

UNITED STATES NUCLEAR REGULATORY COMMISSION REGION II 101 MARIETTA ST., N.W., SUITE 3100 ATLANTA, GEORGIA 30303

Report Nos. 50-250/81-09 and 50-251/81-09

Licensee: Florida Power and Light Company 9250 West Flagler Street Miami, FL 33101

Facility Name: Turkey Point 3 and 4

Docket Nos. 50-250 and 50-251

License Nos. DPR-31 and DPR-41

Inspection at Turkey Point site near Homestead, Florida and General Offices in Miami, Florida

Inspectors: <u>G. A. Behisle</u>	<u>.5/14/8/</u> Date Signed,
P. E. Fredrickson	<u>5/14/81</u> Bate Signed
P. H. Skinner = DD-	<u>S/15/8  </u> Date Signed.
Approved by: C. M. Upright, Section Chief Engineering Inspection Branch Engineering and Technical' Inspection Division	Date Signed

SUMMARY'

Inspection on April 6-10 and 13-17, 1981,

Areas Inspected

8106120 373

This routine, announced inspection involved 216 inspector-hours on site and at the general offices in the areas of licensee action on previous inspection findings; QA annual review; QA/QC administration; personnel qualification program; design changes program; test and experiments; procurement; receipt, storage and handling; records; document control; offsite review; audits and audit implementation; offsite support; training; requalification training; housekeeping and licensee action on previously identified inspection items. Results

Of the 17 areas inspected, no violations or deviations were identified in 13 areas; four violations were identified in three areas (Failure to perform safety evaluations required by 10 CFR 50.59(b), paragraph 9; Failure to maintain receipt documentation for recorder charts, paragraph 12.b; Failure to maintain locked records cabinet, paragraph 12.a; Failure to maintain QC tags with controlled material, paragraph 11.a). One deviation was identified in one area (Failure to update quality procedures and administrative procedures, paragraph 3.c).

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# REPORT DETAILS

#### Persons Contacted 1.

#### Licensee Employees

- \*K. Beatty, Training Supervisor
- #J. Burford, Executive Secretary CNRB/NUA
- \*R. Cook, QC
- #D. Chaney, Nuclear Licensing PTP
- #R. Englmeier, Assistant Manager QA Procurement and Reliability
- #\*T. Essinger, Assistant Manager QA
- #\*S. Feith, QA Operations Supervisor
- \*M. Fowler, Stores Supervisor
- #F. Green, Supervising Engineer, Power Plant Engineering
- \*D. Haase, Technical Department Supervisor
- #J. Harper, Assistant Manager of QA Systems and Audits.
- \*J. Hays, Plant Manager Nuclear
- #H. Hendrix, Inventory Resources Coordinator
- #S. Jackson, QA Engineer Procurement
- #\*D. Jones, QC Supervisor
- #R. Marsh, Supervising QA Engineer
- #J. Martin, Supervisor of Purchasing
- #H. Paduano, Manager Power Resources Nuclear Services
- \*T. Peck, Health Physics
- \*S. Reckford, QA Engineer
- W. Rogers, Jr., Chief Engineer, Power Plant Engineering Department
- #\*J... Sellards, Senior Records Analyst Corporate Records Department
- #\*A. Siebe, QA Manager
- \*L. Thomas, Nuclear Maintenance
- \*R'. Tucker, Senior QA Engineer
- #R. Uhrig, Vice President, Advanced Systems and Technology
- #J. Vessely, Director Nuclear Affairs,
- #W. Woodard, QA Engineer Systems
- \*H. Yaeger, Site Manager
- K. York, Document Control Supervisor

Other licensee employees contacted included technicians, operators, mechanics, security force members, and office personnel.

NRC Resident Inspectors

\*A. Ignatonis \*W. Marsh

\*Attended exit interview on April 14, 1981 #Attended exit interview on April 17, 1981





# 2. Exit Interview

The inspection scope and findings were summarized on April 14, 1981 on site and April 17, 1981 at the general offices with those persons indicated in paragraph 1 above. The licensee was informed of the inspection findings as indicated in paragraph 21. The licensee acknowledged the inspection findings.

## 3. Licensee Action on Previous Inspection Findings

The following terms are defined and used throughout this report.

Accepted QA Program	Topical Quality Assurance Report, FPLTQAR. 1-76A, Revision 3, dated 9/80
AP'	Administrative Procedure
CNRB'	Corporate Nuclear Review Board.
EPP	Power Plant Engineering
FRG	Facility Review Group
HP	Health Physics
I&C	Instrumentation and Control
NRR:QAB	Office of Nuclear Reactor Regulation, Quality
•	Assurance Branch
OLB ·	Operating, Licensing, Branch
OS:	Operating: Stores
OTSC-	On the Spot Change
PC/M	Plant Change/Modification
PNSC	Plant Nuclean Safety Committee
- QA	Quality Assurance
QC. X	Quality Control

Items of noncompliance and unresolved items from Inspection Reports 50-250, 251/79-11 were reviewed with respect to the licensee's letters dated July 12, 1979, August 17, 1979 and December 20, 1979. An unresolved item from Inspection Report 50-250,251/79-16 was also reviewed with respect to the licensee's actions.

- a. (Closed) Infraction, Item A.1 (250,251/79-11-01): Failure to have/ follow procedures. The inspector reviewed AP 0190.4, Procurement. Document Control, Revised 12/79 and QP 4.1, Control of Requisitions. and the Issuance of Purchase Orders for Spare Parts, Replacement Items, and Services, Revision 6 dated 8/80. These documents contain the necessary guidance to assure source documents are utilized in the determination of quality requirements for safety-related structures, systems and components.
- b. (Closed) Infraction, Item A.2 (250,251/79-11-01): Failure to have/ follow procedures. The inspector reviewed the following procedures: QP 2.7, Identification of Safety-Related Structures, Systems and Components, Revision 1 dated 1/80; EPP-QI-2.3, Classification of

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Activities, Structures, Systems and Components, Revision 0 dated 3/80; EPP-QI-2.3A, Classification of Structures, Systems and Components -Turkey Point, Revision 0 dated 3/80. These documents describe the development, use and control of the "Q" List.

- (Closed) Infraction, Item A.3 (250,251/79-11-01): Failure to have/ follow procedures. The licensee's response to item A.3 states in part that long-term corrective action will consist of:
  - (1) The submittal of an exception to the FPL Topical Quality Assurance. Report by July 20, 1979 to describe this program.
  - (2) Inclusion of this program into Corporate Quality Procedures and Turkey Point Administrative Procedures within 30 days after approval of the Topical Quality Assurance Report revision.
  - (3) Full compliance will be achieved upon revision of these procedures.
- The licensee submitted an exception to the accepted QA Program as stated in (1). Revision 3 of the accepted QA Program was fully implemented in September 1980. Inclusion of this program exception has not been made to quality procedures or to administrative procedures as of the date of this inspection, April 1981. This failure to meet commitments stated in licensee correspondence dated July 12, 1979 is a deviation (250,251/81-09-05). A complete explanation of the licensee's Revision 3 to the accepted QA Program is detailed in paragraph 5.
- d. (Closed) Infraction, Item A.6 (250, 251/79-11-01): Failure to have/ follow procedures. The inspector toured record storage facilities on site and at the general offices. Recorder charts are being stored in metal file cabinets in a fire resistant room. FP&L interoffice correspondence, subject: Fire Protection for Record Storage, dated April 13, 1979, detailed the fire protection evaluation, conducted by the Fire Protection Administrator, of the General Office record room. This evaluation did not address the required calculations for fire protection outlined in Section 543 of NFPA 232-1975. Closing this item has led to opening an unresolved item concerning the fire protection evaluations discussed in paragraph 12.c.
- e. (Closed) Infraction, Item D (250/79-11-07): Failure to perform annual test of RHR System. The inspector verified that testing on the RHR system had been performed on 3/24/79, 12/1/79, 12/4/80 and 3/1/81. This testing meets the requirements of Technical Specification 4.4.5.
- f. (Closed) Unresolved (250, 251/79-11-17): Auditing to verify compliance with commitments. The licensee has completed a total base line analysis of the accepted QA Program and ANSI Standards endorsed by that

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Program. As commitments to the Program change, the licensee will review the base line documents and procedures will be changed accordingly.

g. (Closed) Unresolved (250, 251/79-16-01): Corrective action to resolve identified deficiencies in various categories on the licensed operators' annual examinations was requiring between ten and fourteen months. AP 0301, Licensed Operator Requalification Program, dated 7/80, now requires that operators with identified deficiencies (scores less than 80% or periodic quizzes) perform additional studies and be given another quiz within 60 days.

#### .. Unresolved Items

- Unresolved items are matters about which more information is required to determine whether they are acceptable or may involve violations or deviations. One new unresolved item identified during this inspection is discussed in paragraph 12.c.
- 5. QA-Program Annual Review (35701)

References:	(a)	Letter No. L-79-34 from R. Uhrig, to W. Haass, dated
•	(b)	
,	(c)	
		8/13/79
an a share a s		Letter No. L-79-241, from R. Uhrig to W. Haass, dated
	(e)	Letter from W. Haass to R. Uhrig, dated 10/5/79
		Letter No. L-80-133 from R. Uhrig, to W. Haass, dated
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	(.g.)	Letter No., L-80-321, from R. Uhrig, to W. Haass, dated 9/26/80
	(ˌh.)	Letter No. L-80-334 from R. Uhrig to W. Haass, dated 10/3/80.
	(†)	Letter No. L-80-410 from R. Uhrig to W. Haass, dated 12/17/80
•	(j) (k)	Letter from W. Haa'ss to R. Uhrig, dated 2/4/81 Letter No. L-81-116 from R. Uhrig to W. Haass, dated
		3/13/81

References (a) thru (k) detail the correspondence between FP&L and NRR:QAB, relative to the acceptance of Revision 3 to the accepted QA Program. A total review of baseline documents has been completed for Revision 3 of the accepted QA Program. This review was completed in September 1980. For the purpose of this inspection, all activity areas were inspected to the requirements of Revision 3 of the accepted QA Program. All references used throughout this report to the accepted QA Program specifically refer to FP&L TOAR 1-76A, Revision 3.

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The procedures referenced throughout this report were reviewed to assure conformance with the licensee's accepted QA Program and the ANSI Standards endorsed by that Program. The inspector verified by interviews with licensee personnel that they understood changes to procedures generated by this base line document review.

Based on this review, no violations or deviations were identified.

. QA/QC Administration Program (35751)

- References:
- (a) TQR 2.0, Quality Assurance Program, Revision 1 dated 9/80
- (b) Q.P. 2.2, Revision of the Topical Quality Assurance Report, Revision 2 dated 8/76
- (c) Q.P. 2.3, Preparation and Revision of Quality Procedures, Revision 3 dated 5/77
- (d) Q.P. 2.4, Preparation and Revision of Quality Instructions, Revision 2 dated 2/79:
- (e) QI 2 QAD 4, Preparation and Revision of QAD QI's, Revision 4 dated 8/80'
- (f) QI 6 QAD 3, Control of Special QA Documents, Revision O dated 7/77
- (g) Q.P. 2.7, Identification of Safety-Related Structures, Systems and Components, Revision 1 dated 1/80
- (h) EPP-QI 2.3, Classification of Activities, Structures, Systems and Components, Revision 0 dated 3/80
- (i): EPP-QI 2.3A, Classification of Structures, Systems and Components - Turkey Roant Plant, Revision 0 dated 3/80.

The inspector reviewed the referenced documents to verify that they define the structures, systems, components and activities to which the Program applies and that procedures exist for making changes to these documents. The inspector also reviewed the Program to assure that administrative controls for QA Department procedures, inspection and audit activities, and manuals exist to provide the following: review and approval prior to issuance, methods and procedures for changes and revisions, and methods and controls for distribution and recall.

Based on this review, no violations or deviations were identified.

7. Personnel Qualification Program (36701)

References:

- (a) Technical Specifications, Section 6.3, Facility Staff Qualifications.
- (b) TQR 1.0, Organization, Revision 3 dated 9/80
- (c) Quality Assurance Department Organization Manual, FPL-NQA-101, Revised 12/80
- (d) FSAR, Chapter 12, Conduct of Operations.

5.

The inspector verified that licensee personnel qualifications are in accordance with the accepted QA Program and ANSI 18.1-1971 as committed to by that Program. The inspector verified that administrative controls had been established for the following positions: plant manager; maintenance superintendent; plant superintendent-nuclear; assistant plant superintendentnuclear; plant supervisors; mechanical maintenance supervisors; electrical maintenance supervisors; assistant plant superintendent-technical; plant security supervisor; plant engineer-instrumentation and control; radiochemist; health physicist; health physics supervisor; engineers and technical personnel; nuclear control center operators; turbine operators; nuclear operators; auxiliary equipment operators; maintenance personnel; and; onsite and offsite QA personnel.

The inspector reviewed the qualifications of 44 personnel in the disciplines listed to verify that they met the requirements of the accepted QA Program and ANSI 18.1-1971 as committed to by that program.

Based: on; this review, no violations or deviations were identified.

8. Design Change Program: (37702)

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References:	(a)	TQR 3.0, Revision 2 dated 9/80
х	(b)	
a •		dated 4/78
4	(c)	OP 3.2, Identification and Control of Design Interfaces, Revision 1 dated 6/79
anger fitter er er fitter er e	(d)	
· • •		Plants, Revision 2 dated 8/78
) <sup>,</sup>	(e),	QP 3.5, Design Control at the Construction Site,
•	· · ·	Revision 3 dated 9/79.
2	(f)	
		dated 8/80 -
	(g)	AP 0190.15, Plant Changes and Modifications, revised
	1	3/81.
	'(h)	
۰		Leads, revised 10/80
	.(i)	
	$( \cdot )$	revised 3/78.
	(j.)	
	· 16	Plant Operation, Revision 1 dated 9/79 EPP-QI-3.1, Control of Design Performed by EPP, Revision
	' (k)	4 dated 11/80
•	(1).	
	, (1)	Revision 1 dated 9/80.
	(m)	EPP-QI-3.3, Modifications to Operating Nuclear Units,
	()	Revision 2 dated 9/80

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The references listed were reviewed to verify they met the requirements of the accepted QA Program and ANSI N45.2.11-1974 as committed to by that Program. The inspector verified the following aspects of the design change program:

- Procedures have been established for control of design and modification change requests
- Procedures and responsibilities for design control have been established
- Administrative controls for design document control have been established
- Administrative controls assure that design changes are incorporated into plant procedures, operator training.and the updating of drawings
- Controls have been developed that define channels of communication between design and responsible organizations
- Administrative controls require design documentation and records be collected and stored
- Controls require implementation of approved design changes be in accordance with approved procedures
  - Controls require post-modification testing be performed per approved test procedures and the results evaluated
- Responsibility has been assigned for identifying post-modification testing requirements
- Responsibility and method for reporting design changes to the NRC in accordance with 10 CFR 50.59 has been identified.

Similar methods and controls were also verified for use of temporary modifications (jumpers and disconnected leads).

Based on this review two inspector followup items were identified and are discussed in paragraphs 8.a and b.

a. Drawing Control' Task Group

Licensee audit QAE-IDA-80-2 issued August 15, 1980 identified a Tack of current drawings showing PC/M's. In order to correct this problem, a drawing control task group was formulated. This task group has had several meetings and established objectives as stated in interoffice correspondence QAS-81-053 dated March 19, 1981. 8

Additional manpower and funding have been allocated to update plant drawings. The initial estimated completion date for updating approximately 1300 drawings is January 1982. Until this program for updating plant drawings can be reinspected, this item, as well as the item discussed in paragraph 13.b, collectively constitute an inspector followup item (250,251/81-09-18).

Use of Jumpers and Disconnected Leads, Audit QAO-PTP-81-03-340

The inspector accompanied a member of the onsite QA organization during the performance of an audit of the test and operating status area. One portion of this audit was a review of controls established for use of jumpers and disconnected leads. The QA inspector identified the following problem areas in the Unit 3 jumper and disconnected lead log:

- Several lifted leads and jumpers have been installed since 1975.. This timeframe is unacceptable within the scope of existing plant procedures.
- (2) Reference (h), Section 8.4.1, requires that the technical department supervisor or his designee shall periodically review the jumper and disconnected lead log to determine that all installed jumpers and disconnected leads are necessary. No documentary, evidence could be presented to verify that this review was being conducted. Discussions with the technical department supervisor identified that a review is in progress of entries in the jumper and disconnected lead log and that engineering evaluations are being performed.

Until the licensee's audit of this area is issued and corrective actiom is taken, this item is identified as inspector followup item (250,251/ 81-09-19).

9. Test and Experiments Program (37703)

b.

References: (a) 10 CFR 50.59, Changes, Tests and Experiements

(b) AP 0190.22, Changes, Tests, and Experiments, dated 5/79

The inspector reviewed the test and experiments program required by Reference (a) and implemented by Reference (b). The inspector verified the following aspects of this program: a written safety evaluation which meets the intent of reference (a) is retained as Quality Assurance records; review of Plant Nuclear Safety Committee action on tests and experiments; verification that tests and experiments are reported to the NRC in a timely manner; that special tests are reviewed by responsible personnel; and changes to these tests are reviewed by the same organizations that approved the test. Based on this review one violation was identified. The inspector reviewed 17 special tests (79-03, 79-04, 79-09, 79-10, 79-15, 80-01 through 80-10, 81-1 and 81-2). Six of these tests did not contain safety evaluations. Special tests that have been prepared since July 1980 do contain 10 CFR 50.59 evaluations. Safety evaluations were provided to the inspector at the exit interview. These evaluations had not as yet been reviewed by the PNSC. In addition, two on-the-spot changes to special tests were reviewed. One of these changes had not been reviewed by the PNSC as required by AP 0190.3, On-the-Spot Changes to Procedures. As a result, the inspector reviewed the following OTSCs (a total of 56) to various other procedures to determine if the PNSC review was being performed as required:

OTSC 874 thru.878 OTSC 966 thru 977 OTSC 1002 thru 1004 OTSC 1011 thru 1020 OTSC 1016 OTSC 1018 . OTSC 1022 thru 1036

OTSC 1038 thru 1954

Each of the above OTSCs had required PNSC review. Since the OTSC that was not reviewed appears to be an isolated case, no citation is issued for this item:

The failure to provide safety evaluations per reference (a) is a violation (250, 251/81-09-01).

10. Procurement (38701)

References:

- (a) QP 4.1, Control of Requisitions and the Issuance of Purchase Orders for Spare Parts, Replacement Items and Services, Revision 6 dated 8/80.
- (b) QP 4.2, Evaluation of Contractors Bids--Technical, Revision 2 dated 9/80
- (c) QP 4.4, Review of Procurement Documents for Items and. Services Other Than Spare Parts, Revision 8 dated 10/80.
- (d) QP 7.4, Evaluation of Suppliers of Safety-Related Items or Services; Revision 3 dated 6/79 ---
- (e) QP 7.8, Review and Disposition of Supplier Deviation Notices, Revision O dated 11/78
- (f) AP 0190.4, Procurement Document Quality Control, dated 8/80
- (g) EPP-QI 2.3A, Classification of Structures, Systems and Components--Turkey Point Plant, Revision 0 dated 3/80
- (h) QI 7 QAD 3, Source Surveillance of Supplier Activities, Revision 2 dated 8/80
- (i) QI 7 QAD 4, Supplier Annual Review, Revision 1 dated 5 8/80.
- (j) QI 7 QAD 5, Establishing and Maintaining the QA Approved Suppliers List, Revision 1 dated 8/80

- (k) QI 7 QAD 6, Method for Supplier Evaluation, Revision 0 dated 11/80
- QI 17 QAD 3, Preparation, Control, Maintenance and Storage of QAP Audit Files and History Files, Revision 5 dated 11/80

The inspector reviewed the licensee's procurement program with respect to selected elements of the approved QA Program. The inspection was to verify that administrative controls had been established for the preparation, review, approval and revision of procurement documents and for qualification and, audit of suppliers. Implementation of the procurement program was. verified by reviewing procurement documents of several safety-related items and verifying that they were prepared in accordance with administrative controls, that materials were purchased from qualified vendors, and that purchases orders required the vendor to supply appropriate documentation of quality. Based on this review, one inspector followup item was identified. Reference (h) provides for the use of source surveillances for purchase orders. This QI also permits the QA Procurement Manager to waive a surveillance that had previously been developed. Six purchase orders were reviewed by the inspector. One of these, Purchase Order 88983-04619W, dated 12/01/80 had a witness point annotated requiring a source surveillance. Or 12/16/80, this surveillance requirement was waived by the Procurement QA The inspector was able to determine, by procurement staff. Department. interviews, that justification for the initial surveillance requirement and for the eventual waiver had been conducted but not documented. In this instance the lack of written justification did not generate an improper, waiver nor appear to be a continuing problem. This area will be reinspected during a subsequent inspection and is identified as an inspector followup. titem (250, 251/81-09-20).

11. Receipt, Storage and Handling of Equipment and Materials (38702)

**References:** 

(a) QP 7.1, Receipt Inspection of Material's, Parts and Components for Operating Plants, Revision 2 dated 8/80

- (b) QP 7.6, Acceptance of Items and Services, Revision 0: dated 10/80
- (c) QP 8.1, Identification and Control of Materials, Parts and Components at the Plant Site, Revision 0 dated 2/79
- (d) QP 13.2, Handling, Storage and Shipping of Materials, Parts and Equipment During Plant Operation, Revision 0 dated 9/74
- (e) QP 15.2, Control of Nonconforming Materials, Parts or Components--Operating Plants, Revision O dated 2/79 ---
- (f) AP 0190.12, Nonconforming Material, Parts or Components, dated 8/80
- (g) AP 0190.72, Receipt Inspection, Identification, and Control of Nuclear Safety-Related and Fire Protection Parts, Materials and Components, dated 8/80
- (h) OS QI 1-S-1, Organization, Revision 1 dated 4/80

- (i) OS QI 2-S-1, Quality Assurance Program, Revision 3 dated. 4/80
- (j) OS QI 6-S-1, Document Control, Revision 1 dated 6/80
- (k) OS QL 7-S-1, Control of Purchased Material, Revision 4 dated 3/79
- (T) OS QL 13-S-1, Handling, Storage and Shipping, Revision 2: dated 3/79
- (m) ASP-9, Turkey Point Backfit Administrative Site Procedure, Material Control, Revision 0 dated 1/81

The inspector reviewed the licensee's program for the receipt, storage and handling of equipment and material with respect to selected elements of the licensee's accepted QA Program. The inspection was to verify that administrative controls had been established for the following areas: receipt 'inspection' of safety-related materials; preparation and retention of required documentation; control of acceptable nonconforming and conditional release items; control of items in storage including levels of storage, identification: of items, inspections, and maintenance; and, control of handling activities. Implementation of the licensee's program was verified by observing the licensee's control of several safety-related items. Based on this review, one violation, three open items and one inspector followup item were identified and are discussed in paragraphs 11.a-11.e.

Failure to Maintain QC Tags With Controlled Material

The Ticensee utilizes a purchasing and materials storage system which a differentiates between those items used for warehouse stock and those items to be used directly by the plant maintenance departments. As such, each maintenance activity at the site has a controlled storage location in which it maintains those QC inspected items. During the inspection of these maintenance storage locations, the inspector observed that the I&C material control cabinet contained several "QC" required" items including Asco valves and Namco switches without the proper identification tag. Reference (f), paragraph 8.3 requires that the QC tag, (denoting material acceptance) remain attached to the controlled material until installation in the plant system. This failure to maintain QC tag on stored equipment is a violation (250, 251/81-09-04). Interviews with I&C personnel revealed that they were unaware of the requirement for the equipment to be tagged while in storage. These items were stored in a secured cabinet with only QC inspected items inside; therefore, no loss of quality material storage control was identified.

Strengthen Access Requirements to Warehouse

Regulatory Guide 1.38, committed to by the licensee, endorses ANSI N45.2.2-1972. Paragraph 6.2.1 of this Standard requires that access to storage areas shall be limited only to personnel designated by the

responsible organization. The inspector determined by interviews with stores personnel that access to the operating stores warehouse was limited only to stores personnel during normal duty hours but this information was not provided to non-stores personnel. A method for off-hour access has been previously documented. The licensee gave a target date of June 1, 1981 for documenting by procedure change and/or warehouse sign, the access requirements for the operating stores .warehouse. Until reviewed by the NRC, this area is identified as an open item (250, 251/81-09-09).

# c. Clarify Use of Hold and Reject Tags

Reference (e) requires that nonconforming items be controlled by tags, documentation or marking to preclude inadvertent use. Reference (f) refers to the use of a Hold Tag which is to be used for the entirenonconforming period, either until the problem is resolved or the item is shipped back to the supplier. References (k) and (l) refer to a Reject Tag which is to replace the Hold Tag when a determination is made that a nonconforming item will be returned to the supplier. In practice, the former method is utilized and meets inspection requirements. The licensee gave a target date of June 1, 1981 for revising the Operating Stores QIs to agree with Reference (f) in this area. Until reviewed by the NRC, this area is identified as an open item (250, 251/81-09-10).

## d: Conduct Study to Widen Scope of Shelf Life Program

The inspector noted that several items identified on the Westinghouse. Spare Parts Report (SPIN List) had a recommended shelf life and were considered as components of safety-related equipment. At present, References (k) and (l) address a shelf life program for "QC Required" material, but not for items identified in a lower quality level. The inspector did not identify any item which exceeded its standard shelflife. The licensee gave a target date of January 1, 1982 for conducting a study of less than "QC Required" items for inclusion into the shelf life program, and for developing and initiating implementation of the program. Until reviewed by the NRC, this area is identified as an open item (250, 251/81-09-11).

e. Storage of Items at Construction Warehouse

During an inspection of the new site construction warehouse, the inspector noted that several QC Required 600 pound gate valves were being stored outside and, although they were plastic covered, several appeared to have moisture on the surfaces. The warehouse supervisor stated that his operation was in process of relocation and these valves were in process of moving from one warehouse to another, and had been temporarily stored outside. The valves were immediately brought inside and satisfactorily QC inspected. The inspector verified that these valves were only temporarily stored outside during transit and not damaged. The site construction warehouse will be reinspected during a subsequent inspection. This area is identified as inspector followup item (250, 251/81-09-14).

12. Records (39701)

#### References:

(a) Units 3 and 4 Master Record Index

- (b) QP 17.1, The Collection and Storage of Quality Assurance Records for Nuclear Power Plants, Revision 6 dated 10/80
- (c) AP 0190.14, Document Control and Quality Assurance Records, dated 8/80
- (d) QI 17 QAD 2, Control and Storage of QAD Quality Assurance Records, dated 6/77
- (e) QI 17 CRD 1, QI for Storage and Maintenance of Quality Assurance Records, Revision 0 dated 11/79

The inspector reviewed various administrative procedures and quality instructions to verify that provisions had been made to maintain various types of quality records, in both permanent and temporary storage, and that responsibilities had been assigned to carry out the records storage requirements. Records storage procedures were also reviewed to ensure that they described the storage facilities, the filing systems used, and methods of receipt, handling and disposal of the records. In order to verify implementation of these procedures, the inspector selected several plant work. orders, purchase orders, operating procedures, surveillances and radiographs to verify indexing, retrievability and storage. Based on this review, two violations and one unresolved item were identified as discussed in paragraphs 12.a-12.c.

a. Failure to Maintain Records Cabinet Locked

During a review of the satellite, temporary record storage locations, the inspector observed that on April 8, 1981 the Health Physics temporary records cabinet located in the HP trailer was open with no HP personnel in the trailer and with the trailer unlocked. Reference (c) paragraph 8.2.6.4 requires that record custodians shall keep record cabinets locked when not in use. This failure to follow procedure by not securing the HP cabinet is a violation (250, 251/81-09-03). The inspector noted that the trailer was in process of being relocated and would; under normal operations, have HP personnel in residence with authorized access to the record cabinet.

b. Failure to Maintain Receipt Documentation for Recorder Charts

The document control section utilizes reference (c) to conduct the records handling operation at the site. This procedure documents the use of a receipt control system but does not require that the system be

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completely implemented. The inspector observed that a record transmittal system is being used for all received records except recorder charts. These charts are received from the operations personnel and are placed directly in storage containers which are arranged on a completion-month system. No record, log or transmittal maintenance system is being utilized to identify the different charts received and placed into storage. Regulatory Guide 1.88, Revision 2, committed to by the licensee, endorses ANSI N45.2.9-1974. Paragraph 4.3 of this Standard requires that a receipt control system include a record of quality assurance records received. Reference (b) implements the FP&L operations quality records program. Paragraph 5.2.2 of reference (b) requires that a log of QA records received be included in the receipt control system and that the maintenance of QA record transmittals is an. acceptable log. This failure to follow Reference (b) by not maintaining a record of recorder charts received is a violation (250, 251/81-09-02).

# c. Perform Record Fire Protection Evaluation

At present, several 1-hour fire protection cabinets are located at the site and at the general office for the purpose of quality records. storage. Reference (b), paragraph 5.3.b, describes conditions under which 1-hour fire rated cabinets may be used and addresses the requirement that only a "small quantity" of combustible materials be located. in the fire area. This paragraph is based on the commitment to Regulatory Guide 1.88, Revision 2, which authorizes use of NFPA 232-1975 for record storage fire protection requirements. Section 543 of this code provides the necessary method for fire protection requirement determination for both fire resistant and non-fire resistant buildings and also provides the quantification for the "small quantity" of combustibles allowed. No documented evaluations have been conducted in accordance' with the NFPA Code to justify the use of these cabinets in the various Also, complete evaluation to Section 543 has not been locations. conducted for the general office record storage area. This item is unresolved (250,251/81-09-06) pending the following actions: licensee conducting evaluations of the 1-hour cabinet locations at both the site and the general office; completing the evaluation of the general office quality record storage area; and, developing a program to insure proper storage as fire protection conditions change.

# 13. Document Control (39702)

#### References:

- (a) QP 6.4, FPL Drawing Control, Revision 1 dated 8/79
- (b) QP 6.5, PTP Drawing Control, Revision 1 dated 8/79
- (c) QP 6.2, Control of Documents Issued by FP&L, Revision 2 dated 11/77
- (d) AP 0103.10, Using Plant Drawings, dated 8/78 ·
- (e) AP 0190.14, Document Control and Quality Assurance Records, dated 8/80

The inspector reviewed the referenced procedures to verify that proper controls have been established for drawings, vendor technical manuals, technical specifications, FSARs and procedures affecting quality. In particular the inspector selected several documents to verify the proper handling per the applicable procedures, to verify the accuracy of the master index for the various documents and to verify the proper updating of controlled drawings and other documents. The selected documents reviewed were the following:

#### Procedures

## Vendor Manuals

FSAR, Unit 3 Technical Specifications, Unit 3 AP 0190.14 MP 0707.8 MP 0731 MP 1407.7 MP 4107.3 EP 20003 EP 20126 E&L Instruction, ST-101 Crane Motor Operated Gate Valve Westinghouse Model L-106B

Drawings.

5610-E9 5610-M-3-65, SHT 1 5610-E-25, SHT 4 5610-M-311, SHT 219

Based on this review, one open item and one inspector followup item were identified and are discussed in paragraphs 13.a and 13.b.

## a. Clarify Use of Controlled Drawings to Plant Personnel

The inspector noted that the drawing control task force, addressed in paragraphs 8.a and 13.b, had set a January 1982 date for the updating of the plant drawings. Interviews conducted revealed that no interim method exists to inform plant drawing users that the entire plant drawing system is suspect during the task force updating period, and what precautions to take when using the drawings. The licensee gave a target date of June 1, 1981 to provide this guidance to plant personnel. Until reviewed by the NRC, this lack of an interim system is identified as an open item (250,251/81-09-12).

#### b. Annotating PC/M Changes to Drawings

During a review of the controlled drawing distribution system, the inspector observed that, of 4 drawings selected with PC/M changes annotated on the plant files aperture card, three satellite controlled locations were missing PC/M changer stickers from three drawings as follows: 5610-E-25, sht. 4, PC/M 80-12, I&C; 5610-M-311, sht. 219, PC/M 79-83&84, Control Room; 5610-M-3-65, sht. 1, PC/M 79-83&84, Mechanical Maintenance. Since the drawing control task group has identified that it will develop a procedure to adequately control the revising and/or annotating of drawings, this item is not considered a

failure to control drawings but is combined with the item discussed in paragraph 8.a to collectively constitute an inspector followup item (250, 251/81-09-13) pending the task force completion of the drawing control project, and the subsequent NRC review of the results.

14. Offsite Review Committee (40701)

References:

(a) Technical Specifications, Section 6.5.2

(b) Florida Power and Light Company Nuclear Review Board Operating Procedure, Revision 5 dated 11/80

The inspector reviewed the referenced documents and verified the following aspects of CNRB activities:

 Board membership and qualifications are as required by Technical Specifications

- Board meetings were held at the frequency required by Technical Specifications
- Members participating in reviews constituted a quorum and possessed expertise in areas reviewed
- Activities being reviewed were in accordance with the Technical Specifications.

The inspector reviewed CNRB meeting minutes from January 1980 thru March 1981 to verify implementation of the previously stated aspects.

Based on this review, two inspector followup items were identified and are discussed in paragraphs 14.a and b.

a. Conduct of Ad-Hoc Subcommittee Reporting to CNRB

CNRB minutes 177, 179 and 183 discuss the formation of an ad-hoc subcommittee to review the results of QA audits, NRC inspections, FRG and PNSC meeting minutes, reportable occurrences, site annual reports and selected PC/Ms. Presentation of the results of reviews of the listed subjects is scheduled for May 1980. Site audit QAO-PTP-81-03-338, conducted 3/9/81, identified that PNSC minutes were not being distributed as required. Discussions with the CNRB secretary and an alternate member of the CNRB identified that distribution of PNSC minutes has not been performed since April 1980. Technical Specification 6.5.2.7 requires that the CNRB shall review reports and meeting minutes of the PNSC. The formation of this ad-hoc committee, with quarterly reports to the CNRB, is intended to fulfill this function. Until the subcommittee completes its review of the listed subjects and reports to the CNRB the results of its findings, this item is identified as inspector followup item 250, 251/81-09-17. b. CNRB Personnel Titles Not Consistent With Technical Specifications

Technical Specification 6.5.2.2 details the composition of the CNRB. Reference (b), Section 4.1.1 also details the composition of the CNRB. Due to organizational changes some of the titles of personnel in Reference (b) are not consistent with the Technical Specifications. CNRB meeting 185. approved the organizational and job title changes to the Technical Specifications. Until the Technical Specifications and reference (b) reflect the same organizational requirements for CNRB members, this item is identified as inspector followup item: 250, 251/81-09-13.

15. Audit and Audit Implementation (40702, 40704)

References:

- (a) TQR 18.0, Audits, Revision 2 dated 6/77
- (b) TQR 16.0, Corrective Action, Revision 2 dated 9/80.
- (c) QP'18.1, Conduct of Quality Assurance Department Quality Audits, Revision 4 dated 10/80
- (d) QP 18.2, Scheduling of Quality Assurance Department Audit Activities, Revision 7 dated 3/79
- (e) QP 16.1, Corrective Action, Revision 2 dated 10/79
- (f) QP 15.2, Control of Nonconforming Material, Parts or Components for Operating Plants, Revisior 0 dated 7/76
- (g) QP 16.4, Evaluating and Reporting of Defects and Nonconformances for Substantial Safety Hazards, in Accordance with 10 CFR Part 21, Revision 1 dated 6/80
- (h) QP 2.5, Quality Assurance Indoctrination and Training, Revision 2 dated 3/76
- (i) QP 2.9, Qualification of QA Audit, QC Inspection and Construction Test Personnel, Revision 2 dated 8/80
- (j) QI-18-QAD-1, Audit Program Plans and Schedules, Revision 1 dated 7/76
- (k) QI-18-QAD-2, Auditing of the Quality Assurance Committee Company Nuclear Review Board and the Quality Assurance Department, Revision 0 dated: 1/81

The inspector verified that the developed audit program meets the requirements of the accepted QA Program and ANSI N45.2.12 (Draft 3, Revision 4 -1974) as committed to by that Program. The inspector verified the following aspects of the audit program:

- The scope of the audit program has been defined and is consistent with technical specification requirements.
- Responsibilities have been defined for personnel qualifications, training, independence, determination of corrective actions, issuance of audit reports, periodic review of the audit program, preparation of audit schedules and followup of audit findings

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Methods define taking corrective actions when deficiencies are identified during audits

Audited organizations respond in writing to audit findings

Distribution requirements are delineated for audit reports and corrective actions

Audits are performed using approved checklists.

To verify implementation of the previously stated aspects of the audit program, the inspector reviewed 12 activity audits and 15 management audits. The specific audits reviewed are listed below:

Activity Audits	Date
QAO-PTP-80-01-274 QAO-PTP-80-02-280 QAO-PTP-80-05-293 QAO-PTP-80-04-291 QAO-PTP-80-05-294 QAO-PTP-80-06-301 QAO-PTP-80-09-309 QAO-PTP-80-10-312' QAO-PTP-80-10-313 QAO-PTP-81-01-328 QAO-PTP-81-01-328 QAE-DC-80-1	1/16/80: 2/5/80 5/2/80 4/15/80 5/7/80 6/24/80 9/2/80 10/7/80 10/1/80 1/8/81 1/15/81 7/18/80.
Management Audits	Date
QAO-PTP-80-02-282. QAO-PTP-80-06-296 QAO-PTP-80-08-308 QAO-PTP-80-10-314 QAO-PTP-80-12-325 QAO-PTP-80-11-317 QAE-QAD-80-1 QAE-QAD-81-1 QAE-QAD-81-1 QAE-IDA-80-1 QAE-IDA-80-3 QAE-ENV-80-2 QAS-GE-80-1 QAE-NAN-80-1 QAE-PM-80-1	2/22/80 - 3/10/80 6/9-10/80 8/25/80 - 10/27/80 11/12-26/80 12/15/80 - 1/15/81 10/1/80 - 11/25/80 2/11-15/80 2/9-12/80 3/10-28/80 9/22/80 - 3/24/81 12/15-31/80 1/19-27/80 8/4-25/80 7/18/80 - 8/20/80 8/5-19/80

During the review of activity audit QAE-DC-80-1 the inspector identified that no preaudit conference had been held. Of the audits reviewed, this was the only example of failure to conduct a preaudit conference. No citation is issued since this is considered an isolated example.

The inspector reviewed the training and qualifications of 46 personnel in the Quality Assurance Department on site and at the general offices.

Based on this review, one inspector followup item was identified. 10 CFR 50.59(2)(b) requires in part that the licensee submit to the NRC annually or at such shorter intervals as specified in the license, a report containing a brief description of changes, test and experiments, including a summary of the safety evaluation of each. Audit QAO-PTP-80-10-314 identified that this report had not been submitted for the reporting period from 7/1/78 to 6/30/79. Until this report is submitted, this item is identified as inspector followup item 250, 251/81-09-16.

## 16. Offsite Support (40703)

References:

- (a) Technical Specifications, Section 6
  - (b) ANSI N18.7-1972 Administrative Controls for Nuclear Power Plants
  - (c) ANSI N18.1-1971 Selection and Training of Nuclear Power Plant Personnel
  - (d) EPP-AP1.1, Mission, Revision 0 dated 6/78
  - (e) EPP-AP1.2, Assignment of Department Responsibilities and Delineation of Interfaces, Revision 4 dated 1/81
  - (f) EPP-TG 2.2, QA Indoctrination Reference Guide, Revision 0 dated 1/81
  - (g) QP 2.5, Quality Assurance Indoctrination and Training, Revision 2 dated 3/76

The inspector reviewed the offsite support organization described in reference (a). The inspector reviewed the following aspects: delineation of the responsibilities, authority and lines of communication for personnel performing offsite support functions; conformance of procedures for performing offsite support activities with the accepted QA Program; qualifications of offsite personnel including records; and QA audits of the offsite support functions.

The inspector reviewed various EPP procedures including references (b) through (g) and the QA training and indoctrination programs for supervisory and non-supervisory personnel in the support organization. Twelve training records (three supervisors and seven non-supervisors) were reviewed as part of this inspection effort.

Based on this review, no violations or deviations were identified.

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## 18. Nonlicensed Personnel Training (41700)

References:

- (a) QP 2.5, Quality Assurance Indoctrination and Training, Revision 2 dated 3/76
- (b) Technical Specifications, Section 6.0
- (c) AP 0304, Plant Training, dated 5/77
- (d) AP 0305; Emergency Team Training, dated 11/80
- (e) AP 0306, New Employee Indoctrination and Orientation, dated 12/80
- (f) AP 11550.81, Health Physics Training HP-81, dated 10/80

The inspector reviewed the training program which provides the required training for the facility staff personnel. This program was reviewed to verify that: the program complies with commitments contained in references (a) through (f) above; the program covers training in the areas of administrative controls and procedures, radiological health and safety, industrial safety, security procedures, emergency plan and quality assurance training, fire fighting training, and pre-natal radiation exposure training for females; and, audits are conducted by the licensee in the areas of general employee training. The inspector reviewed approximately 20 training records and interviewed 10 individuals (3 licensed and 7 non-licensed).

Based on this review one open item and one inspector followup item were identified and are discussed in paragraphs 17.a and 17.b.

a. Conflicting Procedure Requirements in AP 0304

Reference (c), Section 8.5.1, requires that all FPL employees shall receive training and retraining in industrial safety. Section 8.5.4 appears to relax this requirement in that this section states all personnel should attend the industrial safety training. Of the training records reviewed, all personnel had received the required training. The licensee gave a target date of June 1, 1981 for revising this procedure. This item will be carried as an open item until the procedure has been revised to clarify this apparent conflict and reviewed by the NRC (250,251/81-09-08).

b. Maintaining Records of Training and Verifying Health Physics Retraining

Reference (c) requires that documented evidence of quality assurance training and indoctrination be retained as QA records and that these records shall be retained in Document Control. A review of training records for various plant personnel indicates few training records of non-licensed personnel exist in Document Control prior to October 1980.

Records of personnel training of new employees and retraining since October 1980 were in accordance with reference (c). In addition, a review of approximately 20 Health Physics requalification training records identified two people that had not received retraining within 30 months as required. A discussion with the HP Administrative Supervisor identified that these two people had not had their red security badges withheld as required by the HP retraining program. The HP Supervisor conducted an independent survey of the remaining requalification certifications, which is approximately 5000 personnel, and found 9 additional people lacked retraining. The HP Administrative Supervisor informed security to withhold the red security badges for these 11 people until they had performed the required retraining.

This item will be carried as an inspector followup item pending a subsequent review during a future inspection of non-licensed personnel training records (250, 251/81-09-15).

# 18. Regualification Training (41701)

**References:** 

- (a) AP 0301, Licensed Operator Requalification Program, dated 7/80
- AP 0301, Licensed Operator Requalification Program, (b) dated 3/78
- AP 0304, Plant Training, dated 5/77 (c)
- QP 2.5, Quality Assurance Indoctrination and Training, (d) Revision 2 dated 3/76 Technical Specification Section 6.0
- (e)
- Letter to P. Collins from R. Uhrig dated July 10, 1980, (f) Serial No. PTP-TRNG-80-021; Subject - Revision of AP 0301 dated July 9, 1980 (Reference (a) above)

The inspector reviewed the Operator Requalification Program as described in reference (a). Reference (a) is not at this time an NRC approved program. This program was: forwarded to NRC for review and approval by reference (f) and was implemented by FP&L at that time. A discussion by telephone between the inspector and P. Collins, NRR:OLB determined that reference (a) is the appropriate document that should be used to review the existing retraining program. In addition to reference (a), references (c) through (e) were used to evaluate this program. The following areas were reviewed: retraining conducted in 1980 and 1981; annual written examinations and the individuals' responses; documentation of attendance at requalification lectures; documentation of required control manipulations; and the records of six licensed operators. Additionally, the inspector interviewed three operators to verify that the training records reflected the actual training received.

Based on this review, no violations or deviations were identified.

Housekeeping/Cleanliness Program (54701) 19.

References:

(a) QP 2.8, Cleanliness Control Methods, Revision 3 dated 8/80

QP 2.10, Housekeeping Operating Plants, Revision 0 dated (b) 9/80

- (c) AP 190.10, Cleaning of Nuclear Safety-Related Systems and Components (Mechanical), dated 5/80
- (d) AP 190.19, Control of Maintenance on Nuclear Safety-Related and Fire Protection Systems, dated 8/80

The inspector reviewed the licensee's housekeeping and cleanliness program described in references (a) through (d) to verify that the licensee is implementing adequate controls to assure that the quality of safety-related systems is not degraded. Based on this review, one open item was identified. References (c) and (d) both contain a reference to Procedure AP 190.68, Cleaning of Nuclear Safety-Related Electrical and Electronic Components (Electrical). This procedure has not been issued at this time. Presently, reference (c) covers mechanical cleaning and individual Plant Work Orders cover electrical cleaning. The licensee gave a target date of June 1, 1981 to change these procedures. This item will be tracked as an open item pending changes to referenced procedures which delete the referenced unissued document (250,251/81-09-07).

20. Licensee Action on Previously Identified Inspection Items

(Closed) Open Item (250,251/79-16-03): Training in response to IE Bulletins 79-06 and 79-06A:

- a. Administer a quiz to all licensed operators on the training received in response to IE Bulletins 79-06 and 79-06A. The inspector reviewed licensed operator training records that included quiz results of testing given on IE Bulletin 79-06 and 79-06A training.
- b. Conduct a corporate QA audit on operator training given in response to IE Bulletins 79-06 and 79-06A by July 31, 1979. The inspector reviewed QA audit QAO-PTP-79-07-245, Audit of Training Presented for IE Bulletins 79-06 and 79-06A, issued July 23, 1979.
- c. All bulletin training is to be factored into the licensed operator requalification program. This is a continuing program. The Training Supervisor has developed a program to review IE Bulletins with the instructors and with the licensed operators.

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