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DUKE POWER COMPANY

CHARLOTTE, N. C. 28242

A. C. THIES
SENIOR VICE PRESIDENT
PRODUCTION AND TRANSMISSION

May 22, M19817 AS: 40

(704) 373-4249

Mr. James P. O'Reilly, Director U. S. Nuclear Regulatory Commission Region II 101 Marietta Street, Suite 3100 Atlanta, Georgia 30303

Re: Oconee Nuclear Station IE Inspection Report 50-269/81-06 50-270/81-06 50-287/81-06

Dear Sir:

With regard to R. C. Lewis' letter of April 28, 1981 which transmitted the subject inspection report, Duke Power Company does not consider the information contained therein to be proprietary.

Please find attached responses to the cited items of noncompliance.

I declare under penalty of perjury that the statements set forth herein are true and correct to the best of my knowledge, executed on May 22, 1981.

Very truly yours,

A. C. Thies

FTP/djs Attachment



OCONEE NUCLEAR STATION

Response to IE Inspection Report 50-269/81-06, -270/81-06, -287/81-06

Violation

A. 10 CFR 50, Appendix B, Criterion II requires that the status and adequacy of the QA program shall be regularly reviewed. The accepted QA program endorses ANSI 18.7-1976 as stated in Table 17.0-1. ANSI 18.7-1976, Section 5.2.15, Review, Approval and Control of Procedures, requires plant procedures shall be reviewed by an individual knowledgeable in the area affected by the procedure no less frequently than every two years.

Contrary to the above, plant procedures are not reviewed every two years in that Administrative Policy Manual (APM) procedure 2.1, Document Control, and Station Directive 3.2.1, Performance of Periodic Testing Sampling, have not been reviewed since May 21, 1976 and April 2, 1976, respectively. These two procedures are representative of six APM procedures reviewed and six station directives, reviewed none of which had not been reviewed within the previous two years.

This is a Severity Level V Violation (Supplement I.E).

Response

1) Admission or denial of the alleged violation:

Duke agrees that a violation occurred with respect to the station directives. However, Duke disagrees that a violation occurred with respect to the APM procedures.

- 2) Reasons for the violation or denial of the violation:
 - a) An administrative/procedural deficiency resulted in the station directives not being identified as "procedures" requiring periodic review pursuant to ANSI 18.7-1976.
 - b) The Administrative Policy Manual is not in the true sense a procedure document. It does not list specific actions which must be taken to complete a task; rather, it defines and interprets guidelines based on regulation, company policy, and judgement. The APM therefore is not a procedure as defined in ANSI N18.7-1976. The Duke Power Company Quality Assurance Topical Report (Accepted QA Program) refers to the APM as a procedure, but in a broader sense. Section 17.2.5 of the Topical Report states that "personnel are required to implement this manual as it pertains to the performance of their activities." This selective applicability is not indicative of a procedure, but rather denotes a policy objective.

In addition to the preceding discussion of procedure versus policy, it should be noted that the APM as a whole is under essentially constant review. While Duke does not adhere to a rigid schedule, revisions to the APM are issued as necessary, based on changes or additions to regulations, operating or other experience, and/or improved judgement or interpretations.

3) Corrective actions taken and results:

It is considered that the station directives were being reviewed and revised as necessary; however, this review was informal and was not documented.

4) Corrective actions to be taken to avoid further violations:

The established program for periodic review of station procedures will be revised to include station directives in the review process.

5) Date when full compliance will be achieved:

All station directives which have not been reviewed within the previous two years will be reviewed by January 1, 1982.

OCONEE NUCLEAR STATION

Response to IE Inspection Report 50-269/81-06, -270/81-06, -287/81-06

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Violation

B. 10 CFR 50.59 requires that a summary of the safety evaluation of each change to the facility made pursuant to this section be submitted to the NRC at least annually.

Contrary to the above, facility change safety evaluation summaries were not at least annually submitted to the NRC, in that the 1979 list of Oconee facility changes, which was submitted to the NRC on October 27, 1980, did not contain a summary of the safety evaluations for the listed modifications.

Response

1) Admission or denial of the alleged violation:

Duke agrees that the alleged violation occurred.

2) Reasons for the violation:

Personnel misunderstanding of the literal requirements of the code along with the presumption that the evaluation contained with the actual modification was sufficient.

3) Corrective actions taken and results:

All future reports required by 10CFR50.59 will contain a summary safety evaluation of each modification.

4) Corrective actions to be taken to avoid further violations:

No other action deemed necessary.

5) Date when full compliance will be achieved:

December 31, 1981 or when the 1980 report is submitted, whichever is earlier.

OCONEE NUCLEAR STATION

Response to IE Inspection Report 50-269/81-06, -270/81-06, -287/81-06

Violation

C. 10 CFR 50, Appendix B, Criterion XVI and Section 17.2.16 of the Accepted Quality Assurance Program requires that measures shall be established to assure that conditions adverse to quality are promptly identified and corrected.

Contrary to the above, conditions adverse to quality were not promptly identified and corrected in that inadequate fire protection storage of quality records located in the site file room was identified in Quality Assurance Departmental Audit 0-78-4, Item 7, dated June 14, 1978 and Audit 0-79-2, Item 2A, dated March 13, 1979; and corrective action for this problem area had not been conducted as of March 27, 1981. This matter had been addressed as an unresolved item in NRC Inspection Report 50-269, 270, -287/79-10.

This is a Severity Level V Violation (Supplement I.E.).

Response

1) Admission or denial of the alleged violation:

Duke Power Company concurs with the violation as stated above.

2) Reasons for the violation:

Although Duke agrees that this problem has not been resolved in a timely manner, it should be emphasized that Duke has been actively working toward a satisfactory resolution. Actions have been taken to make better use of the existing record storage facilities through volume reduction of the records. Additionally, new high density storage files are to be installed at Oconee by the end of August as an interim measure.

Duke is reviewing the possibility of storing some files at the Cherokee Nuclear Station as a long term solution. An alternative to this proposal which is also under review is the construction of a new storage vault facility at Oconee. This latter alternative has been under consideration for some time, but was delayed for financial reasons. This was due to the significant cost of this construction, and Duke's decision to direct its limited financial and manpower resources to projects which are required to insure the operational safety of the plant.

3) Corrective actions taken and results:

This violation concerns an isolated case which has involved review by Duke personnel up through upper management to determine a satisfactory resolution. Company review of possible solutions is still being performed. IE Inspection Report 50-269/81-06, -270/81-06, -287/81-06 Violation Item C

It is expected that a decision concerning the final resolution of this matter will be reached by July 1, 1981.

4) Corrective actions to be taken to avoid further violations:

This matter is an isolated case, and therefore this section is not applicable.

5) Date when full compliance will be achieved:

As stated in Section 3 above, a decision on the final resolution is expected by July 1, 1981. Full documentation of this decision will be made at that time and will be available for NRC inspection at Oconee.

OCONEE NUCLEAR STATION

Response to IE Inspection Report 50-269/81-06, -270/81-06, -287/81-06

Violation

D. 10 CFR 50, Appendix B, Criterion XVII requires sufficient records shall be maintained to furnish evidence of activities affecting quality. The records shall include the results of reviews. The accepted QA Program, Section 17.2.17 requires each nuclear station to maintain adequate identifiable and retrievable quality assurance records.

Contrary to the above, records of the results of reviews were not maintained in that QA personnel perform reviews of QA Program procedures to ensure these procedures reflect current methods of conducting work practices but no records of the results of these reviews were maintained. This was determined by direct questioning of QA personnel.

This is a Severity Level VI Violation (Supplement I.F).

Response

1) Admission or denial of the alleged violation:

Duke agrees with the violation as stated.

2) Reasons for the violation:

The reason for the violation is that the responsibility for documenting this review was not clearly established in procedures.

3) Corrective actions taken and results:

Duke has begun a review of procedures in order to document the results of the current review. This review will be completed by June 1, 1981.

- 4) Corrective actions to be taken to avoid further violations:
 - a. After results of the current review are obtained, the necessary procedure changes will be implemented.
 - b. The appropriate Quality Assurance procedures will be revised to establish the responsibilities for this review.
- 5) Date when full compliance will be achieved:

Full compliance will be achieved by July 1, 1981.

OCONEE NUCLEAR STATION

Response to IE Inspection Report 50-269/81-06, -270/81-06, -287/81-06

Violation

E. 10 CFR 50, Appendix B, Criterion V requires activities affecting quality shall be prescribed by documented instructions, procedures or drawings and shall be accomplished in accordance with these instructions, procedures or drawings. The accepted QA Program, Section 17.2.5 implements this requirement. In addition, Technical Specification 6.4.1 requires that the station be operated and maintained in accordance with approved procedures. The Administrative Procedures Manual (APM), Section 2.5, Qualifications and Training of Personnel, paragraph 2.5.5.1 requires that periodic evaluations be conducted to assure that effectual training techniques are utilized.

Contrary to the above, activities affecting quality were not accomplished in accordance with procedures in that periodic evaluations to assure effectual training techniques have not been accomplished.

This is a Severity Level VI Violation (Supplement I.F).

Response

The response to this item is still under preparation and review. It will be provided to Region II by June 5, 1981.