

MAR 24 1988

In Reply Refer To:
Dockets: 50-498/88-01
50-499/88-01

Houston Lighting & Power Company
ATTN: J. H. Goldberg, Group Vice
President, Nuclear
P.O. Box 1700
Houston, Texas 77001

Gentlemen:

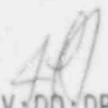
Thank you for your letter of March 1, 1988, in response to our letter and Notice of Violation dated February 10, 1988. We have reviewed your reply and find it responsive to the concerns raised in our Notice of Violation. We will review the implementation of your corrective actions during a future inspection to determine that full compliance has been achieved and will be maintained.

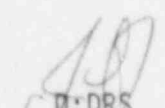
Sincerely,

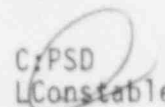
Original Signed By
A. B. Beach


 L. J. Callan, Director
Division of Reactor Projects

cc:
Houston Lighting & Power Company
ATTN: M. A. McBurnett, Manager
Operations Support Licensing
P.O. Box 289
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RIV:DD:DRS
JJaudon/cjg
3/23/88


D:DRS
JLMilhoan
3/23/88


C:PSD
LConstable
3/23/88


D:DRS
LJCallan
3/24/88

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Q PDR

IEO1

Houston Lighting & Power Company

-2-

cc: (cont'd)

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Central Power & Light Company

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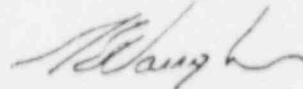
March 1, 1988
ST-HL-AE-2541
File No.: G2.04

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

South Texas Project Electric Generating Station
Unit 1
Docket No. STN 50-498
Response to Violations 8801-01 through 8801-08

HL&P has reviewed the Notices of Violation included in Inspection Report 88-01 and submits the attached responses pursuant to 10CFR Part 2.

If you have any questions, please contact Mr. M. A. McBurnett at (512)972-8530.



G. E. Vaughn
Vice President
Nuclear Plant Operations

GEV/WH/km

Attachment: Responses to Notices of Violation

NL.88.053.03

A Subsidiary of Houston Industries' Incorporated

MAR 22 1988

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A. Statement of Violation 8801-01:

High Head Safety Injection Pump Controls System Lineup

Technical Specification 6.8.1 requires that written procedures be established, implemented, and maintained covering the activities recommended in Appendix A of Regulatory Guide 1.33, Revision 2, February 1978. Section 3 of this appendix recommends procedures for operation of the emergency core cooling system.

Procedure 1POP02-SI-0002, Revision 6 dated December 30, 1987, Safety Injection System Initial Lineup, has been established in accordance with Technical Specification 6.8.1 to implement, inter alia, Technical Specification 3.5.3.

Contrary to the above, on January 7, 1988, the NRC inspector found that this procedure was not adequate to control the alignment of the high head safety injection pumps in Mode 4. Forms 3, 7, and 11, providing the Mode 4 alignment of safety injection system Trains A, B, and C, respectively, specified the required position for the high head safety injection pump main control board handswitches to be "PTL" (Pull to Lock). Following this procedure would have made all three high head safety injection pumps inoperable in Mode 4, contrary to Technical Specification 3.5.3.

Reason for violation:

The root cause of this violation was inadequate review of the procedure to assure its consistency with the requirements of the applicable Technical Specifications.

Corrective actions that have been taken:

1. Procedure 1POP02-SI-0002 has been revised to correct Forms 3, 7, and 11 to indicate the proper handswitch alignments for all modes.
2. A review of other system lineup procedures was performed to ensure their consistency with the Technical Specifications.
3. Procedure OPGP03-ZA-0002 has been revised to incorporate requirements for an independent technical review of new procedures.

Corrective actions that will be taken:

No further action is required.

Full Compliance:

The plant is in full compliance.

B. Statement of Violation 8801-02:

Temporary Modifications

Technical Specification 6.8.1 requires that written procedures be established, implemented, and maintained covering the activities recommended in Appendix A of Regulatory Guide 1.33, Revision 2, February 1978.

Procedure OPGP03-ZO-0003, Revision 7, dated September 12, 1987, "Temporary Modifications and Alterations," has been established in accordance with this Technical Specification.

Section 4.7 of this procedure requires that the control room hard copy of piping and instrumentation drawings affected by a temporary modification be annotated and clouded in red to identify the existence of a temporary modification. It further requires that a copy of the temporary modification request be attached to the drawing and a notation of which drawings were updated to be made on the original of the temporary modification request.

Contrary to the above, on January 5, 1988, the NRC inspector found that the requirements of Section 4.7 of Procedure OPGP03-ZO-0003 had not been met for Temporary Modification T1-EW-87-252 for Drawing 5R289FO5038 in that no markup had been made.

Reason for violation:

The root cause of this violation was the Systems Engineer's lack of attention to detail in following the procedure. A contributing factor was a lack of positive controls (e.g., signature verifications) on the Temporary Modification Request (TMR) form to ensure compliance with the procedure. Another contributing factor was a lack of clarity in the procedure with regard to the treatment of blank and blind flanges.

Corrective actions that have been taken:

1. Drawing 5R289FO5038 was updated in compliance with procedure OPGP03-ZO-0003 (i.e., red lining of drawing, attaching a copy of the TMR, noting drawing update)
2. A review of outstanding temporary modifications was performed against the requirements of the procedure. Identified discrepancies were corrected.

3. Procedure OPGP03-ZO-0003, Temporary Modifications and Alterations, was revised to clarify treatment of blank and blind flanges. The procedure was also revised to implement the following additional controls:
 - a. Identification of Key Drawings on the Temporary Modification Request.
 - b. Addition of a confirmation signature indicating that the affected drawing(s) have been red lined.
 - c. Addition of a restoration signature indicating that the drawings have been restored to normal after temporary modification is removed.
4. System Engineers have been formally advised of the procedural changes and the requirement to follow them in detail.

Corrective action that will be taken:

No further action is required.

Full Compliance:

The plant is in full compliance.

C. Statement of Violation 8801-03:

Locked Valves

Technical Specification 6.8.1 requires that written procedures be established, implemented, and maintained covering the activities recommended in Appendix A of Regulatory Guide 1.33, Revision 2, February 1978. Section 3 of this appendix recommends procedures for operation of the emergency core cooling system.

Procedure 1POP02-SI-0002, Revision 6, dated December 30, 1987, "Safety Injection System Initial Lineup," has been established in accordance with this Technical Specification.

Form 9 of this procedure, Initial Lineup Train C, requires Manual Valves SI-0059C, SI-0224C, and SI-0070C to be locked closed.

Contrary to the above, on January 6, 1988, the NRC inspectors found that SI-0059C was closed, but not locked and that SI-0224C and SI-0070C were closed but inadequately locked. The cables and padlocks on these latter two valves could easily be removed by hand.

Reason for violation:

The root cause of the violation was lack of attention to detail on the part of operations personnel who inspect valves in accordance with the Locked Valve Program in that inadequately locked and/or unlocked valves were not identified and corrected in accordance with the Locked Valve Program OPGP03-ZO-0027.

Corrective actions that have been taken:

1. Valves SI-0070C and SI-0224C were locked and valve SI-0059C was tagged as allowed by procedure.
2. Valves required to be locked in accordance with the Locked Valve Program were inspected for proper position and locking devices or administrative controls. None were found to be improperly positioned. Those that were found to be inadequately locked were either properly locked or administrative controls were implemented through the station clearance process.

Corrective actions which will be taken:

No further action is required.

Full Compliance:

The plant is in full compliance.

D. Statement of Violation 8801-04:

Containment Integrity

Technical Specification 3.6.1.1 requires that containment integrity be maintained in Modes 1, 2, 3, and 4. The conditions of license regulation, 10CFR50.54 invokes Appendix J to 10 CFR 50 to define containment integrity and to limit combined leakage, measured by test, to less than 0.6 La.

Contrary to the above, the licensee was in Mode 4 on October 31 and November 1, 1987, with Containment Isolation Valve BIRAMOV0003, not tested for local leak rate after maintenance so that the ability to meet the 0.6 La criterion was not determined.

Reason for violation:

The root causes of the event were determined to be:

1. Failure to provide maintenance planners and maintenance supervisors with adequate training concerning post maintenance testing (PMT) requirements regarding containment integrity.
2. Failure to identify the appropriate PMT requirements for local leak rate testing on the MWR during supervisory review.

Corrective actions that have been taken:

1. A Local Leak Rate Test was satisfactorily performed on the subject valve and it was returned to an operable status at approximately 2200 hours on January 6, 1988.
2. A review of MWRs and LLRT records was conducted to ensure that proper testing had been done to assure containment integrity.
3. Information regarding this event was discussed with maintenance supervisory personnel and maintenance planners. The intent of these briefings was to make these personnel aware of the importance of maintaining containment integrity. Maintenance planners were advised to discuss PMT requirements with the cognizant system engineer prior to issuing a MWR, especially in regards to containment isolation valves.
4. To enhance the current MWR program, MWR procedure, OPGP03-ZM-0003, was revised to assure that the required PMTs are identified on MWRs involving containment isolation valves.

Corrective action that will be taken:

Training of shift supervisors and support personnel will be conducted to reinforce the importance of post-maintenance testing with regard to containment integrity requirements.

Full Compliance:

The plant will be in full compliance upon completion of the training. This is expected to be done by March 3, 1988.

E. Statement of Violation 8801-05:

Surveillance Procedure Discrepancies

Criterion V of 10 CFR 50, Appendix B, requires, in part, that activities affecting quality be performed in accordance with approved drawings, instructions, and procedures appropriate to the activity.

The licensee's approved Operations Quality Assurance Plan, Section 112, "Test Control," Paragraph 6.4 requires that test procedure shall provide instructions for performing tests and provisions for documenting results.

Contrary to the above, the licensee failed to follow procedures associated with the Surveillance Program and/or failed to provide adequate procedure to control the activities affecting the quality of Technical Specification surveillance as identified in the six examples cited below:

1. In December 1987, the licensee collected 250 milliliter waste liquid discharge samples in lieu of the one liter samples required by Procedure 1PSP07-WL-0001.
2. On January 7, 1988, it was found that Procedure OPSP07-CR-0002 was inadequate in that it failed to provide the necessary requirement to calculate an average sample. Chemistry Technicians were observed to be calculating the average sample in accordance with verbal instructions in lieu of following the procedure.
3. On January 6, 1988, it was found the Procedures 1PSP02-RC-0454, 0461, and 0462 had been improperly modified by Field Change Request to waive Steps 7.4.2 and 7.7.16 when reactor coolant temperature is below 538°F in that the data sheet was not modified to support the change.
4. On January 7, 1988, it was found that Procedure OPSP04-XC-0001, Revision 1, had been improperly revised such that changes were incorporated into an unapproved draft of Revision 0 in lieu of an approved copy of Revision 0, resulting in a Revision 1 that contained draft errors. This is contrary to the requirements of OPGP03-ZA-0002, Revision 10, "Plant Procedures."
5. On January 6, 1988, it was found that Procedure 1PSP11-RH-0004, Revision 1, failed to contain numeric values of the acceptance criteria due to a series of inappropriate changes. This is contrary to the requirements of OPGP03-ZE-0005, Revision 6, "Plant Surveillance Procedure Preparation," Section 3.2.6.
6. On January 6, 1988, it was found that two completed surveillance test packages for OPSP04-DG-0001 were presented to the Plant Operations Review Committee (PORC) for acceptance of the results based on previously accomplished preoperational test information with missing data. The packages were approved by the PORC with missing data.

Reason for violation:

Item 1 was attributable to poor judgement by technicians who decided to substitute a different size container for the size specified in the procedure.

Item 2 was attributable to inadequate description of required calculations in the procedure.

Items 3, 4, and 5 were attributable to a failure to follow procedures regarding the use of FCRs.

Item 6 is attributable to two factors:

1. Personnel reviewing the pre-operational test package prior to its presentation to PORC failed to detect a copying error.
2. The level of review performed by PORC was not of sufficient detail and depth to detect the copying error.

Corrective actions that have been taken:

Item 1: Chemical Analysis personnel have been reinstructed regarding the importance of following procedures verbatim.

Item 2: Chemical Analysis surveillance procedures requiring calculations have been reviewed and revised as necessary to ensure that adequate instruction on performance of the calculations is provided.

Items 3-5: A Departmental bulletin was issued providing additional guidance to NPOD personnel regarding the control of Field Change Request changes to surveillance procedures.

Procedure OPGP03-ZA-0002 "Plant Procedures" was revised to include specific guidelines for the review and implementation of Field Change Requests.

Item 6: The data missing from the subject packages was reviewed and approved by PORC and inserted in the file packages.

An ISEG special investigation was conducted to review the PORC process to recommend possible enhancements. The recommendations, which were issued February 22, 1988 include more formal control of the PORC meetings, more control of "walk-on" items, better definition of scope of review.

Corrective action that will be taken:

Management will review the ISEG recommendations and identify any improvements and a schedule for implementation by March 31, 1988.

Full Compliance:

The plant is in full compliance, however, enhancements to the PORC process may be made following review and analysis of the ISEG report.

F. Statement of Violation 8801-06:

Implementation of Technical Specification Requirements

Technical Specification 6.8.1 requires that written procedures shall be established, implemented, and maintained covering activities recommended in Appendix A of Regulatory Guide 1.33, Revision 2, February 1978.

Contrary to the above, it was found on January 7, 1988, that the licensee had failed to provide test procedures, which completely implemented the final technical specifications as cited below:

1. Procedure 1PSP10-RC-0001, Revision 0, contained an acceptance criterion calling for a figure in the technical specifications which had been deleted when the final technical specifications were issued, thus resulting in an incomplete and inadequate procedure for conducting the surveillance.
2. Procedure OPSP10-II-0003 was found to contain an incorrect and nonconservative equation for adjusting the core radial peaking factor limit for fractional power levels, thus resulting in an incorrect and inadequate procedure conducting the surveillance.

Reason for violation:

The root cause of this violation was that the process to incorporate changes in the Technical Specifications into procedures did not track required actions to completion.

Corrective actions that have been taken:

1. OPSP10-II-0003 has been corrected to be consistent with the Technical Specifications. Procedure 1PEP04-ZG-0007 has been identified as the proper procedure for use in RCS flow measurement in lieu of 1PSP10-RC-0001.
2. Sufficient review of surveillance procedures has been completed to assure compliance with Technical Specification requirements for operation through Mode 2.
3. Procedure OPGP03-ZA-0002 has been revised to require an independent technical review of new procedures. Requirements have been added to the procedure to perform a "walk through" of new surveillance procedures to confirm the procedure can be accomplished as written. Additional procedure review criteria have been imposed by means of an attribute check sheet which includes items for confirming Technical Specification requirements.
4. Interdepartmental Procedure 3.20Q is now in effect which requires Technical Specification changes to be tracked from request through implementation. It also requires a QA verification of implementation.

Corrective action that will be taken:

Sufficient review of surveillance procedures to assure that Mode 1 Technical Specification requirements are incorporated will be completed prior to exceeding 5% power.

Full Compliance:

The plant is in compliance for operation through Mode 2. Confirmation of full compliance will be achieved upon completion of the remaining reviews as described above.

G. Statement of Violation 8801-07:

Overdue Station Problem Report Investigation

Criterion V of Appendix B to 10 CFR Part 50 and the licensee's approved quality assurance plan require that activities affecting quality be conducted in accordance with approved procedures. Interdepartmental Procedure IP 1.45Q, "Station Problem Reporting," requires that corrective investigations be completed within 17 days.

Contrary to the above, on January 4, 1988, 68 of 204 station problem reports were overdue (past 17 days) for completion.

Reason for the violation:

The root cause of the violation was inadequate assignment of resources to prioritize and resolve the SPRs.

Corrective actions that have been taken:

1. The safety significance of each SPR is evaluated when the SPR is first initiated, and immediate action is taken if required to assure plant safety. A review was performed which confirmed that the conditions described in the open SPRs have been adequately addressed so that plant safety is not adversely affected.
2. Revision 1 of Procedure 1.45Q was implemented on February 22, 1988. This new procedure increased management's involvement in the process by requiring an early establishment of priority and due date by the Plant Manager. The revision also requires the SPR originator to take the SPR directly to the Shift Supervisor.
3. Additional licensing engineers have been assigned to coordinate resolution of SPRs. These personnel have participated in a concerted effort to resolve overdue SPRs. The backlog of overdue SPRs has been reduced to an acceptable level.

Correction action that will be taken:

No further action is required.

Full Compliance:

The plant is in full compliance.

H. Inadequate Corrective Action (8801-08):

Criterion XVI of Appendix B to 10 CFR Part 50 and the licensee's approved quality assurance plan require conditions adverse to quality be promptly identified and corrected. In August 1987, a quality assurance audit deficiency report was issued which identified 55 of 179 station problem reports were overdue for completion. The deficiency was closed on the basis that tracking responsibility for station problem report investigation tracking was procedurally changed.

Contrary to the above, it was found on January 4, 1988, that the corrective action was not adequate in that 68 of 204 station problem reports were overdue for completion.

Reason for the violation:

As noted in the statement of the violation, the backlog of overdue SPRs was identified in an audit in August 1987, and as corrective action procedures were changed to assign responsibility for coordination of SPRs to Licensing. Nuclear Assurance accepted this response and a follow up audit to determine the effectiveness of the corrective action was scheduled for February 1988. Prior to the follow-up audit, management failed to identify that the corrective action had not been effective.

Corrective actions which have been taken:

In accordance with the schedule adopted upon acceptance of the response to the August 1987 audit, in February 1988 Nuclear Assurance completed its follow-up audit of the effectiveness of the corrective actions. The follow-up audit identified inadequate effectiveness of the earlier corrective action as a significant deficiency (DR S87-064, Rev. 1). Response to DR S87-064, Rev. 1 is due by March 18, 1988. The response to DR S87-064, Rev. 1 will be reviewed by Nuclear Assurance.

The corrective actions described in response to Notice of Violation 88 01-07 have been implemented, and are expected to resolve DR S87-064, Rev. 1. As an interim measure, until management gains added confidence in the effectiveness of the revisions to the SPR program, Licensing is providing management with weekly reports of SPR status.

Corrective actions that will be taken:

As a result of the DR, a review of Station Problem Reports is being conducted to assure that root causes were adequately addressed and that supporting documentation properly dispositions the required actions. This activity is expected to be complete by 60 days after the issuance of the Full Power Operating License.

Full Compliance:

The plant will be confirmed to be full compliance upon completion of the SPR review described above.