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SUBJECT: Forwards revised amend 24 to DUKE-1-A, "Duke Energy Corp TR
QA Program," previously submitted per 10CFR50.54(a)(3) by
licensee 980825 ltr. Response to NRC 981026 RAI, encl.

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November 19, 1998

U. S. Nuclear Regulatory Commission
Washington, D. C. 20555-0001
ATTENTION: Document Control Desk

SUBJECT: Duke Energy Corporation

Oconee Nuclear Station Units 1, 2, & 3
Docket Nos. 50-269, 50-270, 50-287

McGuire Nuclear Station Units 1 & 2
Docket Nos. 50-369, 50-370

Catawba Nuclear Station Units 1 & 2
Docket Nos. 50-413, 50-414

Nuclear Quality Assurance Program
Amendment 24, Response to NRC Request for Additional
Information

By letter dated October 26, 1998, the NRC responded to proposed Amendment 24 to Topical Report Duke-1, *Quality Assurance Program* (hereafter referred to as Topical Report or Amendment 24). Amendment 24 had been previously submitted pursuant to 10CFR50.54(a)(3) by a Duke Energy Corporation letter to the NRC dated August 25, 1998.

The October 26, 1998 NRC letter discussed Duke's proposal to eliminate the requirement to review station procedures at a specified frequency. The NRC found that the August 25, 1998 Duke submittal did not contain enough information to permit an evaluation of the procedure review controls based upon guidance contained in a NRC memorandum, C. E. Rossi to M. W. Hodges, et al., dated December 21, 1992. Duke Energy Corporation has reviewed the guidance contained in the referenced NRC memorandum and revised Amendment 24 to address this guidance. Each item of the NRC's Plant Procedure Review Guidance, and the corresponding Duke response, are discussed in Attachment 1 to this letter. The resolution of these NRC items requires revision to the originally submitted version of Amendment 24. The proposed changes to Amendment 24 are shown in marked form

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in Attachment 2. The reprinted version of Amendment 24 is provided as Attachment 3 with the changes shown by the use of indicator bars on the left margin.

As noted in Items 2 and 4 of Attachment 1, Duke will maintain the applicable NRC-approved exceptions to Regulatory Guide 1.33, Revision 2 that are currently contained in Topical Report Amendment 23.

As discussed in its August 25, 1998 submittal, Duke is requesting that the NRC complete the review and approval process for Amendment 24 such that it can be implemented by December 31, 1998. The additional administrative controls discussed in Item 4 of Attachment 1 will also be implemented on a schedule that supports implementation of the applicable provisions of Amendment 24.

Comments or questions regarding this matter should be addressed to J. S. Warren at (704) 382-4986.

Very truly yours,



M. S. Tuckman

MST/JSW

Attachments

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Attachment 1

Topical Report Duke-1, Quality Assurance Program, Amendment 24
Response to Plant Procedure Review Guidance Contained in NRC
Memorandum Dated December 21, 1992 and Referenced in NRC Letter
to Duke Energy Corporation Dated October 26, 1998

NRC Guidance, Item 1

Programmatic Controls should specify that all applicable plant procedures will be reviewed following an unusual incident, such as an accident, an unexpected transient, significant operator error, or equipment malfunction and following any modification to a system, as specified by Section 5.2 of ANSI N18.7/ANS 3.2 which is endorsed by RG 1.33.

Duke Response to Item 1

Table 17-1 (Page 17-6) and Section 17.3.2.14 (Page 17-42) of Topical Report Amendment 24 have been revised to be consistent with the requirements contained in NRC Guidance, Item 1. All the examples of unusual incidents and modifications (as well as other factors) are now listed in Section 17.3.2.14 (Page 17-42) as being initiating mechanisms for procedures review.

NRC Guidance, Item 2

Non-routine procedures (procedures such as emergency operating procedures, off-normal procedures, procedures which implement the emergency plan, and other procedures whose usage may be dictated by an event) should be reviewed at least every two years and revised as appropriate.

Duke Response to Item 2

The current NRC-approved Amendment 23 requirement for the non-routine procedures review frequency is being maintained at six years. This is consistent with Duke's current NRC-approved exception to Regulatory Guide 1.33, Revision 2. At Duke, non-routine procedures are: Abnormal Procedures, Emergency Procedures, and Emergency Response Procedures. The change to Amendment 24 necessary to address this item is contained in the revised Topical Report Table 17-1 (Page 17-6) and Section 17.3.2.14 (Page 17-42). In regard to non-routine procedures, this means there is no change being proposed to Duke's current NRC-approved Quality Assurance Program.

Attachment 1

NRC Guidance, Item 3

At least every two years, the Quality Assurance (or other "independent") organization should audit a representative sample of routine plant procedures that are used more frequently than every two years. The audit is to ensure the acceptability of the procedures and verify that the procedure review and revision program is being implemented effectively. The root cause of significant deficiencies is to be determined and corrected.

Duke Response to Item 3

Section 17.3.3.2.3 (Page 17-50) of the Topical Report addresses Duke's internal audit program. These audits are performed under the direction of the Manager, Regulatory Audits/Operational Assessment and evaluate the effective implementation of all the criteria of 10CFR50, Appendix B (which includes instructions, procedures, and drawings). Under the present Duke program (see Page 17-51), internal audits are performed on a frequency of at least every two years and procedures are included in the content of the audits. A representative sample of procedures is chosen and addressed in the audit plans. Procedures from each functional area of responsibility (maintenance, operations, chemistry, radiation protection, etc.) are included. In order to be consistent with NRC Guidance Item 3, Section 17.3.3.2.3 of Topical Report Amendment 24 has been revised as shown in Attachments 2 and 3 (see new Item n on Page 17-51). Also, audits has been added to Section 17.3.2.14 (Page 17-42) as an additional initiating mechanism for procedures review.

Section 17.3.2.13 (Page 17-38) of the Topical Report addresses Duke's corrective action program. This section requires the determination of cause for significant conditions adverse to quality. Also, Duke's internal audit program, as discussed above, includes a determination of the effective implementation of the corrective action program (see Item c on Page 17-50). Duke Energy Corporation has reviewed its corrective action program as currently discussed in the Topical Report. It has been determined that the Topical Report adequately addresses NRC Guidance Item 3 in regard to the corrective action program, thus no changes are being proposed to Amendment 24.

Attachment 1

NRC Guidance, Item 4

Routine plant procedures that have not been used for two years should be reviewed before use to determine if changes are necessary or desirable.

Duke Response to Item 4

Topical Report Table 17-1 (Page 17-6) and Section 17.3.2.14 (Page 17-42) have been revised to require that routine procedures be reviewed prior to reuse if such procedures have not been used for six years. In order to implement this new requirement, Duke will develop the necessary administrative controls for procedures on a schedule that supports the implementation of the applicable provisions of Amendment 24. In terms of review frequency, the six year time frame is consistent with the current NRC-approved contents of Amendment 23, which is based upon Duke's current NRC-approved exception to Regulatory Guide 1.33, Revision 2.

Attachment 2
Duke Energy Corporation
Quality Assurance Program
Topical Report Duke-1
Revised Amendment 24
Marked Version

Table 17-1 (Page 1 of 7). Conformance of Duke's Program to Quality Assurance Standards, Requirements and Guides

Standard, Requirement or Guide	Conformance Status	Remarks
Regulatory Guide 1.8 Rev (1-R) - Personnel Selection and Training	Alternative	RG 1.8 Rev (1-R) incorporates ANSI N18.1. Duke's program conforms to ANSI N18.1-1971 except Radiation Protection Manager qualifications are contained in the Technical Specifications.
Regulatory Guide 1.26 Rev (3) - Quality Group Classifications & Standards for Water, Steam, and Radioactive-Waste Containing Components of Nuclear Power Plants	Alternative	Duke's Program conforms to this Regulatory Guide except for additional details and directions noted in Station FSAR's.
Regulatory Guide 1.28 Rev (2) - Quality Assurance Program Requirements (Design and Construction)	Conforms	-----
Regulatory Guide 1.29 Rev (3) - Seismic Design Classification	Alternative	Duke's Program conforms to this Regulatory Guide except for additional details and directions noted in Station FSAR's.
Regulatory Guide 1.30 Rev (0) - Quality Assurance Requirements for the Installation, Inspection and Testing of Instrumentation and Electric Equipment	Conforms	RG 1.30 Rev (0) incorporates ANSI N45.2.4-1972 for both construction and operation
Regulatory Guide 1.33 Rev (2) - Quality Assurance Program Requirements (Operations)	Alternative	RG 1.33 Rev (2) incorporates ANSI N18.7-1976/ANS-3.2. Duke's program conforms to ANSI N18.7-1976 except the frequency of audits of selected aspects of operational phase activities is defined in Section 17.3.3, "Self Assessment" and the frequency for procedure review, as described in Section 17.3.2.14, "Document Control," is based on ANSI N18.7 /ANS-3.2 (1994) with appropriate reviews performed when the need is identified by normal use, unusual station events, or established quality programs. <i>Review frequencies for Abnormal Procedures, Emergency Procedures, and Emergency Response Procedures shall not exceed six years. Procedures that have not been use for six years shall be reviewed prior to reuse.</i>

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qualified personnel of the performance of specific procedural steps. Examples of documents established concerning quality related operational activities are:

- a) Preoperational Test Procedures
- b) Periodic Test Procedures
- c) Operating Procedures
- d) Emergency Procedures
- e) Maintenance Procedures
- f) Instrument Procedures
- g) Radiation Protection Procedures
- h) Alarm Responses
- i) Chemistry Procedures
- j) Process Control Program Implementing Procedures
- k) Plant Operations Review Committee Implementing Procedures

The frequency of review for Abnormal Procedures, Emergency Procedures, and Emergency Response Procedures shall not exceed six years. Procedures that have not been used for six years shall be reviewed before reuse to determine if changes are necessary or desirable.

- l) Abnormal Procedures
- m) Emergency Response Procedures

Procedures are reviewed for adequacy based upon: lessons learned from normal use, audits, station events, station modifications, the operating experience program, root cause analysis, equipment malfunction, or the corrective action program. Review of procedures can be accomplished in several ways, including (but not necessarily limited to) documented step-by-step use of the procedure (such as occurs when the procedure has a step-by-step checkoff associated with it), or detailed scrutiny of the procedure as part of a documented training program, drill, simulator exercise, or other such activity. A revision of a procedure can constitute a procedure review. Unusual incidents (such as an accident, unexpected transient, significant operator error, or equipment malfunction). A knowledgeable individual/organization shall review changes to the Process Control Program, Offsite Dose Calculation Manual, radiological effluent controls of the UFSAR, and radwaste treatment systems. A knowledgeable individual/organization shall review the Fire Protection Program and implementing procedures. Changes to the Offsite Dose Calculation Manual shall be reviewed for acceptability by either the Radiation Protection Manager or the Station Manager.

In addition to the above, files of drawings and supplier documents applicable to the station's structures, systems and components are maintained at each nuclear station and are utilized, as appropriate, in the performance of quality related activities.

Station procedures which address activities associated with QA Condition 1 structures, systems and components are subjected to a well-defined and established preparation, review, and approval process. This process includes the requirement that procedures be prepared by a knowledgeable individual/organization. This process also includes the requirement that each procedure be reviewed for adequacy by an individual/organization other than the individual/organization which prepared the procedure. As appropriate, such procedures are also reviewed by personnel from the Nuclear General Office, by other departments within the Corporation, by the Nuclear Safety Review Board, or by vendor personnel. Individuals responsible for procedure reviews and reviews of changes to the radiological effluent controls of the UFSAR performed in accordance with Section 17.3.2.14, shall be members of the supervisory staff assigned to the site, and previously designated by the Site Vice President to perform such reviews. Review of environmental radiological analysis procedures shall be performed by the General Manager, Environmental Services

17.3.3.2.3 Internal Audits

Duke's Quality Assurance Program requires a comprehensive system of planned and periodic internal audits for all phases of station operations and supporting activities.

/ Operational Assessment
All organizational units conducting quality assurance activities are evaluated with a system of audits. These audits are performed to determine the effective implementation of all applicable criteria of 10CFR 50, Appendix B. Periodic audits of activities or records of processes (e.g., welding, maintenance, development of design, record management, or system testing), to verify compliance and effectiveness of the implementation of the Quality Assurance Program are performed. Internal audits are initiated under the direction of the Manager, Regulatory Audits. The Manager, Nuclear Assessment and Issues Division may initiate special audits or expand upon the scope of an existing audit. The scope of each audit is determined by the responsible Lead Auditor, under the direction of the Manager, Regulatory Audits Group. Additionally, the scope of audits performed under the cognizance of the Nuclear Safety Review Board (NSRB) is reviewed by the NSRB staff. The lead auditor directs the audit team in developing checklists, instructions, plans and in the performance of the audit. The audit shall be conducted in accordance with checklists; the scope may be expanded upon by the audit team during the audit, if needed. One or more persons comprise an audit team, one of whom shall be qualified lead auditor.

Audits of site activities shall be performed under the cognizance of the NSRB. These audits shall encompass:

- a) The conformance of each nuclear unit's operation to provisions contained within the Technical Specifications and applicable Facility Operating License conditions;
- b) The performance, training, and qualifications of the entire station staff;
- c) The results of actions taken to correct deficiencies occurring in unit equipment, structures, systems, or method of operation that affect nuclear safety;
- d) The performance of activities required by the Operational Quality Assurance Program to meet the criteria of 10CFR50, Appendix B;
- e) The Emergency Plan and implementing procedures;
- f) The Security Plan and implementing procedures;
- g) The Facility Fire Protection programmatic controls including the implementing procedures;
- h) The fire protection equipment and program implementation utilizing either a qualified offsite license fire protection engineer or an outside independent fire protection consultant. An outside independent fire protection consultant shall be used at least every third year;
- i) The Radiological Environmental Monitoring Program and the results thereof;
- j) The Offsite Dose Calculation Manual and implementing procedures;
- k) The Process Control Program and implementing procedures for Solidification of radioactive wastes;
- l) The performance of effluent and environmental monitoring activities;
- m) Any other area of site operation considered appropriate by the NSRB or the Executive Vice President, Nuclear Generation;
- n) *The acceptability of a representative sample of station procedures, including the effectiveness of the procedure review and revision program.*