

U.S. Nuclear Regulatory Commission
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Enclosures

cc (Enclosures):

NRC Resident Inspector
Watts Bar Nuclear Plant
Rt. 2, Box 700
Spring City, Tennessee 37381

Mr. P. S. Tam, Senior Project Manager
U.S. Nuclear Regulatory Commission
One White Flint North
11555 Rockville Pike
Rockville, Maryland 20852

U.S. Nuclear Regulatory Commission
Region II
101 Marietta Street, NW, Suite 2900
Atlanta, Georgia 30323

ENCLOSURE 1

WATTS BAR NUCLEAR PLANT UNITS 1 AND 2
REPLY TO NOTICE OF VIOLATION
NRC'S APRIL 28, 1994 LETTER TO TVA
NRC VIOLATIONS 390, 391/94-22-01

DESCRIPTION OF VIOLATION

10 CFR Part 50, Appendix B, Criterion XVI, Corrective Action, and Tennessee Valley Authority Nuclear Quality Assurance Plan, TVA-NQA-PLN89A, Revision 3, paragraph 10.2.2, require that measures be established to assure that conditions adverse to quality are promptly identified and corrected.

Nuclear Power Standard STD-3.4, Corrective Action Program, Revision 2, specifies the acceptable methods for implementing the TVA Nuclear Power corrective action program. Standard STD-3.4 also specifies that standard STD-3.6, Problem Evaluation Reports, contains the requirements to identify and track to closure the actions necessary to correct adverse conditions and provide recurrence control, if required, for adverse conditions documented on problem evaluation reports (PER).

Site Standard Practice SSP-3.04, Corrective Action Program, specifies the acceptable methods for implementing the corrective action program at the Watts Bar Nuclear Plant. Procedure SSP-3.04 also specifies that Procedure SSP-3.06, Problem Evaluation Reports, fulfills the requirements to identify and track to closure the actions necessary to correct adverse conditions and provide recurrence control, if required, for adverse conditions documented on PERs.

Contrary to the above, activities affecting quality were not properly identified and corrected in that the established corrective actions for the following examples were inadequate:

VIOLATION EXAMPLE 1

As of March 31, 1994, the corrective action plan for PER CHPER930001, issued to address deficiencies in the control of quality assurance related software, did not correct the failure to perform periodic assessments of document holders as required by Standard STD-2.12, "Control of Computer Application Software," and Work Instruction WI-6.0, "Document Control." This PER was closed on April 1, 1993.

TVA RESPONSE TO EXAMPLE 1

TVA agrees with violation Example 1, above.

REASON FOR THE VIOLATION - EXAMPLE 1

The assigned Corporate Information Service (IS) supervisor failed to verify through self-checking that stated actions were completed in accordance with PER action requirements.

In addition, the combination of insufficient refresher training for people in IS in the attributes needed to close out a corrective action document and ineffective self-checking to ensure the criteria of the corrective action program were met contributed to the unsatisfactory performance.

CORRECTIVE STEPS TAKEN AND RESULTS ACHIEVED

The PER CHPER930001 was closed on April 1, 1993. At the time of closure, the only assessment records on file were those of the REX software. The remainder of the software information was loaded into the Document Distribution System (DDS) and resulted in initiation of 619 additional assessments during the period of April 20, 1993, to March 15, 1994. This was after the closing date of April 1, 1993. The late assessments identified in this process have been escalated and documented in PER CHPER940008.

As noted in the Inspection Report, CHPER940011 was issued to address the incorrect closure of CHPER930001. The corrective actions of CHPER940011, required that the Production Management Document Control Library Personnel in Corporate IS be trained on STD-3.4, "Corrective Action Program," STD-3.6, "Problem Evaluation Report," and STD-2.12, "Control of Computer Application Software." Corporate IS has also included STD-3.4 and STD-3.6 in the individuals' training matrices.

CORRECTIVE STEPS TAKEN TO AVOID FURTHER VIOLATIONS

The responsible supervisor is no longer in this position. The new supervisor resolved CHPER940011 and conducted the training described above. Training was completed on April 19, 1994. This training will serve as recurrence control. Additionally, to determine if further actions are necessary in Corporate, this issue has been added for evaluation during a corrective action audit which is scheduled to begin July 1994.

DATE WHEN FULL COMPLIANCE WILL BE ACHIEVED

Full compliance was achieved upon closure of PER CHPER940011 on April 22, 1994.

VIOLATION EXAMPLE 2

As of March 31, 1994, the description of condition and the corrective action plan for PER WBPER930057, issued to address the implementation of the Harsh Environment Records System computer program before various required software quality assurance documents had been issued, did not identify or resolve the failure of the application owner to fulfill responsibilities for ensuring that all quality assurance software control requirements had been met prior to placing the program into production as required by Procedure SSP-2.12, "Control of Computer Application Software." This PER was closed on August 2, 1993. In addition, these adverse conditions were not documented on any other corrective action document.

TVA RESPONSE TO EXAMPLE 2

TVA agrees with violation Example 2, above.

REASON FOR VIOLATION - EXAMPLE 2

The violation occurred due to a misunderstanding of the responsibilities of software application owners as defined by Site Standard Practice (SSP)-2.12, Revision 1. Although the application owner identified the problem regarding the quality assurance documentation of the Harsh Environment Records System in WBPER930057, the description of condition focused on the Information System Department's role in the problem and not the role of the application owners. This was apparently caused by a misunderstanding of a statement in the procedure which stated that IS had "overall responsibility for document control requirements for computer application SOFTWARE."

Further, the corrective action was focused on bringing the software documentation into compliance and preventing further problems. The preparers did not document actions to address the responsibilities of the application owners. The close participation of the application owner in all phases of the corrective action document essentially achieved the appropriate corrective action for these areas, but these actions are not described in the corrective action document.

CORRECTIVE ACTIONS TAKEN AND RESULTS ACHIEVED

As stated in the inspection report closure for violation 93-20-03, the issues related to the software documentation have been resolved.

The corrective action document records (WBPER930057) will be supplemented to document the participation of the application owner in the corrective actions and to document the resolution of SSP-2.12 responsibility issues.

CORRECTIVE STEPS TAKEN TO PREVENT FURTHER VIOLATIONS

Management directed that the site Information Services manager would take ownership of site software to establish a single point of software control, compliance, and accountability. Site procedures are being revised to document this assignment by July 31, 1994.

As discussed in Enclosure 3 to TVA's May 13, 1994, response to NOV 94-13-01 and 02, TVA is conducting training sessions for selected personnel directly involved with SCAR and PER resolution. This training includes a focus on the need for clear justification for decisions made in the correction action document closures. This training will also address NRC's comment in the body of the report regarding information needed in the cause analysis section of PERs.

DATE WHEN FULL COMPLIANCE WILL BE ACHIEVED

Full compliance will be achieved upon completion of the supplement to the records for WBPER930057. This action is scheduled to be completed by June 30, 1994.

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LIST OF COMMITMENTS

1. Supplement the records for WBP930057 to document the participation of the application owner in the corrective actions, the resolution of SSP-2.12 responsibility issues, and the programmatic correction made to software control by June 30, 1994.
2. Revise site procedures to document Information Services ownership of site software by July 31, 1994.