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PG&E Letter DCL-06-032

U.S. Nuclear Regulatory Commission
ATTN: Document Control Desk
Washington, DC 20555-0001

Docket No. 50-275, OL-DPR-80
Docket No. 50-323, OL-DPR-82
Diablo Canyon Power Plant Units 1 and 2
Commitment Change Summary Report

Dear Commissioners and Staff:

In accordance with NEI 99-04, "Guidelines for Managing NRC Commitment Changes," Revision 0, endorsed by the NRC in SECY-00-0045, Pacific Gas and Electric Company is submitting the enclosed Commitment Change Summary Report for Diablo Canyon Power Plant, Units 1 and 2. The report provides a summary of the regulatory commitment changes that occurred during the period January 1, 2004, through December 31, 2005. The summary for each change includes identification of the source document(s), a description of the original and revised commitments, and a justification for the change.

The regulatory commitment changes described in the report were processed in accordance with the NEI guideline, and were determined to not require prior NRC approval. The report does not include commitment changes that are contained in 10 CFR 50.59 evaluation summary reports, or in other submittals previously transmitted to the NRC.

Sincerely,

James R. Becker

SSZ1/R0261035
Enclosure
cc: Terry W. Jackson, NRC Senior Resident Inspector
Alan B. Wang, NRC Project Manager
cc/enc: Bruce S. Mallett, NRC Region IV (2)

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JANUARY 1, 2004 THROUGH DECEMBER 31, 2005

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1.0 VERIFY START OF BOTH ASW PUMPS ON SAFETY INJECTION

Source Document(s)

Pacific Gas and Electric Company (PG&E) Letter DCL-89-078
Licensee Event Report (LER) 1-84-040-00
PG&E Letter DCL-89-206
Nonconformance Report N0001235

Original Commitment

"Emergency Operating Procedure (EOP) E-0, 'Reactor Trip or Safety Injection,' has been revised to add a new step to verify that both ASW pumps start following a safety injection. If one pump starts, the operator is instructed to place the second CCW heat exchanger in service in accordance with Operating Procedure E-5:II, 'Auxiliary Salt Water System – Two CCW Heat Exchanger Operation.'"

Revised Commitment

Delete the commitment.

Justification for Change

Earlier design calculations indicated the Component Cooling Water (CCW)/Auxiliary Salt Water (ASW) systems could not meet design requirements under standard single failure assumptions. The commitment was needed to ensure that compensatory actions were maintained in the appropriate procedures. Subsequent calculations show that the CCW/ASW systems are fully capable of meeting design criteria with a single heat exchanger in service. There is no longer any need for the compensatory actions in order to meet design criteria.

2.0 TUBE SUPPORT PLATE DEGRADATION

Source Document(s)

NRC Generic Letter 97-06
PG&E Letter DCL-98-046
PG&E Letter DCL-01-110

Original Commitment

"Computerized data screening will be performed on 100 percent of the [steam generator tube inspection] bobbin data each refueling outage to identify potentially new Suspect Ligament Crack (SLC) indications."

Revised Commitment

Computerized data screening or manual analysis will be performed on 100 percent of the bobbin data each refueling outage to identify potentially new SLC indications.

Justification for Change

This commitment was made in response to NRC Generic Letter 97-06, to identify tube support plate degradation in the steam generators. Manual analysis is equivalent to computerized data screening. This change provides an option of using either computerized data screening (automated analysis) or manual analysis to identify potentially new SLC indications.

3.0 DEVELOP REQUAL PROGRAM

Source Document(s)

PG&E Letter DCL-98-130

Original Commitment

"PG&E is developing a requalification program for presently qualified [10 CFR 50.59 LBIE] preparers and reviewers. Program goals include improving expertise for developing and reviewing changes for 10 CFR 50.59 applicability, increasing awareness of regulatory and industry issues, and improving licensing bases search techniques."

Revised Commitment

PG&E provides continuing training for 10 CFR 50.59 screeners and evaluators on an as-needed basis. Program goals include maintaining expertise in developing and reviewing changes for 10 CFR 50.59 applicability, maintaining awareness of regulatory and industry issues, and maintaining expertise in the use of current licensing bases search techniques.

Justification for Change

This commitment was made as a corrective action to prevent recurrence for an NRC Notice of Violation of 10 CFR 50.59. Major changes were made to the 10 CFR 50.59 rule in 2001. The changes clarified many aspects of the rule making it easier to understand, and relaxed certain provisions of the rule, significantly reducing the number of proposed changes requiring approval under the license amendment process. With almost three years of experience with the new rule, it has become evident that a formal requalification training program for 10 CFR 50.59 screeners and evaluators is no longer necessary. Continuing training, implemented through periodic communications from the program owner on industry issues, search techniques, and resolution of deficiencies is sufficient to maintain an appropriate level of expertise. Unless the rule changes, there is no need to provide recurring classroom or computer based training.

4.0 SAMPLING FREQUENCY OF DIESEL FUEL DAY TANKS

Source Document(s)

PG&E Letter DCL-90-021
LER 1-880014
PG&E Letter DCL-88-195

Original Commitment

"Diesel fuel oil in the day tanks is sampled on a monthly basis, as specified in Surveillance Test Procedure M-10B."

Revised Commitment

Diesel fuel oil in the day tanks will be sampled quarterly. This frequency will be reassessed, as appropriate, based on reviews of analysis data results.

Justification for Change

On August 1, 1988, PG&E submitted DCL-88-195, "Voluntary Licensee Event Report 1-88-014-00, Contamination of the Diesel Generator Day Tank Fuel Oil Due to Biofouling." A contributing cause of the problem was the lack of a sampling and biociding program for the day tanks. In this report, PG&E stated it would develop a sampling and inspection program for the diesel generator day tanks. A corrective action to prevent recurrence was a revision to chemistry scheduling procedure CAP A-9, "Auxiliary System Sampling Schedule," to include sampling of the day tanks. The basis for a 31-day sampling was that it was consistent with the sampling frequency of the diesel fuel oil storage tanks.

Corrective actions were to add a biocide to the diesel fuel oil storage tanks, implement a sampling and analysis program, and route the fuel oil waste return lines to a waste container during testing of the diesel engines. Biocides are added to new fuel. We have not had a biological fungal problem since we started using these biocides. A sampling and analysis program was implemented and the waste oil return lines are rerouted during testing. Data analysis trend graphs show the corrective actions have been successful.

5.0 MAIN UNIT TURBINE SPEED VERIFICATION

Source Document(s)

PG&E Letter DCL-93-032
LER 1-92-018-01
NRC Inspection Report 93-029

Original Commitment

"Procedures for the Main Turbine were revised to verify that the main turbine speed reference is set to 0 prior to re-latching the main turbine."

Revised Commitment

Verify main turbine speed set point is tracking actual turbine speed prior to relatching.

Justification for Change

Several design features in the new Triconex turbine control system minimize the likelihood of a faulty input affecting operations. All Triconex inputs are triple modular redundant so a single digital input card component failure will not result in an erroneous turbine latch signal being available. Additionally, if the turbine is tripped but PS-22 fails to change state, the operators will receive several alarms from the Triconex system and it will prevent latching the turbine from the control panel. The revised commitment is needed because of the ability to override all the turbine control system interlocks by latching the main turbine from the front standard manually. By assuring the speed setpoint is tracking the actual turbine speed, it can be verified that the control system has sensed the trip and latching will not cause a cooldown.

6.0 ROOT CAUSE ANALYSIS REQUIREMENTS

Source Document(s)

NRC Inspection Report 50-275/88-15 and 50-323/88-14
PG&E Letter DCL-88-236

Original Commitment

"Originally, it was required to perform a Quality Evaluation (QE) for any problem which did not meet the criteria for a Non-Conformance Report (NCR) and for which a management AR review process had determined that a QE or formal cause analysis is warranted. It was also required that Nuclear Quality Services concur with the cause determination and the Corrective Actions to Prevent Recurrence (CAPR) for all quality-related QEs."

Revised Commitment

PG&E no longer performs QEs. We deleted references to them and deleted the requirements for Quality Verification (formally Nuclear Quality Services) concurrence with cause determinations and CAPRs.

Justification for Change

The original commitments were made to address lowering quality problem reporting threshold, and to assure that cause analysis and CAPRs were reviewed by appropriate levels of management. The Diablo Canyon Power Plant (DCPP) quality assurance program and corrective action program have undergone significant changes since 1988. Quality problem reporting is now reviewed by a committee, Action Request Review Team, and cause determinations are reviewed by the process improvement group or an upper level management review board, Corrective Action Review Board (CARB).

7.0 QUALITY PROBLEM STATUS REPORT

Source Document(s)

PG&E Letter DCL-87-136
PG&E Letter DCL-89-006

Original Commitment

"The quality problem status reports will have the following characteristics for their monthly distribution: Statistics on the number of NCRs, Audit Finding Reports (AFRs), and other department-specific Quality Problem Reports (QPARs) issued, closed, and open for each department. Age of the open NCRs, AFRs, and other department specific quality problem reports for each department. Identification for each department of the NCRs, AFRs, and other department specific QPRs that are repetitive, whose closures are late, or whose closures are deemed otherwise 'critical.'"

Revised Commitment

This commitment was deleted.

Justification for Change

The intent of this 1987 commitment was to increase management attention on quality problems. A culture of rigorous review of performance metrics, including quality problem status, has been implemented at DCPP through Program Directive OM15, "Performance Improvement Program." Additionally, the CARB has been implemented through OM4.ID15, "Corrective Action Review Board (CARB)," and has the responsibility to provide senior management oversight of the Corrective Action Program (CAP). This oversight function includes:

- Reviewing root cause analyses and concur with the root cause(s) and the CAPRs.
- Managing timeliness of root cause analysis
- Concurring with the effectiveness evaluation
- Reviewing selected Apparent Cause Evaluations
- Reviewing selected CAP self assessments and plans
- Periodically reviewing event trending reports
- Periodically reviewing the problem significance and response classifications

8.0 PERFORMANCE INDICATORS

Source Document(s)

PG&E Letter DCL-87-136

Original Commitment

"Goals in addition to those already established for reduction in the number of NCRs, LERs, and QEs, will be established with respect to root causes attributed to procedure noncompliance, inadequate communications, and late reporting for determining the effectiveness of these management actions. Performance indicators for outstanding Action Request (AR) and corrective maintenance resolution are being developed. Performance indicators for assessing the timeliness of necessary procedure changes are being developed. The Quality director will provide a monthly report to management that includes an assessment of the overall health of the Problem Prevention and Resolution (PPR) program. Directors will review the performance indicators in the monthly PPR report to identify areas requiring management attention (e.g. corrective action timeliness, adverse trends, human performance)."

Revised Commitment

This commitment has been deleted.

Justification for Change

The intent of this 1987 commitment was to increase management attention to the effectiveness of the corrective action program.

A culture of rigorous review of performance metrics, which assess the overall health of the PPR program, has been established via Program Directive OM15, "Performance Improvement Program." Additionally, the CARB has been established via OM4.ID15.

9.0 TIMELINESS OF CORRECTIVE ACTIONS

Source Document(s)

PG&E Letter DCL-87-136
PG&E Letter DCL-89-006

Original Commitment

"As an additional action to improve the timeliness of corrective actions on quality problems, PG&E intends to provide more effective indication of the significance of identified problems by developing a new priority system for ARs. In addition, procedural guidance is being developed to require that QEs be periodically reviewed and statused. This guidance will be completed by October 1, 1987."

Revised Commitment

As an additional action to improve the timeliness of corrective actions on quality problems, PG&E intends to provide more effective indication of the significance of identified problems by developing a new priority system for problem reports.

Justification for Change

The intent of the 1987 commitment was to increase management attention to quality problems.

A culture of rigorous review of performance metrics, including quality problem status, has been implemented at DCPP through PD OM15, Performance Improvement Program. Additionally, the CARB has been implemented through OM4.ID15.