

Indian Point 3
Nuclear Power Plant
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**New York Power
Authority**

Joseph E. Russell
Resident Manager

February 8, 1990
IP3-90-010
MFP-90-021B

Docket No. 50-286
License No. DPR-64

Mr. Marvin W. Hodges, Director
Division of Reactor Safety
U.S. Nuclear Regulatory Commission
Region 1
475 Allendale Road
King of Prussia, PA 19406

SUBJECT: Inspection No. 50-286/89-82 and Associated Notice
of Violation (89-82-01 and 89-82-02)

Dear Mr. Hodges:

This letter and its attachments provide the Authority's response to the notices of violation (89-82-01 and 89-82-02) and to the concern (Unresolved Item 89-82-08) identified in NRC Inspection Report No. 89-82.

As stated in the attachments:

The Authority agrees that violation 89-82-01 occurred, and has taken steps to improve the biennial review process not only for Operations Department procedures but for all station documents and instructions.

The Authority disagrees with violation 89-82-02. The basis for this finding states, "The Technical Specifications Section 6.5.2.8, and Quality Assurance Instruction, 18.2 Revision 2, Section 6.1.1.F, require the audit of all procedures within the Technical Specifications within a 24-month period". This is incorrect. These documents do not require the audit of all procedures identified within the Technical Specifications and specifically do not require the audit of the Emergency Operating Procedures. The Authority requests that the NRC reevaluate its position on this issue and withdraw the violation.

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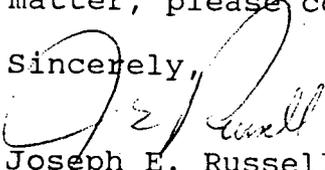
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After review of the concern identified as open item number 89-82-08, the Authority strongly asserts that the conclusion reached by the examiner - "in that Emergency Operating Procedures were used as guidance documents and adherence was not required" - is an incorrect root cause of the events that occurred during the simulator audit. The Authority reaffirms its commitment that procedures are not guidance documents and do require strict adherence.

The Authority believes that the inspection report contains many excellent recommendations and is reviewing them for incorporation into the Emergency Operating Procedure Program. Additional details on this effort will be provided in our 60 day response.

Should you or your staff have any questions concerning this matter, please contact Mr. M. Peckham of my staff.

Sincerely,


Joseph E. Russell
Resident Manager
Indian Point Unit 3
Nuclear Power Plant

JER:MFP/rl

Attachment

cc: Document Control Desk (original)
U.S. Nuclear Regulatory Commission
Mail Station P1-137
Washington, D.C. 20555

Resident Inspector's Office
Indian Point 3
U.S. Nuclear Regulatory Commission
P.O. Box 337
Buchanan, NY 10511

**ATTACHMENT I
RESPONSE TO NOTICE OF VIOLATION
89-82-01 AND 89-82-02**

VIOLATION:

"10 CFR 50, Appendix B, Criterion V, "Instructions, Procedures, and Drawings," requires that activities affecting quality be prescribed by documented procedures and that those activities be accomplished in accordance with those procedures. Administrative procedure AP-3, "Procedure Preparation, Review and Approval," Revision 16, Section III.B, requires that all procedures be reviewed every two years, with a tolerance of plus 25 percent.

Contrary to the above, as of August 25, 1989, the licensee had not reviewed approximately thirty of the required procedures within the allowed thirty months. Examples of the procedures that had not been reviewed as required are:

<u>Procedure Number/Title</u>	<u>Effective Date</u>	<u>Review Due Date</u>
ONOP-CB-1 "Loss of Containment Integrity"	10/17/85	4/17/88
ONOP-RC-1 "Malfunctioning RPI"	6/06/86	12/06/88
SOP-EL-13 "Appendix R Diesel Generator Operation"	4/25/86	10/25/88

A Notice of Violation was issued for a similar condition identified during an NRC inspection, during the period September 26-30, 1988. (See Inspection Report No. 50-286/88-18).

This is a Severity Level IV violation."

RESPONSE:

The Authority has reviewed in detail the notice of violation (89-82-01) outlined in Attachment A of NRC Inspection Report 89-82 and agrees that the event occurred as discussed. All deficiencies identified in the report have been corrected. A review of all Operations procedures was conducted to insure compliance with the biennial requirements. The Authority had previously committed (see NRC Inspection Report 89-80 Weaknesses Response dated September 14, 1989) to implementing a centralized procedure tracking center for all plant procedures. This tracking system is scheduled for implementation by March 31, 1990.

**ATTACHMENT I
RESPONSE TO NOTICE OF VIOLATION
89-82-01 AND 89-82-02**

VIOLATION:

"10 CFR 50, Appendix B, Criterion XVIII, "Audits," requires periodic audits to verify compliance with all aspects of the quality assurance program. The Technical Specifications, Section 6.5.2.8, and Quality Assurance Instruction 18.2, Revision 2, Section 6.1.1.F, require the audit of all procedures identified within the Technical Specifications within a 24 month period. The operations department procedures are identified within the Technical Specifications as required procedures.

Contrary to the above, as of August 25, 1989, the Emergency Operating Procedures had not been audited since their initial issuance in April, 1985.

This is a Severity Level V violation."

RESPONSE:

The Authority has reviewed in detail the notice of violation (89-82-02) outlined in Attachment A of NRC Inspection Report 89-82 and agrees that the Emergency Operating Procedures (EOPs) have not been audited, but disagrees that this is a violation of NRC requirements. The Authority also believes that the basis for the violation is incorrect in that the Technical Specifications Section 6.5.2.8 (Attachment II) and Quality Assurance Instruction 18.2 Rev.2, Section 6.1.1.F (Attachment III) do not require the audit of all procedures identified within the Technical Specifications within a 24 month period and specifically do not require the audit of the Emergency Operating Procedures.

The Authority believes that the involvement of the QA organization in the maintenance and review of the Emergency Operating Procedures is important and had taken steps prior to the inspection to address this issue. The Emergency Operating Procedure verification and validation group contains representation from the QA Department. Additionally, the Quality Assurance Department reviews a sampling of EOPs as part of its operations monitoring program.

ATTACHMENT I
RESPONSE TO NOTICE OF VIOLATION
89-82-01 AND 89-82-02

NRC UNRESOLVED ITEM (89-82-08):

"Due to the observed deficiencies in the simulator, it was determined that a third crew should be observed; this decision was supported by Regional management. The third crew performed satisfactorily. As a result of the first two crews not performing as expected - in that emergency procedures were used as guidance documents and adherence was not required - the ability of the operators to correctly use the EOPs was questioned. Because of the potential for the above to affect the safety of the plant, and notwithstanding the subsequent requalification examination in which there were no EOP identified failures, the facility is requested to respond and explain how the concern will be addressed. The concern identified above will be tracked as Open Item No. 50-286/89-82-08."

RESPONSE:

After review of the concern identified as open item number 50-286/89-82-08 the Authority asserts that the conclusion reached by the examiner is an incorrect root cause of the events that occurred during the simulator audit. The Authority reaffirms its position that operating procedures, which include the EOPS, are not guidelines and must be adhered to as required by administrative procedure (AP-4) "Procedure Adherence and Use".

This philosophy has been communicated to all members of the plant staff in initial training and continuing retraining. The Authority is confident that this is understood by all operations department personnel, especially in the use of the Emergency Operating Procedures. At no time during the audit did any operator communicate by word or practice that these procedures could be deviated from or used as guidance.

The inspector in Section 7.3 of the report cites examples of incorrect EOP use as the basis for his concern. The Authority agrees that these examples are deficiencies and indications of operator performance requiring feedback, correction, and improvement. This, after all, is a basic purpose of continuing training. The Authority notes that in all cases cited the operating crews demonstrated the ability to bring the reactor to a safe, stable, shutdown condition.

ATTACHMENT I
RESPONSE TO NOTICE OF VIOLATION
89-82-01 AND 89-82-02

The Authority also notes that these errors occurred during scenarios which were designed to test the extreme limits of the procedures and which were inappropriate for use during NRC requalification examinations. To conclude that a generic problem of procedure adherence exists based on these isolated events, to the exclusion of the many instances of satisfactory performance of the initial two crews, the satisfactory overall performance of the third crew, and the subsequent requalification examination in which there were no EOP identified failures, is inappropriate.

**ATTACHMENT II
RESPONSE TO NOTICE OF VIOLATION
89-82-01 AND 89-82-02**

AUDITS

6.5.2.8 Audits of facility activities shall be performed under the cognizance of the SRC. These audits shall encompass:

- a. The conformance of facility operation to provisions contained within the Technical Specifications and applicable license conditions at least once per 12 months.
- b. The performance, training and qualifications of the entire facility staff at least once per 12 months.
- c. The results of actions taken to correct deficiencies occurring in facility equipment, structures, systems or methods of operation that affect nuclear safety at least once per 6 months.
- d. The performance of activities required by the Operational Quality Assurance Program to meet the criteria of Appendix "B", 10 CFR 50, at least once per 24 months.
- e. The Facility Emergency Plan and implementing procedures at least once per 12 months.
- f. The Facility Security Plan including the Safeguards Contingency Plan and implementing procedures at least once per 12 months.
- g. Any other area of facility operation considered appropriate by the SRC or the Executive Vice President-Nuclear Generation.
- h. The Facility Fire Protection Program and implementing procedures at least once per two years.
- i. A fire protection and loss prevention inspection and audit shall be performed annually utilizing either qualified offsite licensee personnel or an outside fire protection firm.
- j. An inspection and audit of the fire protection and loss prevention program shall be performed by an outside qualified fire consultant at intervals no greater than 3 years.
- k. The radiological environmental monitoring program and the results thereof at least once per 12 months.
- l. The OFFSITE DOSE CALCULATION MANUAL and implementing procedures at least once per 24 months.
- m. The PROCESS CONTROL PROGRAM and implementing procedures for processing and packaging of radioactive wastes at least once per 24 months.

ATTACHMENT III
RESPONSE TO NOTICE OF VIOLATION
89-82-01 AND 89-02-02

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3. the results have met the requirements or that appropriate corrective action was taken and documented.

The selection of test procedures will assure that all Section 4 sub-sections (4.1 through 4.13) with the exception of Subsection 4.2, ISI, have been audited within a 36 month period.

- E. Amendments to the Technical Specification shall be monitored to determine the impact on Sections 3 and 4. Audits of these amendments will be performed on a semi-annual basis, if necessary, to assure that the new requirements are being properly implemented and that the implementation process is effective.
- F. Section 6, Administrative Controls, shall be audited on a selective basis once every 12 months. This selective basis shall assure that all applicable areas of Section 6 are audited within a 24 month basis. These areas may be audited under different requirements (e.g., 10CFR50 Appendix B audit) but will still satisfy the Section 6 audit requirement, and be documented as doing such.

6.1.2 Technical Specifications Appendix B

A. Radiological Environmental Technical Specifications (RETS)

1. Section 2, Limiting Conditions for Operations, shall be audited once per 12 months on a selective basis. This selective basis shall assure that all Section 2 sub-sections (2.1 through 2.9) will be audited within a 24 month period. These audits shall assure that plant operating procedures for controlled releases are in accordance with Technical Specifications and that if limits are exceeded the proper actions were taken.
2. Section 3, Surveillance Requirements, shall be audited once per 12 months on a selective basis. This selective basis shall assure that all Section 3 sub-sections (3.1 through 3.9) will be audited in a 24 month basis. These audits shall assure that sampling and analysis is properly performed, prepared, reviewed and approved, and that monitoring equipment is checked, tested and calibrated at the required frequencies.