

Docket No. 50-220

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MEMORANDUM FOR: William F. Kane, Chairman
Nine Mile Point Restart Panel
Region I

FROM: Robert A. Capra, Director
Project Directorate I-1
Division of Reactor Projects I/II

SUBJECT: COMMENTS AND QUESTIONS ON THE NINE MILE POINT UNIT 1 RESTART
ACTION PLAN

The Nine Mile Point Project Managers, Ms. Haughey and Mr. Benedict, and I have reviewed the Nine Mile Point Unit 1 Restart Action Plan. Enclosed are our comments/questions on the plan for review by the panel before transmittal to the licensee, as well as some remarks on the plan for the panel alone. The enclosure has already been provided to Ms. Maitri Banerjee to incorporate into a complete package of NRC comments.

Robert A. Capra, Director
Project Directorate I-1
Division of Reactor Projects I/II

Enclosure:
Comments and Questions

M. Haughey

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COMMENTS AND QUESTIONS ON THE NMP-1 RESTART ACTION PLAN

1. The Restart Action Plan (RAP) does not address the last sentence of item 2 in CAL 88-17. "For actions proposed for completion after restart, you will provide justification for why completion after restart will not have an adverse impact on safe plant operation." How does Niagara Mohawk plan to address this issue?
2. Page 2:
What document assigns accountability for corrective actions and verification actions?
3. Page 2:
Timeliness of problem identification/resolution is not addressed in the systematic approach (items 1 through 5) (Also on Page I-1).
4. Page 4:
What are the "established criteria to determine if the resolution of an issue is required before restart?"
5. Page 4:
The last paragraph on the page discusses the identification of issues. If NMPC does not plan on amending the RAP, how are the new issues requiring resolution prior to restart brought to the attention of the NRC and tracked by Niagara Mohawk?
6. Page 4:
The plan discusses the need for a "cultural change," but implies this effort will be addressed only in the Nuclear Improvement Program. What efforts to initiate a "cultural change" will be pursued/completed before restart? What is the justification for those efforts that will not be completed until after restart?
7. Page 5 and I-5:
What process does Niagara Mohawk intend on using to "Notify" the NRC that specific corrective actions and their verification have been completed?
8. Page ii, Introduction and Appendix C:
What process will be used to identify, track, and resolve issues that do not qualify as "regulatory concerns," but have the potential of affecting plant operations (for example (but not limited to), deficiencies in non-safety related systems that are not "regulatory concerns" but may affect operation of the system and non-hardware concerns that may affect personnel attitudes)?



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9. Page I-1:

The Restart Action Plan discusses the self-assessment process used to respond to the I&C Technician allegation. In a letter dated 1/29/88 Niagara Mohawk committed to include Unit 1 in the continuing self-appraisal process being used on Unit 2. However, that self-assessment process and the reason why it was ineffective at identifying and resolving problem was not discussed in the Restart Action Plan. Please discuss the reasons why that process was also ineffective and how those flaws were evaluated and avoided when developing the Restart Action Plan.

10. Page I-2:

The plan indicates that the associated effort of the process of developing the plan will "assure timely and effective implementation." With the exception of the items identified as being required to be completed before restart, how will timely resolution be assured? What system will be used to regularly review progress of the remaining open items?

11. Page I-2:

Why weren't NRC inspection reports and Niagara Mohawk inspection reports and similar documents included in the review for root causes?

12. Page I-3:

What is the "Restart Task Force matrix" used in determining the underlying root causes?

13. Page I-3, eighth line up from the bottom of the page:

Discuss the selection criteria used to identify how managers were selected to perform the evaluation. Will the "buy-in" process create a conflict with responsible managers identifying corrective actions?

14. Page I-5:

What is the schedule and scope of the INPO assist team assessment? How will their comments be addressed, especially (but not exclusively) for those issues which should be corrected before restart? Will the results be made public by Niagara Mohawk? Will the results of this assessment be sent to the NRC or will the results only be available on site?

15. Page I-5, bottom lines:

To what degree and in what manner will the Nuclear Oversight Committee of the Board participate in the "review of restart readiness?" What expertise will this Committee bring to its review?



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16. Pages I-5 and I-6:

How does the Outage Manager identify and track other issues needed for restart? How are items assessed for restart (e.g., Operating Experience Assessment & NRC Open Items List)? Why does Table 1 only list "examples of specific types of items that will be tracked by the Outage Manager?" What are some of the other items being tracked that are not listed under the examples?

17. Page I-5:

Only a very preliminary outline of the Self-Assessment Phase (i.e., Readiness for Restart) is presented in the Restart Action Plan (RAP). When and how does NMPC plan on providing more details on this very critical portion of the restart plan?

18. Page I-6:

What is the difference between the last two items?

19. Page II-1:

Eleven verification actions are listed, but only numbers 1, 2, 3, 5, 6 and 7 are referred to in the following Tables. Where are the other verification actions applied?

20. Page II-2:

The Underlying Root Cause mentions changing needs of the Nuclear Division and changes within the nuclear industry. How were these "changes" determined and defined by Niagara Mohawk? What are the changes? How has Niagara Mohawk not kept up with them?

21. Page II-2:

Some of the root causes identified do not appear to be truly root causes. For example, Underlying Root Cause 1 is a symptom or result of a problem, not a root cause. Please reevaluate the identified root causes to determine if a more basic root cause can be identified and identify corrective actions for those as applicable.

22. Page II-2, Underlying Root Cause (URC) 1:

In part, Corrective Action Objective 1.1 is to develop and communicate senior management's vision, direction, and performance expectations. None of the three Restart Corrective Actions discusses communicating these policies. When and how is this to be accomplished?



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23. Page II-2, URC-1:

Corrective Action Objective 1.1 discusses management's vision, direction and performance expectations. The three Corrective Actions discuss: Nuclear Division vision & goals; Corporate objectives; and senior management expectations. The Long-Term Strategies discuss goals, objectives and operating principles? How are all of these items related to each other?

24. Page II-3, URC-1:

1.2.1 - What is the scope of the Nuclear Commitment Tracking System (NCTS)?

1.2.3 - Why does this item only cover Technical Specification (TS) test requirements?

1.2.5 - Why do these lists identify specific "types" of equipment instead of "the specific" equipment?

1.2.6 - What does an improved program mean? What are the lessons learned from the program at Unit 2, since the program at Unit 2 for controlling surveillance tests has not worked very effectively?

25. Page II-3, Item 1.2.5:

How will it be assured that all preventive maintenance, surveillance testing, or other operational requirements on the controlled lists have been completed before restart?

26. Page II-5, Underlying Root Cause-2: Restart Corrective Actions:

Items 2.1.1 through 2.1.6 identify areas that will be reviewed for outstanding issues or trends that may affect restart. How will these issues be integrated, screened and tracked?

27. Page II-5 Underlying Root Cause 2:

How is the identification and the reporting of problems discussed in item 2.1.1 to be accomplished in an "integrated and consistent process?" How will the "processing, evaluation, and implementation" of the problem reports discussed in item 2.1.2 be accomplished? How will issues identified by the corrective actions identified for Underlying Root Cause 2 be incorporated into the restart plan? Identify the "other reporting and corrective action systems" reviewed as discussed in item 2.1.9.



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28. Page II-6, URC-2: Restart Corrective Actions:

Item 2.1.7 states, "Review lessons learned from NMP-2 that may identify issues applicable to NMP-1 that may relate to restart." Please clarify what specifically will be reviewed.

29. Page II-10, Underlying Root Cause 5:

This is another example of a root cause not taken to the root level. In addition, discuss how the short term corrective actions will promote team building in other than management or the restart team?

30. Page II-11:

The vital area issue should be included in the Specific Issues list.

31. Page II-14, Specific Issue (SI)-1, Table 1:

Corrective Action 1.A.2 discusses the development and implementation of temporary procedures 88-6, 88-7, and 88-8? Please describe what these procedures cover.

32. Page II-17 Specific Issue 2, Maintenance of Operator Licenses:

What is the basis for allowing upgrades to the operator requalification program to go beyond restart?

33. Page II-18:

How will operator feedback on program content be incorporated in the operator training program? How will training program ownership by the operators, as well as management, be encouraged?

34. Page II-19, SI-2, Table 2:

Root Cause 2.B states, in part, that the quality of training in some instances was not adequate due to inadequate management oversight. Corrective Action 2.B.1 directs the superintendent of training to provide management oversight to assure quality of training. Is the superintendent of training the only individual assigned the responsibility of providing oversight on the quality of training?

35. Page II-19, SI-2, Table 2:

Corrective Action 2.B.4 states that training procedures will be revised to systematically identify, prioritize and track changes to the simulator. Is there a similar action identified somewhere in the restart plan to ensure plant procedures are identified, tracked and revised to ensure plant modifications are appropriately incorporated in procedures?



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36. Page II-21, Specific Issue 3, Emergency Operating Procedures (EOPs):

Why are upgrades to the EOPs not needed before restart? What is the schedule for completion of training?

37. Page II-25, Specific Issue 3, EOPs:

How will corrective actions identified by the human performance evaluation be implemented? What is the schedule for implementation?

38. Page II-28, Specific Issue 4, Table 4:

Corrective Actions 4.A.1 and 4.A.4 discuss procedure revisions and personnel retraining. Explain why the verification actions include verifying that the procedures are revised, but do not include verifying retraining is completed.

39. Page II-28, Specific Issue 4, Table 4:

Corrective Action 4.A.6 discusses the performance of a maintenance walkdown of large bore safety-related piping systems not included in the ISI Program. What is the specific purpose of these walkdowns?

40. Page II-28, Specific Issue 4, Inservice Inspection (ISI):

What does root cause 4.A mean? How will the results of the maintenance walkdown (verification action 4.A.6.1) be addressed?

41. Page II-28, Specific Issue 4, ISI:

Verification action should include verifying that all required relief requests are approved by the NRC before restart.

42. Pages II-28 & 29, SI-4, Table 4:

Corrective Actions 4.B.1 and 4.B.3 discuss the assignment of a Task Manager to implement the ISI program and the assignment of an experienced ISI Coordinator to promote departmental objectives. Please explain the difference between these two positions.

43. Page II-30:

Were all purchase orders reviewed for safety-related and commercial and commercial grade items back to 1985, or just a sample? If just a sample, justify. As what is supplied does not always match what was originally ordered in the purchase specification, what other documents were reviewed for each piece of equipment to determine what items needed to be re-evaluated?



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44. Page II-33, SI-5, Table 5:

The root cause states that management failed to adequately assess resources and program scope needed to satisfy commercial grade dedication. None of the three corrective actions address procedure changes or training. Does this imply that current procedures and training for the control of commercial grade items is satisfactory?

45. Page II-44:

Changes to Technical Specifications that involve Appendix J testing requirements are not "administrative" and would be expected to affect plant operations. This item should be clarified.

46. Page II-47, Specific Issue 9, Appendix J:

Discussion of this open item is incomplete. Refer to NRC letter dated 11/15/88.

47. Page II-48, Specific Issue 10, Reactor Pressure Vessel Pressure/Temperature (P/T) Curves:

The Niagara Mohawk proposal to submit revised P/T curves by the end of 13 effective full power years will not allow sufficient time for NRC review and approval.

48. II-62, Specific Issue 14, Safety System Functional Inspection (SSFI):

Three items from the SSFI "quick look" letter were missing from the list. The missing items may not need to be resolved before restart, but they should be evaluated and addressed.

49. Page II-71, SI-17, Table 17:

Sub-element 17.1 states that the IST Program does not include all ASME Class 1, 2, and 3 (safety-related) pumps and valves. Corrective Action 17.A.1 states that NMPC will finalize and implement the 2nd Interval IST Program. Confirm that Corrective Action 17.A.1 means that the 2nd Interval IST Program will include all ASME Class 1, 2, and 3 (safety-related) pumps and valves.

50. Page II-71, SI-17, Table 17:

Corrective Action 17.C.1 states that NMPC will obtain interim relief from the NRC for components that cannot be tested during the current outage. In order not to impact restart, NMPC should submit such relief requests in a timely enough manner to allow sufficient NRC staff review time.

51. Pages II-72 - 73, SI-18, Table 18:

The long-term strategy states that several enhancements to the 125 VDC system have been identified and that reviews are expected to be completed within a year after restart. Clarify that prior to restart, the 125 VDC system will meet its design and functional operability requirements.



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52. Page B-5, Item F10:

Why are date and computations errors considered under the same heading?
Please clarify.

53. Page B-5, 6, and 7:

These trees do not consider the physical/mental condition of the person performing the task (e.g., was the person fatigued from extensive overtime). How was this factor considered in the root cause evaluation?

54. Page II-58, through II-62, Specific Issue 14 (SSFI):

Clarify what are the corrective actions for sub-elements 14.7, 14.9, 14.11, and 14.14.

55. Appendix C:

The criteria for determining if an issue is a Regulatory Concern does not consider if the issue creates the possibility of a new or different kind of accident, one of the 50.59 criteria for determining if an issue is an unreviewed safety issue. Please address how this criterion was addressed for each of the issues reviewed.

Remarks/Questions for the Restart Panel

1. Page 1:

Will NRC need a schedule for completion and verification of corrective actions in order to plan for some individual closeout inspections?

2. Page 2 & Page I-3:

The root causes identified (items 1 through 5) were less specific than those identified in the MAC report for Peach Bottom.

3. Page 4 & I-4:

Niagara Mohawk has no plans to amend RAP for new issues even though they will go through the same process as items identified earlier. Is this acceptable to NRC?

4. Page I-5:

How much detail does the Panel need on the Self-Assessment Process (i.e., Readiness for Restart Phase) before it can approve the RAP?

Groundrules between the NRC and INPO should be established before the INPO Assist team visit.

