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

Report No.: 50-348/78-27

Docket No.: 50-348

License No.: NPF-2

Licensee: Alabama Power Company
Post Office Box 2641
Birmingham, Alabama 35271

Facility Name: Farley Unit 1

Inspection at: Farley Site, Ashford, Alabama and
Corporate Offices in Birmingham, Alabama

Inspection conducted: October 2-6, 1978

Inspector: W. A. Ruhlman
M. C. Ashenden
H. D. Jenkins
J. A. McDonald, Jr.

Accompanying Personnel: A. K. Hardin (Exit Only)

Approved by: P. J. Kellogg, Chief — 11/28/78 Date
Nuclear Support Section No. 2
Reactor Operations and Nuclear Support Branch

Inspection Summary

Inspection on October 2-6: (Report No. 50-348/78-27)
Areas Inspected: Routine, announced inspection of quality assurance audits, procurement and procurement document control, accessible areas during a plant tour, design changes/modifications, and quality assurance records and document control. The inspection involved 118 inspector-hours on-site and at the corporate offices by four (4) regional office based inspectors.
Results: Of the five areas inspected, no items of noncompliance were identified in two areas. Four apparent items of noncompliance were identified in three areas (infraction-failure to take and/or report timely corrective action-paragraph 2b; deficiency-failure to follow procedure AP-4-paragraph 5.c.; deficiency-lack of a submittal plan for turnover of design documents-paragraph 6.a; and, deficiency-lack of control over controlled documents-paragraph 6.c).

DETAILS I

Prepared by:

W. A. Ruhlman, Operations Inspector — Date 11/28/78
Nuclear Support Section No. 2
Reactor Operations and Nuclear
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M. C. Ashenden, Operations Inspector — Date 11/27/78
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H. D. Jenkins, Operations Inspector — Date 11/27/78
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J. A. McDonald, Jr.,
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Nuclear Support Section No. 2
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Support Branch

Inspection Conducted: October 2-6, 1978

Reviewed by:

P. J. Kellogg, Chief — Date 11/29/78
Nuclear Support Section No. 2
Reactor Operations and Nuclear
Support Branch

1. Persons Contacted

Alabama Power Company

L. Bailey, Operations Quality Assurance Engineer
C. Biddinger, Manager-Corporate Quality Assurance
J. Campbell, Manager-Operations Quality Assurance
W. Carr, Operations Quality Assurance Engineer
D. Cox, Quality Assurance Engineer
L. Enfinger, Document Control Superintendent
T. Epps, Engineer-Production
W. Hairston, Plant Manager
R. Hill, Plant Quality Assurance Engineer
L. Jones, IV, Storekeeper

J. Kale, Quality Assurance Engineer
O. Kinglsey, Jr., Assistant Manager - Nuclear Generation
H. McClellan, Technical Services Engineer
R. McDonald, Vice President - Power Supply Services
J. Simms, Production Nuclear Engineer
H. Thrash, Manager - Nuclear Generation
D. Verner, Production Nuclear Engineer
J. Woodward, Assistant Plant Manager
F. Wurster, Quality Assurance Engineer

The inspectors also talked with and interviewed several other licensee employees, including members of the operations, technical and plan services staff and clerical and office personnel.

With the exception of R. McDonald and L. Jones, all persons contacted were attendees at either the site or corporate offices exit interview.

2. Quality Assurance Audits

References:
(a) QQA-AP-01, QQA Organization, Revision 8 dated 4/78
(b) QQA-AP-05, Audit Coverage Planning, Revision 9 dated 7/78
(c) QQA-AP-06, Audit Implementation, Revision 8 dated 4/78
(d) QQA-AP-09, Corrective Action, Revision 8 dated 4/78
(e) QQAD-WP-21, Spot Auditing (Generalized), Revision 1 dated 5/77
(f) QQAD-WP-25, Audit of PQAE Activities, Revision 0 undated.

a. Program Review

The referenced documents were reviewed with respect to the licensee's accepted Quality Assurance Program as delineated in Chapter 17 of the FSAR and with respect to the requirements of ANSI N45.2.12, Draft 3, Revision 4 as committed to by that Program.

ANSI N45.2.12, Draft 3, Revision 4, requires (Section 3.4.2) that applicable elements of the quality assurance program be audited at least annually. The QQA Policy Manual (Section 18.4.3.c(4)(5)(6)) and Paragraphs 4.1.d., e. and f. of reference (b) allow up to 2 years to conduct some audit functions. However, for all areas reviewed, no audits had been conducted at more than a 12-month interval.

Section 4.3.2.6 of the Standard requires that any nonconformances (safety and/or quality) requiring immediate corrective actions be immediately brought to the attention of management of the audited organization. Paragraph 8.0 of reference (c) requires such action only when the item is of such significance that plant safety may be in jeopardy prior to the post audit conference. However, during discussions with plant Quality Assurance Engineers, quality (not necessarily safety) problems were postulated by the inspector. In each case, the QAE stated that these problems would have been brought to the attention of the audited organization even without the specific procedural requirement to do so.

An evaluation statement regarding the effectiveness of the quality assurance program elements which were audited is a specific requirement of Section 4.4.4 for inclusion in the audit report according to ANSI N45.2.12. The licensee uses a form (pages A-1 and A-2 of reference (c)) which has a section titled "Evaluations". The body of the procedure gives no instructions on how this section is to be filled out. The evaluation consists of the identification of the last equivalent audit, if any; blanks to be filled in with the number of noncompliances on the last audit and on the current audit; and, a choice of three (3) words (increasing, decreasing, or indeterminate) to complete the sentence: "Trend since last equivalent audit in significance of individual noncompliances:." Since this form will not require an "evaluation" on the first audit of an area, the requirement of the Standard will not always be fulfilled. This is especially true since no option is given in filling out this area. However, on some audits reviewed, the QAE had made an additional statement of evaluation.

Some significant changes exist between the draft ANSI N45.2.12 and the issued Standard. The Manager of Operational Quality Assurance (MOQA) stated that the commitment in the accepted Program might be revised at some future date after licensing of Farley Unit 2. He also indicated that the procedures might be changed to meet the current commitment if a change is not considered desirable. He stated that procedure changes would be made in a timely manner but that a change in commitments would not be made until after Unit 2 was licensed. This item will remain unresolved pending a review during a subsequent NRC inspection (348/78-27-01).

b. Audit Review

The inspector reviewed completed reports for biweekly, spot, 4-month, and vendor audits conducted by both plant and corporate office quality assurance personnel for the period from issuance

of the operating license (June 1977) until August 30, 1978. The review was to verify that these audits were conducted in accordance with written procedures/checklists, by trained personnel not having direct responsibility in the area being audited, with the results documented and reviewed by the managers responsible for the audit area and by those directing the QA program, with followup action including reaudit taken as required, with a frequency required by the accepted QA Program, and with timely corrective action taken and reported.

The inspector noted that Corrective Action Reports (CAR's) require approval of the Manager of Nuclear Generation. A small percentage of these items required up to five (5) months to receive this approval. There was no specific guidance in either the accepted Program or the implementing procedures with respect to this approval process. This item may be reviewed during a future inspection to determine if such guidance should be developed.

10 CFR 50, Appendix B, Criterion XVI requires timely corrective action for audit findings. The licensee's accepted Quality Assurance Program (FSAR Chapter 17) Section 17.2.16 requires that an Administrative Procedure be written to assure that adverse quality conditions are promptly identified and corrected. The Program also states that the requirements of ANSI N45.2.12, Draft 3, Revision 4 will be implemented. Both the written Administrative Procedure (reference (d)) and the Standard (Section 4.5.1) required that corrective action be completed within 30 days of notification of the condition and that a reply so stating shall be made within the same period. When the corrective actions cannot be completed within 30 days, the response shall include an explanation of the circumstances and a schedule date for completion. On three (3) of the audits reviewed, corrective actions were not completed and/or reported within 68 days, 89 days and 119 days, respectively, for audits of the Nuclear Generation Section and two vendors.

These three (3) examples of failures to take and/or report timely corrective actions, collectively, constitute an item of noncompliance (348/78-27-02).

3. Procurement and Procurement Document Control

References:
(a) FMP-0-AP9, Procurement and Procurement Document Control. Revision 7 dated 7/78.
(b) FNP-0-AP20, Receipt inspection. Revision 3 dated 2/78.
(c) FNP-0-AP21, Identification and Control of Materials, Parts and Components. Revision 3 dated 11/77.

(d) FNP-0-AP22, Non-Conformance Control/Deficiency Reporting. Revision 2 dated 9/77.
(e) FNP-0-AP23, Handling, Storage and Shipping Materials, Components, and Equipment. Revision 1 dated 11/77.

a. Program Review

The referenced documents were reviewed with respect to the Quality Assurance Program as delineated in Chapter 17 of the FSAR and with respect to the requirement of ANSI N45.2.13-1976 as committed to by that Program.

In reviewing the QA controls applied to consumables/expendables items (e.g. lubricants, chemicals, resins, welding rods, gaskets, "0" rings, packing, nuclear fuel, and gases) the inspector discovered they were not under the licensee's current QA program. The inspector conducted a random review of the licensee's control and usage of these items. Grease, snubber fluid, welding rod, and boric acid were selected and reviewed during a plant tour on-site. The inspector found no safety degrading problems or practices.

The licensee stated that consumable/expendable items would be reviewed to determine which items could affect safety-related functions of safety-related systems, structures, and components. He further stated that the items determined by this review would be placed under the QA Program controls to the degree required to ensure that safety was not degraded. A target date of February 1, 1979, was given for completion of this action.

Until the review has been completed and controls have been implemented, this item (348/78-27-03) is unresolved.

b. Procurement Review

The inspector reviewed the purchased components, materials and supplies used for safety-related functions to verify they were in conformance with approved quality assurance program and implementing procedures. The systems selected for review were: reactivity control and power distribution, instrumentation, and plant and electrical power systems. The records were reviewed to ensure the document contained proper approval and that the quality control inspections and records requirements were met.

The inspector confirmed by direct observation that spare parts and materials selected from the systems mentioned above were identified in accordance with procedures. Items that did not meet the acceptance criteria were stored separately and had

appropriate hold or reject tags. Two unresolved items were identified as discussed in paragraphs 3.c and 3.d below.

c. Limited Shelf Life Items

The supply system in use by the plant has no procedure or system to prevent the issuance of items whose shelf life has expired. An example is diaphrams for valves that have a designated shelf life of six (6) years. Due to the newness of the plant and the relatively long shelf life of the items selected by the inspector, there was little probability of the issuance of an outdated limited shelf life item at this time.

Acknowledging the inspector's concern the licensee stated that a review would be conducted to examine the extent the supply system is affected, and controls to prevent the issuing of outdated limited shelf life items would be established and implemented. A tentative date of February 1, 1979, was given to establish and implement controls.

Until the review has been completed and controls established and implemented, this item (348/78-27-04) is unresolved.

d. Inventory Control

Section 8 of FNP-0-AP21 addresses inventory control and states in part, that the Traveling Requisition card shall be used for the reorder of an item when its quantity falls below the predetermined reorder point. Contrary to this, a source range detector assembly was not reordered; but was awaiting renewal parts to be rebuilt. Neither the inventory control card nor the Traveling Requisition card indicated this fact.

The licensee stated the procedure would be reviewed and revised by January 1, 1979 to contain instruction on the reordering of assemblies or components that were subject to rebuilding versus replacement.

Until the procedure is revised, implemented and reviewed to ensure inventory level is controlled, this item (348/78-27-05) is unresolved.

4. Plant Tour

An initial plant tour was conducted on October 2, 1978, while the plant was in cold shutdown condition. Several areas were pointed out to the accompanying Quality Assurance Engineer (e.g. oil and debris

under a diesel generator skid; rags lying about in the cable spreading room; and several fire doors which were open). It was noted that clean-up work was in process in the cable spreading room.

The same areas were reinspected on October 4, 1978, during plant startup. The inspector found that all areas previously in need of attention had been corrected.

The inspector reviewed the jumper control log in view of the fact that a diesel output breaker had failed to close during a partial retest of a surveillance procedure. The licensee had indicated that an improperly terminated jumper caused the failure. The review of the jumper control system concerning Unit 1 and Unit 2 interface indicated that lifted wires were tagged and logged. However, if the clearance called for both lifted wires and jumpers to be installed, the installed jumpers would not be tagged.

The Plant Manager indicated a review of the jumper control system was forthcoming and should be completed and implemented to ensure all jumpers were identified by January 1, 1979.

In further discussion with the Plant Manager several methods of effective jumper control were discussed such as color of jumpers and a log of jumpers by cabinet or panels. Until the final review is completed and additional controls, if any, are implemented, this item (348/78-27-06), is unresolved.

5. Design Changes/Modifications

References:
(a) AP-8 Design Modification Control, Revision 2, dated 10/77.
(b) AP-8 Design Modification Control, Revision 3, dated 7/78.
(c) AP-4 Control of Plant Documents and Records, Revision 2, dated 8/77.
(d) GO-PNS-11 Design Change and Design Control, Revision 3, dated 8/78.

a. Program Review

The referenced documents were reviewed with respect to the licensee's accepted Quality Assurance Program as delineated in Chapter 17 of the FSAR and with respect to the requirements of ANSI N45.2.11 as stipulated in Regulatory Guide 1.64, Revision 1, dated February 1975 as committed to by that Program.

The inspector found that reference (a) did not meet the procedural requirements of the Standard. The following specific items were not addressed as required: specific definitions; comprehensive

design change control process instructions; and, clarification of the safety evaluation. However, reference (D), presently being reviewed at the corporate offices, did appear to meet the procedural requirements of the Standard. The Plant Manager committed to October 15, 1978, as the implementation date for reference (b).

Until reference (b) is reviewed, approved, and implemented, this item (348/78-27-07) is unresolved.

b. Design Change Review

The inspector selected and reviewed the records of the design changes listed below and interviewed three (3) persons within the Technical Support Staff to verify, as applicable, that: design changes were reviewed and accomplished in accordance with 10 CFR50.59 and the licensee's QA program requirements; code requirements and specifications were included; acceptance tests to include acceptance values and standards were documented; records of equipment performance were reviewed and accepted; and, drawings/prints and operating procedures were revised. The modifications reviewed were in the following categories:

- Reactivity Control (PCN 78-151)
- Instrumentation (PCN 78-009, PCN 78-056, PCN 78-220)
- Reactor Coolant System (PCN 78-006)
- Emergency Core Cooling System (PCN 78-221)
- Containment Systems (PCN 78-030, PCN 78-187)
- Plant and Electrical Power Systems (PCN 78-020, PCN 78-199, PCN 78-044)

This inspection disclosed an item of noncompliance and three (3) unresolved items which are documented in paragraphs 5.c., 5.d., 5.e., and 5.f.

c. Failure to Revise Drawings

The inspector reviewed three (3) PCN's which required drawing revisions. Specific drawings were:

(1) P & ID (D-175073), Main Feedwater System, Revision 6
(2) P & ID (D-170807), Air Start System for Diesel Generators 1c and 2c, Revisions 3 and 2 respectively, and
(3) P & ID (D-170806), Air Start System for Diesel Generators 1A and 2A, Revision 1.

Each drawing for the above related system was required to be annotated with its respective in-force PCN. There was no annotation on Control Room drawings as required by reference (c).

Technical Specification 6.8.1a requires that administrative procedures be established, implemented, and maintained. AP-4, "Control of Plant Documents and Records", requires (Section 8.7.2) that FCR's and CN's which are outstanding in the particular revision being issued shall be logged in on the status block of the affected drawing. Of the samples of three (3) drawings available, all Control Room drawings lacked the required annotation. The maintenance of drawing revisions in Document Control was proper; the Control Room drawings were the only source of improperly annotated drawings.

These three (3) examples of failure to follow procedure AP-4, collectively constitute an item of noncompliance (348/78-27-08).

d. Design Change Status Record

Section 6.8 of reference (b) requires that Document Control shall log PCN numbers, design organization identification, action approval (approved or denied), and date of receipt. No such log was maintained by Document Control. However, there did exist a compilation of data on each PCN. The data did not include such items as design organization identification and action approval. An additional log was maintained by the Technical Staff which allowed retrieval of all required information. The Plant Manager committed to December 1, 1978, as the date for implementation of said status log.

Until the licensee collates the required information and maintains it in the log specified by reference (b), this item (348/78-27-09) is unresolved.

e. Safety Evaluations

The inspector examined the aforementioned PCN's for consistency of each safety evaluation as it related to the requirements of 10 CFR 50.59 and the licensee's Technical Specifications. Two (2) changes involving apparent safety-related systems and one change of a system described in the FSAR were found which did not receive the required 10 CFR 50.59 and PORC reviews. Discussion with the Plant Manager regarding incomplete safety evaulations yielded a policy statement by which he informed the inspector that reviews were initiated on all changes of safety-related structures, systems and components, as well as those systems described in the FSAR. Particular attention was made regarding the requirements of 10 CFR 50.59 and the necessity for safety evaluation of FSAR related changes. In that some changes are obviously not related to FSAR or safety-related systems, the Plant Manager agreed to revise reference (b) to specify that all changes of safety-related structures, systems and components and

FSAR related systems would receive a thorough evaluation. December 1, 1978, was the commitment date given by the Plant Manager to effect said revision of AP-8.

Until the licensee's procedure is changed to require a safety evaluation for all changes of safety-related structures, systems and components, in addition to each FSAR system change, this item (348/78-27-10) is unresolved.

f. Vendor Manual and Drawing Changes

The inspector reviewed the vendor manual and drawing change procedure with corporate personnel. Upon review of reference (b), it was noted that the subject change procedure detailed therein referenced amplifying information to be found in reference (c). There existed a mechanism in reference (c) by which the licensee could effect such changes; however, there were no manual or drawing changes outstanding. The Plant Manager was informed of this disparity in AP's. He committed to revise reference (c) no later than January 1, 1979.

Until the licensee revises AP-4 to specify the mechanism by which vendor manuals and drawings are changed, this item (348/78-27-11) is unresolved.

6. Quality Assurance Records and Document Control

Reference: AP-04, Control of Plant Documents and Records, Revision 2 dated 8/77.

a. Program Review

The referenced document was reviewed with respect to the licensee's accepted Quality Assurance Program as delineated in Chapter 17 of the FSAR and with respect to the requirements of ANSI N45.2.9-1974 as committed to by that Program.

10 CFR 50, Appendix B, Criterion III requires the establishment of procedures for the release and distribution of documents involving design interfaces. The accepted Quality Assurance Program (FSAR Chapter 17) Section 17.2.17 requires an administrative procedure to develop a method for filing records in accordance with ANSI N45.2.9-1974. ANSI N45.2.9-1974 requires the establishment of a specific submittal plan for quality assurance records by agreement between the purchaser and supplier. Contrary to the above, as of October 4, 1978, neither an agreement nor a specific submittal plan was established for the transfer of design records from the Bechtel Corporation to Alabama Power Company.

This lack of a specific submittal plan by agreement for the transfer of design records constitutes an item of noncompliance (348/78-27-12).

b. Operating Phase Records

The inspector reviewed the licensee' program for the control, storage, retention and retrieval of required operating phase records and documents and verified the licensee's system to detect long term equipment degradation. This inspection disclosed an item of noncompliance and an unresolved item which are documented in paragraphs 6.c. and 6.d. below.

c. Vendor Instruction Manual Distribution/Accountability

The inspector selected seven (7) controlled vendor instruction manuals and reviewed their accountability with respect to the master document index in order to verify the adequacy and implementation of the referenced procedure. These manuals were inspected in the Central File and, as appropriate, in the files and work area of the Mechanical Maintenance Department.

10 CFR 50 Appendix B, Criterion VI, requires the establishment of procedures to control the issuance of documents. The Accepted Quality Assurance Program (FSAR Chapter 17) Section 17.2.6 requires an administrative procedure to control documents. AP-4, Section 8.1, requires official copies of controlled documents to be issued to authorized holders and to be maintained current. AP-4, Section 8.3, requires each copy of Class B documents (which includes vendor instruction manuals) to be serialized.

Contrary to the above, one copy of Component Cooling Water Pump Manual (U168870) was in the possession of the Mechanical Maintenance Department, but not controlled by sign-out from the Central Files. Additionally, another copy of the same Component Cooling Water Pump Manual was not serialized.

These two instances of lack of control of controlled documents, collectively, constitute an item of noncompliance (348/78-27-13).

d. Vendor Instruction Manual Revisions

The inspector selected seven (7) controlled vendor instruction manuals and reviewed their current revision status with respect to the master document index to verify the adequacy and implementation of the referenced procedure. These manuals were inspected in the Central File and, as appropriate, in the files and work area of the Mechanical Maintenance Department.

One copy of the Part Length Control Rod Manual (U167827, Serial No. 001) did not reflect that current Revision D was entered. The current revision status page was separated from the manual. The Document Control Supervisor stated that a procedure change would be made by January 1, 1979, to improve control/consistency of entering revision status in vendor instruction manuals.

Until the licensee issues and implements procedures to improve control/consistency of entering revision status in vendor instruction manuals, this item (348/78-27-14) is unresolved.

e. Operating Records Review

The inspector selected the following sets of records for inspection to verify the licensee's system to control, store, retain, and retrieve operating records in accordance with the referenced procedure:

The inspector selected the following six (6) operating logs and surveillance records:

(1) Reactor Power History Daily Log (1 December 77 - 31 December 77)

(2) Steam Generator 1A PT-474, 1B PT-484, 1C PT-494, Loop Calibration and Functional Test, Procedure STP-213.10A (May 77)

(3) LP Cold Leg Temperature Wide Range Strip Chart (June 78)

(4) Boron Concentration Determination of an Accumulator, Procedure STP-417 (May 78)

(5) Iodine Determination in Charcoal Samples of Plant Vent Stack Releases, Procedure STP-522 (June 78)

(6) Auxiliary Building Battery Quarterly Verification, Procedure STP-605.4 (June 78)

The inspector selected ten (10) controlled distribution drawings and compared the issued drawings in the Control Room and in the Mechanical Maintenance Department, as appropriate, with the master drawing index.

The inspector selected sixteen (16) changes made in the operating procedures. The Central File record copies were verified based upon the effective revision in the master instruction file.

Collectively, the inspector reviewed the records listed below at various times during the completion of other aspects of this inspection:

(7) Audit reports listed in paragraph 2

(8) Procurement records listed in paragraph 3

(9) Modification records listed in paragraph 5.

The inspector identified no items of noncompliance or deviations.

f. Operations and Equipment Trend Analysis

The inspector interviewed the Mechanical Maintenance Supervisor to determine if the licensee had a system or method to detect long term equipment degradation. He described his actions of monitoring operating logs and maintenance items to identify and evaluate trends and to initiate corrective action on problems which could lead to long term equipment degradation.

The inspector identified no items of noncompliance or deviations.

7. Unresolved Items

Unresolved items are matters about which more information or more time is needed to ascertain whether the items are acceptable, items of noncompliance, or deviations. Unresolved items disclosed during the inspection are discussed in paragraphs 2.a., 3.a., 3.c., 3.d., 4., 5.a., 5.d., 5.e., 5.f., and 6.d.

8. Exit Interviews

The inspectors met with the licensee representatives (listed in Paragraph 1) at the conclusion of the site inspection portion of October 4, 1978, and at the conclusion of the corporate offices portion on October 6, 1978. The Plant Manager was informed by telephone of the additional findings made at the corporate offices prior to the corporate offices exit. Certain corporate managers were informed of the results of the site inspection during a special meeting held near the beginning of the corporate offices portion of the inspection. At each exit, the inspectors summarized the scope and purpose of the inspection and the findings. With respect to the item of noncompliance for failure to take/report timely corrective action, the MOQA stated that he felt corrective actions were actually completed prior to receiving the reports. With respect to the item of noncompliance for lack of an agreement/plan for the transfer of design documents, the Manager of Nuclear Generation stated that negotiations were in progress and that the required contract and plan should be finalized in the

very near future. With respect to the item of noncompliance for failure to control vendor instruction manuals, the inspector stated that immediate corrective action had been completed and verified prior to the exit interview. The Plant Manager acknowledged the item of noncompliance with regard to updating drawings following a PCN without comment. The completion dates documented for the unresolved items in paragraphs 3.c., 3.d., 4., 5.a., 5.d., 5.e., 5.f., and 6.d were affirmed by the Plant Manager.

The completion dates documented in Paragraphs 2.a., and 3.a., were affirmed by the Managers at the corporate offices. With respect to unresolved items 348/78-27-01 (Paragraph 2.a.), the inspector noted the long lead time given for resolution and stated that even though not included in the licensee's implementing procedures, all requirements included in the licensee's committment to ANSI N45.2.12 would be inspected and enforced by the NRC. The MOQA acknowledged the inspector's statement and affirmed that the licensee intended to comply with all commitments made in the accepted Quality Assurance Program.