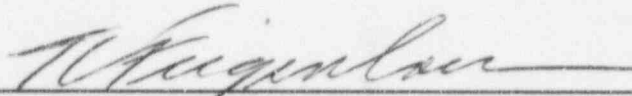
The following are CYAPCO's commitments made within this letter. Other statements within this letter are provided for information only.

- CY-97-058-1 Publish site-wide and department level standards and expectations by June 30, 1997.
- CY-97-058-2 Upgrade the work observation program by June 30, 1997.
- CY-97-058-3 Complete the evaluation to replace the make-up valve to the condensate receiver tank for the auxiliary boiler by July 31, 1997.
- CY-97-058-4 Complete implementation of WCM 3.3-1 by September 1, 1997.
- CY-97-058-5 Convert applicable procedures to surveillance procedures by September 1, 1997.

If you should have any questions, please contact Mr. G. P. van Noordennen at (860) 267-3938.

Very truly yours,

CONNECTICUT YANKEE ATOMIC POWER COMPANY

A handwritten signature in dark ink, appearing to read 'T. C. Feigenbaum', is written over a horizontal line.

T. C. Feigenbaum
Executive Vice President and
Chief Nuclear Officer

cc: H. J. Miller, NRC Region I Administrator
M. B. Fairtile, NRC Project Manager, Haddam Neck Plant
W. J. Raymond, NRC Senior Resident Inspector, Haddam Neck Plant

Docket Nos. 50-213
CY-97-058

Attachment 1

Haddam Neck Plant

Reply to Notice of Violations

NRC Integrated Inspection Report No. 50-213/97-01

June 1997

Restatement of Violation 1

Technical Specifications 6.8.1 requires that written procedures and/or administrative policies be established, implemented and maintained covering the activities as recommended in Appendix A of Regulatory Guide 1.33. Regulatory Guide 1.33 requires that procedures be established governing plant operations and administration, work controls, and security.

General Response

In addition to the station-wide efforts to raise performance standards and actions to improve procedural adherence discussed in the cover letter, additional information is provided in the individual responses for each of the six examples noted.

Restatement of Violation 1.a.

Work Control Manual WCM 2.4-1, Equipment Tagging, Revision 7, was written pursuant to the above and states in Step 1.2.2 that any equipment tagged with a red tag shall not be operated by anyone. Contrary to the above, on February 19, 1997, a contractor health physics technician opened the red tagged prefilter access door for auxiliary building filter FL-70-1A.

Reason for the Violation

This violation was caused by inadequate human performance.

An apparent cause determination was performed which concerned opening the door to a filter housing without having the red tag cleared. The ventilation door had a red tag on it that was not a part of the work order under which the work was being performed and which should have been removed prior to allowing work to be performed on the filter unit. The technician opening the filter door assumed the red tag was part of the work order he was working on and did not check the red tag or his supervisor to determine if clearance was required. The person showed a lack of understanding of the red tag process and a lack of a questioning attitude. The technician had received training on tags as part of their initial site access and qualification training.

Corrective Steps that have been taken and the results achieved

Immediate corrective action was to counsel the technician and his supervisor on the importance of never operating red tagged equipment. Guidance was provided to station personnel, including contractors, stressing the importance of complying with the tagging program and never operating equipment with red tags. Each department head verified that a meeting with their employees had been held to discuss the event and reinforce the importance of following tagging procedures.

A Temporary Procedure Change (TPC) was written to WCM 2.1-2, Trouble Report (TR)/Job Scoping. TPC 97-97 added a statement to the Tagging Required portion of the Evaluator's Checklist under TR/Job Scoping Guidelines stating "perform walkdown of system/component to verify there are no conflicting tags on system/component that would affect work". This procedure change will identify tags from other clearances during the job scoping process.

A second TPC 97-98 was written to WCM 2.1-1, Work Control Process. This TPC added a statement to the step on verifying tagging under the Work Performance section for the First Line Supervisor/Designee ". . . to verify there are no conflicting tags on system/component that would affect work".

Corrective Steps that have been taken to avoid further violations

Disciplinary action was taken against the employee. The TPCs have been attached to the latest revision of the applicable procedures. A sign has been permanently installed on the ventilation door to eliminate the need for future red tagging.

Date when full compliance will be achieved

The above corrective action is complete and full compliance has been achieved.

Restatement of Violation 1.b.

Procedure NOP 2.19-8A, Auxiliary Boiler Operation, Revision 2 dated January 30, 1997, requires in Step 6.1.12a that the operator maintain the condensate receiver tank one-half to two-thirds full when operating the condensate makeup pump manually. Contrary to the above, on January 5 and 11, 1997, an operator began a manual fill of the auxiliary boiler condensate receiver tank, and then left the area. The condensate receiver tank overflowed on both occasions, resulting in an unplanned discharge to the environment.

Reason for the Violation:

The reason for this violation was a failure to follow procedures.

In these two events the operators did not follow instructions to keep the tank at the prescribed level. The operators had chosen to manually fill the tank in each case because of reliability concerns of the automatic makeup valve.

Corrective Steps that have been taken and the results achieved

The involved NSOs were counseled, and guidance was issued to all Operations Department personnel on the subject of heating steam condensate receiver tank overflow. NOP 2.19-8A, "A" Auxiliary Boiler Operation, has been revised to include enhanced instructions for manual filling of the Condensate Receiver Tank.

A trouble report had been issued on this valve on February 11, 1997. The Maintenance Department investigated the reliability concerns related to the valve and concluded no repair would be effective.

Corrective Steps that have been taken to avoid further violations

The specific events and management expectations regarding compliance with operating procedures have been reinforced. The corrective actions have been incorporated into the latest revision of NOP 2.19-8A, "A" Auxiliary Boiler Operation and NOP 2.19-8B, "B" Auxiliary Boiler Operation.

An evaluation to replace the valve is ongoing.

Date when full compliance will be achieved

CYAPCO will complete the evaluation on replacing the makeup valve by July 31, 1997. There have been no new events for the auxiliary boiler operation related to this violation.

Restatement of Violation 1.c.

Technical Specifications 6.2.2.f requires that administrative procedures be developed and implemented to limit working hours of facility staff. Procedure NGP 1.09 was developed pursuant to the above, and requires in Step 4.6 that workers have no less than 8 continuous hours off between scheduled work periods and that workers do not work more than 16 hours in a 24 hour period, 24 hours in a 48 hour period, and 72 hours in a 7 day period. Contrary to the above, on February 5-6, 1997, an operator worked two shifts without 8 hours off between scheduled work periods. In addition, the results of a licensee investigation on January 17, 1997, identified 6 instances over a four week period in July and August 1994 in which work hours for plant staff exceeded the overtime limits.

Reason for the Violation

An operator worked two shifts with less than eight hours off between the shifts without the prescribed time off because the individual scheduling the operator was unaware that turnover time is included in the total time worked.

In the second case, the workers involved worked more than 72 hours in a single week due to inadequate management oversight.

Corrective Steps that have been taken and the results achieved

In the first case, the individual scheduling the operator was counseled and all Shift Managers reviewed the requirements for overtime controls for Nuclear Group Personnel, NGP 1.09. The specifics of these events have been given to operations personnel to convey management's expectation regarding the overtime practices and procedures.

Health Physics Management has directed all Health Physics Supervisors review "Overtime Controls for Nuclear Group Personnel", NGP 1.09, thus reiterating Station Management expectations and responsibilities to follow procedural requirements.

Corrective Steps that have been taken to avoid further violations

Station management addressed this issue generically by reiterating the importance of observing overtime limits in an article in the plant daily newsletter, CY TODAY.

Date when full compliance will be achieved

Corrective actions have been completed and full compliance has been achieved.

Restatement of Violation 1.d

Work Control Manual WCM 2.1-2, Trouble Report/Job Scoping, Revision 3, requires in Step 1.2.3 and 1.3.3 that trouble report tags be removed and closed upon development of work packages, or for work that will be completed under blanket authorized work orders. Contrary to the above, on February 18, 1997, as documented in adverse condition report ACR 97-90, a review of trouble reports by plant operators identified that of 275 trouble reports hanging on plant equipment, 113 were associated with trouble reports or AWOs that had been either deleted, completed or canceled.

Reason for the Violation

This violation was caused by inadequate personnel performance, i.e., failure to follow procedures. The primary reason cited for canceled tags still hanging was that the person canceling the Trouble Report (TR) was not going back out to remove the TR tag as required by WCM 2.1-2, Trouble Report/Job Scoping. Also, some TRs were not removed after work had been completed. A review of the various work control procedures indicated there were no programmatic problems with the tagging process. Rather, the main problem was inattention to detail.

Corrective Steps that have been taken and the results achieved

All 113 TR tags have been removed. Guidance was provided to all Managers/Supervisors on March 4, 1997, outlining the appropriate use of the TR system, including the proper hanging and removal of TR tags. Supervisors are expected to ensure that personnel understand the requirements of WCM 2.1-1, Work Control Process. In the attachment for Work Performance, the Work Completion section delineates one of the responsibilities of the worker as well as the first line supervisor as being to "Verify TR tag removed" and attached to the work order, unless contaminated or lost.

Corrective Steps that have been taken to avoid further violations

The specifics of the violation have been reinforced to all personnel under the work control supervisor using additional guidance and department training to clearly convey Station Management expectations regarding work control and tagging practices.

Date when full compliance will be achieved

CYAPCO has completed the corrective actions and full compliance has been achieved.

Restatement of Violation 1.e.

Work Control Manual WCM 3.3-1, Technical Specifications Surveillance Tracking, Revision 2, requires in Step 1.4.2 and 1.4.3 that the station procedures be audited annually (initiated in January) to assure the technical specification requirements are met. Procedure ACP 1.2-6.5A, Station Procedures, Revision 0, requires that technical specifications surveillances be conducted by procedure in the Surveillance Procedure category. Contrary to WCM 3.3-1, as of April 4, 1997, the Licensee had not completed the annual audit of procedures per WCM 3.3-1.

Contrary to ACP 1.2-6.5A, on March 12, 1997 the licensee identified that technical specifications surveillances were completed using preventative maintenance (PMP 9.1-31) and environmental services (ESP 14.1-4) procedures.

Reason for the Violation

The requirement to audit the Master List of Technical Specification Surveillances was missed when the former program administrator was transferred to a different location and the work was not reassigned to another individual.

The requirement to conduct surveillances with procedures in the surveillance procedure category was overlooked for the preventive maintenance and environmental procedures. This error was caused by inattention to detail.

Corrective Steps that have been taken and the results achieved

The Unit Director has assigned an individual with the responsibility for implementing procedure WCM 3.3-1.

Corrective Steps that will be taken to avoid further violations

The individual assigned will ensure implementation of WCM 3.3-1. The applicable preventive maintenance and environmental services procedures will be converted to surveillance procedures.

Date when full compliance will be achieved

The individual assigned will complete implementation of WCM 3.3-1 and we will convert the applicable procedures to surveillance procedures by September 1, 1997.

Restatement of Violation 1.f.

Security procedure SEC 1.3-8, Package and Material Control, Revision 26, requires in Step 6.2.1.b, that all packages be searched prior to entry into the protected area. Contrary to the above, on March 13, 1997, six boxes were brought into the protected area without receiving the required security searches.

Reason for the Violation

The reason for the violation involved poor personnel performance. The stockhandler failed to follow procedure, SEC 1.3-8, step 6.2.1b.

Corrective Steps that have been taken and the results achieved

The individual was suspended pending investigation. Upon completion of the investigation, the individual's employment was terminated on March 13, 1997.

Corrective Steps that have been taken to avoid further violations

The remaining stockhandlers were interviewed and the incident was determined to be an isolated case. Management expectations were reaffirmed with the remaining stockhandlers.

Date when full compliance will be achieved

Corrective actions were completed with the completion of interviews and reinforcement of management expectations and full compliance has been achieved.

Restatement of Violation 2

Technical Specifications 4.7.7 requires that reactor coolant system chemistry be sampled every 72 hours to assure that chloride and fluoride concentrations remain below the limits specified in TS 3.4.7. The mode of applicability for the specification 3.7.7 is "at all times".

Contrary to the above, no RCS chemistry samples were taken from November 15, 1996 through February 6, 1997.

Reason for the Violation

The apparent cause for this violation was poor judgment by Chemistry Management. With the core offloaded and no flow through the reactor coolant system, it was deemed acceptable to secure sampling on a system which was out of service.

Corrective Steps that have been taken and the results achieved

On February 6, 1997, purification flow was re-established and the Chemistry Department commenced sampling the reactor coolant system in accordance with the Technical Specification frequency and specified parameters, at the most representative location for the plant configuration. Chemistry sampling of the RCS has indicated that Technical Specifications chemistry limits were never challenged.

Corrective Steps that have been taken to avoid further violations

The Chemistry Department has and will continue to maintain reactor coolant chemistry sampling until a revision to the Technical Specifications has been issued. Defueled Technical Specifications to remove the sampling requirements were submitted for NRC approval, on May 30, 1997.

Date when full compliance will be achieved

CYAPCO has completed the corrective actions and full compliance has been achieved.

Restatement of Violation 3

10 CFR 50, Appendix B, Criterion XVI, "Corrective Actions" requires that measures be established to assure that conditions adverse to quality are promptly identified and corrected. In the case of significant conditions adverse to quality, the measures shall assure that the cause of the condition is determined and corrective action is taken to preclude repetition.

Contrary to the above, the licensee did not correct the recurrence of significant conditions adverse to quality, in that there have been multiple examples of a failure to adequately implement the technical specification (TS) operational surveillance program. Past deficiencies related to missed or late TS surveillance were the subject of inspection item URi 94-27-01, and licensee event reports 95-12, 96-17 and 96-22. The licensee identified the following failures to complete technical specification surveillances in a timely manner: February 6, 1997, the failure to test reactor coolant system chemistry per TS 4.4.7; on February 11, the failure to test the main station battery per TS 4.8.2.2 and 4.8.2.1.c; on February 12, the failure to test the service water pumps per TS 4.7.b.2; and on March 21, the failure to verify the positions of safety related valves per TS 4.5.2.c.

Reason for the Violation

Corrective action has been ineffective in preventing further missed or late surveillances required by Technical Specifications. Lack of accountability and low management standards contributed to a high tolerance for ineffective actions to correct previous problems.

Corrective Steps that have been taken and the results achieved

The Unit Director has met with all responsible managers to reiterate expectations. Each manager reviewed the process being used to track surveillances in their department and verified the process was acceptable.

Corrective Steps that have been taken to avoid further violations

The responsible managers have a clear understanding of what is expected and that they are responsible for this important program.

Date when full compliance will be achieved

Corrective actions have been completed and full compliance has been achieved.