P.O. BOX 529100, MIAMI, FL 33152

FPL
FLORIDA POWER & LIGHT COMPANY

August 13, 1980
L-80-267

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

Dear Mr. O'Reilly:

Re: RII:RZ
50-335/80-06

Florida Power & Light Company has reviewed the subject inspection report and a response is attached.

There is no proprietary information in the report.

Very truly yours,

Robert E. Uhrig
Vice President
Advanced Systems & Technology

REU/MAS/pa

Attachment

cc: Harold F. Reis, Esquire

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PEOPLE . . . SERVING PEOPLE

ATTACHMENT

Re: RII:RZ
50-335/80-06

Finding A

As required by Technical Specification 6.4.1, a retraining and replacement training program for the facility staff shall be maintained under the direction of the Training Supervisor and shall meet or exceed the requirements and recommendations of Section 5.5 of ANSI N18.1-1971 and Appendix "A" of 10 CFR Part 55. Section 5.5 of ANSI N18.1-1971 states that a training program shall be established which maintains the proficiency of the operating organization.

Contrary to the above, the licensee did not have an adequate retraining program which maintained the proficiency of the Health Physics staff, nor did the licensee have a training program for replacement personnel of the Health Physics staff in that the basic elements listed in ANSI N18.1-1971 Section 5.5.1 were not contained in the program.

Response A

A replacement training and a retraining program for Health Physics personnel, meeting the requirements and recommendations of ANSI 18.1-1971, will be developed and implemented. Implementation of the replacement training program will be accomplished by November 30, 1980. Implementation of the retraining program will be accomplished by December 31, 1980.

Finding B

As required by Technical Specification 6.9, procedures for personnel radiation protection shall be prepared consistent with the requirements of 10 CFR Part 20 and shall be approved, maintained and adhered to for all operations involving personnel radiation exposure. Procedure HP-30, Revision 7, Paragraph 8.3.6 requires that the plastic bag holding the dosimetry, thermoluminesent dosimeter (TLD) and neutron TLD be taped to the front of the upper torso and Paragraph 4.3 of the Health Physics Manual requires dosimetry to be worn on the front side of the upper trunk.

Contrary to the above, during the period of inspection, numerous instances of improper wearing of dosimeters were observed. Examples included TLD clipped on belts at the hip side, TLD's shielded by pocket dosimeter and TLD's turned backwards.

Additional procedural discrepancies were noted during the inspection period. These include: (1) Respirators were stored face up (contrary to Procedure HP-62, Revision 2, Paragraph 8.5.2); (2) form HP-62 was not being used (contrary to Procedure HP-62, Revision 2, Paragraph 8.4.2.2); (3) Form HP-65 was not being used on SCBA units (contrary to Procedure HP-65, Revision 1, Paragraph 8.1.8.2); (4) unique numbering was not being used on respiratory equipment (contrary to Procedure HP-62, Revision 2, Paragraph 8.4.2.2); (5) results of response checks were not being recorded (contrary to Procedure HP-13B, Revision 1, Paragraph 8.17); (6) and Form HP-1.1 was not being utilized in all instances (contrary to Procedure HP-1, Revision 9, Paragraph 8.2.4.5); and (7) the TLD reader was not being calibrated at an adequate frequency to ensure proper operability (inadequate Procedure HP-12, Revision 4).

Response B

The plant staff will be reindoctrinated to the correct method of wearing personnel dosimetry during the assembly for the August, 1980 plant safety meeting. Increased emphasis will be placed on the correct method of wearing personnel dosimetry in the general employee radiation protection training and retraining programs. This will be initiated in the next training and retraining classes.

Finding C

As required by 10 CFR 20.103(c) "When respiratory protective equipment is used to limit the inhalation of airborne radioactive material pursuant to paragraph (b)(2) of this section, the licensee may make allowances for such use in estimating exposures of individuals to such materials provided that such equipment is used as stipulated in Regulatory Guide 8.15, "Acceptable Programs for Respiratory Protection"." Section C.8.a of Regulatory Guide requires "Respirable air of approved quality be provided" in accordance with "Commodity Specification for Air", G-7.1-1966, which in Section 2.3, entitled "Quality Tests" for Grade D air requires tests for oxygen, hydrocarbons, carbon monoxide and carbon dioxide.

Contrary to the above, procedure HP-62, Revision 2, does not provide for the sampling or testing of the breathing air supply for oxygen, condensed hydrocarbons or carbon dioxide content and the air was being used without this sampling.

Response C

The St. Lucie Plant breathing air supply was tested in July, 1980 to ensure that the breathing air meets "Commodity Specification of Air", G-7, 1-1966 for grade D air. Health Physics procedure, HP62, "Inspection, Maintenance and Quality Assurance of Respiratory Protection Equipment", will be revised by August 31, 1980 to include a periodic analysis of the breathing air.

Finding D

As required by Technical Specification 6.8.1 written procedures shall be established, implemented and maintained covering the activities recommended in Appendix A of Regulatory Guide 1.33, November 1972. Regulatory Guide 1.33, Appendix A, Section G.5(c) states that written procedures for surveys and monitoring should be prepared. Plant Procedure HP-41 states, in part, that if an item is to be removed as an unconditional release from the Radiation Control Area, Health Physics shall ascertain that the item meets the criteria described in Plant Procedure HP-71, Paragraph 4.3.2. Procedure HP-71, paragraph 4.3.2 states that the release limit for uncontrolled material leaving the RCA is 100 counts per minute per probe area (beta-gamma) using the RM-14/HP-210 instrument (approximately equivalent to 1,000 dpm/ probe area) with no detectable removable contamination.

Contrary to the above, during the inspection a wrench was found in the clean tool room located outside the Radiation Control Area, which when tested was observed to be contaminated to 30,000 dpm per probe area.

Response D

The plant staff will be instructed on the methods and importance of maintaining control of radioactive materials within their designated areas during August, 1980 plant safety meeting. Special emphasis will be placed on the control of tools and equipment leaving the radiation control area.

Significant Appraisal Finding

The majority of the negative findings of the report can be traced to the apparent inadequate health physics staffing. All the items of noncompliance listed in Appendix B can be traced to the lack of staff (or lack of time available for existing staff) necessary to accomplish the tasks required. It is fortuitous that the present understaffed health physics group has functioned as well as it has. However, if a major radiological safety event happens in the future the circumstances may not be as favorable.

Staffing deficiencies contributed to the item of noncompliance listed in Appendix B concerning the retraining program for health physics technicians. The proficiency of the health physics staff obviously must be maintained to enable them to cope competently with both normal and abnormal situations.

Staffing deficiencies also contributed to those problems and items of noncompliance listed in Appendix B in the personnel dosimetry area. For example, significant discrepancies between pocket dosimeter and TLD results were not evaluated, the TLD reader was not calibrated at sufficient frequency, and procedural requirements governing the wearing of dosimetry devices were not strictly enforced.

Response

As discussed with NRC personnel during the appraisal, we were engaged in estimating the manpower requirements for the site and we are now taking steps to increase the number of assigned personnel. A manpower evaluation has been performed and submitted to FPL management. Additional personnel will be added to the health physics staff as soon as the evaluation can be reviewed, new positions approved, and qualified personnel hired.

Additional FPL Comments on Details Section 4.h

The department contacted during the HP appraisal concerning this subject was Quality Assurance. This department conducts the referenced audits of the plant under the cognizance of the Company Nuclear Review Board. These management and activity audits are not intended to provide the same detailed coverage of the areas under the surveillance coverage of the Quality Control Department.

The Quality Control Department, which reports directly to the Plant Manager, is responsible for conducting surveillances of Health Physics activities. The personnel responsible for these surveillances were not contacted during the course of the HP Appraisal.

The QC Department effort includes shipments, review of purchase orders, receipt inspection, inspection of radwaste shipments, review of completed calibrations, review of completed technical specification surveillances, review of proposed plant changes, review of completed documentation prior to filing, and review of proposed procedure changes. In addition, during 1979, surveillances (random observations of operations) were conducted in activities involving waste storage, radiation work permits, measuring and test equipment, surveys, posting of notices, training, and locking of high radiation areas.

The QC Department also reviews gaseous liquids releases on a spot check basis. This is done as part of the chemistry area reviews. During 1979, twenty-two liquid releases and eighteen gaseous releases were reviewed by QC personnel.

In view of the above, we feel that our QC efforts in the Health Physics area are satisfactory.