

1987 DE

Attachment B
p. 1 of 2

UNITED STATES
NUCLEAR REGULATORY COMMISSION
WASHINGTON, D. C. 20540

APR 08 1987

870602T0339

B45 '870528 826

Mr. Walter H. Weber, Chairman
Nuclear Construction Issues Group
Union Electric Company
2815 Scott Avenue
St. Louis, MO 63103

QA Record

FILMED FROM
BEST AVAILABLE COPY

Dear Mr. Weber:

SUBJECT: "Sampling Plan For Visual Reinspection of Welds"
(NCIG-02) Revision 2

REFERENCE: Letters from R. A. Thomas to R. J. Bosnek,
dated March 18, 1987 and March 25, 1987

The staff has completed review of the subject document dated March 24, 1987 prepared by the Nuclear Construction Issues Group. We have concluded that NCIG-02 represents a technically acceptable approach to providing a uniform basis for conducting reinspections of welds, using the acceptance criteria contained in NCIG-01: "Visual Weld Acceptance Criteria for Structural Welding at Nuclear Power Plants," (VWAC). The staff's acceptance should not be construed to replace any licensing criteria or licensing commitments in the areas of structural welding.

Applicants and licensees wishing to utilize NCIG-02 for weld reinspection must commit to the use of VWAC. This commitment must be documented in the form of an amendment to the Safety Analysis Report for each station's license. The staff's processing of these amendments can be expected to be expeditious if no significant exceptions are taken to VWAC or NCIG-02. Any nonconformances found during the use of NCIG-02 must be properly evaluated and documented. A given representative physical property (i.e., hardness) shall not be used to justify another physical property (i.e., tensile strength). If representative physical properties are used for a group of items, in lieu of the use of specified or actual properties, the basis for doing so shall be justified and documented as part of the engineering evaluation.

The referenced letter dated March 18, 1987 raised the fact that the sampling plan methodology is not unique to reinspection of structural welds. We concur that the sampling methodology contained in NCIG-02 may be useful for evaluating the sampling of other homogeneous populations. Such use, however, should be submitted for prior-NRC approval on a case specific basis, so that we may gain experience and confidence with situations in which the document is applied to populations other than structural welds. The acceptance of the methodology for statistical sampling does not infer that statistical sampling

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Mr. Walter H. Weber

- 2 -

APR 08 1967

rather than complete reinspection is appropriate in all future cases. NCIS-02 is not applicable for periodic inservice inspections defined by ASME Boiler and Pressure Vessel Code, Section XI.

If you have any questions regarding this matter, please do not hesitate to contact us.

Sincerely,



Thomas P. Speis, Director
Division of Safety Review and Oversight
Office of Nuclear Reactor Regulation

cc: Ruble A. Thomas, NCIS
Douglas E. Dutton, NCIS

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INTEROFFICE MEMORANDUM

J.O. NO.
WO. NO.

16000.16

▲ 0-0-00

SUBJECT TRANSMITTAL FOR QACEG CATDs
BELLEFONTE NUCLEAR PLANT

DATE

December 09, 1987

FROM

J. E. Karr

TO

W. R. Brown, Jr.
Program Manager
ECTG Building - WBNP

CC

QACEG Category Head

The proposed Corrective Action Plan for CATD 80407-ELN-01 has been concurred with by QACEG.

Copy of CATDs and CAP attached.


J. E. Karr

JEK:LRF

cc (Attachments):

N. M. McCallum, Trl. #7, WBN

D. C. Steelfox, SWEC Trailer #7, Watts Bar
QACEG Files

ATTACHMENT D
ECSP CORRECTIVE
Action Tracking Document
(CATD)

INITIATION

- 1. Immediate Corrective Action Required: Yes No
- 2. Stop Work Recommended: Yes No
- 3. CATD No. 80407-BLN-01 4. INITIATION DATE 6/15/87
- 5. RESPONSIBLE ORGANIZATION: Project Engineering-BLN
- 6. PROBLEM DESCRIPTION: /X/ QR [unclear] /IN/R

See Attached 80407-BLN-01 Fact Sheet

// ATTACHMENTS

- 7. PREPARED BY: NAME G. A. Carter DATE: 6/15/87
- 8. CONCURRENCE: CEG-H [Signature] DATE: 6/17/87
- 9. APPROVAL: ECTG PROGRAM MGR: [Signature] DATE: 6/19/87

CORRECTIVE ACTION

- 10. PROPOSED CORRECTIVE ACTION PLAN: SEE ATTACHED
- [Signature] 12/4/87

// ATTACHMENTS

- 11. PROPOSED BY: DIRECTOR/MGR: [Signature] DATE: 7/22/87
- 12. CONCURRENCE: CEG-H [Signature] DATE: 12/10/87
- SFP: [Signature] DATE: _____
- ECTG PROGRAM MGR: _____ DATE: _____

VERIFICATION AND CLOSEOUT

- 13. Approved corrective actions have been verified as satisfactorily implemented.

SIGNATURE	TITLE	DATE
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NOTE: This applies to Concerns IN-36-243-002 and ES-95-001-WC3

CATD FACT SHEET

CATD No. 80407-BLN-01

Date: 06-13-87

Concern No(s). IN-86-243-002 and NS-85-001-X03

Problem Description:

ANSI N45.2 Section 11 (Inspection) states: "Where a sample is used to verify acceptability of a group of items, the sampling procedure shall be based on recognized practices and shall provide adequate justification for the sample size and selection process".

Contrary to the above requirements, QACEG has reviewed several NCRs that invoked random sampling programs to provide acceptance of total populations, without evidence of recognized standard sampling practices or adequate justification for the sample size and selection process. As an example of the above, reference NCRs 4613 Revision 1 and 4815 Revision 1.

Remarks:

Preparer: G. A. Carter

CATD NO. 80407-BLN-01

10. PROPOSED CORRECTIVE ACTION PLAN:

This CATD questions the validity of the sampling basis used in the resolution of nonconformances at Bellefonte. Typically, the resolution of nonconformances at Bellefonte has been based on sample sizes much greater than is required for a statistically valid sample. In a number of cases the sample consisted of virtually 100 percent of the population in question, excluding only those items that could not be accessed without dismantling sizeable portions of completed installations (i.e., concrete surrounding embedded piping). We are not aware of any instances where the sample size used in dispositioning NCRs was less than that required to be statistically valid.

The two specific NCRs referenced in the CATD were reviewed to determine if a deficiency existed. NCR 4618 had a sample size that is more than two times that required for a statistically valid sample. The disposition has a valid technical basis and no deficiency exists. NCR 4815 has a sample that is statistically valid. Since evaluation of this NCR has not been completed, a statement concerning the validity of the technical basis for disposition cannot be made at this time.

To prevent similar questions in the future, Bellefonte will include the requirement that the basis for sample size and selection be documented.

Does the corrective action plan rely on or take credit for currently identified or previously completed work? Yes _____ No X
If yes, list parent documents (e.g., NCR, SCR, CAR, Audit, etc.)

Does the problem described constitute a condition adverse to quality (CAQ)?
Yes _____ No X

If Yes, CAQ No. _____

Schedule for completion of corrective action (schedule data, if known, or milestone; e.g., BFL1, etc.): BFL1

11. Carl W. Hattaway 12-3-87
Prepared by/Date

R. R. [Signature] 12/14/87
Proposed by/Date

ECGSP CORRECTIVE
Action Tracking Document
(CATD)

INITIATION

1. Immediate Corrective Action Required: Yes No
2. Stop Work Recommended: Yes No
3. CATD No. 80407-WBN-01 R/1
4. INITIATION DATE 03/06/87
5. RESPONSIBLE ORGANIZATION: Dept. Nuclear Engineering (Knoxville)
6. PROBLEM DESCRIPTION: QR NQR

See the Attached 80407-WBN-01 R/1 Fact Sheet

7. PREPARED BY: NAME D. C. Steelbox ATTACHMENTS DATE: 03/06/87
8. CONCURRENCE: CEG-H [Signature] DATE: 03/06/87
9. APPROVAL: ECG PROGRAM MGR: [Signature] DATE: 3/12/87

CORRECTIVE ACTION

10. PROPOSED CORRECTIVE ACTION PLAN:
See attached CAP

11. PROPOSED BY: DEFECTOR/MGR: [Signature] ATTACHMENTS DATE: 3/20/87
12. CONCURRENCE: CEG-H [Signature] DATE: 4/28/87
SEP: [Signature] DATE: _____
ECG PROGRAM MGR: _____ DATE: _____

VERIFICATION AND CLOSEOUT

13. Approved corrective actions have been verified as satisfactorily implemented.

SIGNATURE

TITLE

DATE

NOTE: This applies to concern numbers EN-86-243-001 and NS-85-001-003.

CARD FACT SHEET

CARD No. 80407-428-01 2/1

Date: 02/21/87

Concern No(s). NY-86-243-002 and NS-85-001-X03

Problem Description:

ANSI N45.2 section 11 (Inspection) states: "Where a sample is used to verify acceptability of a group of items, this sampling procedure shall be based on recognized practices and shall provide adequate justification for this sample size and selection process".

Contrary to the above QACEG has reviewed numerous NCRs that invoked random sampling programs to provide acceptance of total populations, without evidence of recognized standard sampling practices or adequate justification for the sample size and selection process. As an example of the above, Reference NCRs 2375R and 2654.

This CARD was revised to clarify the scope of the random sampling issue. Original issue date 02/21/87.

Remarks:

Prepared: D. C. Steelfox

CATD
CAPP 1.0
REVISION 0
ATTACHMENT A

CATD NO. 20407-WBN-01, R1

10. PROPOSED CORRECTIVE ACTION PLAN:

Random sampling programs have been used in several instances at WBN to evaluate or support evaluation of potential or known problems to determine their validity or extent. The results of these samples have been used to determine the scope of application of planned corrective actions, or to establish adequate confidence in the approved/inspected product. WBN has not utilized random sampling program for initial product acceptance, which is normally based on one hundred percent (100%) inspection by DNCA Quality Control (QC) inspectors. In some instances, random samples have been utilized to provide additional confidence that the 100% inspection process has been effective in assuring end products meet required attributes.

It is recognized that WBN has not always procedurally controlled the performance of random samples to ensure that the samples are performed in accordance with recognized practices, or that the sample size or selection process are adequately justified and documented. However, we have not yet identified any random sample applications for which the sample performed has been determined to be technically unacceptable. The lack of procedural controls or documentation raises uncertainty about the validity of some past samples. To address this uncertainty, WBEP will:

1. Establish a WBEP procedure to set minimum requirements for the selection and documentation of WBEP initiated sampling plans used to establish the validity of previously performed work. This procedure will assure that the sampling plans are performed in accordance with recognized practices.
2. Conduct a survey of Watts Bar personnel involved in the CAO process to identify those NCRs readily determinable to have used a sample plan for disposition of the CAOs. Identify those NCRs for which samples were not procedurally controlled and have been used to provide acceptance of total populations. This effort will identify and exclude from further evaluation those NCRs associated with areas in which design and/or field verifications have been performed or are planned to provide adequate confidence in the total population.

These excluded areas include:

- Welding
- Instrumentation Sense Lines
- Concrete
- Design Basis Documents
- Cable Installations
- Flex Conduit
- Rigorously and alternately analyzed piping and support design

ATTACHMENT C
ECSP CORRECTIVE
Action Tracking Document
(CATD)

INITIATION

1. Immediate Corrective Action Required: Yes No
2. Stop Work Recommended: Yes No
3. CATD No. 80408-BLN-01 4. INITIATION DATE 4/15/87
5. RESPONSIBLE ORGANIZATION: Mechanical Engineering-BLN
6. PROBLEM DESCRIPTION: QR NQR

See Attached Fact Sheet 80408-BLN-01

7. PREPARED BY: NAME R. D. White // ATTACHMENTS DATE: 4/15/87
8. CONCURRENCE: CEG-H [Signature] DATE: 4/15/87
9. APPROVAL: ECTG PROGRAM MGR: [Signature] DATE: 4/23/87

CORRECTIVE ACTION

10. PROPOSED CORRECTIVE ACTION PLAN: _____
" See Attached "

11. PROPOSED BY: DIRECTOR/MGR: [Signature] // ATTACHMENTS DATE: 6/18/87
12. CONCURRENCE: CEG-H [Signature] DATE: 10-14-87
SRP: [Signature] DATE: _____
ECTG PROGRAM MGR: [Signature] DATE: 10/15/87

VERIFICATION AND CLOSEOUT

13. Approved corrective actions have been verified as satisfactorily implemented.

SIGNATURE TITLE DATE

NOTE: This is applies to Concern Number BNP-QCP-10.35-C01

CATD FACT SHEET

80400
ATTACHMENT B
PAGE 91 of 110CATD No. 80406-BLN-01Date: 04/17/87

Concern No(s). This applies to Concern Number BNP-QCP-10.35-C01

Problem Description:

Reference Employee Concern BNP-QCP-10.35-C01, "many times QCIR disposition is wrong or inadequate." Examples cited were QCIRs 24525, 24526, and 24527. Although FCRs M-4235, M4236, and M4555 eventually corrected the problems documented on the QCIRs above, the dispositions provided on the QCIRs were examples where Engineering investigations were wrong or inadequate. The concern was substantiated and requires Engineering evaluations of dispositions provided on other nonconformance reports to verify that the dispositions provided are correct and that the proper party dispositioned the nonconforming condition in the first place.

Remarks:

Preparer: R. W. White

CATD NO. EC408-BLN-01

10. PROPOSED CORRECTIVE ACTION PLAN:

The OCIRs were properly closed. The fact that these items could physically be removed was reverified by NQC on 5-12-87.

Subsequent to the OCIR notification, Mechanical Engineering realized the difficulty of performing this maint. activity and decided to write FCRs on these items to provide easier access for maintenance.

Does the corrective action plan rely on or take credit for currently identified or previously completed work? Yes _____ No
If yes list parent documents (e.g. NCR, SCR, CAR, Audit, etc.) _____

Does the problem described constitute a condition adverse to quality (CAQ)?
Yes _____ No

If Yes CAQ No. _____

Schedule for completion of corrective action (schedule date, if known, or milestone (e.g. BFLI, etc.)) N/A

11. Sam McBall 5/11/87
0320V Prepared by/Date

Proposed by/Date

ECSP CORRECTIVE
Action Tracking Document
(CATD)

INITIATION

1. Immediate Corrective Action Required: Yes No
2. Stop Work Recommended: Yes No
3. CATD No. 80400-WBN-01 4. INITIATION DATE 02/18/87
5. RESPONSIBLE ORGANIZATION: Dept. of Nuclear Engineering (DNE) WBN
6. PROBLEM DESCRIPTION: QR NQR

QA procedure WBN-OCI-1.08, Revision 11, "Quality Assurance Records", describes in Section 6.5 the unique identifiers to be used on documentation evaluated by the Responsible Engineering Unit (REU). Paragraph 6.5.5 identifies that "a percent (%) evaluation sign" is utilized when no official documentation exist. Paragraph 6.5.5 also states a percent (%) evaluation sign is also used when NUC PR inspects and documents the installation. A computer printout is utilized to determine the status of various records. When the percent (%) symbol appears on the computer printout, it is unknown if the REU basis for acceptance is no official documentation exist, or whether NUC PR inspected and documented the installation.

- | | | |
|----|--|-----------------------|
| | | / ATTACHMENTS |
| 7. | PREPARED BY: NAME <u>E. E. Dism</u> | DATE: <u>02/19/87</u> |
| 8. | CONCURRENCE: CEG-E <u>[Signature]</u> | DATE: <u>02/19/87</u> |
| 9. | APPROVAL: ECTG PROGRAM MGR: <u>[Signature]</u> | DATE: <u>2/22/87</u> |

CORRECTIVE ACTION

10. PROPOSED CORRECTIVE ACTION PLAN: _____

- | | | |
|-----|---|----------------------|
| | | / ATTACHMENTS |
| 11. | PROPOSED BY: DIRECTOR/MGR: <u>[Signature]</u> | DATE: <u>2/18/87</u> |
| 12. | CONCURRENCE: CEG-E <u>[Signature]</u> | DATE: <u>2/18/87</u> |
| | SEP: _____ | DATE: _____ |
| | ECTG PROGRAM MGR: _____ | DATE: _____ |

VERIFICATION AND CLOSURE

13. Approved corrective actions have been verified as satisfactorily implemented.

_____ SIGNATURE	_____ TITLE	_____ DATE
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CATD FACT SHEET

CATD No. 80409-WBN-01

Date: 02/19/87

Concern No(s). IN-85-973-005

Problem Description:

TVA procedure WBN-QCI-1.08, Revision 11, "Quality Assurance Records", describes in Section 6.5 the unique identifiers to be used on documentation evaluated by the Responsible Engineering Unit (REU). Paragraph 6.5.5 identifies that "a percent (%) evaluation sign" is utilized when no official documentation exist. Paragraph 6.5.5 also states a percent (%) evaluation sign is also used when NUC PR inspects and documents the installation. A computer printout is utilized to determine the status of various records. When the percent (%) symbol appears on the computer printout, it is unknown if the REU basis for acceptance is no official documentation exist or whether NUC PR inspected and documented the installation.

Remarks:

Preparer: E. E. Dien

CARD FACT SHEET

CARD No. 80400-WBN-01

Date: 02/19/67

Concern No(s). IN-85-973-005

Problem Description:

TVA procedure WBN-QCI-1.08, Revision 11, "Quality Assurance Records", describes in Section 6.5 the unique identifiers to be used on documentation evaluated by the Responsible Engineering Unit (REU). Paragraph 6.5.5 identifies that "a percent (%) evaluation sign" is utilized when no official documentation exist. Paragraph 6.5.5 also states a percent (%) evaluation sign is also used when NUC PR inspects and documents the installation. A computer printout is utilized to determine the status of various records. When the percent (%) symbol appears on the computer printout, it is unknown if the REU basis for acceptance is no official documentation exist or whether NUC PR inspected and documented the installation.

Remarks:

Prepared: E. E. Dien

CATD NO. 80400-WBN-01

10. PROPOSED CORRECTIVE ACTION PLAN:

The percent (Z) evaluation definition discrepancy in WBN-OCI-1.08 paragraph
6.5.5 will be identified, corrected, and documented in the correction method
specified in SCR 6722 for WBN Unit 1 and SCR 6723 for WBN Unit 2. Each FEU
will review and correct all Z evaluations that do not specify an NCR number.
WBN-OCI-1.08 will be revised to delete the last sentence in 6.5.5 as part of
the correction method of the above SCR's. Procedure revision request number
RR-617 (attached) has been issued to delete the use of Z evaluation when
NUC PR inspects and documents the installation.

Verbal concurrence by Ed Ryan 5/22/86 and W. Giddis 5/22/86 2 May 87

Does the corrective action plan rely on or take credit for currently
identified or previously completed work? Yes _____ No Z
If yes list parent documents (e.g. NCR, SCR, CAP, Audit, etc.) _____

Does the problem described constitute a condition adverse to quality (CAQ)?
Yes Z No _____

If Yes CAQ No. SCR 6722 6723

Schedule for completion of corrective action (schedule date, if known, or
milestone (e.g. IRL, etc.) IRL

Prepared by/Date Ed Ryan 5/22/86

Proposed by/Date W. Giddis 2/24/86

OFFICE OF CONSTRUCTION
REVISION REQUEST

Initiator: FRANK EVANS
Project or Branch: INVEST
Date: 5/2/07
Document and Rev. No. 10151-002-101 REV. II
Document Title: QUALITY ASSURANCE PROCEDURES

RR No. 10151-002-101-01

Description and Reason for Proposed Change:

DELETE THE LAST SENTENCE OF PARAGRAPH 6.5.5 WHICH READS,
"A PERCENT (%) EVALUATION SIGN IS ALSO USED ON ATTACHMENT D
WHEN N/C FR INSPECTS AND DOCUMENTS THE INSTALLATION". THIS
FR IS PART OF THE CORRECTION METHOD FOR SCR'S 6T22, 6T23,
AND CATD NO. 80400-WBN-01.

Evaluation of RR: Procedure is a CAD Yes No

If yes, NCR No. & Rev. SCR 6T22 RD. SCR 6T23 RD

Approved: [Signature]
Responsible Manager

Distribution:

- Original to Organization
- Controlling Document (Identify _____)
- Other Affected Organizations

RESPONSE TO REVISION REQUEST

- Revision is approved as requested
- Revision action will be as described below
- Revision cannot be approved for reason(s) stated below

Responsible Manager of Original Controlling Document

Commitment tracking and updated by _____

Date _____

Distribution:
Initiator of Request
Retention Period:
DDC

ECGS CORRECTIVE
Action Tracking Document
(CATD)

INITIATION

- 1. Immediate Corrective Action Required: Yes No
- 2. Stop Work Recommended: Yes No
- 3. CATD No. 80412-W3N-01
- 4. INITIATION DATE 02/26/87
- 5. RESPONSIBLE ORGANIZATION: Process Quality Assurance W3N
- 6. PROBLEM DESCRIPTION: 12/ QR 12/NQR

See the Attached 80412-W3N-01 Fact Sheet

- 7. PREPARED BY: NAME G. A. Collins ATTACHMENTS 0
DATE: 02/26/87
- 8. CONCURRENCE: CEG-E N. K... DATE: 02/26/87
- 9. APPROVAL: ECGS PROGRAM MGR: N... DATE: 02/29/87

CORRECTIVE ACTION

- 10. PROPOSED CORRECTIVE ACTION PLAN: SEE ATT A

- 11. PROPOSED BY: DIRECTOR/MGR: [Signature] ATTACHMENTS 0
DATE: 6-16-87
- 12. CONCURRENCE: CEG-E [Signature] DATE: 7/16/87
SRP: [Signature] DATE:
ECGS PROGRAM MGR: DATE:

VERIFICATION AND CLOSURE

- 13. Approved corrective actions have been verified as satisfactorily implemented.

SIGNATURE

TITLE

DATE

NOTE: This applies to concern number(s) IN-85-247-003, IN-85-406-003
IN-85-421-001, IN-85-671-002
IN-85-006-001, IN-85-102-010

~~CONFIDENTIAL~~
CATED FACT SHEET

CATED No. 80412-WEN-01

Date: 02/26/87

Concern No(s). IN-85-247-003. IN-85-606-003. IN-85-621-001. IN-85-671-002.
IN-85-001-001. and IN-85-102-010

Problem Description:

Appendix B to 10CFR50, Criterion XVI, requires that "measures shall be established to assure that conditions adverse to quality, such as failures, malfunctions, deficiencies, deviations, defective material and equipment, and nonconformances are promptly identified and corrected."

Contrary to this requirement, nonconforming conditions were identified in the Auxiliary Building in June 1986, during a QACEG surveillance of electrical supports and related equipment. TVA's Electrical Quality Control (EQC) inspectors accompanied the QACEG investigator and were cognizant of the Nonconforming Conditions identified during this QACEG surveillance. A review of the NCR Log revealed that NCR's 6992 through 7001, were not written to document these discrepancies until three to six months later. The QACEG evaluator was told that the QC Supervisor had previously instructed the inspectors not to write the NCRs.

Remarks:

Preparer: G. A. Collins

257. 0
ATTACHMENT A

CAQ NO. 90-12-WBX-01

10. PROPOSED CORRECTIVE ACTION PLAN: (Revised June 19, 1957)

When EOC inspectors accompanied OACEG on a surveillance of electrical supports
and related equipment. Electrical Quality Control inspectors identified
deficiencies and deviations that were nonconforming conditions. The culture at
the time this incident occurred and the guidance given to the inspectors was such
that an inspector did not feel responsible for reporting problems identified by an
auditor. Under our present environment and charter, the inspector is responsible
for identifying and reporting conditions adverse to quality. A portion of each
inspectors week is spent walking his/her spaces and observing and reporting both
good and adverse conditions. Observations such as these would be immediately
reported. Sometime after these items were observed, EOC was notified to follow-
up on each of the items addressed during the OACEG surveillance. At that time an
indepth review and research of past documentation (variances, FCRs, NCRs, memos,
and procedural requirements) that was in effect at the time documentation was done
to determine if every item addressed on the surveillance, was in fact a non-
conforming condition. (See continuation page)

Does the corrective action plan rely on or take credit for currently
identified or previously completed work? Yes X No _____
If yes list parent documents (e.g. NCR, SCR, IR, Audit, etc.) _____

NCR W-339-P covers all items addressed on OACEG surveillance.

Does the problem described constitute a condition adverse to quality (CAQ)?
Yes _____ No X

If Yes CAQ No. N/A

Schedule for completion of corrective action (schedule date, if known, or
milestone (e.g. EFL1, etc.) Concerning W-339-P EFL1

11. [Signature] 6-19-87
03207 Prepared by/Date

[Signature]
Proposed by/Date

PROPOSED CORRECTIVE ACTION PLAN (Cont'd)

All items found and determined by Electrical Quality Control to be discrepant and/or deficient were addressed through NCRs (QCI-1.02). In any instance that an inspector recognizes a discrepancy, deviation, defective material, and equipment, measures are taken to assure that such cases are promptly identified and corrected.

The Corrective Action Tracking Document (CATD) program has been developed as the interface between ECTG and appropriate TVA organizations to preclude the noted condition from recurring.

This proposed corrective action plan was coordinated with G. A. Collins.

ATTACHMENT C

80400 CORRECTIVE
Action Tracking Document
(CATD)

VERIFICATION

- 1. Immediate Corrective Action Required: Yes No
- 2. Stop Work Recommended: Yes No
- 3. CATD No. 80412-WEN-02
- 4. VERIFICATION DATE 02/27/87
- 5. RESPONSIBLE ORGANIZATION: Process Quality Assurance - WEN
- 6. PROGRAM DESCRIPTION: QA NQR

See the Attached 80412-WEN-02 Fact Sheet

- 7. PREPARED BY: NAME G. A. Collins TR-2 DATE: 02/27/87
- 8. CONCURRENCE: CEO-E [Signature] DATE: 02/27/87
- 9. APPEAL: EOCG PROGRAM MGR: [Signature] DATE: 2/27/87

CORRECTIVE ACTION

- 10. PROPOSED CORRECTIVE ACTION PLAN: See Att. A

- 11. PROPOSED BY: DIRECTOR/MGR: [Signature] DATE: 3-8-87
- 12. CONCURRENCE: CEO-E [Signature] DATE: 3/12/87
- 13. EOCG PROGRAM MGR: _____ DATE: _____

VERIFICATION AND CLOSEOUT

- 13. Approved corrective actions have been verified as satisfactorily implemented.
- _____
SIGNATURE
- _____
TITLE
- _____
DATE

NOTE: This applies to concern number 21-85-406-003

CASE FACT SHEET

Case No. 80412-WEN-02

Date: 02/27/87

Concern No(s). NY-85-606-903

Problem Description:

A comparison of Nonconformance Procedures indicates a notable inconsistency between the WEN QAP-15.1 and QCI-1.02. Numerous inconsistencies are also evident between the QAP/QCI and the parallel document used by Office of Nuclear Power (ONP), AI-2.8.3. This inconsistency becomes evident during the initiation and process cycle of the NCR Program.

Remarks:

Prepared: G. A. Collins

ECSP CORRECTIVE
Action Tracking Document
(CARD)

INITIATION

1. Immediate Corrective Action Required: Yes No
 2. Stop Work Recommended: Yes No
 3. CARD No. 80413-WBN-01
 4. INITIATION DATE 02/25/87
 5. RESPONSIBLE ORGANIZATION: Project Quality Assurance - WBN
 6. PROBLEM DESCRIPTION: QR NQR

See the Attached 80-13-WBN-01 Fact Sheet
-
- | | |
|---|------------------------|
| | <u>/X/</u> ATTACHMENTS |
| 7. PREPARED BY: NAME <u>D. P Holt</u> | DATE: <u>02/25/87</u> |
| 8. CONCURRENCE: <u>CEG-H</u> | DATE: <u>02/25/87</u> |
| 9. APPROVAL: ECTG PROGRAM MGR: <u>[Signature]</u> | DATE: <u>2/26/87</u> |

CORRECTIVE ACTION

10. PROPOSED CORRECTIVE ACTION PLAN: See ATT. A
-
- | | |
|---|----------------------|
| | <u>/</u> ATTACHMENTS |
| 11. PROPOSED BY: DIRECTOR/MGR: <u>[Signature]</u> | DATE: <u>3-2-87</u> |
| 12. CONCURRENCE: <u>CEG-E</u> | DATE: <u>3/12/87</u> |
| SRP: _____ | DATE: _____ |
| ECTG PROGRAM MGR: _____ | DATE: _____ |

VERIFICATION AND CLOSEOUT

13. Approved corrective actions have been verified as satisfactorily implemented.

_____ SIGNATURE	_____ TITLE	_____ DATE
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NOTE: This applies to concern number DI-85-996-002.

CARD FACT SHEET

Date: 02/25/87

CARD No. 80413-WEN-01

Concern No(s). IN-85-996-002

Problem Description:

10CFR50 Appendix B Criterion XVII states, "Sufficient Records shall be maintained to furnish evidence of activities affecting quality". Contrary to this requirement, TVA Procedure WBN-QCI-1.02-1, Revision 11, identifies Inspection Rejection Notice (IRN) as "A communication and trending analysis tool used by DNQA inspection personnel to inform craft and/or engineering of a failed inspection". IRNs are not considered by TVA to be DOC or LOP documents and are not treated as Quality Records.

Remarks:

Preparer: D. P. Holt

CATG
CAPP 1.0
REVISION 0
ATTACHMENT A

CATD NO. 80412-WAN-01

10. PROPOSED CORRECTIVE ACTION PLAN:

~~OCP-1, 02-1 has recently been transferred to the Site Quality Organization and will be revised as OCP-1, 02-1. The document is now under revision to address among other things the issue regarding IPNs as quality records. OCP-1, 02-1 will be revised by 4/15/87 and will include the retention of IPNs as quality records.~~

~~Upon issuance of OCP 1, 02-1 all IPNs on hand will be collected and transferred to the vault for storage.~~

LCM 3/5/87

~~Verbal concurrence with D. P. Hale from meeting with Jeff Rehberg 7:30-8:30~~

RJR

Does the corrective action plan rely on or take credit for currently identified or previously completed work? Yes No
If yes, list parent documents (e.g., NCR, SCR, C&R, Audit, etc.) _____

Does the problem described constitute a condition adverse to quality (CAQ)? Yes No

If yes, CAQ No. _____

Schedule for completion of corrective action (schedule date, if known, or milestone (e.g., BFLI, etc.)) 4/15/87

11. LC Miller 3/2/87 : J. M. D... 13-2-87
Prepared by/Date/ Proposed by/Date

ATTACHMENT D
ECSP CORRECTIVE
Action Tracking Document
(CATD)

INITIATION

1. Immediate Corrective Action Required: Yes No
2. Stop Work Recommended: Yes No
3. CATD No. 80454-NPS-01
4. INITIATION DATE 6/19/87
5. RESPONSIBLE ORGANIZATION: NEB
6. PROBLEM DESCRIPTION: /X/ QR /-/NQR

See Attached Fact Sheet

// ATTACHMENTS

7. PREPARED BY: NAME Mark. D. Bednar DATE: 6/22/87
8. CONCURRENCE: CEG-H [Signature] DATE: 6/22/87
9. APPROVAL: ECTG PROGRAM MGR: [Signature] DATE: 6/23/87

CORRECTIVE ACTION

10. PROPOSED CORRECTIVE ACTION PLAN:

// ATTACHMENTS

11. PROPOSED BY: DIRECTOR/MGR: Per memo 233 P70715 909 DATE: 7-15-87
12. CONCURRENCE: CEG-H [Signature] DATE: 9/17/87
SRP: [Signature] DATE: _____
ECTG PROGRAM MGR: [Signature] DATE: 8/15/87

VERIFICATION AND CLOSEOUT

13. Approved corrective actions have been verified as satisfactorily implemented.

SIGNATURE TITLE DATE

NOTE: This applies to Concern WEN-0518 and WI-85-100-031

CATD FACT SHEET

CATD No. 80454-NPS-01

Date: 06/22/87

Concern No(s). WI-85-100-025

Problem Description:

The QACEG performed an evaluation of the issue dealing with; TVA FSAR commitments, Safety Evaluation Report (SER) and NRC question responses being treated lightly or not being met at all.

Prior to the QACEG evaluation of this issue, Significant Condition Reports (SCR) SCRGENNEB8602 and SCR BLNNEB6702 had been generated which address the accuracy of FSAR statements. CATD 80454-NPS-01 is being issued to track the completion of the corrective action and action to prevent recurrence of both SCRs.

M. D. Bednar

Memorandum

L33 870715 909

TENNESSEE VALLEY AUTHORITY

TO : P. D. Brackins, Project Manager, FSB, Watts Bar Nuclear Plant

FROM : D. E. McCloud, Manager, Generic Licensing Branch, LP 5N 108B-C

DATE : JUL 15 1987

SUBJECT: ECSP FACT SHEETS AND CORRECTIVE ACTION TRACKING DOCUMENTS (CATDs) -
FSAR INACCURACIES

Reference: Memorandum from J. L. McAnally to R. L. Gridley dated June 24, 1987, concerning Watts Bar Nuclear Plant (WBN) - transmittal of ECSP Fact Sheets and Corrective Action Tracking Documents (CATDs)

The referenced memorandum transmitted another memorandum requesting a proposed corrective action plan to CATD No. 80454-NPS-01, which was also attached. The CATD fact sheet states that CATD 80454-NPS-01 is tracking the completion of corrective actions and actions to prevent recurrence of SCRGENNEB8602 and SCRBLNNEB8702. SCRGENNEB8602 was written to address a programmatic concern regarding the accuracy of FSAR statements for all TVA plants as a result of a generic review of WBN's problem identification report numbers PIRWBNNEB8611 and PIRWBNNEB8612. SCRGENNEB8602 has since been voided and replaced by site specific reports (three CAQRs and one SCR). The following matrix lists the respective reports for each site and the contact that has been assigned the responsibility of proposing corrective action plans and plans to prevent recurrence as stipulated in the CAQR/SCR programs.

<u>Site</u>	<u>Report No.</u>	<u>Responsible Contact</u>
Bellefonte Nuclear Plant (BLN)	SCRBLNNEB8702	D. T. Clift
Browns Ferry Nuclear Plant (BFN)	CAQREFF870088	T. F. Newton
Sequoyah Nuclear Plant (SQN)	CAQRSQT870586	V. A. Bianco
WBN	CAQRWBT870165	P. D. Metcalf

The listed responsible contacts reside within the Division of Nuclear Engineering (DNE).

In a discussion between T. Rogers, of my staff, and M. D. Bednar, who prepared CATD No. 80454-NPS-01, Mr. Bednar indicated that the intent of the CATD was to elicit the status of the corrective action plan and action to prevent recurrence of SCRBLNNEB8702. Therefore, Mr. Rogers contacted D. T. Clift, but was referred to J. Ritts.

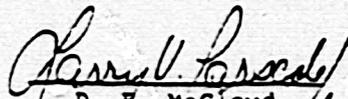
P. D. Brackins

JUL 15 1987

ECSP FACT SHEETS AND CORRECTIVE ACTION TRACKING DOCUMENTS (CATDs) -
FSAR INACCURACIES

Mr. Ritts indicated that no detailed corrective action plans will be developed in the near term for BLN. BLN's detailed corrective action plans will be developed from lessons learned from the WBN and SQN corrective action plans. Mr. Ritts feels that BLN can afford this delay in providing their plans based on the current scheduled dates of completion of BLN's construction.

The above information represents the results of our investigation to understand the problem as described in the CATD Fact Sheet, and to determine proper ownership as requested by the subject memorandum. It now appears that responsible contacts may have been assigned at each site to address specific component parts of the original problem. This information has been discussed with Mr. Bednar, and this completes our response and action on this item.


D. E. McCloud /for

LVP:TR:RAW

cc: RIMS, MR 4N 72A-C
W. R. Brown, Jr., ECTG, ONP, Watts Bar
R. L. Gridley, LP 5N 157B-C
J. L. McAnally, LP 5S 83E-C
J. Ritts, 9-152 SB-K
D. L. Terrill, ONP, Bellefonte

2148h

Enclosure 3

REFERENCE - ECPS132J-ECPS132C
 FREQUENCY - REQUEST
 ONP - ISSS - RUM

TENNESSEE VALLEY AUTHORITY
 OFFICE OF NUCLEAR POWER
 EMPLOYEE CONCERN PROGRAM SYSTEM (ECPS)
 EMPLOYEE CONCERN INFORMATION SYSTEM CATEGORY/SUBCATEGORY
 SUBCATEGORY: 908 EMERGENCY EQUIPMENT AND PLANT RESPONSE

PAGE - 1
 RUN TIME - 17:11:31
 RUN DATE - 03/08/88

CATEGORY: SF INDUSTRIAL SAFETY

CONCERN NUMBER	CAT	SUB CAT	S W R PLT D LOC	1 REPORT APPL				HISTORICAL REPORT	CONCERN OR GIN	CONCERN DESCRIPTION	REF. SECTION #	
				2 SAF RELATED	BF	BL	SO				WB	CAT - SF
IN -85-248-00201 150232	MP	70905	S WBN	1	N	N	N	N	QTC	TVA MEDICAL DOES NOT RESPOND IN A TIMELY MANNER TO PERSONAL INJURY EMERGENCIES. DETAILS KNOWN TO QTC, WITHHELD DUE TO CONFIDENTIALITY. NO FURTHER INFORMATION MAY BE RELEASED. COINSTRUCTION DEPT. CONCERN. C/I HAS NO FURTHER INFORMATION. NO FOLLOW-UP REQUIRED.	1.5	2.5
				2	NA	NA	NA	NA			3.1.5	4.5
02	SF	90805	S WBN	1	N	N	N	Y				
				2	NA	NA	NA	NO				

1 CONCERNS FOR CATEGORY SF SUBCATEGORY 908
 CONCERNS ARE GROUPED BY FIRST 3 DIGITS OF SUBCATEGORY NUMBER.

TVA EMPLOYEE CONCERNS
SPECIAL PROGRAM

REPORT NUMBER: 80400

REPORT TYPE: Subcategory

REVISION NUMBER: 6

TITLE: Nonconformance Control and Corrective
Action

PAGE 1 OF 108

REASON FOR REVISION:

To incorporate a CATD response and to correct typos.
Revision markers used in margin to indicate revisions.

PREPARATION

PREPARED BY: R. D. Halverson

R. D. Halverson
SIGNATURE

3/9/88
DATE

REVIEWS

PEER:

Raymond G. Kelly
SIGNATURE

3/9/88
DATE

TAS:

James E. Worthy IV
SIGNATURE

3/9/88
DATE

CONCURRENCES

Janice W. Gage
SIGNATURE

3/14/88
DATE

CEG-H: *J.E. Karr / RW* 3/9/88
DATE

SRP: N/A
SIGNATURE*

DATE

APPROVED BY

W. R. Brown 3/14/88
ECSP MANAGER DATE

N/A
MANAGER OF NUCLEAR POWER
CONCURRENCE (FINAL REPORT ONLY)

DATE

*SRP Secretary's signature denotes SRP concurrences are in files.

5461T

~~8804076234~~ 247 pp

EXECUTIVE SUMMARY
Subcategory 80400
Nonconformance Control
and
Corrective Action

1.0 SUMMARY

The issues in this subcategory report were comprised of concerns raised during the Watts Bar Employee Concern Special Program. The issues focus attention on the inadequacy of the TVA control systems employed for the control of nonconforming items and the prompt correction of nonconforming conditions in accordance with Appendix B to 10 CFR 50. There are a total of 29 issues detailed in the report, of which 14 identified problems, directly or indirectly, requiring corrective action.

2.0 MAJOR FINDINGS

The report identifies several conditions which degraded the nonconformance control and corrective action programs. It was found that discrepancies were not promptly identified; reporting systems were overly complicated and confusing; licensing commitment tracking was inadequate resulting in the final safety analysis report being out of date; and sampling of identified noncompliances as a basis for acceptance was inadequate.

3.0 COLLECTIVE SIGNIFICANCE

The subcategory results indicated that the systems employed to control the nonconformance program were ineffective in assuring compliance to 10CFR50, Appendix B requirements. Management's inability to satisfy regulatory requirements and commitments resulted in inadequate implementation by the line organization and conflicting direction in procedures. In some instances adequate procedures were in place but were

Preface

This subcategory report is one of a series of reports prepared for the Employee Concerns Special Program (ECSP) of the Tennessee Valley Authority (TVA). The ECSP and the organization which carried out the program, the Employee Concerns Task Group (ECTG), were established by TVA's Manager of Nuclear Power to evaluate and report on those Office of Nuclear Power (ONP) employee concerns filed before February 1, 1986. Concerns filed after that date are handled by the ongoing ONP Employee Concerns Program (ECP).

The ECSP addressed over 5800 employee concerns. Each of the concerns was a formal, written description of a circumstance or circumstances that an employee thought was unsafe, unjust, inefficient, or inappropriate. The mission of the Employee Concerns Special Program was to thoroughly investigate all issues presented in the concerns and to report the results of those investigations in a form accessible to ONP employees, the NRC, and the general public. The results of these investigations are communicated by four levels of ECSP reports: element, subcategory, category, and final.

Element reports, the lowest reporting level, will be published only for those concerns directly affecting the restart of Sequoyah Nuclear Plant's reactor unit 2. An element consists of one or more closely related issues. An issue is a potential problem identified by ECTG during the evaluation process as having been raised in one or more concerns. For efficient handling, what appeared to be similar concerns were grouped into elements early in the program, but issue definitions emerged from the evaluation process itself. Consequently, some elements did include only one issue, but often the ECTG evaluation found more than one issue per element.

Subcategory reports summarize the evaluation of a number of elements. However, the subcategory report does more than collect element level evaluations. The subcategory level overview of element findings leads to an integration of information that cannot take place at the element level. This integration of information reveals the extent to which problems overlap more than one element and will therefore require corrective action for underlying causes not fully apparent at the element level.

To make the subcategory reports easier to understand, three items have been placed at the front of each report: a preface, a glossary of the terminology unique to ECSP reports, and a list of acronyms.

Additionally, at the end of each subcategory report will be a Subcategory Summary Table that includes the concern numbers; identifies other subcategories that share a concern; designates nuclear safety-related, safety significant, or non-safety related concerns; designates generic applicability; and briefly states each concern.

Either the Subcategory Summary Table or another attachment or a combination of the two will enable the reader to find the report section or sections in which the issue raised by the concern is evaluated.

The subcategories are themselves summarized in a series of eight category reports. Each category report reviews the major findings and collective significance of the subcategory reports in one of the following areas:

- management and personnel relations
- industrial safety
- construction
- material control
- operations
- quality assurance/quality control
- welding
- engineering

A separate report on employee concerns dealing with specific contentions of intimidation, harassment, and wrongdoing will be released by the TVA Office of the Inspector General.

Just as the subcategory reports integrate the information collected at the element level, the category reports integrate the information assembled in all the subcategory reports within the category, addressing particularly the underlying causes of those problems that run across more than one subcategory.

A final report will integrate and assess the information collected by all of the lower level reports prepared for the ECSP, including the Inspector General's report.

For more detail on the methods by which ECTG employee concerns were evaluated and reported, consult the Tennessee Valley Authority Employee Concerns Task Group Program Manual. The Manual spells out the program's objectives, scope, organization, and responsibilities. It also specifies the procedures that were followed in the investigation, reporting, and closeout of the issues raised by employee concerns.

ECSP GLOSSARY OF REPORT TERMS*

classification of evaluated issues the evaluation of an issue leads to one of the following determinations:

Class A: Issue cannot be verified as factual

Class B: Issue is factually accurate, but what is described is not a problem (i.e., not a condition requiring corrective action)

Class C: Issue is factual and identifies a problem, but corrective action for the problem was initiated before the evaluation of the issue was undertaken

Class D: Issue is factual and presents a problem for which corrective action has been, or is being, taken as a result of an evaluation

Class E: A problem, requiring corrective action, which was not identified by an employee concern, but was revealed during the ECTG evaluation of an issue raised by an employee concern.

collective significance an analysis which determines the importance and consequences of the findings in a particular ECSP report by putting those findings in the proper perspective.

concern (see "employee concern")

corrective action steps taken to fix specific deficiencies or discrepancies revealed by a negative finding and, when necessary, to correct causes in order to prevent recurrence.

criterion (plural: criteria) a basis for defining a performance, behavior, or quality which OWP imposes on itself (see also "requirement").

element or element report an optional level of ECSP report, below the subcategory level, that deals with one or more issues.

employee concern a formal, written description of a circumstance or circumstances that an employee thinks unsafe, unjust, inefficient or inappropriate; usually documented on a K-form or a form equivalent to the K-form.

evaluator(s) the individual(s) assigned the responsibility to assess a specific grouping of employee concerns.

findings includes both statements of fact and the judgments made about those facts during the evaluation process; negative findings require corrective action.

issue a potential problem, as interpreted by the ECTG during the evaluation process, raised in one or more concerns.

K-form (see "employee concern")

requirement a standard of performance, behavior, or quality on which an evaluation judgment or decision may be based.

root cause the underlying reason for a problem.

*Terms essential to the program but which require detailed definition have been defined in the ECTG Procedure Manual (e.g., generic, specific, nuclear safety-related, unreviewed safety-significant question).

Acronyms

AI	Administrative Instruction
AISC	American Institute of Steel Construction
ALARA	As Low As Reasonably Achievable
ANI	Authorized Nuclear Inspector/ANII (Inservice)
ANS	American Nuclear Society
ANSI	American National Standards Institute
ASME	American Society of Mechanical Engineers
ASTM	American Society for Testing and Materials
AWS	American Welding Society
BFN	Browns Ferry Nuclear Plant
BLN	Bellefonte Nuclear Plant
CAQ	Condition Adverse to Quality
CAQR	Condition Adverse to Quality Report
CAR	Corrective Action Report
CATD	Corrective Action Tracking Document
CCTS	Corporate Commitment Tracking System
CEG-H	Category Evaluation Group Head
CEP	Construction Engineering Procedure
CFR	Code of Federal Regulations
CI	Concerned Individual
CMTB	Certified Material Test Report
COC	Certificate of Conformance/Compliance
DCR	Design Change Request
DNC	Division of Nuclear Construction (see also NU CON)

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DNE Division of Nuclear Engineering
DNQA Division of Nuclear Quality Assurance
DNT Division of Nuclear Training
DOE Department of Energy
DPO Division Personnel Officer
DR Discrepancy Report or Deviation Report
ECN Engineering Change Notice
ECP Employee Concerns Program
ECP-SR Employee Concerns Program-Site Representative
ECSP Employee Concerns Special Program
ECTG Employee Concerns Task Group
EEOC Equal Employment Opportunity Commission
EQ Environmental Qualification
EMRT Emergency Medical Response Team
EN DES Engineering Design
ERT Employee Response Team or Emergency Response Team
FCR Field Change Request
FSAR Final Safety Analysis Report
FY Fiscal Year
GET General Employee Training
HCI Hazard Control Instruction
HVAC Heating, Ventilating, Air Conditioning
II Installation Instruction
INPO Institute of Nuclear Power Operations
IRN Inspection Rejection Notice

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L/R	Labor Relations Staff
MAI	Modifications and Additions Instruction
MI	Maintenance Instruction
MSPB	Merit Systems Protection Board
MT	Magnetic Particle Testing
NCR	Nonconforming Condition Report
NDE	Nondestructive Examination
NPP	Nuclear Performance Plan
NPS	Non-plant Specific or Nuclear Procedures System
NQAM	Nuclear Quality Assurance Manual
NRC	Nuclear Regulatory Commission
NSB	Nuclear Services Branch
NSRS	Nuclear Safety Review Staff
NU CON	Division of Nuclear Construction (obsolete abbreviation, see DNC)
NUMARC	Nuclear Utility Management and Resources Committee
OSHA	Occupational Safety and Health Administration (or Act)
ONP	Office of Nuclear Power
OWCP	Office of Workers Compensation Program
PHR	Personal History Record
PT	Liquid Penetrant Testing
QA	Quality Assurance
QAP	Quality Assurance Procedures
QC	Quality Control
QCI	Quality Control Instruction

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QCP	Quality Control Procedure
QTC	Quality Technology Company
RIF	Reduction in Force
RT	Radiographic Testing
SQN	Sequoyah Nuclear Plant
SI	Surveillance Instruction
SOP	Standard Operating Procedure
SRP	Senior Review Panel
SWEC	Stone and Webster Engineering Corporation
TAS	Technical Assistance Staff
T&L	Trades and Labor
TROI	Tracking and Reporting of Open Items
TVA	Tennessee Valley Authority
TVILC	Tennessee Valley Trades and Labor Council
UT	Ultrasonic Testing
VT	Visual Testing
WBECSP	Watts Bar Employee Concern Special Program
WBN	Watts Bar Nuclear Plant
WR	Work Request or Work Rules
WP	Workplans

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80400

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1.0 CHARACTERIZATION OF ISSUE

The Nonconformance Control and Corrective Action Subcategory consisted of 70 concerns comprising 29 issues, pertinent to the processes for identifying, documenting, dispositioning, trending, and correcting unsatisfactory conditions. Nine of the issues were determined to be generic and 20 were determined to be site-specific.

The evaluated issues resulted in the following classifications: eight of the issues could not be verified as factual (Class A); six of the issues were factually accurate, but what was described was not a problem (Class B); five of the issues were factual and identified problems, but corrective action for the problems was initiated before the evaluation of the issues was undertaken (Class C); nine of the issues were factual and presented problems for which corrective action has been, or is being, taken as a result of an evaluation (Class D); and one issue could not be verified as factual but as a result of the evaluation other problems were discovered for which corrective action was initiated (Class E).

2.0 EVALUATION METHODOLOGY

The evaluation methods used to assess the issues contained in this subcategory report consisted of reviewing the Employee Concern File, Nuclear Safety Review Staff (NSRS) File, Quality Technology Company (QTC) File, and applicable reports contained in the files. Pertinent requirements were established by reviewing the Tennessee Valley Authority (TVA) procedural hierarchy, ranging from the TVA Topical Report and Nuclear Quality Assurance Manual, to the specific governing implementing procedures. Additionally, regulatory requirements and industry standards were researched, when appropriate.

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Documentation generated as a result of the particular activity related to each was reviewed in the evaluation process. For example, over 350 Nonconformance Reports, Significant Condition Reports, Inspection Rejection Notices, Quality Control Investigation Reports, Corrective Action Reports, Monthly Trend Reports, Deficiency Reports and Problem Identification Reports were reviewed in determining the issue's validity.

Discussions were held with cognizant personnel having responsibilities for the activities associated with the specific issue. Furthermore, when the issue warranted, additional evaluation or inspections were conducted of installations.

3.0 FINDINGS

3.1 Element - Discrepancies not being documented

3.1.1 Issue - Problems are not being documented on Problem Identification Reports (PIRs)/Significant Condition Reports (SCRs). Also, writing notes to file is being stressed instead of using the PIR/SCR forms. (Site-specific to BLN) (I-86-232-BLN)

Specific Evaluation

This issue was evaluated at BLN only. A review was performed of the following applicable documents: Quality Assurance Manual for Design, Construction, and Operation (Typical Report) TVA TR75-1A, Revision 8; TVA Nuclear Quality Assurance Manual (NQAM), January 26, 1987; Office

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of Engineering Procedure (OEP), OEP-17 "Corrective Action," Revision 3, March 28, 1986; Nuclear Engineering Procedure (NEP), NEP-9.1, "Corrective Action," Revision 1, February 20, 1987; and Quality Control Procedure (QCP), QCP-6.18 "Metallic and Nonmetallic Thermal Insulation," Revision 5, October 8, 1985. Also, the investigation of the issue included discussions with Division of Nuclear Engineering (DNE) and QA personnel.

Discussion

A letter located in the (administratively confidential) file provided two examples where quality problems were not documented on PIRs and/or SCRs. In the first example, an SCR was generated relating to problems with final verification and analysis of installed piping insulation. The SCR was subsequently downgraded to a PIR. However, the PIR was never issued. QACEG's evaluation indicated the PIR was reviewed by the lead mechanical engineer (DNE) and was found not to be a problem. The reason this was not a problem was explained to the individual who initiated the PIR. The individual indicated (on the PIR) his concurrence that the PIR condition was not a problem.

The second example indicated that a PIR was initiated identifying a problem with the closure of an Engineering Change Notice (ECN), but never issued. QACEG's evaluation indicated no evidence of the subject PIR, however an ECN was located which appeared to be the subject of this

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concern. The Lead Mechanical Engineer stated that the PIR was initiated but not issued because the PIR's description of the condition was in error. The closure sheet of the ECN was properly coordinated and initialed by the involved supervisors before closure. The ECN was incorporated before closure.

QACEG held discussions with several Division of Engineering and Quality Assurance personnel to gain further insight to the scope of the issue. These discussions indicated that one individual, a Principal Mechanical Engineer, recalled a time when notes were written to the files as an informal means of identifying discrepancies, but could not provide any details or examples.

QACEG also reviewed two procedures. OEP-17 "Corrective Action," (in effect at the time of the concern) Revision 3, March 28, 1986 and NEP-9.1, "Corrective Action," Revision 1, February 20, 1987 (which superseded OEP-17), contain the requirements for processing and resolving quality problems. NEP 9.1 delineates the present method for resolving disagreements regarding the validity of newly identified quality problems.

Conclusion

The issue could not be verified as factual (Class A). The particular examples provided, by the Concerned Individual, were determined to be invalid. Discussions held with

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cognizant personnel did not reveal any instances where quality problems were not being properly documented on PIRs/SCRs, when required. Procedures were/are in place to control the processing of quality problems documented on PIRs, SCR's and the current Condition Adverse to Quality Report.

3.2 Element - Timely issuance of discrepancy documentation

- 3.2.1 Issue - Corrective Action Reports (CARs)/Deficiency Reports (DRs) not issued in a timely manner precluding prompt identification of problems (generic - WBN, BFN, BLN). (IN-86-090-002, IN-86-098-001, I-85-129-WBN, IN-86-087-003, IN 85 688-004, I 85 517-BFN, IN-85 688-002)

Specific Evaluation

This issue was evaluated at WBN, BFN, and BLN.

The QACEG's review of the Employee Concern Files indicated the existence of four NSRS reports, I-85-517-WBN, March 4, 1986, IN-85-424-WBN, December 9, 1985, I-86-185-SQN, March 5, 1986 and I-85-933-WBN, December 18, 1985, which addressed this issue. The evaluation also consisted of a review of implementing procedures (Administrative Instructions and Staff Instruction Letters) at Watts Bar Nuclear Plant (WBN), Bellefonte Nuclear Plant (BLN) and Browns Ferry Nuclear Plant (BFN) governing the processing of CARs/DRs and the associated tracking logs.

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At Sequoyah Nuclear Plant (SQN) the QACEG evaluation included interviews with supervision personnel from Quality Engineering (QE) and Quality Control (QC), the CAR/DR Coordinator, and SQN Site Quality Assurance (QA) Manager. All 1985 and 1986 open and closed SQN CARs and DRs were reviewed as well as a random review of historical revisions to Sequoyah Administrative Instructions (AIs).

Discussion

A review was performed of the NSRS reports pertinent to the issue. These reports concluded that CARs/DRs had, in fact, not been promptly issued. Also, a review was conducted of the respective site implementing procedures. For example, at WBN, Administrative Instruction (AI), AI-7.3, Revision 4 and Plant Quality Assurance Staff Instruction Letter (PQA-SIL) PQA-SIL-3.1, Revision 8 included provisions for the use of a "draft" (informal) CAR/DR. This "draft" report was used primarily as a means of obtaining the concurrence of the Plant Quality Assurance Staff and there were no procedural time restraints on the processing of the "draft" report. Additionally, the procedures required that the initiator obtain his supervisor's review on the "draft" CAR/DR which provided the opportunity for further delays.

Review of implementing procedures at BFN and BLN indicated that similar situations occurred as those identified at WBN. The procedures did not provide any time restraints for the processing of CARs/DRs, from initiator to formal issuance, which resulted in the untimely issuance of CARs/DRs.