



South Texas Project Electric Generating Station P.O. Box 289 Wadsworth, Texas 77483

August 3, 2017  
NOC-AE-17003506  
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Attention: Document Control Desk  
U. S. Nuclear Regulatory Commission  
Washington, DC 20555-0001

South Texas Project  
Units 1 and 2  
Docket Nos. STN 50-498, STN 50-499  
Response to Apparent Violations in  
NRC Inspection Report 05000498/2016010; 05000499/2016010; EA-16-216

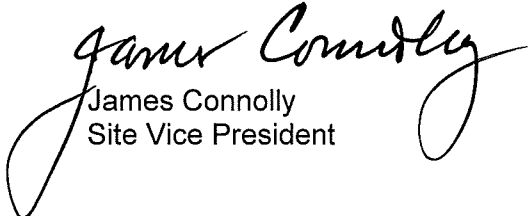
Reference: Letter from A. Vogel, NRC, to G.T. Powell, STPNOC, "South Texas Project Electric Generating Station Units 1 and 2 – NRC Inspection Report 05000498/2016010; 05000499/2016010 and NRC Investigation Reports 4-2015-014 and 4-2016-008", June 29, 2017 (AE-NOC-17003011) (ML17180A436)

This letter provides STP Nuclear Operating Company's (STPNOC) response to the two apparent violations contained in the above referenced letter. The referenced letter provided the option to respond to the Apparent Violations addressed in this inspection report, request a pre-decisional enforcement conference, or request alternative dispute resolution. The attachments provide STPNOC's response to the apparent violations.

Corrective actions identified in the attachment will be tracked and implemented in accordance with the STP Corrective Action Program. On July 26, 2017, approval was obtained from the NRC staff to extend the response deadline until August 4, 2017.

There are no regulatory commitments in this letter.

If you have any questions or require additional information regarding this letter, please contact Walter Fulton at (361) 972-4349 or me at (361) 972-7344.

  
James Connolly  
Site Vice President

Attachments:

1. Response to Apparent Violation Regarding Failure to Follow Fire Protection Program Procedure Requirements
2. Response to Apparent Violation Regarding Failure to Maintain Complete and Accurate Information for the Fire Protection Program

STI: 34525824

cc:  
(paper copy)

Mr. Anton Vogel  
Director, Division of Reactor Safety,  
U.S. Nuclear Regulatory Commission, Region IV  
1600 E. Lamar Blvd.  
Arlington, TX 76011-4511

Regional Administrator, Region IV  
U. S. Nuclear Regulatory Commission  
1600 East Lamar Boulevard  
Arlington, TX 76011-4511

Lisa M. Regner  
Senior Project Manager  
U.S. Nuclear Regulatory Commission  
One White Flint North (O8H04)  
11555 Rockville Pike  
Rockville, MD 20852

NRC Resident Inspector  
U. S. Nuclear Regulatory Commission  
P. O. Box 289, Mail Code: MN116  
Wadsworth, TX 77483

(electronic copy)

Morgan, Lewis & Bockius LLP  
Steve Frantz, Esquire  
Paul Bessette

U.S. Nuclear Regulatory Commission  
Lisa M. Regner

NRG South Texas LP  
Mark Walker  
Jim von Suskil  
Skip Zahn

CPS Energy  
Kevin Pollo  
Cris Eugster  
L. D. Blaylock

City of Austin  
Elaina Ball  
John Wester

Texas Dept. of State Health Services  
Helen Watkins  
Robert Free

**Attachment 1**

**Response to Apparent Violation Regarding Failure to Follow Fire Protection  
Program Procedure Requirements**

**Response to Apparent Violation Regarding Failure to  
Follow Fire Protection Program Procedure Requirements**

Restatement of Violation:

- A. 10 CFR 50.48 (a)(1)(iv) requires, in part, that a licensee must have a fire protection plan that outlines the plans for fire protection, fire detection, suppression capability, and limitation of fire damage.

STP Nuclear Operating Company Technical Specification 6.8.1.d requires, in part, that written procedures shall be established, implemented, and maintained covering the fire protection program implementation.

Procedure ZFG-0001, "Fire Watch Program Guideline," Revision 10, Step 4.2 requires, in part, that each hourly fire watch shall be responsible for inspecting all areas of the room for possible indications of smoke, fire, or potential fire hazards, which includes looking behind all accessible areas, behind panels and components that may obscure the fire watches' view.

Procedure ZFG-0001, "Fire Watch Program Guideline," Revision 11, Step 6.0, requires, in part, that a condition report shall be written for a missed fire watch. Procedure OPGP03-ZX-0002, "Condition Reporting Process," Revision 50, Step 3.7 requires, in part, that condition report owners are responsible for proper resolution of the condition, including ensuring that the condition report description is accurate and actions are initiated to address the condition.

Contrary to the above, the licensee failed to implement written procedures covering the fire protection program as evidenced by the following two examples:

1. On May 8-15, 2014, hourly fire watches failed to follow Procedure ZFG-0001 and inspect all areas of the room for possible indications of smoke, fire, or potential fire hazards. Specifically, 20 fire watches, 17 in Unit 1 and 3 in Unit 2, were improperly performed as a result of improper written instructions provided by a supervisor to direct the hourly fire watches to only look at areas of impairments or transient fire loads instead of inspecting all areas of the room as required by fire protection program requirements.
2. On March 4, 2015, a supervisor failed to follow Procedure OPGP03-ZX-0002 when the supervisor closed a condition report and failed to ensure that the condition report description was accurate and actions were initiated to address the condition. Specifically, the supervisor documented inaccurate information in Condition Report 15-4871 that stated, in part, that when a fire watch for Unit 2, Mechanical Auxiliary Building, Room 67 was inadvertently closed, fire watch personnel routinely traversed through the area while performing rounds, and once identified the round was performed immediately with no issues identified. However, no fire watch personnel traversed the area because the room was locked and was not part of their normal route. Therefore, no fire watch personnel entered the room as documented in the condition report closure.

The apparent violation is designated as AV 05000498/2016010-01; 05000499/2016010-01, "Failure to Follow Fire Protection Program Procedure Requirements."

Reason for the Apparent Violation:

Supervisor 1 was overconfident in his ability to administer the Fire Watch Program and applied the Corrective Action Program based on his experience rather than ensuring compliance with STP's Fire Watch Program and procedures. Placing Supervisor 1 under the Safety Supervisor limited the amount of oversight and performance monitoring of the Fire Protection Program. The monitoring and oversight were less than adequate, which delayed reduction of the fire impairment backlog.

Corrective Steps That Have Been Taken and Results Achieved:

1. The Fire Protection Group was re-assigned to the Maintenance department under the Plant General Manager in April 2016 to provide the necessary oversight of the Fire Protection Program. Since the Fire Protection Program was placed in the Maintenance Department, there has been an improvement in morale and performance within the Fire Protection Group.
2. Supervisor 1 was terminated on November 4, 2015, due to failure to demonstrate acceptable behaviors and performance. A new Supervisor was hired February 22, 2016, and has had a positive impact within the Fire Protection Group.
3. Special written instructions ("scan and go") were removed from fire watch logs on May 15, 2014, and the removal was communicated to fire watch personnel to ensure Fire Protection Program compliance. (See Example 1 in restatement of violation.)
4. The fire watch for Unit 2, Mechanical Auxiliary Building, Room 67 was reestablished on the same day upon discovery. (See Example 2 in restatement of violation.)
5. To address extent of condition, the current Supervisor reviewed fire impairments and temporary fire loading permits previously approved by Supervisor 1. The scope of this review was for permits and impairments that were still open and pending use. No compliance issues were identified.

Corrective Steps That Will Be Taken:

None

Date When Full Compliance will be achieved:

STP is in full compliance as October 19, 2016.

For Example 1 in the violation, the improper special instructions in the fire watch records were removed on May 15, 2014, under Condition Report 14-8967. For Example 2 in the violation, Condition Report 15-4871 was amended on October 19, 2016, to correct inaccurate information.

**Attachment 2**

**Response to Apparent Violation Regarding Failure to Maintain Complete and Accurate  
Information for the Fire Protection Program**

## **Response to Apparent Violation Regarding Failure to Maintain Complete and Accurate Information for the Fire Protection Program**

### Restatement of Violation:

- B. 10 CFR 50.9 requires, in part, that information required by the Commission's regulations, orders, or license conditions to be maintained by the licensee shall be complete and accurate in all material respects.

STP Nuclear Operating Company Technical Specification 6.8.1.d requires, in part, that written procedures shall be established, implemented, and maintained covering the fire protection program implementation.

Procedure ZFG-0001, "Fire Watch Program Guideline," Revision 10, Step 4.2 requires, in part, that each hourly fire watch shall be responsible for inspecting all areas of the room for possible indications of smoke, fire, or potential fire hazards, which includes looking behind all accessible areas, behind panels and components that may obscure the fire watches' view. Step 4.2.12 requires, in part, that after completing the inspection of the assigned area, scan the appropriate "Fire Watch Scan Point" above the fire watch posting.

Procedure ZFG-0001, "Fire Watch Program Guideline," Revision 11, Step 6.0, requires, in part, that a condition report shall be written for a missed fire watch. Procedure OPGP03-ZX-0002, "Condition Reporting Process," Revision 50, Step 3.7 requires, in part, that condition report owners are responsible for proper resolution of the condition, including ensuring that the condition report description is accurate and actions are initiated to address the condition.

Contrary to the above, the licensee failed to ensure that information required by the Commission's regulations, orders, or license conditions to be maintained by the licensee shall be complete and accurate in all material respects as evidenced by the following three examples:

1. On May 8-15, 2014, the licensee failed to maintain complete and accurate records associated with hourly fire watches. Specifically, a total of 20 fire watch records, 17 in Unit 1 and 3 in Unit 2, were recorded (scanned) as being completed without inspecting all areas of the room for possible indications of smoke, fire, or potential fire hazards. This information was material to the NRC because the performance of fire watches enables the rapid detection, control, and suppression of a fire in accordance with the fire protection program requirements.
2. On March 4, 2015, the licensee failed to maintain complete and accurate records associated with a condition report. Specifically, a supervisor willfully documented inaccurate information in Condition Report 15-4871 that stated, in part, that when a fire watch for Unit 2, Mechanical Auxiliary Building, Room 67 was inadvertently closed, fire watch personnel routinely traversed through the area while performing rounds, and once identified the round was performed immediately with no issues identified. However, no fire watch personnel traversed the area because the room was locked and was not part of their normal route. Therefore,

no fire watch personnel entered the room as documented in the condition report closure. This information was material to the NRC because condition reports associated with missed fire watches provide evidence of compliance with licensee procedures and NRC requirements.

3. On April 14, 2015, the licensee failed to maintain complete and accurate records associated with a condition report. Specifically, a supervisor deliberately documented inaccurate information in Condition Report 15-9793 that stated, in part, that field interviews with a fire watch manager and a fire watch lead indicated that the Unit 2 fire watches (FW8934) were properly performed. However, the supervisor did not confirm with the fire watch manager or a fire watch lead that the fire watches had been performed. This information was material to the NRC because condition reports associated with missed fire watches provide evidence of compliance with licensee procedures and NRC requirements.

The apparent violation is designated as AV 05000498/2016010-02; 05000499/2016010-02, "Failure to Maintain Complete and Accurate Information for the Fire Protection Program."

Reason for Violation:

Supervisor 1 was overconfident in his ability to apply the Corrective Action Program based on his experience. Supervisor 1 behavior did not change after repeated coaching sessions on the proper use of the Corrective Action Program.

Corrective Steps That Have Been Taken and Results Achieved:

1. Supervisor 1 was terminated on November 4, 2015, due to failure to demonstrate acceptable behaviors and performance. A new Supervisor was hired February 22, 2016, and has had a positive impact within the Fire Protection Group.
2. Special written instructions ("scan and go") were removed from fire watch logs on May 15, 2014, and the removal was communicated to fire watch personnel to ensure Fire Protection Program compliance. (See Example 1 in restatement of violation.)
3. Condition Report 15-4871 was amended to correct the inaccurate/incomplete information. (See Example 2 in restatement of violation.)
4. The FW8934 logs were found and Condition Report 15-9793 was amended to document evidence of Fire Protection Program compliance. (See Example 3 in restatement of violation.)



5. In 2016, STP executed an Ethics and Compliance Awareness campaign consisting of four videos that reinforced to station workers the obligation and responsibility to maintain integrity in daily activities. The videos included topics on:
  - trustworthiness and reliability,
  - the meaning of signing your name to a document,
  - requirements of 10CFR50.9,
  - external operating experience highlighting the impacts to an organization when integrity is challenged, and
  - available tools employees have to report ethics and compliance concerns.
  
6. To address extent of condition, a review of Condition Reports and actions assigned to or originated by Supervisor 1 was conducted to determine if Supervisor 1 provided incomplete or inaccurate information in the Corrective Action Program. The review concluded that there were no additional instances where incomplete or inaccurate information was provided in reference to the Fire Protection Program.

Corrective Steps That Will Be Taken:

None

Date When Full Compliance Achieved:

STP is in full compliance as of October 19, 2016.

For Example 1 in the violation, the special instructions in the fire watch records that failed to maintain complete and accurate records were removed on May 15, 2014, under Condition Report 14-8967. For Example 2 in the violation, Condition Report 15-4871 was amended on October 19, 2016, to correct inaccurate information. For Example 3 in the violation, Condition Report 15-9793 was corrected on September 28, 2015, to provide accurate information regarding Unit 2 fire watches (FW8964).