DUKE POWER COMPANY
P.O. BOX 33189
CHARLOTTE, N.C. 28242

HAL B. TUCKER
VICE PRESIDENT
NUCLEAR PRODUCTION

TELEPHONE
(704) 373-4531

October 10, 1989

U. S. Nuclear Regulatory Commission
Document Control Desk
Washington, D.C. 20555

Subject: Catawba Nuclear Station
Docket Nos. 50-413 and 50-414
NRC Inspection Report Nos. 50-413, 414/89-09
Reply to Inspector Follow-up Items

Gentlemen:

Enclosed is the response to Inspector Follow-up Items identified in Inspection Report 50-413, 414/89-09 issued July 10, 1989 by Albert F. Gibson.

Very truly yours,

Hal B. Tucker

Hal B. Tucker

WRC76/lcs

xc: Mr. S. D. Ebneter
Regional Administrator
Region II
101 Marietta Street, NW, Suite 2900
Atlanta, Georgia 30323

Mr. W. T. Orders
NRC Resident Inspector
Catawba Nuclear Station

IE01
1/1

bxc: R. C. Futrell
R. G. Morgan
R. M. Glover
R. L. Gill, Jr.
T. D. Curtis - ONS
R. O. Sharpe - MNS
F. G. Hudson
E. M. Parris
N. A. Rutherford
W. R. Cross
Mgr. QA T/S - EC12A
NRC Coord QA T/S - EC12A
NCMPA-1
NCEMC
PMPA
SREC
CN-815.01 (89-09)

DUKE POWER COMPANY

REPLY TO A WEAKNESS (IFI)
413, 414/89-09-03

Controls on the thermal power computer and its inputs are weak. This computer is used for normal determination of plant power level and for adjusting the gain on the nuclear instruments. (Paragraph 2.b)

RESPONSE:

1. Corrective Actions Taken and Results Achieved.

   The Unit 1 procedure used to perform a check of the computer inputs to the thermal power calculation was added to the Catawba Periodic Test (CPT) test tracking program. This was a committed action.

2. Corrective Actions to be Taken to Avoid Further Incidents.

   The Maintenance Management Procedure concerning control of the Standing Work Request program will be revised to ensure that the cognizant System Experts receive notification of any instrumentation that will exceed its normal calibration frequency. This is a committed action.

3. Date of Full Compliance.

   Duke Power will be in full compliance by December 1, 1989.

DUKE POWER COMPANY

REPLY TO A WEAKNESS (IFI)
413, 414/89-09-04

One 10CFR50.59 Evaluation was weak concerning a modification to the nuclear service water pit strainer instrumentation. Annunciators described in the FSAR were disabled for about 30 days with no written consideration of compensatory action.

RESPONSE:

1. Corrective Actions Taken and Results Achieved.

   A. A review of the 10CFR50.59 Evaluation was performed and it was determined that even though the RN Pit Screen Hi D/P annunciators were not specifically stated in the 10CFR50.59 Evaluation as being described in the FSAR, it was apparent that the preparer knew this because the FSAR Section 9.2.1, Nuclear Service Water System, was listed as an FSAR Section consulted. It was also decided that the information contained on Page 3 of 3 of the evaluation answered the appropriate questions: Screening for 10CFR50.59 Applicability and Unreviewed Safety Question (USQ) Evaluation. Addressing what compensatory measures will be taken for removing a piece of equipment from service is not a concern of the 10CFR50.59 Evaluation. Any compensatory actions necessary when removing a piece of equipment from service is determined by Operations and would be included in the body of the procedure. The need for compensatory action was listed in the 10CFR50.59 Evaluation for the level of the SNSWP because of the requirement of Tech. Spec. 3/4.7.5. The specific compensatory action was still not specified in the evaluation; instead, it was left up to the operator.

2. Corrective Actions to be Taken to Avoid Further Incidents.

   A. All modifications will be looked at on a case to case basis, but compensatory measures for a piece of equipment being removed from service will not normally be included in the 10CFR50.59 Evaluation.

3. Date of Full Compliance.

   Duke Power is in full compliance now.

REPLY TO A WEAKNESS (IFI)
413, 414/89-09-05

Auxiliary operators on rounds failed to frisk immediately after exiting contaminated areas. (paragraph 2.e)

RESPONSE:

1. Corrective Actions Taken and Results Achieved.

   A. The OSTI review was conducted immediately following refueling outages on Unit #1 and #2. Budget and manpower limitations resulted in a dilution of normal decontamination resources during outages. As a result, approximately 15 Safety Related Pump Rooms were contaminated during the review period.

   The decontamination program at the time of this response has achieved a condition where only three (3) of the Safety Related Pump Rooms are contaminated.

   Station Directive 3.8.3 (Contamination Prevention, Control and Decontamination Responsibilities) was revised August 28, 1989 to simplify the frisking requirements for Operators performing routing surveillances. These changes will create a more efficient work process and contribute to improved compliance.

2. Corrective Actions to be Taken to Avoid Further Incidents.

   A. Since budget and manpower limitations exist, additional management attention can be directed to the particular category of contaminated safety related pump rooms as we assess our status and develop decontamination plans. The Monthly Report documenting contamination status and decontamination efforts/plans will be revised to indicate under "Priority Items" a permanent category of "Contaminated Safety Related Pump Rooms". In addition, the Radiation Protection Monthly Status Report will be revised to indicate a category for "Contaminated Safety Related Pump Rooms".

   The availability of this information to station management will provide sufficient attention to maintain Safety Related Pump Rooms in acceptable condition to support Operations personnel performing routine inspections.

3. Date of Full Compliance.

The two reports referenced will be revised to include the above changes. Reports published after September 30, 1989 will be in this new format.

DUKE POWER COMPANY

REPLY TO A WEAKNESS (IFI)
413, 414/89-09-06

Control of doors was weak, as indicated by the three open fire doors or security doors found by the team. (paragraph 2.g.)

RESPONSE:

1. Corrective Actions Taken and Results Achieved.

   A. Upon notification of the problem with the door to the diesel generator room (AX302) maintenance personnel replaced the automatic closer and replaced the weather stripping which was preventing the door from completely closing.

   The problem with the door on the Unit 1 side of the control room was created when the tile in the corridor leading to the control room was replaced with new, thicker tile. Work request #001593MES has been written to correct this problem by removing the tile and grinding down a high spot on the concrete beneath the tile.

   The door at the entrance to the IAE office area is a non-committed fire door (i.e., this door is in a non-vital area, but designated as a fire door to prevent property damage). The Safety section at Catawba has received permission from the insurance carrier for Catawba to allow the doors in this area to remain open when personnel are in the area.

2. Corrective Actions to be Taken to Prevent Further Incidents.

   A. All members of Radiation Protection are in a position to be involved in incidents which cause a Security or Fire Door to fail to perform an intended function. In addition, all members of Radiation Protection are in a position due to proximity to many of these doors, to identify problems which have previously gone undetected. A package identifying this weakness and requesting Radiation Protection personnel be sensitive to this problem during their work activities has been prepared and distributed to Radiation Protection Supervision for presentation to all employees. Presentations will be completed by September 30, 1989.

B. A preventative maintenance program is being established to inspect and maintain all doors in the auxiliary building on a periodic basis; the doors leading to the diesel generator rooms will be inspected and necessary maintenance performed quarterly. This should eliminate mechanical problems associated with these doors. This program will be in place by November 1, 1989.

C. To prevent creating situations that cause doors to drag, all NPD maintenance personnel and Construction and Maintenance Department personnel associated with installation of flooring materials will be cautioned to assure that door operation is not impaired. This action will be complete by November 1, 1989.

D. All non-committed fire doors are being marked with permanent signs. Any doors which are not required to be maintained in a closed position will also be marked with permanent signs to indicate this condition and avoid any confusion. This action will be completed by March 1, 1990.

3. Date of Full Compliance

A. The Maintenance Section will be in full compliance by March 1, 1990.

B. The Radiation Protection Section will be in full compliance by September 30, 1989.

DUKE POWER COMPANY

REPLY TO A WEAKNESS (IFI)
50-413,414/89-09-07

In the Independent Verification and Safety Tag procedures, three items of potential improvement are identified. (paragraph 2.i)

RESPONSE:

1. Corrective Action Taken and Results Achieved

   A. Based on operator knowledge of the independent verification process and its intent combined with our past record of minimal errors, we believe the efficiency of operation out weights the effectiveness of the recommended practice. No corrective action will be taken.

   B. Verification of valve position by remote indication satisfies the requirements of independent verification and also accomplishes the job with respect to dose ALARA. Operators are trained to be alert to signs of material degradation of components whenever they are observed. Based on current operating practices we do not believe that the remote verification of valve position constitutes a deficiency. No corrective action will be taken.

   C. Plant procedures will be revised to direct the operator to include on the Removal and Restoration tagout sheet (R&R), in addition to the isolation boundary valves, the valve on which maintenance is actually being performed. All other valves inside the boundary remain in the position required by their operating procedure. Change from this required position must be documented on the R&R sheet.

2. Corrective Action to be Taken to Avoid Further Incidents

   A. Corrective action stated in item 1 shall resolve the recognized deficiency with no further action required.

3. Date of Full Compliance

   Duke Power will be in full compliance by December 1, 1989.

DUKE POWER COMPANY

REPLY TO A WEAKNESS (IFI)
413,414/89-09-08

Several deficiencies were noted during observation of a performance test on one of the Containment Spray pumps (paragraph 2.m.).

1. No Section 2.0 reference for the KF system.

2. Momentary lack of adequate miniflo during throttling process.

3. Significant digit mismatch between acceptance criteria and available data.

4. Poor communication between remote location of throttle valve and meter that reads flow.

5. Instrument 1NSTH5010 broken with an incorrect laminate tag. Also, NS Pump 1B motor covers were either loose or missing.

RESPONSE:

1. Corrective Actions Taken and Results Achieved.

   A. Item 1 will be resolved by eliminating all valve lineup references to KF valves on the subject procedure and the other three NS pump procedures. KF101B and KF103A valves on both units are not required to perform an IWP test on these pumps.

   B. Item 2 will be resolved by noting throttle valve positions for each NS pump after flow has been setup. This information will be used to accurately determine the "Required Initial Test Position" in both the periodic test procedure lineups as well as the Operations' OPs.

   C. Even though the accuracy specified in the procedure (i.e. to a tenth of a gpm) exceeds that available from the instrument, the acceptance criteria for the test can still be met by reading a value of 615 - 625 gpm which is within the instruments capability. The instrument in question meets the IWP requirement for accuracy. For this reason we feel a change to the procedure is not required at this time.

   D. Item 4 has been evaluated by Performance and determined not to be a significant weakness provided Item 2 is resolved.

E. Item 5a is being followed up and will be resolved with a work request if problem is still outstanding. Item 5b has been resolved by initiating a change to the NS pump procedures. Motor cover removal and replacements will now be performed per these procedures.

2. Corrective Actions to be Taken to Avoid Further Incidents.

A. Normal periodic procedure upgrades should correct similar weaknesses to Item 1 in other procedures if they exist.

B. A review of other IWP procedures revealed no problems similar to Item 2.

C. Not applicable.

D. Not applicable with the resolution of Item 2.

E. Item 5a is not considered a generic problem. No further action deemed necessary. Item 5b: Motor cover removal and replacement on certain IWP tested pumps are now performed per their respective procedures.

3. Date of Full Compliance.

Duke Power will be in full compliance **where deemed** necessary on January 1, 1990. Item 2 cannot be resolved until all the NS pumps are retested. These pumps are tested quarterly.

DUKE POWER COMPANY

REPLY TO A WEAKNESS (IFI)
413, 414/88-09-09

Scaffolding procedures do not address seismic considerations and resultant inoperability of safety equipment. (paragraph 2.r.)

RESPONSE:

1. Corrective Actions Taken and Results Achieved.

   A. A review of existing scaffolds was performed by Design Engineering personnel. No areas of concern relative to installed scaffolds were identified.

   B. The scaffold crew personnel assisted in the review addressed in A above. Through this review, the crew members have become aware of concerns based on seismic considerations.

2. Corrective Actions to be Taken to Avoid Further Incidents.

   A. A guideline is being developed to address the administrative controls and technical details concerning the erection of scaffolds. This guideline is being developed by a team of representatives from various Duke Power departments.

   B. A site specific procedure will be generated to include information from the above guideline and to address seismic considerations in the erection of scaffolds.

3. Date of Full Compliance.

   The date of full compliance will be July 1, 1990.

September 15, 1989

Duke Power Company
Reply to a Weakness (IFI)
413, 414/89-09-10

IAE Maintenance does not use portable equipment to facilitate timely locating of DC ground faults. (paragraph 2.5)

RESPONSE

1. Corrective Action Taken and Results Achieved

   A. A review of the practices for locating DC ground faults was undertaken. The supervisor felt that he was unable to use the portable ground locating equipment because of its sensitivity. This equipment is so sensitive that it picks up noise from surrounding AC circuits, to the point that you can't distinguish the tone received when a ground is present because the noise from surrounding AC circuits is too loud. We have contacted McGuire personnel about the equipment they use that is similar to ours. They have experienced the same problems even after special filters were installed on their tester at the factory. This test equipment is a model 201002 DC ground fault detector made by Electrom Co.

   B. We are actively trying to check for DC ground faults by using other types of test devices that would allow us to test with the circuits energized.

2. Corrective Actions to be Taken to Avoid Further Incidents

   A. We have obtained an additional piece of test equipment that will enable us to test for and locate DC ground faults more efficiently. We feel that we can better locate DC ground faults than with the model 201002 tester.

   B. Our approach will be to ask Operations personnel to de-energize any circuits on the bus that will have no impact on the safe operation of the plant. If the ground still is present, we will then test the active circuits with our tester until the ground is located.

   C. A thorough review of all avenues will be conducted to ensure the most efficient way to locate DC ground faults is used.

3. Date of Full Compliance

This information will be covered with all IAE Supervisors and General Supervisors at Catawba Nuclear Station by October 30, 1989.

DUKE POWER COMPANY

REPLY TO A WEAKNESS (IFI)
50-413,414/89-09-11

There are many significant deviations between the EOPs and the PSTG (Plant Specific Technical Guidelines) where there should be none. This is primarily due to changes being made in the EOPs before being made in the guidance document (PSTG). (paragraph 3 and Appendix B)

RESPONSE:

1. Corrective Action Taken and Results Achieved.

   A plan has been agreed upon between the Safety Analysis section and the station Document Development section to review all the comments in Appendix B listed as PSTG Deviations. The result of this review will be a change to either document so that the difference in guidance is eliminated. Technical Verification of the EOPs, a required step in the Verification and Validation program, will serve as the process by which this plan will be implemented. The Safety Analysis section performs the Technical Verification process. All of the identified deficiencies will be corrected through this review process by 12-31-90.

2. Corrective Action to be Taken to Avoid Further Incidents.

   The Technical Verification process is designed to provide a means by which changes made to the EOPs are verified to be technically correct. Verification of technical correctness may lead to a modification of the PSTG, with appropriate justification, or a rejection of the EOP change as written. This process provides a functional means to ensure the EOPs accurately and consistantly reflect the guidance in PSTG. Sufficient resources and timely efforts will be committed to this process to avoid future inconsistencies between EOPs and PSTG.

3. Date of Full Compliance.

   Duke Power will be in full compliance by December 31, 1990.

DUKE POWER COMPANY

REPLY TO A WEAKNESS (IFI)
50-413, 414/89-09-12

Many technical and human factor discrepancies were identified in the EOPs. Each one is listed (paragraph 3.b. and Appendix B).

RESPONSE:

1. Corrective Action Taken and Results Achieved

   A. A formal process for the inclusion or dismissal of the items listed in Appendix B into the EOPs has been planned, but not implemented. Consideration will be given to each item based on the benefit realized to make the procedure more user friendly or technically correct. To ensure those items deemed beneficial are incorporated into the procedure properly and consistantly, the actual rewrite of the EOPs will follow the publishing of the revised EP/AP Writer's Guide.

   B. AOPs are currently under revision to upgrade them to the current standard for EOPs. The AOP revision took priority over the EOPs based on the request of licensed operators and the inspection team's recommendation. Complete revision of the AOPs to address the items identified by the inspection team will be accomplished after the publishing of the revised EP/AP Writer's Guide.

   C. Discrepancies between PSTG and EOPs will be resolved in the process of Technical Verification of EOPs during the revision to address inspection team concerns.

2. Corrective Action to be Taken to Avoid Further Incidents.

   A. Revising of the EP/AP Writer's Guide will establish a new standard for future EOP/AOP development. The methods for maintaining the standard are already established and well documented by the Verification and Validation (V&V) processes as described in Operations Management Procedures.

   B. AOPs, which were not formally subjected to the V&V process in previous revisions, will be scrutinized under V&V criteria in subsequent revisions.

3. Date of Full Compliance.

   Duke Power will be in full compliance on December 31, 1990.

DUKE POWER COMPANY

REPLY TO A WEAKNESS (IFI)
50-413,414/89-09-13

Many labeling discrepancies between EOPs and panel indication were identified. Each one is listed. (paragraph 3.c and Appendix D)

RESPONSE:

1. Corrective Action Taken and Results Achieved.

   A. Consideration of the labeling discrepancies noted in Appendix D will be accomplished during the revision of the EP/AP Writer's Guide. Control board/panel labeling is not necessarily the nomenclature by which the operator identifies his indication/controls. Based on training and day to day operation, a functional nomenclature has evolved. Guidance provided to the procedure writer in the EP/AP Writer's Guide must allow enough flexibility so that nomenclature familiar to the operator can be used.

   B. Consideration of the labeling discrepancies will also include proposals to change control board/panel labeling so as to more functionally describe the indication/control items.

2. Corrective Action to be Taken to Avoid Further Incidents.

   A. Revising the EP/AP Writer's Guide to establish a standard for referring to indications/and controls and maintaining the standard by the Verification and Validation processes will provide a method of quality control for the EOPs and AOPs.

   B. Control board/panel nomenclature is a controlled item. To change this nomenclature requires approval of management at various levels based on plant configuration control. This process is considered adequate and will not require modification to make changes, deemed necessary, based on this inspection.

3. Date of Full Compliance.

   Duke Power will be in full compliance with our commitment to consider the labeling concerns listed in Appendix D by June 1, 1990. Based on the EP/AP Writer's Guide, those concerns involving only a procedure revision will be completed by Dec 31, 1990. For those items of concern requiring Control Board/panel labeling modification, the full compliance date will coincide with the end of the respective unit refueling outage in 1991; 1EOC5 and 2EOC4.

DUKE POWER COMPANY

REPLY TO A WEAKNESS
50-413,414/89-09-14

There is a discrepancy between the EOPs and the S/G pressure meter in the control room (paragraph 3.c and Appendix B item 1.g.)

RESPONSE:

1. Corrective Actions Taken and Results Achieved.

   The marking of the S/G steam pressure gauges has been addressed by origination of work requests 432120PS and 511720PS (Unit 2 and Unit 1 respectively). The ranges, which depict abnormal conditions for normal at power operation, have been specified. The corrective action will redesignate the lower red range on each S/G pressure meter starting at 725 psig (Low S/G Steam Pressure SI setpoint) and ending at 0 PSIG on the scale. This work requires removal of the meter from the control board and thus has not been completed with the units at operating temperature and pressure.

2. Corrective Actions to be Taken to Avoid Further incidents.

   The red range marking of control panel meters is a functional process and considered an operator aid, when performed correctly. Individual responsibility for this process has been reassigned to better utilize our personnel resources and assure the process functions as intended.

3. Date of Full Compliance.

   Duke Power will be in full compliance by the end of the next scheduled refueling outage 1EOC-4, 2EOC3 (Unit 1, Unit 2 respectively) 1990.

DUKE POWER COMPANY

REPLY TO A WEAKNESS (IFI)
50-413,414/89-09-15

Many writer's guide discrepancies were identified in the EOPs. Each one is listed (paragraph 3.c. and Appendix C).

RESPONSE:

1. Corrective Action Taken and Results Achieved.

   A. A decision has been made to revise the EP/AP Writer's Guide. Based on the comments of the inspection team, it is evident that more detailed guidance should be provided to the EOP and AOP writer.

   B. Many of the discrepancies noted in Appendices B, C and D can only be addressed after decisive guidance is established in the EP/AP Writer's Guide. Thus revisions to the EOPs and AOPs will be made based on the revised EP/AP Writer's Guide and comments deemed appropriate from reports 50-413,414/89-09.

2. Corrective Actions to be Taken to Avoid Further Incidents.

   A. The current processes of Verification and Validation (V&V) provide an efficient and adequate means of assuring EOPs conform to written guidance. No corrective action is necessary.

   B. AOPs will be subjected to the V&V processes to assure conformity with written guidance and compatibility with operational experience.

3. Date of Full Compliance.

   Duke Power will be in full compliance with regard to the EP/AP Writer's Guide by June 1, 1989 and, with regard to the revised EOPs and AOPs, by December 31, 1990.

DUKE POWER COMPANY

REPLY TO A WEAKNESS (IFI)
50-413,414/89-09-16

Noise level in the control room during auto-start of both ventilation trains during S/I response is excessive (paragraph 3c).

RESPONSE:

1. Corrective Action Taken and Results Achieved.

   A design study has been initiated to review the problem with excessive noise in the Control Room due to the operation of the ventilation system. A test will be performed to determine noise levels for various configurations of the ventilation system. Based on the test results a resolution of the problem will be proposed to management for corrective action.

2. Corrective Action to be Taken to Avoid Further Incidents.

   Corrective action taken, based on proposals by the design study stated in item 1, should resolve the recognized deficiency with no further action required.

3. Date of Full Compliance.

   Date of full compliance is dependant on the complexity of the proposed corrective action. Duke Power will have a proposal for corrective action by December 31, 1989.

DUKE POWER COMPANY

REPLY TO A WEAKNESS (IFI)
50-413,414/89-09-17

Deficiencies were identified in simulator effectiveness in training on EOPs (paragraph 3.d).

RESPONSE:

1. Corrective Action Taken and Results Achieved.

   A. The concurrent use of AOPs is justifiable based on the quantity and control of resources available during a multi-failure scenario. By conscientious decision the Shift Supervisor may use more than one AOP at a time. This is allowed since the AOPs are written to provide various options to stabilize the plant after a particular malfunction. We do not consider this a deficiency.

   B. The EOP/AOP filing methods will be reviewed to determine whether an identification and retrieval problem exists for Control Room personnel. The deficiency noted was based on the observation of a staff person's performance. Appropriate corrective action will be taken, if required.

   C. Entry conditions for EOP/AOPs will be reviewed in conjunction with the review of procedures for other deficiencies noted in this report. The EOP/AOPs will be revised as deemed necessary.

2. Corrective Actions to be Taken to Avoid Further Incidents.

   A. Discrepancies discussed in Item 1, with exception of 1.c., are not expected to recur . Thus surveillance programs, to monitor for the repetition of the discrepancy, are not required.

   B. The EP/AP Writer's Guide and the Verification and Validation processes will ensure that future revisions to EOP/AOP entry conditions are written to an established standard.

3. Date of Full Compliance:

   Duke Power will be in full compliance for the following corrective actions as listed:

   - EOP/AOP filing method review - January 2, 1990
   - EOP/AOP entry condition review - December 31, 1990

DUKE POWER COMPANY

REPLY TO A WEAKNESS (IFI)
413, 414/89-09-18

Weakness noted in the site's ETQS (Employee Training and Qualification System, paragraph 4.a.).

RESPONSE:

1. Corrective Actions Taken and Results Achieved.

   A. The new Mechanical Maintenance ETQS program is still being developed. We are working with McGuire, Oconee and the training organization to finalize all aspects of the new program. The task rewrite is approximately 95% complete. The continuing training plan is being developed by Production Training Services (PTS), with input from the stations and changeover qualification from old tasks to new tasks should be started by November 1, 1989. We will not begin our communication to all personnel until the program is finalized.

2. Corrective Actions to be Taken to Avoid Further Incidents.

   A. The new program is scheduled to be implemented by January 1, 1990.

   B. We will communicate, through crew meetings, the requirements of the new program to all Mechanical Maintenance Personnel.

3. Date of Full Compliance.

   The communication to personnel will be completed by March 1, 1990.

DUKE POWER COMPANY

REPLY TO A WEAKNESS (IFI)
413, 414/89-09-19

There are approximately 131 temporary modifications in effect on site. Some date back as far as 3 or 4 years.

RESPONSE:

1. Corrective Actions Taken and Results Achieved.

   In 1986 Catawba Nuclear Station had approximately 320 TSM's installed. At that time a working group was formed to identify who was responsible for each TSM and what it would require to clear them. Most of the older TSM's which are installed have required modifications to be originated to clear them. The Station Directive (4.4.5) has been revised several times since 1986 and it is now clear that the Temporary Modification program shall not be used to bypass the normal modification process for changes that are intended to remain permanent.

2. Corrective Actions to be Taken to Avoid Further Incidents

   All TSM's have been reviewed to determine an estimated clearing date and what station group is responsible for clearing the TSM. Approximately fifty percent of the installed TSM's have been identified to clear during the upcoming Unit 1 and Unit 2 outages in 1990. The remaining TSM's are not tied to an outage, but do have a current estimated clearing date.

3. Date of Full Compliance

   Catawba Nuclear Station is in full compliance with this issue at this time. Catawba has significantly reduced the number of TSM's and has an estimated clearing date assigned to all installed TSM's.

   According to the Catawba Nuclear Station Performance Indicators, the station's goal is to maintain the number of TSM's to no more than 60. This is a new indicator which is just beginning to be looked at. Catawba expects to achieve this goal by October 1, 1990.

DUKE POWER COMPANY

REPLY TO A WEAKNESS (IFI)
413, 414/89-09-20

The separate reporting authority and duplication of support functions for the Transmission Group is considered a weakness.

RESPONSE:

Upon review of the report several areas are in need of further explanation. The report states that Transmission has its own procedures, training program, and equipment calibration program which is true. These procedures and programs were all developed specifically to support Transmission and Distribution personnel in performing their assigned work activities at the nuclear stations. Also, these programs and procedures must meet the same requirements as those of other departments and in many cases fall under Nuclear Production Department (NPD) policies and procedures. For example, procedures used by Transmission and Distribution (T&D) personnel at the station are originated by T&D engineering personnel; however, the procedures are the same as any other station procedure and must follow the same station approval process. The only major difference is the originating group.

Training programs for T&D personnel are developed in cooperation with the Production Support Department which also coordinates with other departments in a similiar fashion. These programs are tailored specifically for T&D personnel, and the type of work performed by the department at the station. They may or may not be the same as other departments programs depending on the needs identified.

The equipment calibration program allows T&D personnel to have their equipment calibrated at a central location thereby not having to make special trips to the stations to constantly drop off and pick up equipment. This equipment is used by T&D personnel at other company locations, and the central location offers convenience and efficient service.

The report also focuses on limited resources available to support T&D activities. The amount of resources assigned to any task should be commensurate with the identified need. This approach has been used in each area pertaining to nuclear related activities. Resources for required work are made available on an as needed basis without comparison to resources supplied by other departments and are considered a normal overhead expense associated with nuclear maintenance work.

In summary, the weakness noted by the report is not perceived as a true weakness. First, the fact that separate reporting authority exists does not necessarily indicate that changes to station programs will not be implemented in kind in the T&D Department.

Effective communication, administrative controls, and audit practices help ensure this continuity. Second, the duplication of service in this case is a more efficient and productive way of providing support for T&D personnel performing work at the stations. Procedures are written by engineeering personnel who have the necessary experience with the equipment and the maintenance activities to be performed. Training programs are tailored to specific T&D needs which may be different from those of station personnel. Finally, equipment calibrations are performed at a central location to accommodate T&D personnel that must work at other Duke locations.