



South Texas Project Electric Generating Station P.O. Box 289 Wadsworth, Texas 77483

January 31, 2007
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File No.: G09.19
10CFR50.54(a)
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U. S. Nuclear Regulatory Commission
Attention: Document Control Desk
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South Texas Project
Units 1 and 2
Docket Nos. STN 50-498 and STN 50-499
Submittal of Operations Quality Assurance Plan Change QA-063

Reference: (1) Quality Assurance Program for the Design and Construction Phase of the South Texas Project, ST-HL-AE-802, dated March 9, 1982

This change has been reviewed and determined to represent a reduction in commitment and is submitted to the Nuclear Regulatory Commission (NRC) for approval prior to implementation in accordance with the provisions of 10CFR50.54(a)(4).

In accordance with the Operations Quality Assurance Plan (OQAP), Chapter 15.0, section 5.4.1, STP Nuclear Operating Company (STPNOC) is required to conduct an annual assessment of the Quality organization's implementation of the OQAP. STPNOC is submitting this change to the OQAP to request this frequency be changed to require the assessment to be performed at the same periodicity as internal audits (i.e., nominal biennial frequency).

The current requirement to perform an independent annual assessment of the Quality organization's implementation of the OQAP stems from a requirement in the Thermal Power Organization (Bechtel) Quality Assurance Program during the design, procurement, and construction of the South Texas Project (section 2.8). This was submitted to the NRC as part of the submittal in Reference 1. This requirement was subsequently incorporated into Houston Lighting & Power's Operations Quality Assurance Plan in its current form as stated above (Chapter 15.0, section 5.4.1). There is no regulatory basis for performing the assessment annually. It is therefore concluded that the current annual assessment of the Quality organization's implementation of the OQAP is overly conservative in relation to other independent oversight activities used to determine the adequacy of the

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implementation of the QQAP. STPNOC participates in similar assessments for other licensees and has noted that it is generally standard practice to perform these assessments on a biennial frequency. STPNOC proposes the frequency of this assessment be changed to coincide with the frequency of internal audits for station functional areas (i.e., nominal biennial frequency).

This change continues to satisfy the criteria of 10CFR50 Appendix B as implemented by ANSI N18.7-1976/ANS-3.2, section 4.5 which states in part "Audits of selected aspects of operational phase activities shall be performed with a frequency commensurate with their safety significance and in such a manner as to assure that an audit of all safety-related functions is completed within a period of two years." STPNOC is currently committed in the QQAP, Chapter 15.0, section 5.2.3.1 to perform internal audits at "... a frequency commensurate with their safety significance, past performance and regulatory requirements. Audits are scheduled on a nominal biennial frequency, except those audits whose frequency is specifically governed by regulation."

If there are any questions regarding this matter, please contact Mr. T. F. Walker at (361) 972-7392 or me at (361) 972-8757.

A handwritten signature in black ink, appearing to read "J. J. Sheppard", with a long horizontal flourish extending to the right.

J. J. Sheppard
President and Chief
Executive Officer

Attachments: 1. Operations Quality Assurance Plan change QA-063

cc:

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CHANGE QA-063
SUMMARY OF CHANGES
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ALL CHANGES ARE IN BOLD TYPE

CHAPTER	LOCATION	ACTION	TEXT
TOC	CH 15.0	INSERT	QA-063
CH 15.0	5.4.1.	DELETE	annually
		INSERT	on a nominal biennial frequency

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2.0	Program Description	15	2-1-06	QA-060, 061
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12.0	Instrument and Calibration Control	6	2-1-98	
13.0	Control Of Conditions Adverse to Quality	11	2-1-06	QA-061
14.0	Records Control	8	2-1-06	
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16.0	Independent Technical Review	9	2-01-06	QA-060, 061
17.0	ASME Code Section XI - Repairs and Replacements	7	2-01-06	QA-060, 061, 062
18.0	ASME Code Section XI - Inservice Inspection and Testing	8	2-01-06	QA-061, 062
19.0	Administrative Controls	2	2-01-06	QA-060

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1.0 PURPOSE

- 1.1 The purpose of this chapter is to establish requirements for a system of independent oversight activities of quality assurance programs for the South Texas Project Electric Generating Station (STP).

2.0 SCOPE

- 2.1 This chapter provides for implementing a program of independent oversight activities which includes audits, assessments, evaluations, performance monitoring, and surveillances to ensure the requirements of the Operations Quality Assurance Program are being properly implemented.

3.0 DEFINITIONS

- 3.1 None

4.0 REFERENCES

- 4.1 OQAP Chapter 2.0, Table I
- 4.2 OQAP Chapter 4.0, Qualification, Training and Certification of Personnel
- 4.3 OQAP Chapter 7.0, Procurement
- 4.4 OQAP Chapter 13.0, Control of Conditions Adverse to Quality
- 4.5 OQAP Chapter 14.0, Records Control

5.0 REQUIREMENTS

- 5.1 Independent Oversight Activities
- 5.1.1 Procedures shall be developed to control independent oversight activities. These activities include, but are not limited to, audits, assessments, evaluations, performance monitoring, and surveillances. These activities shall be used to observe and verify that activities are accomplished in accordance with prescribed requirements.

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5.2 Audits

5.2.1 A comprehensive audit program in compliance with Reference 4.1 shall be established and implemented by STP Nuclear Operating Company (STPNOC) to verify internal and external quality activity compliance with the Quality Program. The audit program shall assure that applicable elements of the program have been developed, documented, and are effectively implemented and shall provide for reporting and reviewing audit results by appropriate levels of management. These audits shall encompass:

- 5.2.1.1 The conformance of unit operation to provisions contained within the Technical Specifications and applicable license conditions;
- 5.2.1.2 The training and qualification of the unit staff;
- 5.2.1.3 Actions taken to correct deficiencies occurring in equipment, structures, systems, components, or method of operation that affect nuclear safety;
- 5.2.1.4 The performance of activities required by the Operational Quality Assurance Program to meet the criteria of Appendix B, 10CFR50;
- 5.2.1.5 The fire protection programmatic controls including the implementing procedures;
- 5.2.1.6 The fire protection equipment and program implementation utilizing either a qualified offsite licensee fire protection engineer or an outside independent fire protection consultant;
- 5.2.1.7 The Radiological Environmental Monitoring Program and the results thereof;
- 5.2.1.8 The OFFSITE DOSE CALCULATION MANUAL and implementing procedures;
- 5.2.1.9 The PROCESS CONTROL PROGRAM and implementing procedures for processing and packaging of radioactive wastes;

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5.2.1.10 The performance of activities required by the Quality Assurance Program for effluent and environmental monitoring; and

5.2.1.11 Other activities and documents as requested by the SMT or the President and Chief Executive Officer.

5.2.2 Qualified personnel assigned auditing responsibilities shall be independent of any direct responsibility for the performance of the activities which they audit; shall be experienced or trained commensurate with the scope, complexity, or special nature of the activities to be audited; and shall be qualified in accordance with the requirements of Reference 4.2.

5.2.2.1 An audit team consists of one (or more) qualified person(s). A qualified lead auditor shall be appointed as the audit team leader. The audit team leader shall be responsible for the written plans, checklists, team orientation, audit notification, pre-audit conference, audit performance, post-audit conference, reporting, and follow-up activity to assure corrective action. The audit team leader shall promptly report conditions requiring immediate corrective action to the appropriate management of the audited organization. Other audit findings will be identified to the audited organization at the post-audit conference.

5.2.2.2 Other qualified personnel may assist in the conduct of audits, such as technical specialists or management representatives.

5.2.3 Internal Audits

5.2.3.1 Internal audits shall be conducted by the Quality Department and performed with a frequency commensurate with their safety significance, past performance and regulatory requirements. Audits are scheduled on a nominal biennial frequency, except those audits whose frequency is specifically governed by regulation.

If a decision is made to extend an audit beyond that nominal frequency, the basis for that decision shall be documented. Decisions shall be approved by the Manager, Quality and notifications made to the General Manager, Oversight and the Senior Management Team and the Vice President Oversight & Regulatory Affairs for Units 3 & 4.

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- 5.2.3.2 Review of the audit program shall be performed at least semiannually by the Senior Management Team or by a management representative to verify that audits are being accomplished in accordance with the requirements of the Quality Program.
- 5.2.3.3 Audit results shall be reviewed periodically by the Quality organization for quality trends and overall audit program effectiveness. The results of these reviews shall be reported to appropriate management in periodic summary reports.
- 5.2.3.4 Audited organizations are responsible for providing timely corrective action including action to prevent recurrence for programmatic problems identified by an audit.
- 5.2.4 Supplemental audits shall be conducted when:
 - 5.2.4.1 Significant changes are made to the quality assurance program.
 - 5.2.4.2 It is necessary to determine the root cause of problem areas which may impact the effectiveness of the quality assurance program.
 - 5.2.4.3 A systematic, independent assessment of program effectiveness is necessary.
 - 5.2.4.4 Requested by appropriate management.
- 5.2.5 Audit implementation shall include the following:
 - 5.2.5.1 Written notification to the audited organization of the audit, if an announced audit.
 - 5.2.5.2 Development of an individual audit plan/scope. The audit plan and any necessary reference documents shall be available to the audit team members.
 - 5.2.5.3 A pre-audit and post-audit conference with responsible organizational management.
 - 5.2.5.4 Use of a checklist or procedure as a guide during the performance of the audit.
 - 5.2.5.5 Identifying and documenting conditions adverse to quality.

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5.2.5.6 Audit reports shall be prepared and submitted to the audited organization, senior management, and the President and Chief Executive Officer within thirty days after the post-audit conference. The audit report shall address those items required by Reference 4.1.

5.2.5.7 Audited organizations provide timely and thorough corrective action and recurrence control to discrepancies identified during the audit. In the event that corrective action cannot be completed within thirty days, the audited organization's response shall include a scheduled date for the corrective action. Earlier dates for corrective action may be established if circumstances dictate.

5.2.5.8 Evaluation of corrective action for conditions adverse to quality and follow-up verification as appropriate.

5.3 Surveillance/Quality Performance Monitoring

5.3.1 Procedures and/or instructions shall be developed to control surveillance/quality performance monitoring activities. Surveillance/quality performance monitoring activities shall be used to observe and verify that activities are accomplished in accordance with prescribed procedures.

5.3.2 Surveillance/quality performance monitoring activities will be performed during refueling outages, startup activities, and normal and off-normal operational activities. Areas to be monitored will be determined based on safety significance, past performance, regulatory requirements, and customer request.

5.3.3 The frequency of surveillance/quality performance monitoring activities is based upon the complexity of the activity, importance of the activity, and severity level of conditions noted during previous oversight activities.

5.3.4 Surveillance/quality performance monitoring results shall be documented and a summary shall be prepared and transmitted to responsible management.

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5.4 Assessments/Evaluations

5.4.1 Assessments are conducted on a nominal biennial frequency in accordance with written procedures to assess the Quality organization's implementation of the Operations Quality Assurance Plan.

5.4.1.1 These assessments will be conducted by organizations independent of the activities performed to assure the STPNOC OQAP is being properly implemented.

5.4.1.2 The Senior Management Team shall review the scope and schedule of the assessment.

5.4.1.3 The results of these assessments will be transmitted to the President and Chief Executive Officer and the Senior Management Team.

5.4.2 Other assessments/evaluations may be performed to verify activities are accomplished in accordance with applicable requirements and prescribed procedures.

5.4.2.1 These assessments/evaluations will be performed on areas based on their safety significance, past performance, regulatory requirements, and customer request.

5.4.2.2 Assessment/evaluation results shall be documented and transmitted to appropriate management.

5.5 An approved oversight plan shall be issued annually to include:

5.5.1 Activities/organizations to receive independent oversight.

5.5.2 Time frame in which the oversight activity will be conducted.

5.6 Conditions adverse to quality identified during an independent oversight activity shall be documented in accordance with Reference 4.4.

5.7 Personnel performing independent oversight activities shall be trained and qualified in accordance with Reference 4.2.

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6.0 DOCUMENTATION

- 6.1 Procedures which are generated as required by this chapter shall identify the records which are required to implement and document those activities. The records shall be controlled in accordance with Reference 4.5.

7.0 ATTACHMENTS

- 7.1 None