NRC FORM 591S PART 1 (8-2002) 10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/CERTIFICATE HOLDER	2. NRC/REGIONAL OFFICE
Transnuclear, Inc. 7135 Minstrel Way, Suite 300 Columbia, MD 21045 REPORT NUMBER(S) 72-1021/2009-201	Division of Spent Fuel Storage and Transportation U. S. NRC M/S EBB-3D-02M Washington, DC 20555-0001

3. LICENSEE/CERETIFICATE NUMBER(S)	4. INSPECTION LOCATION	5. DATE(S) OF INSPECTION
72-1021	General Electric Hitachi, Canonsburg, PA	March 30 through April 2, 2009

The inspection was an examination of the activities conducted under your Nuclear Regulatory Commission (NRC) approved Quality Assurance Program related to compliance with the NRC's rules and regulations with regard to activities subject to 10 CFR Part 71 and 72. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the inspector. The inspection findings are as follows:

☒ 1. Based on the inspection findings, no violation or nonconformances were identified.

☐ 2. Previous violations(s) or nonconformance(s) closed.

☐ 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified non-repetitive, and corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy, NUREG-1600, to exercise discretion, were satisfied.

_____ Non-Cited Violation(s) was/were discussed involving the following requirement(s) and Corrective Actions(s):

☐ 4 During this inspection certain of your activities, as described below and/or attached, were in violation of nonconformance of NRC requirements and are being cited. This for is a NOTICE OF VIOLATION OR NONCONFORMANCE, which may be subject to posting in accordance with 10 CFR19.11.

(Violations, Nonconformances, and Corrective Actions)

STATEMENT OF CORRECTIVE ACTIONS

☐ I hereby state that, within 30 days, the actions described by me to the inspector will be taken to correct the violations identified. This statement of corrective actions I made in accordance with the requirements of 10 CRF 2.201 (corrective steps already taken, corrective steps which will be taken date when full compliance will be achieved). I understand that no further written response to NRC will be required, unless specifically requested; OR

☐ Written Response requested in 30 days ☐ Yes ☐ No

TITLE	PRINTED NAME	SIGNATURE	DATE
LICENSEE	Robert Grubb		4/2/09
NRC INSPECTOR	Jim Pearson		4/2/09

INSPECTOR NOTES COVER SHEET

Licensee/Certificate Holder (name and address)	Transnuclear, Inc. (TN) 7135 Minstrel Way, Suite 300 Columbia, MD 21045
Licensee/Certificate Holder contact and phone number	Mr. Chris Lloyd 410-910-6870
Docket No.	071-1021
Inspection Report No.	071-1021/2009-201
Inspection Dates(s)	March 30 - April 2, 2009
Inspection Location(s)	General Electric Hitachi Nuclear Energy (GEH), Canonsburg, PA
Inspectors	Jim Pearson, Team Leader, Senior Safety Inspector Earl Love, Safety Inspector Clyde Morell, Safety Inspector, In-Training
Summary of Findings and Actions	The team reviewed all corrective actions resulting from the Notice of Violation (NOV) issued at the conclusion of the last NRC inspection of TN at the GEH facility (October 29 to November 2, 2007 and January 14 to 17, 2008) as documented in NRC Inspection Report (IR) 721021/2007-201 (ML080650152). The team noted that while TN and GEH's corrective actions for the Notice of Violation (NOV) items were acceptable, follow-on NRC inspections will determine the long term effectiveness of the actions and while GEH has satisfactorily addressed the QA program concerns identified by the NRC and TN, the NRC expects that TN will continue to be proactive with regard to ensuring that GEH conducts cask fabrication activities in a manner that conforms to TN's NRC-approved QA program and that meets 10 CFR Part 71 and 72 QA requirements. Overall, no concerns were identified in the review of TN's and GEH's corrective actions to the nine (9) examples cited in the NOV. The team did discuss the progress made by both TN and GEH in identifying and describing areas for corrective action as well as the fact that continued attention would be required by both TN and GEH to ensure that any trends indicated were addressed in a timely manner and to the extent necessary so as not to affect the proper and safe fabrication of Dry Shielded Canisters (DSCs). Though no findings were identified the enhanced NRC inspection schedule for the GEH facility shall continue to ensure that GEH conducts DSC fabrication activities in a manner that conforms to TN's NRC-approved QA program. The review of GEH fabrication activities and corrective actions as well as TN's oversight of the fabrication activities, were assessed to be adequate. No significant adverse findings were noted and no cited or non-cited violations were identified.
Lead Inspector Signature/Date	Jim Pearson 4/30/09 Jim Pearson / Earl Love 4/30/2009
Inspector Notes Approval Section Chief Signature/Date	David W. Pstrak 4/30/09 David W. Pstrak

INSPECTOR NOTES: SECTIONS 02.01 THROUGH 02.08 OF IP 60852 WERE PERFORMED AS APPLICABLE IN REGARD TO REVIEW OF TRANSNUCLEAR CORRECTIVE ACTIONS FROM A PREVIOUS INSPECTION. THE INSPECTION RESULTS ARE DOCUMENTED BELOW:

Inspection Background:

The inspection's primary focus was to review and assess, for adequate implementation of corrective actions resulting from the Notice of Violation (NOV) issued at the conclusion of the last NRC inspection of TN at the GEH facility October 29 to November 2, 2007, and January 14 to 17, 2008. GEH is a fabrication contractor for TN fabricating Dry Shielded Canisters (DSCs) for the NUHOMS spent nuclear fuel cask storage system. The team noted that both TN and GEH had adequately implemented their corrective actions to the Notice of Violations (NOVs) along with actions to preclude recurrences in a timely manner. As a method of verification, the inspection was performance based and included observations of on-going shop fabrication, assembly, and testing activities relative to the implementation of corrective actions. The 32P and 32PTH NUHOMS DSC systems are used by Calvert Cliffs Nuclear Power Plant (CCNP) and Dominion Generation, respectively.

02.01: Determine whether the fabrication specifications are consistent with the design commitments and requirements documented in the SAR, and, as applicable, the CoC or the site-specific license and technical specifications.

The team reviewed TN Specification No. E-20763, "NUHOMS 32PTH HD System Dry Shielded Canister" for consistency and compliance to design commitments and SAR requirements. The requirements for materials, fabrication, welding, inspection, examination, testing, and quality assurance for the fabrication, assembly and testing of the 32PTH DSC were satisfied. The team reviewed a large sample of work travelers in progress including but not limited to Basket Assembly (s/n's 10-21, 22 and 24), Shell Weldment (s/n's: 2-24, 26 and 28), and Top Cover plate (s/n 33-30). The team verified the acceptance of the applicable work sequence number, work documents, description of work, and the acceptable sign off by welders, fabricators and NDE personnel.

The team reviewed the identified Welding Procedure Specification (WPS) procedure and found it met the ASME Section IX requirements. The team verified that the proper filler wire and flux was used as required in the identified WPS. The team verified that the Submerged Arc Welding (SAW) process was completed in accordance with the WPS essential variables.

The team reviewed the Non Destructive Testing procedures for Penetrant Testing (PT) and found them to meet the American Society of Mechanical Engineers requirements. In addition the team witnessed PT testing being performed, in doing so the team verified that GEH's PT procedure (reference no.PT-1339, Rev. 0) met the requirements of ASME Section III, Subsection NB. The team verified that the Visual Testing (VT) and PT inspector was qualified to perform the PT Inspection as required by GEH procedure number QAP 900, Rev. 8. The team referenced GEH PT procedure PT-1339, Rev. 0 to observe the performance of the PT inspection. The team was able to verify that the PT inspection was completed in accordance with the GEH procedure. No concerns were identified.

02.02: Determine whether corrective actions for identified fabrication deficiencies have been implemented in a time frame commensurate with their significance, and whether nonconformance reports documenting the deficiencies have been initiated and resolved.

The team reviewed all corrective actions resulting from the Notice of Violation (NOV) issued at the conclusion of the last NRC inspection of TN at the GEH facility (October 29 to November 2, 2007 and January 14 to 17, 2008) as documented in NRC Inspection Report (IR) 721021/2007-201 (ML080650152). The team noted that while TN and GEH's corrective actions for the NOV items were acceptable, follow-on NRC inspections will determine the long term effectiveness of the actions and while GEH has satisfactorily addressed the QA program concerns identified by the NRC and TN, the NRC expects that TN will continue to be proactive with regard to ensuring that GEH conducts cask fabrication activities in a manner that conforms to TN's NRC-approved QA program and that meets 10 CFR Part 71 and 72 QA requirements.

As cited in IR 72-1021/2007-201, the first NOV read as follows (note: the second NOV is discussed in Section 02.03):

10 CFR 72.150, "Instructions, procedures, and drawings," states, in part, that the certificate holder shall prescribe activities affecting quality by documented procedures and shall require that these procedures be followed.

Contrary to the above, the following examples were identified by the NRC where activities affecting quality were not prescribed in documented procedures, or where procedures for activities affecting quality were not followed:

1) GEH Commercial Nuclear Quality Assurance Manual, Section 7.0, Revision 9, "Control of Purchased Material, Items, and Services," step 7.4.C.1., states, in part, that auditing services may be performed by approved third party auditing organizations provided the auditing organization has been audited and approved by GEH and is identified on the GEH Approved Suppliers List (ASL) as an auditing organization. The NRC identified a third party auditor, was not listed on GEH's ASL as an approved auditing organization.

For example 1, the team verified that NIAC was properly placed on the ASL following initial identification of the issue. Subsequently, GEH withdrew from participation in NIAC and at that time, NIAC was removed from the GEH ASL. In addition, the team reviewed the revision in use at the time of the violation, GEH QAP 1820, Procedure for Evaluation of Third Party Audit Reports.

2) GEH Quality Assurance Procedure (QAP) 1500, Revision 6, "Nonconformance Material Control," Step 5.1.2, states that nonconforming items shall be tagged by the Quality Control inspector with a red Hold tag and segregated until disposition. The NRC identified that segregated, nonconforming, borated aluminum plate, marked as "scrap," was not tagged with a red Hold tag.

For example 2, the team reviewed GEH procedures; QAP 1500, Nonconforming Material Control, Revision 6 and 10 to identify the specific changes in procedural guidance to correct the material control issue. In addition the team visited all the areas at GEH where any nonconforming material existed to ensure tagging and segregation, where practical, was acceptable. No concerns were identified.

3) GEH did not adequately prescribe proper procedural controls for the use of temporary weld attachments, an activity affecting quality, in documented procedures. Specifically, required quality records required for use of temporary weld attachments were either not generated or maintained in a consistent manner.

The team reviewed Dominion Generation Traveler 32PTH-8, Top Shield Plug (s/n 34-24) for control of temporary weld attachments. The team determined satisfactory records (sequencing, temporary attachment map, weld control record) were maintained and that attachment and removal of temporary welds along with the necessary inspections were completed as prescribed.

4) The NRC identified that GEH QAP 960, Revision 5, did not provide proper procedural controls to maintain the computer data base welder continuity program. Specifically, the procedure did not adequately prescribe how to input data and maintain procedural control of the new computer data base welder continuity program.

For example 4, the team reviewed GEH Request for Corrective Action (RCA) no. 2007-055, dated 1/21/2008. The RCA identified a breakdown in the maintenance of the welder qualification tracking systems that is required by ASME Section IX.

The team interviewed the Senior Manufacturing Technical Manager (SMTM) to determine what actions were completed to resolve the deficiencies identified in the RCA. The SMTM indicated that the following actions were taken to resolve the deficiencies: Replaced an old tracking system with a computer based tracking system; Revised applicable implementing procedure to incorporate the use on the computer based tracking system; Created the SMTM position to oversee the production welding; Created a Welding Technician position to maintain the welder qualification tracking system; Trained personnel responsible for maintaining and

controlling the welder qualification log tracking system; and changed the time interval to re-qualify welders from six months to three months to minimize the potential time interval in which welders could be not qualified. The team met with the new welding technician and was satisfied the welding technician was knowledgeable in how the new welder tracking system worked.

5) GEH QAP 540, "Work Instructions (Travelers, Drawings and Level III Work Instruction)," Step 5.4.10 states, in part, that handwritten changes may be made to travelers provided both Manufacturing and Quality Assurance sign and date the changes. Contrary to this requirement, handwritten changes were made to travelers that added welding procedure specification requirements without obtaining required signatures from Quality Assurance.

The team reviewed various production travelers both in-process and completed production records of Constellation (32P) and Dominion Generation (32PTH) to see if any hand written changes were made without proper approvals. No concerns were identified. Further, it was noted that GEH has established routine surveillances of travelers and records according to a Traveler Acceptance Checklist (TAC). The team reviewed a TAC specific to 32PTH-5 Unit 10-21 Basket Assembly for completeness and accuracy and determined that activities were properly documented in a timely manner as the activity was performed. The team verified satisfactory implementation of corrective and preventative actions. No additional concerns were noted.

6) DSC Assembly (IO62) traveler referred to a nonconformance report (NCR) dispositioned as "repair." The NRC identified that prior to approval of the NCR, a conditional release authorized work to proceed. GEH QAP 230, Revision 2, "Conditional Release," Step 5.3, states, in part, that a point of release shall be entered on the traveler as a hold point by the Director of Quality. Contrary to this requirement, a point of release was not entered on the traveler as a hold point when the conditional release was issued.

The team reviewed GEH Corrective Action, RCA No. 2007-058, as well as TN's assessment of corrective actions taken by GEH and determined the actions were acceptable. In addition, the team reviewed changes to QAP-230, "Management Conditional Release," specifically those areas enhanced to require customer approval and GEH's process of proceeding with a conditional release. Further, the team reviewed records, including, Management Conditional Release Form Nos. 772, 768, and 755, as well as customer approval letters authorizing release to a pre-defined point within the travelers. The team verified satisfactory implementation of corrective and preventative actions. No additional concerns were noted.

7) GEH QAP 540, Step 5.4.15, states, in part, that upon completion of each operation, the traveler is signed and dated by the person completing the operation, and that each individual is responsible to ensure that documentation of the prior required traveler sequence has been completed prior to proceeding with the next sequence. Contrary to this requirement, the NRC identified those travelers for 32PTH-5-1 and 2, specific to completed fuel compartments, contained Quality Control cleanliness inspection hold points that were not signed, yet work had proceeded beyond the hold points.

The team reviewed GEH Corrective Action, RCA No. 2007-058, as well as TN's assessment of corrective actions taken by GEH and has determined the actions taken by TN were acceptable. The team noted extensive TN oversight as well as bimonthly walkthroughs of shop activities by GEH management. The team noted TN oversight of shop activities continues to identify material control issues in which TN has documented their observations on Supplier Finding Report (SFR) No. 2009-003. The team expressed a concern relating to the ongoing prevalence of material control issues. Traceability of procurement documents, tagging and storage of nonconforming material, housekeeping, and management controls continue to be areas of adverse conditions that GEH has acknowledged as needing additional corrective and preventative actions. TN will continue to monitor the resolution of those deficiencies noted within SFRs along with preventative measures as documented in TN CAR 2008-042.

8) GEH QAP 1500, "Nonconforming Material Control," Step 5.4.1, that states, "nonconforming conditions shall be documented on an NCR and that the traveler sequence shall be annotated with a reference to the NCR number." Contrary to this requirement, the NRC identified that sequence 290 on a completed traveler for a

DSC (001-C), involving rework associated with meeting stack-up requirements, contained a pen and ink change that stated "top shield plug re-machined to satisfy stack-up requirement." While sequence 290 allowed rework of the top cover plate to satisfy stack-up requirements, it did not allow reworking of the top shield plug. GEH failed to initiate an NCR to document that stack-up requirements could not be met without machining of the top shield plug.

The team has reviewed the actions taken by GEH in RCA 2007-058 and CAR 44476, as well as, TN actions taken for missed NDE operations on the top shield plug in question and determined the actions were acceptable. The team reviewed traveler 32PTH sequence 290 and has verified GEH preventative measures by virtue of assuring requisite steps are correctly documented and that changes were made to eliminate extensive hand written changes regarding rework during stack-up process. To prevent recurrence, the team noted, appropriate top shield plug machining and inspection notes have been added to the traveler and that TN NCR 2008-056 was initiated for the missed NDE activities and the NCR has subsequently been accepted and closed. Lastly, the team noted that TN routinely monitors fabrication activities to prevent recurrence of adverse conditions. The team verified satisfactory implementation of corrective and preventative actions. No additional concerns were noted.

9) GEH QAP 1500, "Nonconforming Material Control," Step 5.4.1, states that nonconforming conditions shall be documented on an NCR and that the traveler sequence shall be annotated with a reference to the NCR number. Contrary to this requirement, the NRC identified that GEH failed to document the unsuccessful attempt to insert DSC Basket 10-4 under its own weight into DSC Shell 2-6 on an NCR, as required by QAP 1500.

The team reviewed the actions taken by GEH in RCA 2007-058 and CAR 44932 and determined those actions were acceptable. The use of force was addressed on TN NCR 2006-676 and GEH RCA 2006-027. The team determined effective corrective actions by reviewing documentation associated with resolution of the above noted RCA and CAR. In addition the team witnessed shop activities and reviewed shop travelers concerning a production assembly, DSC Unit No. 18, in which an unsuccessful attempt was made to insert a basket assembly into a shell weldment. The team noted that the nonconforming condition and subsequent disposition of basket assembly (s/n 10-22) and shell weldment (s/n 2-24) was adequately documented and that the removal of the basket and associated repairs were satisfactorily controlled. The team noted the initiation of GEH NCRs 2008-565 (removal of basket), 567 (disposition of basket assembly) and 568 (disposition of shell weldment). Further, the team noted that TN's evaluation is ongoing and that basket assembly and/or shell repairs, as well as, conditions that may warrant 'Use-As-Is' or 'Repair' dispositions will be conducted in strict compliance with GEH and TN QA program requirements and associated implementing procedures. This deficiency remains an open issue by TN and GEH and is currently under evaluation for repairs and subsequent closure. Based on observations and a review of controlling documents the team determined effective control of nonconforming material and concluded satisfactory implementation of corrective and preventative actions to the previous violation. No additional concerns were noted.

The team reviewed a GEH self-identified condition adverse to quality. Specifically, GEH manufacturing personnel observed a lack of fusion in spot welds between the Fuel Compartments and the Bottom Plates and Basket Plate Supports on Basket Assembly s/n's: 10-17, 18, 19, 20, 30-21 and 30-22 applicable to Dominion Generation 32PTH and Calvert Cliffs Nuclear Power Plant (CCNP) 32P DSC's, respectively. The team noted that GEH NCR number 2008-598 and that CAR number 46537 were initiated. As part of the evaluation of the extent of condition, for the Dominion Generation project, five of ten baskets inspected exhibited lack of fusion. For CCNP six of ten baskets inspected exhibited lack of fusion. The team reviewed GEH's Investigation Report, "Fuel Canister Basket Spot Welding Lack of Fusion Issue," Revision 2, dated March 28, 2009, along with TN's assessment as documented by TN CAR 2008-051. TN determined that the lack of fusion condition on completed and shipped canisters was not a Significant Safety Condition and not reportable under the provisions of 10 CFR 21. Although GEH has not been able to replicate the lack of fusion condition during mockup testing, the cause was determined to be inadequate control of critical parameters as well as faulty workmanship during the production weld process. The team reviewed documentation associated with this issue, including corrective and preventative actions taken. The corrective actions required GEH to revise the welding procedure for the process as well as create a new procedure for testing weld integrity of production

spot welds. The team noted that the revised GEH weld procedures and increase process monitoring appeared adequate for ensuring weld integrity of fuel tubes as no further spot weld problems have occurred. No concerns were identified in TN/GEH's resolution of the issue.

Overall, no concerns were identified in the review of TN's and GEH's corrective actions to the nine (9) examples cited in the NOV. The team did discuss the progress made by both TN and GEH in identifying and describing areas for corrective action as well as the fact that continued attention would be required by both TN and GEH to ensure that any trends indicated were addressed in a timely manner and to the extent necessary so as not to affect the proper and safe fabrication of Dry Shielded Canisters (DSCs). Though no findings were identified, the continued enhanced NRC inspection schedule for the GEH facility will continue to ensure that GEH conducts DSC fabrication activities in a manner that conforms to TN's NRC-approved QA program.

The team also reviewed other programmatic enhancements implemented by GEH including Approved Suppliers List (ASL) enhancements for purchase order (PO) reviews and ASL control and distribution. Further, the team specifically evaluated TN and GEH's surveillance process, which now includes frequent monitoring of in-process welding, assembly and testing operations, and concluded that adequate measures were established and implemented to assure that conditions adverse to quality are identified and corrected. No concerns were identified.

02.03: Determine whether individuals performing quality-related activities are trained and certified where required.

The second NOV cited in IR 72-1021/2007-201, read as follows:

10 CFR 72.158, "Control of Special Processes," states, in part, that the certificate holder shall establish measures to ensure that special processes, including welding, are accomplished by qualified personnel. Contrary to the above, the NRC identified that a welder was shown as qualified to perform two separate welding processes, yet his qualification to do so had actually lapsed.

To verify effectiveness and corrective actions for this issue, the team reviewed numerous welder qualification datasheets, welder qualifications to determine if their qualifications were in agreement with the revised computer welder qualification tracking system. The team verified that welder's qualifications were in order. No concerns were identified and the issue involved with the NOV is considered closed.

02.04: Determine whether the offsite fabricator's personnel are familiar with the specified design, designated fabrication techniques, testing requirements, and quality controls associated with cask construction.

The team reviewed various documents and also held discussions with personnel at all levels of the GEH organization including shop/floor personnel performing fabrication, Quality Assurance (QA) and Quality Control (QC) personnel, and engineering and management personnel. The team noted from these discussions and reviews that GEH personnel were familiar with the designs under fabrication, and with the associated fabrication techniques, testing requirements and quality controls. No concerns were identified.

The team observed GEH performance of various examinations, reviewed selected surveillance and NDE reports, and numerous welding operations. In addition, the team observed material control (i.e., plate and shell weldments) to assure that traceability of items was maintained throughout processing operations. Further, the team also verified that items were adequately identified as to inspection status, storage areas complied with specified requirements, item markings were clear and not detrimental, and that subdivided items had satisfactory transfer of markings to each item.

02.05a: Determine whether materials, components, and other equipment received by the fabricator meet design procurement specifications. 02.05b: Determine whether the procurement specifications conform to the design commitments and requirements contained in the SAR and, as applicable, the CoC or the site-specific license and technical specifications.

The team reviewed procurement procedures, interviewed procurement QA personnel, reviewed various approved vendor audits/surveillances, and verified the procurement consumable items as well as components undergoing fabrication to verify that they were procured from qualified suppliers and met procurement specifications.

Several TN material components being used in fabrication activities at the time of the inspection were reviewed for their procurement history by the team. For all of the items reviewed, material inspection reports were on file, Certified Material Test Reports (CMTRs) and other laboratory analyses as needed were included, and the material specifications were traced back to the vendor design drawing specifications and determined to be in accordance with the design specifications. No concerns were identified.

The team also reviewed the GEH ASL and the process for qualifying and maintaining suppliers on the ASL. All materials reviewed were verified to have been procured from suppliers listed on the ASL. No concerns were identified with the procurement process.

Overall, the team concluded that GEH's procurement activities were being performed in accordance with their controlling procedures. Procurement personnel clearly understood the procurement process and the procedures used. Methods used to approve addition of suppliers to the ASL were appropriate and the audits and surveillances used to qualify and maintain suppliers on the ASL were adequate. No concerns were identified.

02.06: Determine whether DCSS components are being fabricated per approved QA and 10 CFR Part 21 implementing procedures and fabrication specifications.

All of the fabrication activities observed or reviewed by the team were determined to be conducted in accordance with approved GEH QA procedures and TN fabrication specification. The team noted that project specific procedures for vendor fabrication taking place at GEH required adherence to 10 CFR Part 21. The team verified that Part 21 requirements were invoked where required on the various Purchase Orders that were reviewed. No concerns were identified.

02.07a: With regard to fabrication activities, determine whether they are conducted under an NRC-approved QA program (10 CFR 72.140).

Though GEH's QA Program is not a program directly approved by the NRC, the GEH QA program is applied as directed by TN's procurement agreements with GEH. TN's QA Program is an NRC-approved program and the vendor contractually imposed QA requirements on GEH that meet NRCs requirements. All of the quality activities performed by GEH personnel and observed or reviewed by the team were determined to meet NRCs QA requirements. No concerns were identified.

02.08b: With regard to QA activities, determine whether for selected audits and inspection findings from QA audit or surveillance and/or inspection reports issued in the previous 2 years, the findings were appropriately handled with corrective actions implemented in a time frame commensurate with their safety significance.

The team determined that TN QA personnel have improved in the performance of their programmatic surveillances of the GEH QA Program. Where deficiencies were noted audit or surveillance findings were documented in GEH RCAs and were addressed in a time frame commensurate with their importance. The team noted that TN provides adequate on-site coverage during fabrication activities. No concerns were identified.

02.08c: With regard to quality assurance activities, determine whether supervision and quality control/quality assurance personnel perform appropriate oversight during fabrication activities.

The team determined from review of multiple TN and GEH documents, that QA personnel perform planned and periodic oversight of the GEH QA Program. Significant surveillance improvement on the part of the certificate

of compliance holder was noted since the last inspection. In addition, the team noted that oversight by the fabricator, vendor, and the purchaser continues to be ongoing during fabrication activities. For fabrication travelers, the team noted the incorporation of hold and witness points in them at various locations throughout the traveler. During the inspection, the team reviewed multiple work travelers to verify the completion of hold point sign-offs. No concerns were identified.