

June 25, 1982

Docket: 50-285/81-37

Omaha Public Power District
ATTN: W. C. Jones, Division Manager -
Production Operations
1623 Harney Street
Omaha, Nebraska 68102

Gentlemen:

This refers to the Systematic Assessment of Licensee Performance (SALP) Board Report of the Fort Calhoun Station, License DPR-40. The SALP Board met on December 9, 1981, to evaluate the performance of the subject facility for the period July 1, 1980, through June 30, 1981. The performance analyses and resulting evaluation are documented in the enclosed SALP Board Report. These analyses and evaluation were discussed with you at your Omaha Public Power District's office on December 9, 1981.

The performance of your facility was evaluated in the selected functional areas identified in Section IV of the enclosed SALP Board Report.

The SALP Board evaluation process consists of categorizing performance in each functional area. The categories which we have used to evaluate the performance of your facility are defined in Section II of the enclosed SALP Board Report. As you are aware, the NRC has changed the policy for the conduct of the SALP program based on our experiences and the recently implemented reorganization which emphasized the regionalization of the NRC staff. This report is consistent with the revised policy.

Any comments which you may have concerning our evaluation of the performance of your facility should be submitted to this office within 20 days of the date of this letter. Your comments, if any, and the SALP Board Report, will both appear as enclosures to the Region IV Administrator's letter which issues the SALP Report as an NRC Report. In addition to the issuance of the report, this letter will, if appropriate, state the NRC position on matters relating to the status of your safety program.

Comments which you may submit at your option are not subject to the clearance procedures of the Office of Management and Budget as required by the Paperwork Reduction Act of 1980, PL 96-511.

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Q PDR

OFFICE	ES	RPS-C	RPB2	RPB1	DRRP&EP	RA-RIV
NAME	DMHunnicut/nh	REHall	WCSeidte	GLMadsen	JEGagliardo	JTCollins
DATE	6/18/82	6/19/82	6/24/82	6/24/82	6/24/82	6/25/82

3

June 25, 1982

Should you have any questions concerning this letter, we will be glad to discuss them with you.

Sincerely,

"Original Signed by:
W. C. SEIDLE"

W. C. Seidle, Chief
Reactor Project Branch 1

Enclosure:
Appendix - NRC Report 50-285/81-37

cc w/enclosure
Fort Calhoun Station
ATTN: W. G. Gates, Manager
P. O. Box 399
Fort Calhoun, Nebraska 68023

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No distribution made at this time

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APPENDIX

U. S. NUCLEAR REGULATORY COMMISSION
REGION IV

SYSTEMATIC ASSESSMENT OF LICENSEE PERFORMANCE

Report: 50-285/81-37

Docket: 50-285

License: DRP-40

Licensee: Omaha Public Power District
1623 Harney Street
Omaha, Nebraska 68102

Facility Name: Fort Calhoun Station

Appraisal Period: July 1, 1980, through June 30, 1981

Appraisal Conducted: December 9, 1981

SALP Board Members: John T. Collins, Regional Administrator, Region IV
G. L. Madsen, Chief, Reactor Project Branch 1
D. M. Hunnicutt, Chief, Engineering Section
D. L. Kelley, Senior Resident Inspector
L. A. Yandell, Reactor Inspector
C. M. Trammell, NRR, Project Manager
E. G. Tourigny, NRR

Reviewed:

D. M. Hunnicutt
D. M. Hunnicutt, Chief, Engineering Section

6/21/82
Date

R. E. Hall
R. E. Hall, Chief, Reactor Project Section C

6/19/82
Date

Approved:

G. L. Madsen
G. L. Madsen, Chief, Reactor Project Branch 1
(SALP Board Chairman)

6/21/82
Date

I. INTRODUCTION

The NRC established a Systematic Assessment of Licensee Performance (SALP) program. This SALP program is an integrated NRC staff effort to collect available observations and data on a predetermined schedule and to evaluate licensee performance based on these observations and data. Emphasis is placed upon NRC understanding the licensee's performance in the 14 functional areas listed in the body of the report and discussing and sharing this understanding with the licensee. SALP is an integrated part of the regulatory process used to assure licensee's adherence to the NRC rules and regulations. SALP is oriented toward furthering NRC's understanding of the manner in which: (1) the licensee management directs, guides, and provides resources for assuring plant safety; and (2) such resources are used and applied. The integrated SALP assessment is intended to be sufficiently diagnostic to provide meaningful guidance to licensee management related to quality and safety of plant operation, modifications, and new construction.

This SALP report is the SALP Board's assessment of the licensee safety performance at Omaha Public Power District's Fort Calhoun Station during the period of July 1, 1980, to June 30, 1981.

The results of the SALP Board assessments in the 14 selected functional areas were discussed with the licensee at a meeting held on December 9, 1981.

II. CRITERIA

Licensee performance is assessed in 14 selected functional areas. Each of these functional areas represents an area significant to nuclear safety and its related environment and is a programmatic area for the NRC inspection program.

Evaluation criteria as listed below were used, as appropriate, in each of the functional area assessments:

1. Management involvement in assuring quality
2. Approach to resolution of technical issues from safety standpoint
3. Responsiveness to NRC initiatives
4. Enforcement history
5. Reporting and analysis of reportable events
6. Staffing (including management)
7. Training effectiveness and qualifications

In addition, SALP Board members considered other criteria, as appropriate.

Based upon the SALP Board assessment, each functional area evaluated is classified in one of the three performance categories. The definition of each of these performance areas is:

Category 1 - A combination of attributes which demonstrates achievement of superior safety performance; i.e., licensee management attention and involvement are aggressive and oriented toward nuclear safety; licensee resources are ample and effectively used such that a high level of performance with respect to operational safety or construction is being achieved. Reduced NRC attention may be appropriate.

Category 2 - A combination of attributes which demonstrates achievement of satisfactory safety performance; i.e., licensee management attention and involvement are evident and are concerned with nuclear safety; licensee resources are adequate and are reasonably effective such that satisfactory performance with respect to operational safety or construction is being achieved. NRC attention should be maintained at normal levels.

Category 3 - A combination of attributes which demonstrates achievement of only minimally satisfactory safety performance; i.e., licensee management attention or involvement is acceptable and considers nuclear safety, but weaknesses are evident; licensee resources appear to be strained or not effectively used such that minimally satisfactory performance with respect to operational safety or construction is being achieved. Both NRC and licensee attention should be increased.

III. SUMMARY OF RESULTS

The SALP Board met at the Omaha Public Power District's offices on December 9, 1981. The Board's reviews, discussions, and evaluations of the licensee's performance in the 14 functional areas resulted in classifying the licensee's performance as: (1) Category 1 - none; (2) Category 2 - 11; (3) Category 3 - 2 (Personnel, Training, and Plant Procedures and Design Changes and Modifications). The area of refueling operations was not evaluated since no plant refueling occurred during this SALP evaluation period.

IV. PERFORMANCE ANALYSIS

A. Plant Operations

1. Analysis

One inspection was conducted in this area by regional inspectors, and inspections were performed by the resident inspector on a continuing basis. No violations or deviations were identified in this area.

Seventeen Licensee Event Reports (LER's) could be attributed to plant operations:

- a. Relay which supplies power sequencer circuitry was hanging up. (80-013)
- b. Transformer of Diesel Generator No. 1 failed. (80-014)
- c. Trip unit setpoints had become positive rather than negative. (80-015)
- d. Weld crack on suction side of pump. (80-016)
- e. Malfunction of gas analyzer sampling apparatus. (80-018)
- f. Axial power distribution setpoints were out of tolerance. (80-020)
- g. Diesel Generator No. 1 transformer failure. (80-021)
- h. Power interruption to the lockout relay coil. (80-023)
- i. Charging pump breakdown. (80-024)
- j. Weld leak in "A" charging pump discharge header. (80-025)
- k. Weld leak in charging pump flushing line. (80-031)
- l. Primary heat tracing circuits were inoperable. (80-032)
- m. Current loop failure. (80-033)
- n. Potential defects in Foxboro transmitters. (81-002)
- o. Main steam isolation valves failed closed. (81-003)
- p. Mechanical door seals of the personnel air lock did not seal properly. (81-004)
- q. During monthly surveillance test, timers did not time out in prescribed time. (81-005)

2. Conclusions

The licensee is considered to be in performance Category 2 in this area. Although there were 17 LER's attributed to this area, the licensee's surveillance program identified and satisfactorily resolved the problems in a timely manner. The licensee's failure

to implement design changes and effect timely completion of maintenance items has resulted in an excessive number of control room annunciators being illuminated. Licensee management controls in this area met the intent of the program.

3. Board Recommendations

The Board recommends that the licensee fully implement design changes in a timely manner. Additional effort should be directed towards the fire protection program responsibilities and management involvement in the jumper control program.

B. Refueling Operations

1. Analysis

Three inspections were conducted in the area of fuel receipt and storage by the resident inspector. No violations or deviations were identified.

2. Conclusions

The licensee did not perform any refueling activities during this SALP review period.

3. Board Recommendations

None

C. Maintenance

1. Analysis

Five inspections were conducted in this area by regional inspectors, and three inspections by the resident inspector. No violations or deviations were identified.

One LER could be attributed to the maintenance area.

- Containment spray pump, outboard motor bearing failure. (80-029)

2. Conclusions

The licensee is considered to be in performance Category 2 in this area. The licensee failed to fully implement the maintenance program, particularly involving the control room annunciators. The corporate management performed visits on the backshifts and on weekends which demonstrated positive management participation

in plant activities. The most significant weakness in this area was the apparent lack of management support for the QA and QC functions.

3. Board Recommendations

The Board recommends that the licensee's management improve their overview related to maintenance involving control room annunciators and the jumper control program. Licensee management should place more emphasis on meeting QA and QC requirements and on effective corrective action measures related to this area.

D. Surveillance and Inservice Testing

1. Analysis

Three inspections were conducted in this area by regional inspectors, and inspections were performed by the resident inspectors on a continuing basis. One violation was found in this area.

Licensee failed to restore valves to their proper position at the completion of a test. (Severity Level IV)
(81-0901)

The seven LER's listed below could be attributed to the surveillance area:

- a. Reactor coolant flow trip setpoints drifted out of specification. (80-012)
- b. The ventilation isolation actuation signal lockout failed to trip due to a burnt coil. (80-022)
- c. Matrix relay failure during the testing of the reactor protective system. (80-026)
- d. During the monthly surveillance test, a timer on a sequencer failed to time out within its prescribed limit. (80-027)
- e. "Ready to load" buzzer on Diesel Generator failed to sound within the prescribed 10 seconds. (80-028)
- f. Failure of Diesel Generator No. 1 to start on its secondary air system. (80-030)
- g. Component cooling water pump and raw water pump timers failed to time out within their prescribed limit during the monthly surveillance test. (81-005)

2. Conclusions

The licensee is considered to be in performance Category 2 in this area. The licensee's surveillance generally identified problem areas and adequate corrective action was taken. The licensee's attentiveness to schedules and the technical adequacy of testing met requirements. Management control techniques in the surveillance test program were very good.

3. Board Recommendations

None

E. Personnel, Training, and Plant Procedures

1. Analysis

Two inspections were conducted in this area by regional inspectors. Three violations were identified during this SALP review period.

- a. Licensed personnel were identified as Emergency Duty Officers in the Emergency Plan, but had not received the required training. (Severity Level IV) (81-0202)
- b. Licensee did not perform a systematic evaluation of the performance of operators. (Severity Level IV) (81-0203)
- c. Records that operators were aware of Technical Specification changes were not kept. (Severity Level V) (81-0204)

Two LER's could be attributed to the Personnel, Training, and Plant Procedures area.

- a. Setpoint selector switches were set in the higher of the two setpoint positions. (80-017)
- b. Two seismic restraints were inoperable at the same time. (80-019)

2. Conclusions

The licensee is considered to be in performance Category 3 in this area. The licensee's apparent lack of adequate training staff may have contributed to inadequate training documentation and to late administration of annual requalification examinations. There was a lack of systematic retraining for nonlicensed

personnel. The licensee has recognized this problem area and is attempting to improve by increasing the training staff, providing incentives to encourage personnel to improve, and installing a computerized tracking system to monitor training activities.

3. Board Recommendations

The Board recommends that the licensee increase the involvement of management and shift supervision in the directing, monitoring, and managing of the training programs.

F. Fire Protection and Housekeeping

1. Analysis

One inspection was conducted in this area by a regional inspector and one by the resident inspector. No violations or deviations were identified during these inspections.

2. Conclusions

The licensee is considered to be in performance Category 2 in this area.

3. Board Recommendations

None

G. Design Changes and Modifications

1. Analysis

One inspection was conducted by a regional inspector. During this inspection, no violations or deviations were identified.

2. Conclusions

The licensee is considered to be in performance Category 3 in this area. The licensee has a large backlog of drawing revisions to complete. In addition, there is a backlog of other engineering work to be completed. Due to these problems, the licensee has not completed modification control forms, provided interim drawing revisions, or completed design verification in a timely manner.

3. Board Recommendations

The Board recommends that the licensee concentrate additional management attention to remove the backlogs of engineering work and drawing revisions (updates), and complete design verification in a timely manner.

H. Radiation Protection

1. Analysis

Two inspections were conducted by regional inspectors and four by the resident inspector. Six violations were identified within the area inspected.

- a. Health Physics Technicians are required to have 2-years experience in their specialty - one technician had approximately 1-year. (Severity Level V) (80-16A)
- b. Several 55-gallon drums of waste were not labeled as to their radioactive content. (Severity Level V) (80-16B)
- c. Two previous employees were not sent copies of their exposure records. (Severity Level V) (80-16C)
- d. Access door to very high radiation area was left ajar and unattended. (Severity Level IV) (81-0101)
- e. Employee in new fuel receipt room was not wearing a surgeon's cap. (Severity Level V) (81-0102)
- f. Calibration procedures had not been reviewed from May 1979 to May 1981. (Severity Level V) (81-1201)

2. Conclusions

The licensee is considered to be in performance Category 2 in this area. The licensee has completed corrective action for the enforcement items identified during the Health Physics Appraisal period and made satisfactory progress in the closing of significant findings and open items. The licensee had not established an ALARA Program that meets the recommendations of Regulatory Guide 8.8. Region IV completed its latest Confirmatory Measurements Inspection in May 1981. The licensee's and the NRC's measurements were in good agreement.

3. Board Recommendations

The Board recommends that the licensee complete an ALARA Program that meets the requirements stated in Regulatory Guide 8.8 at the earliest date possible.

I. Environmental Protection

1. Analysis

One inspection was performed in this area by a regional inspector with no violations or deviations having been found.

2. Conclusions

The licensee is considered to be in performance Category 2 in this area.

3. Board Recommendations

None

J. Emergency Preparedness

1. Analysis

One inspection was performed in this area by a regional inspector and one by the resident inspector. No violations or deviations were identified.

2. Conclusions

The licensee is considered to be in performance Category 2 in this area. The licensee met the Early Warning System requirements on December 1, 1981, and is now in compliance with this NRC requirement.

3. Board Recommendations

None

K. Security and Safeguards

1. Analysis

Three inspections were performed by regional inspectors in this area. Three violations were identified during these inspections.

a. A section of pipe was rolled under the main gate without being inspected. (Severity Level IV) (80-1501)

b. Independent inspection effort - a felony conviction was found in former employee's background. (Severity Level IV) (81-0801)

- c. Lack of Site Security Plan documentation. (Severity Level IV)
(81-0802)

2. Conclusions

The licensee is considered to be in performance Category 2 in this area. Licensee management has not provided adequate plans and procedures to assure compliance with 10 CFR 73 Regulations. The licensee has been responsive to NRC requests and corrective actions related to Notices of Violation.

3. Board Recommendations

The Board recommends that licensee management become more deeply involved in completion of plans and procedures to meet 10 CFR 73 Regulations.

L. Audits Review and Committee Activity

1. Analysis

One inspection was conducted in this area by a regional inspector. Three violations were identified.

- a. Failure to comply with Technical Specification concerning the SARC audit reports. (Severity Level V) (81-0702)
- b. Verification of conformance standards and their administration had not been accomplished. (Severity Level V) (81-0703)
- c. Failure to audit appropriate aspects of the Quality Assurance Program. (Severity Level V) (81-0705)

2. Conclusions

The licensee is considered to be in performance Category 2 in this area. The licensee's staff did not include a full time QA manager during this SALP review period. Licensee management had not kept current in the certification of audit personnel and in the periodic evaluation of their audit program's effectiveness.

3. Board Recommendations

The Board recommends that the licensee designate a full time QA manager and become more closely involved in the certification of audit personnel and the evaluation of the audit program's effectiveness.

M. Administration, QA Records, Procurement

1. Analysis

Three inspections were performed in this area by regional inspectors with four violations being identified.

- a. Licensee did not provide summaries as part of the monthly report concerning the safety evaluations from August 1979 to September 1980. (Severity Level V) (81-0201)
- b. Failure to maintain sufficient records to furnish evidence of activities affecting quality. (Severity Level V) (81-0701)
- c. Failure to follow storage procedures. (Severity Level V) (81-1101)
- d. Failure to document procedures affecting quality. (Severity Level VI) (81-1102)

One LER could be attributed to the administration area.

- Charging header flow transmitter to be replaced by the end of the 1981 refueling outage. (reference: IE Bulletin 79-01B) (81-001)

2. Conclusions

The licensee is considered to be in performance Category 2 in this area.

3. Board Recommendations

None

N. Corrective Actions and Reporting

1. Analysis

One inspection was performed by a regional inspector and one by the resident inspector. One violation was identified.

- Failure to take prompt corrective action. (Severity Level V) (81-0704)

2. Conclusions

The licensee is considered to be in performance Category 2 in this area. The licensee has established corrective action systems which are used in tracking the status of corrective actions and

commitments to NRC. The licensee has been responsive to corrective actions to items involving NRC requirements and their procedures and commitments.

3. Board Recommendations

None

V. SUPPORTING DATA AND SUMMARIES

A. Noncompliance Data

See Attachment A

B. Licensee Report Data

1. LER's

The Regional SALP Board reviewed the LER's for the period of July 1, 1980, through June 30, 1981. This review included LER's 50-285/80-12 through 80-33 and 81-01 through 81-06. The classification and number of LER's during this report period (July 1, 1980, through June 30, 1981) are listed as follows.

2. LER Evaluation Area

Personnel Error	3
Design/Fabrication Error	6
Component Failure	18
Defective Procedure	0
Other	<u>1</u>
TOTAL	28

- a. The SALP Board reviewed the licensee's classification of each LER. The SALP Board did not identify any significant differences between the classifications made by the licensee and those made independently by the SALP Board.
- b. Causally-linked (repetitive) LER's were identified in the areas of cracks in the charging pump piping and failure of mercury wetted relays in reactor protective system matrix (small safety significance).

3. Part 21 Reports

None

C. Licensee Activities

No significant activities

D. Inspection Activities

No special inspection activities

E. Investigation and Allegations

None

F. Escalated Enforcement Actions

1. Civil Penalties

None

2. Orders

None

3. Immediate Action Letters

None

G. Management Conferences Held During Past 12 Months

A meeting was held in the Region IV offices on February 19, 1981, to discuss NRC concerns related to the licensee's training program weaknesses and deficiencies that were reported in Inspection Report 81-02. The four violations identified in Inspection Report 81-02 and discussed during this meeting are summarized as follows:

1. Test and Experiments Program (failure to follow report requirements of 10 CFR 50.59)
2. Training (failure to follow commitments made in the training program)
3. Requalification Training (failure to meet requalification requirements)
4. Requalification Training (failure to provide record of activities affecting quality)

H. NRR Performance Evaluation

1. Performance Elements

- a. Quality of Responses and Submittals (such as SAR amendments, technical specification changes, generic letter response, and responses to requests for additional information)

Generally good. One amendment request was submitted (increase in shutdown margin, March 30, 1981) which had an inadequate basis and which required substantial additional information, although the request itself was responsive to NRC's request for the change.

- b. Efforts Required to Obtain an Acceptable Response or Submittal

- (1) Timeliness
- (2) Effort
- (3) Responsiveness to staff requests
- (4) Anticipates or reacts to NRC needs

Minimal effort is required. OPPD documents are submitted on time. OPPD responds promptly to telephone requests for information.

- c. Working Knowledge of Regulations, Guides, Standards, and Generic Issues

Good

- d. Technical Competence

Good

- e. Conduct of Meetings With NRR

Excellent. When a change in project managers occurred in 1981, OPPD made a special effort to meet with NRR to familiarize the new Project Manager with the personnel and issues at Fort Calhoun.

- f. Long-Standing Open Items

Nothing notable in this category

h. Results of Operator Licensing Examinations Conducted During the Appraisal Period

Four RO exams were administered. All candidates passed.

i. Performance on Specific Issues

There are few issues to consider. Fort Calhoun runs reliably and usually without incident. OPPD's performance was noteworthy in April 1981 when they shut the plant down for a weekend to check the environmental qualification of Foxboro pressure transmitters. This action followed notification by Foxboro that deficiencies could exist in OPPD's transmitters. Some deficiencies were found and corrected that weekend. This action took place without any prodding from NRC and was a responsible action by the utility.

2. Observed Trends in Performance

None was observed. OPPD has consistently performed well over the appraisal period.

3. Notable Strengths and Weaknesses

OPPD runs Ft. Calhoun well. The plant is well caught up on NRC generic issues and requests very little licensing activity.

4. Overall Summary

Overall rating: Category 1

ATTACHMENT A

1. Number and Nature of Enforcement Items - Operating Reactors

Facility Name: Fort Calhoun Station
 Inspection Reports 80-11 through 80-24
 81-01 through 81-15

Functional Area	Investigation & Inspection Manhours	Noncompliances and Deviations Severity Level						Classification* Dev.		
		I	II	III	IV	V	VI	Vio.	Inf.	Def.
1. Plant Operations										
2. Refueling Operations										
3. Maintenance										
4. Surveillance & Inservice Testing					1					
5. Personnel, Training & Plant Procedures					2	1				
6. Fire Protection & Housekeeping										
7. Design Changes & Modifications										
8. Radiation Protection, Radioactive Waste Management & Transportation					1	5				
9. Environmental Protection										
10. Emergency Preparedness										
11. Security & Safeguards					3					
12. Audits, Reviews & Committee Activity						3				
13. Administration, QA Records, Procurement						3	1			
14. Corrective Actions & Reporting						1				
TOTALS					7	13	1			