U. S. NUCLEAR REGULATORY COMMISSION

REGION V

Report No. 50-397/85-27

Docket No. 50-397

License No. NPF-21

Licensee: Washington Public Power Supply System
P. O. Box 968
Richland, Washington 99352

Facility Name: Washington Nuclear Project No. 2 (WNP-2)

Inspection at: WNP-2 Site, Benton County, Washington

Inspection conducted: July 29 - August 2, 1985

Inspector: P.P. Narbut for 8/9/85
P. M. Qualls, Reactor Inspector — Date Signed

Approved By: PPNarbut for 8/9/85
P. H. Johnson, Chief
Reactor Projects Section 3 — Date Signed

Summary:

Inspection on July 29 - August 2, 1985 (Report No. 50-397/85-27)

Areas Inspected: Unannounced inspection by a regional inspector of the WNP-2 Quality Assurance (QA) program and follow-up on Licensee Event Reports. The inspection involved 30 hours onsite by one NRC inspector. During this inspection, inspection procedures 30703, 35701, 64704, 92700, 90712, 40703, 39702 and 39701 were covered.

Results: Of the areas inspected, no violations or deviations were identified.

DETAILS

1. Persons contacted

M. Manolopli, Manager, Operational Assurance Programs
G. Wooley, Manager, Procurement Quality Assurance
D. Koenigs, Compliance Engineer
R. Glasscock, Director of Licensing and Assurance
C. Powers, WNP-2 Plant Manager
K. Emel, Generation Aide
R. Partrick, Plant Support Administrative Supervisor
C. Fies, Manager, Engineering Services
N. Irwin, Plant QC Supervisor
*G. Sorensen, Manager, Regulatory Programs
*M. Bartlett, Plant QA Supervisor
*J. Landon, Plant Maintenance Manager

*Indicates personnel attending the exit meeting.

2. Startup Report

The inspector reviewed the plant final startup report and test results for completeness and accuracy. No discrepancies were noted during this review.

No violations or deviations were identified.

3. Offsite Quality Control

The inspector interviewed personnel, in a supervisory position, in the offsite Quality Assurance (QA) organization. The personnel were knowledgeable concerning their delegated responsibility and authority. They also appeared to have enough authority and staff to carry out their responsibilities in a proper manner. The qualifications of both managers and staff appeared adequate.

No violations or deviations were identified.

4. Document Control

The plant procedures and the implementation of these procedures concerning control of drawings were examined. The methods of control appear adequate to ensure that required drawing changes are updated. One strength appears to be that when a plant modification is accomplished which affects a top tier drawing (one that is used in the control room by the operators) the drawing change receives top priority and the control room copy is updated in a very timely manner.

No violations or deviations were identified.

5. Record Storage

The inspector verified that the records were stored in areas which met the licensee commitments. He verified that procedures were in place

concerning the retention and organization of the required records and had licensee personnel retrieve a number of records to verify that the licensees filing system functioned properly.

No violations or deviations were identified.

6. Procedure Review

The inspector examined four recently completed surveillance procedure for accuracy and review adequacy. Of the four examined two appeared to have minor discrepancies which should have been corrected in the procedure review process. In one case numbers were on a data sheet, from a plant histogram, which would have placed the test out of specification if they were correct. The histogram was attached which showed that the test was in fact within limits. In another example, in an approved deviation to a procedure; one of the data sheet acceptance limits was greater than the value specified in Technical Specifications. The value during the test was within the Technical Specification limit. And in the last example the procedure required the test performer to initial a space as satisfactory or unsatisfactory. The person performing the test checked the satisfactory space.

The licensee stated that the plant QA organization has recently been asked to perform an in-depth review of this area to determine the scope of the problem and the desirability of increased attention to detail in the review process.

No violations or deviations were identified.

7. LER Follow-up

The inspector discussed with a plant compliance engineer, LER 85-18 and the need to report the cumulative number of hours that drywell temperature exceeds 150°F as an equipment qualification requirement. The licensee stated that they would determine if the need existed and to update their information LER 85-18 is closed.

The inspector conducted an in-office review of the following LERs and determined no followup actions are needed. The following LERs are closed based on in-office review.

LER 85-04
LER 85-06
LER 85-12
LER 85-13
LER 85-15
LER 85-16
LER 85-17
LER 85-20

8. Plant Tour

Plant housekeeping appeared to be much improved from that reported in Inspection Report 85-22. No new areas of concern were noted and the items listed in the report were corrected.

The inspector noted that some thermolag material with an expiration date of July 1985 was in use in the plant on July 31, 1985. Investigation revealed that the plant personnel had in readiness, for use the next day, a fresh supply with an expiration date of January 1986. The foreman was aware of the approaching expiration of shelf life of his material and had already taken action.

No violations or deviations were identified.

9. Exit Meeting

An exit meeting was held on August 2, 1985, with members of the plant staff. The items listed in this report were discussed at that time.