

U. S. NUCLEAR REGULATORY COMMISSION

REGION V

Report Nos. 50-206/86-05, 50-361/86-06 and 50-362/86-06

Docket Nos. 50-206, 50-361 and 50-362

License Nos. DPR-13, NPF-10 and NPF-15

Licensee: Southern California Edison Company

P. O. Box 800

2244 Walnut Grove Avenue

Rosemead, California 91770

Facility Name: San Onofre Units 1, 2 and 3

Inspection at: San Onofre, San Clemente, California

Inspection conducted: February 10-14, 1986

Inspectors:

P. H. Phelan
P. H. Phelan, Reactor Inspector

2/27/86
Date Signed

W. J. Wagner
W. J. Wagner, Reactor Inspector

2/27/86
Date Signed

Approved By:

T. Young, Jr.
T. Young, Jr., Chief, Engineering Section

2-27-86
Date Signed

Summary:

Inspection on February 10-14, 1986 (Report Nos. 50-206/86-05, 50-361/86-06 and 50-362/86-06)

Areas Inspected: Routine unannounced inspection by regional based inspectors of activities associated with Audits, Records, Fire Protection, and licensee action on inspector identified items. NRC Inspection Procedures 39701B, 40702, 64704, 92701 and 30703 were covered during this inspection. The inspection involved 70 inspector-hours by two NRC inspectors.

Results: No violations or deviations were identified.

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DETAILS

1. Persons Contacted

Southern California Edison Company

- *D. Schone, Site QA Manager
- *K. Slagle, Manager, Material and Administration
- *R. Tye, Supervisor, Fire Protection
- *W. Robinson, QA Engineer
- *C. Kergis, Lead Compliance Engineer
- *G. Gibson, Supervisor, Compliance
- *D. Barreres, Supervisor, Emergency Preparedness
- *R. Richter, Engineer, Emergency Preparedness
- *S. Hunn, Supervisor of CDM Site Operations
- *J. Grosshardt, QA Engineer
- *S. Foglio, Station Engineer
- *F. Briggs, Station Technician
- J. Kahrs, CDM Center Supervisor
- L. Baugher, CDM Coordinator
- R. Retana, Codes QA Engineer
- T. Sturteuant, Senior Captain, Fire Protection Services
- D. Peacor, Manager, Emergency Preparedness
- D. Ensminger, Engineer, Emergency Preparedness
- T. Dack, QA Engineer

*Denotes those individuals attending exit meeting of February 14, 1986.

2. Licensee Action on Previously Identified Items

a. (Closed) Unresolved Item No. 50-361/84-34-01 "Disposition of Weld Indication"

The inspector reviewed the licensee's evaluation and disposition of a weld indication identified in an inconcel transition field weld 10-505-06 (ISI Weld No. 02-14-002). The evaluation, performed in accordance with the rules of Article IWB-3500 of ASME Section XI, determined the discontinuity indication to be acceptable for continued service. The reason given for detection of this indication, which was not previously identified, was that current technique utilized improvement in the "state-of-the-art" ability to detect, characterize and size discontinuities. The licensee plans on monitoring this indication for the next three fuel cycles to determine if any increase in size occurs.

This item is closed.

b. (Closed) Inspection Open Item 50-206/84-16-09 "Fire Protection Design/Document Review"

The inspector reviewed the revisions to the licensee's procedures to process proposed facility change packages and for handling design

change packages for SONGS 1, 2 and 3. The procedural changes appear adequate to assure that a qualified fire protection engineer reviews plant modifications. This change will assure that any modifications which affects a unit's fire protection program are included in the design change reviews and will be properly documented. The inspector reviewed a cross section of Proposed Facility Changes to assure that the revised procedures were being properly implemented.

This item is closed.

c. (Closed) Inspection Open Item 50-206/85-11-02 "Functional Test of Fire Dampers"

NFPA Code 90 recommends that dampers be checked annually by removing the link and ensuring the dampers close against air flow. Previously, the plant procedures and Technical Specifications stated that the functional test of the fire dampers was a visual inspection. Procedures S01-X111-57, February 10, 1986, and S0 23-X111-57; February 13, 1986, 18 Month Fire Rated Assembly Inspection, have both been revised to incorporate removing the fusible link when performing the functional test. During the inspection of the dampers this will be done to at least 10% of the listed dampers in Units 2 and 3, and 100% of the dampers listed in Unit 1.

This item is closed.

d. (Closed) Inspection Open Item 50-361/84-22-01 "Fire Protection Design/Document Review"

Refer to 2.b of this report.

This item is closed.

e. (Closed) Inspection Open Item 50-361/85-11-02 "Functional Test of Fire Dampers"

Refer to 2.c of this report.

This item is closed.

f. (Closed) Inspection Open Item 50-362/84-22-01 "Fire Protection Design/Document Review"

Refer to 2.b of this report.

This item is closed.

g. (Closed) Inspection Open Item 50-362/85-10-02 "Functional Test of Fire Dampers"

Refer to 2.c of this report.

This item is closed.

3. Fire Protection Documents Reviewed

- a. Fire Hazard Analysis
- b. SO 123-XIII-12, Control of Ignition Sources, March 13, 1985
- c. SO 123-XIII-13, Weekly Inspection for the Control of Combustibles and Transient Fire Loads, January 14, 1986
- d. SO 123-XIII-52, Monthly Portable Fire Extinguisher Inspection
- e. SO 123-XIII-54, Monthly Fire Hose Station Inspection, December 30, 1985
- f. SO 123-GAD-3, Site Housekeeping and Cleanliness Control, October 10, 1985
- g. SO 123-XVI-2.0, Storage of Gas Cylinders

4. Fire Department Training

The fire brigade is made up of an independent fire department dedicated to fire fighting, as well as, other site emergencies such as hazardous chemicals and medical aid. Their training is divided up into three phases; classroom instruction, practice sessions and periodic refresher training on shift. Each month, all members receive training in at least twenty different subjects ranging from fire fighting to first aid. The training records were reviewed to verify that all members were present for, and received, monthly training. The inspector witnessed an unannounced fire drill which required a full turn out of the shift members. All members seemed well versed in their responsibilities and duties.

No violations or deviations were identified.

5. Fire Protection Inspections/Surveillances

The inspector observed instances where fire extinguishers were allowed to remain in the plants after being identified as unsatisfactory, in some cases, for periods of up to four months. The inspector was informed that these discrepancies had been previously identified. The root cause of the problem being a lack of administrative controls to hold individuals responsible for replacing the extinguishers. A change was made to incorporate explicit data on the extinguisher exchange sheets including type, size, identification number and by whom it was installed. A comparison of the monthly extinguishers surveillance sheets will show if any extinguisher was mistakenly left in the plants. A cross check of the extinguisher exchange sheet indicates the responsible party. The revisions to the program have been in place since the first of this year. The implementation and program effectiveness will be evaluated during a later inspection.

All other areas of the fire protection inspection and surveillance program appeared adequate.

No violations or deviations were identified.

6. Plant Tour - Fire Protection

The inspector conducted an in-depth tour of all three units with the following results.

a. Combustible Materials

Unit 1 was in the middle of an outage; a large portion of the plant had some type of construction or modification activity. The amount of transient combustibles was high. The weekly fire surveillance identified those combustibles that were unauthorized or posed a hazard. Immediate action was taken in these cases. No unauthorized combustibles were identified in Units 2&3.

b. Hot Work

The inspector observed numerous areas in Unit 1 where "hot work" was in progress. In each case a valid hot work permit was authorized and posted. A fire watch was posted, all nearby communications and suppression systems were in place and functional.

c. Housekeeping

Combustible waste material and rubbish were removed from the work areas as rapidly as practicable. Appropriate trash containers were provided for oily rags and other combustible material. The housekeeping in Units 2&3 were adequate.

d. Fire Protection Systems

Fire hoses, extinguishers, suppression devices and other equipment inside the units were examined. The extinguishers were properly sealed and labeled, hose stations were in good order, and all other equipment appeared to be well maintained.

No violations or deviations were identified.

7. Audit Program

The inspector reviewed the licensee's corporate quality assurance program relating to audits of Units 1, 2 and 3 activities to assure that the audit program was in conformance with regulatory requirements, commitments in the application, and industry standards. The Topical Quality Assurance Manual (TQAM) sets forth the policies and general requirements for establishing and implementing the licensee's quality assurance program. The scope of the audit program is defined in TQAM chapter 1E "Audits"; the audit program defined in this document is consistent with Section 6 of the Technical Specifications and Section 17 of the FSAR. Other quality assurance procedures applicable to the audits program are contained in the Quality Assurance Organization Reference Procedures Manual (QAP). The following QAP procedures were reviewed by the inspector:

<u>Procedure Number</u>	<u>Title</u>	<u>Revision Number</u>	<u>Effective Date</u>
N18.04	Quality Assurance Organization Audits - Scheduling, Planning, Performance, Documentation and Follow-up	28	02-03-86
N18.05	Qualification of Quality Assurance Organization Auditors	8	01-21-85
N18.07	Participation of Technical Personnel from other Departments on Audit Teams	3	05-06-85
N18.11	Independent Audits	2	06-19-85
N18.13	Technical Specification Audits by the Quality Assurance Organization	5	02-03-86

By review of the above quality assurance program procedures the inspector verified that responsibilities were assigned in writing for the overall management of the audit program including:

- a. Determining the adequacy of the qualifications of audit personnel.
- b. Determining the need for special training of audit personnel and/or inclusion of special expertise.
- c. Determining the independence of audit personnel.
- d. Ensuring corrective actions taken for deficiencies identified during audits.
- e. Determining when reaudits are required.
- f. Issuance of audit reports to management.
- g. Periodic review of the audit program to determine its status and adequacy.
- h. Preparation of long-range audit plans.

The audit program also requires the audited organization to respond to audit findings within 30 days.

Distribution requirements for audit reports and corrective action responses have been defined in the QAP's. Checklists are used in the performance of all audits, however the checklist for Technical Specifications includes provisions for verification that Technical Specification changes have been translated into appropriate procedures.

No violations or deviations were identified.

8. Records Program

The inspector reviewed the licensee's quality assurance program relating to the control of records to assure that a records program has been established and implemented in conformance with regulatory requirements, commitments in the FSAR, and industry standards. This involved a review of the types of records required to be maintained, record storage controls, records retention and verification that responsibilities for these areas have been assigned. TQAM Chapter 1-D "Document Management" contains the corporate policy and requirements for the records program including the responsibilities for these activities.

a. Records to be Maintained

The requirements and provisions to maintain the types of records identified in Section 6.10 of the Technical Specifications, Section 17.2.17 of the FSAR, and ANSI N45.2.9 are contained in Department Procedure CDM 26-8-14 "Receipt, Control and Retrieval of Records at SONGS 1, 2 & 3", Revision 9 of August 18, 1985.

b. Records Storage

Record storage controls are provided in Department Procedure CDM 26-8-1 "Storage of Original Records/Documents at CDM SONGS", Revision 7 of December 21, 1984. The inspector reviewed this storage procedure to assure that provisions were established which, as a minimum, accomplished the following:

- (1) Describes the records storage facility.
- (2) Designates a supervisor in charge of the storage facility.
- (3) Describes the filing system used.
- (4) A method for verifying that the records received are in agreement with the transmittal document and that the records are legible.
- (5) Rules for governing access to files and maintaining accountability of records removed from the storage facility.

Provisions for correcting or filing supplemental information and disposing of superceded records is contained in procedure CDM 26-8-45 "Corrections/Additions to Records in CDM Files", Revision 5 of December 3, 1985. The required review and approval for these activities is also specified. The CDM supervisor has been assigned the responsibility for assuring that the record storage controls be properly implemented.

c. Record Retention

The inspector interviewed the CDM Supervisor regarding retention period controls. Provisions have been established and responsibilities assigned to assure that record retention

requirements identified in Section 6.10 of the Technical Specifications are being met. This includes retention periods of records not covered by the FSAR or Technical Specifications.

d. Implementation

The inspector selected records for Unit 1, 2 and 3 from the same category in order to assure that records maintenance for all units is in accordance with the administrative controls identified in 8.a. The following type of records were selected: inservice inspection (ISI), startup test records, QA audit reports, personnel training, control operators log books, receiving inspection, maintenance activities, and reportable occurrences (LER's). These records were selected to assure that the records were listed on an index; that the index, which is a computerized data base with on-line search capability called STAIRS (Storage and Information Retrieval System), identifies record retention times, storage locations and location with storage area; records are readily retrievable and properly stored. The Unit 1 ISI records were not available to the inspector during this inspection. There appeared to be some confusion concerning whether or not the ISI records were submitted to CDM, and if so, whether the originating organization can provide the necessary information to CDM to retrieve the records. The location and maintenance of ISI records for Unit 1 will be reviewed during a later inspection (Unresolved Item No. 50-206/86-05-01).

The inspector conducted a tour of the records storage area and found the environmental conditions, such as temperature and humidity, and the fire prevention suppression systems to be as described in the Technical Specifications and ANSI N45.2.9.

No violations or deviations were identified.

9. Exit Meeting

The inspectors met with licensee management representatives denoted in paragraph 1 on February 14, 1986. The scope of the inspection and the inspector's findings as noted in this report were discussed.