

U. S. NUCLEAR REGULATORY COMMISSION  
OFFICE OF INSPECTION AND ENFORCEMENT  
REGION I

IE Inspection Report No: 50-29/76-06 Docket No: 50-29  
Licensee: Yankee Atomic Electric Company License No: DPR-3  
20 Turnpike Road Priority: \_\_\_\_\_  
Westborough, Massachusetts 01581 Category: C  
Safeguards Group: \_\_\_\_\_  
Location: Rowe, Massachusetts  
Type of Licensee: PWR (W) 600 MWt  
Type of Inspection: Routine, Announced, Quality Assurance  
Dates of Inspection: February 9-13, 1976  
Dates of Previous Inspection: January 21, 1976  
Reporting Inspector: J. T. Smith, Jr. DATE 3/4/76  
J. T. Smith, Jr., Reactor Inspector  
Accompanying Inspectors: R. B. Glasscock DATE 3/4/76  
R. B. Glasscock, Reactor Inspector  
D. R. Haverkamp DATE 3/9/76  
D. R. Haverkamp, Reactor Inspector (2/11  
thru 2/13 only)  
W. A. Ruhlman DATE 3/4/76  
W. A. Ruhlman, Reactor Inspector  
Other Accompanying Personnel: None DATE \_\_\_\_\_  
Reviewed By: E. C. McCabe, Jr. DATE 3/12/76  
E. C. McCabe, Jr., Section Chief, Nuclear Support  
Section No. 1, Reactor Operations  
and Nuclear Support Branch

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## SUMMARY OF FINDINGS

### Enforcement Action

#### A. Infraction

Contrary to 10 CFR 20.203(c)(2) requirements to control each entrance or access point to a high radiation area, the access to the high radiation area containing the Waste Holdup and Activity Dilution Delay tanks was neither equipped with the required control devices nor locked during the period August 21, 1975 through February 1, 1976.

The access to this area was properly locked prior to the completion of the inspection. However, a response detailing actions taken or planned to prevent recurrence is needed for this item. (Detail 6.b)

#### B. Deficiencies

1. Contrary to 10 CFR 50, Appendix B, Criterion XVIII and the Operational Quality Assurance Manual, Section V, item XVIII.10 requirements that audit results be documented and reviewed by management having responsibility in the area audited, four of the sixteen audits conducted in 1975 had not been reviewed by the Manager of Operations as required through issuance of Plant Position Reports within the prescribed (AP-0208) 30 day period.

The four Plant Position Reports were generated and forwarded for review prior to completion of the inspection. No additional response is required for this item. (Detail 6.c)

2. Contrary to 10 CFR 50, Appendix B, Criterion XVI and the Operational Quality Assurance Manual, Section V, item XVI.2 requirements that measures be established to assure that conditions adverse to quality be promptly identified and corrected: measures had not been established to assure prompt correction; in that the licensee's prescribed action on his 12/27/74 audit finding that there was an inadequacy in the system for updating the FSAR (FHSR) for design changes or modifications was not resolved as of 2/10/76. (Detail 6.d)

3. Contrary to 10 CFR 50, Appendix B, Criterion II and the Operational Quality Assurance Manual, Section V, item II requirements that the structures, systems and components to be covered by the quality assurance program be identified and that the quality assurance program shall provide control over activities affecting the quality of the identified structures, systems, and components, to an extent consistent with their importance to safety: boron used to control reactivity, and fuel oil used in the emergency diesel are not covered by the quality assurance program. (Detail 8)

Licensee Action on Previously Identified Enforcement Items

The item identified in Detail 3.a of Report 50-29/75-13 was inspected with respect to the licensee's response dated November 18, 1975. While progress toward implementation had been made, the required procedure revision was not completed at this time. The corrective action will be reviewed during a subsequent inspection. (Detail 9)

Unusual Occurrences

None Identified

Design Changes

None Identified

Other Significant Findings

A. Current Findings

1. Acceptable Areas

(These are areas which were inspected on a sampling basis and findings did not include an Item of Noncompliance, Deviation or an Unresolved Item.)

- a. Quality Assurance Program Review. (Detail 2)
- b. Procurement Control. (Detail 4)
- c. Receipt, Storage and Handling of Equipment and Materials. (Detail 5)

Records. (Detail 7)

e. NSARC and PCRC Review. (Detail 11)

f. Nonroutine Event Review. (Detail 12)

2. Unresolved Items

(These are items for which additional information is required to determine if the item is Acceptable, a Deviation or an Item of Noncompliance.)

a. Revision of Procedure OP-3304. (Detail 9)

b. Engineering Drawing Control. (Detail 10)

3. Licensee Identified Item of Noncompliance

(This item was identified by the licensee during the performance of an internal audit for which documentation and initiation of corrective action had been undertaken but not yet completed. Although this item was identified by the inspector in the course of the inspection, due to the licensee's corrective action, no response is required by Region I at this time.)

Deficiency

Contrary to 10 CFR 50, Appendix B, Criteria XI, and Administrative Procedure 0001, Paragraph H, changes were made to installation procedures without obtaining approval of the original designer and the department head. (Detail 3.b)

B. Status of Previously Identified Unresolved Items

The Unresolved Item identified in Detail 9 of Report 50-29/75-13 was inspected. This item is resolved. (Detail 9)

Management Meeting

At the licensee's request a management meeting was conducted to discuss the licensee's concerns regarding the type and details of procedures required to implement the licensee's proposed Quality Assurance Program, which is currently under review by the Division of Reactor Licensing. The meeting attendees were as follows:

Yankee Atomic Electric Company

Mr. J. L. French, Jr., Manager of Operations  
Mr. L. H. Heider, Assistant Vice President  
Mr. E. W. Jackson, Plant Follow Engineer  
Mr. R. L. Martin, Operational Quality Assurance Engineer  
Mr. D. B. Pike, Manager of Operational Quality Assurance  
Mr. E. M. Reid, Plant Follow Engineer

Vermont Yankee Nuclear Power Corporation

Mr. W. F. Conway, Technical Services Supervisor

Management Interviews

A. Entrance Interview

A pre-inspection interview was conducted onsite at the beginning of the inspection on February 9, 1976, with the following licensee personnel in attendance:

Mr. H. A. Autio, Plant Superintendent  
Mr. R. L. Boutwell, Technical Assistant  
Mr. L. X. Bozek, Site Quality Control and Audit Coordinator  
Mr. L. L. Reed, Quality Control and Audit Coordinator  
Mr. J. L. Staub, Technical Assistant to the Plant Superintendent  
Mr. N. N. St. Laurent, Assistant Plant Superintendent

The licensee was requested to identify any unusual operating events since the last inspection. The licensee reported a recent component failure associated with the No. 3 charging pump, which will be the subject of a licensee thirty day report.

During the pre-inspection meeting, the inspector identified the scope and objectives of the inspection.

B. Exit Management Interview

An exit management interview was conducted at the site at the conclusion of the inspection on February 13, 1976 with the following licensee personnel in attendance:

Mr. D. A. Army, Technical Assistant (Maintenance)  
Mr. H. A. Autio, Plant Superintendent  
Mr. R. L. Boutwell, Technical Assistant  
Mr. D. J. Kauppiner, Technical Assistant (Operations)  
Mr. D. B. Pike, Manager of Operational Quality Assurance  
Mr. L. L. Reed, Quality Control and Audit Coordinator  
Mr. J. H. Shippee, Instrument and Control Supervisor  
Mr. N. N. St. Laurent, Assistant Plant Superintendent  
Mr. R. H. Streeter, Storekeeper  
Mr. D. B. Vassar, Assistant Operations Supervisor

The following summarizes the items discussed:

- A. Quality Assurance Program Review. (Detail 2)
- B. Design Changes and Modifications. (Detail 3)
- C. Procurement Control. (Detail 4)
- D. Receipt, Storage and Handling of Equipment and Materials. (Detail 5)
- E. Review and Audits. (Detail 6)
- F. Records. (Detail 7)
- G. Safety Related Materials. (Detail 8)
- H. Report 50-29/75-13. (Detail 9)
- I. Engineering Drawing Control. (Detail 10)
- J. NSARC and PORC Reviews. (Detail 11)
- K. Nonroutine Event Review. (Detail 12)

## DETAILS

### 1. Persons Contacted

#### Yankee Atomic Electric Company

Mr. D. A. Army, Technical Assistant (Maintenance)  
Mr. H. A. Autio, Plant Superintendent  
Mr. R. L. Berry, Training Coordinator  
Mr. W. D. Billings, Chemistry and Health Physics Supervisor  
Mr. R. L. Boutwell, Technical Assistant  
Mr. L. X. Bozek, Site Quality Control and Audit Coordinator  
Mr. H. F. Buchanan, Senior Engineer - Radiation Protection Group  
Mr. R. M. Cooney, Technical Assistant (I&C)  
Mr. R. P. Dobosz, Clerk  
Mr. J. L. French, Jr., Manager of Operations  
Mr. L. H. Heider, Assistant Vice President  
Mr. W. C. Howe, Chief of Security  
Mr. E. W. Jackson, Plant Follow Engineer  
Mr. D. J. Kauppinen, Technical Assistant (Operations)  
Mr. P. E. Laird, Maintenance Supervisor  
Mr. R. L. Martin, Operational Quality Assurance Engineer  
Mr. E. L. May, Engineering Assistant  
Mr. E. A. Miles, Technical Assistant  
Mr. R. M. Mitchell, Operations Technician-Plant Support  
Mr. W. H. Monahan, Administrative Supervisor  
Mr. N. M. Panzarino, Engineer - Radiation Protection Group  
Mr. D. B. Pike, Manager of Operational Quality Assurance  
Mr. S. Racz, Clerk (I&C)  
Mr. L. L. Reed, Quality Control and Audit Coordinator  
Mr. R. E. Reid, Plant Follow Engineer  
Mr. D. A. Rice, Technical Assistant (Chemistry and Health Physics)  
Mr. I. R. Seybold, Plant Health Physicist  
Mr. J. H. Shippee, Instrument and Control Supervisor  
Mr. J. L. Staub, Technical Assistant to the Plant Superintendent  
Mr. N. N. St. Laurent, Assistant Plant Superintendent  
Mr. R. H. Streeter, Storekeeper  
Mr. D. B. Vassar, Assistant Operations Supervisor

#### Vermont Yankee Nuclear Power Corporation

Mr. W. F. Conway, Technical Services Supervisor

2. Quality Assurance Program Review

The inspector reviewed the changes made to the Operational Quality Assurance Plan implementing procedures for the period from 1/1/75 through 1/1/76. The inspector checked, on a sampling basis, for conformance with 10 CFR 50, Appendix B. Through discussions with personnel responsible for the implementation of these changes, the inspector verified that the selected individuals were aware of the changes and were implementing them.

a. Change Summary

The procedures listed below were reviewed:

- (1) AP-0001, PLANT PROCEDURES, Revision 4 dated 6/13/75.
- (2) AP-0002, ABNORMAL OCCURRENCE REPORTS, Revision 3 dated 10/9/75.
- (3) AP-0200, PLANT DESIGN CHANGES, Revision 2 dated 5/16/75.
- (4) AP-0201, PLANT MODIFICATIONS, Revision 4 dated 5/30/75.
- (5) AP-0202, ENGINEERING DESIGN CHANGES, Revision 3 dated 8/15/75.
- (6) AP-0205, MAINTENANCE REQUESTS, Revision 3 dated 8/15/75.
- (7) AP-0208, IN-PLANT AUDITS, Revision 4 dated 10/9/75.
- (8) AP-0210, CONTROL OF SPECIAL PROCESSES, Revision 2 dated 12/10/75.
- (9) AP-0211, MATERIAL AND SERVICE PURCHASE, Revision 4 dated 9/5/75.
- (10) AP-0212, MATERIAL RECEIPT, Revision 4 dated 12/10/75.
- (11) AP-0213, MATERIAL IDENTIFICATION AND CONTROL, Revision 2 dated 6/13/75.
- (12) AP-0214, INSTALLATION AND MAINTENANCE OF SAFETY CLASSIFIED SYSTEMS, COMPONENTS, OR STRUCTURES, Revision 2 dated 4/9/75.



- (13) AP-0215, CONTROL OF MEASURING AND TEST EQUIPMENT, Revision 3 dated 9/5/75.
- (14) AP-0218, PREOPERATIONAL, OPERATIONAL AND SPECIAL TESTS, Revision 2 dated 12/10/75.
- (15) AP-0220, SURVEILLANCE TESTS AND RECORDS, Revision 6 dated 10/17/75.
- (16) AP-0221, QUALITY ASSURANCE RECORDS, Revision 2 dated 5/30/75.
- (17) AP-0222, JOB ORDERS, Revision 1 dated 2/20/75.

Items (3), (5) and (17) were major procedural rewrites; all other items were minor rewrites designed to expand reference lists, include additional items or expand definitions, include currently endorsed ANSI standard practices, clarify methods of handling unusual conditions, and in some cases to expand/ redefine approval mechanism.

The inspector identified no inadequacies in this area.

b. Personal Interviews

During the course of the inspection, the following personnel were interviewed with respect to their understanding and implementation of the selected changes in procedures documented in Detail 2.a above.

- (1) Technical Assistant to the Plant Superintendent.
- (2) Maintenance Supervisor.
- (3) Instrument and Control Supervisor.
- (4) Site Quality Assurance and Audit Coordinator.

The inspector identified no discrepancies in this area.

3. Design Changes and Modifications

a. Design Changes Evaluated

Ten design changes and modifications initiated during 1975 were evaluated for the following:

- (1) Accomplishment in compliance with 10 CFR 50.59.
- (2) Reviewed and approval in accordance with Technical Specifications, established plant procedures, and quality assurance controls.
- (3) Completion in accordance with applicable codes.
- (4) Inspections and test performed to verify conformance with requirements.
- (5) Operating procedures and prints modified as required to reflect the change.

The design changes evaluated are as follows:

<u>Design Change Request</u>	<u>Description</u>
75-21	Add damper on No. 3 charging pump.
75-20	Reconnection of MC flow ( $\Delta P$ ) to system.
75-18	Replace present Rod Position Indication Lamps with LEDS.
75-17	Install a valve at cavity recovery connection to main coolant drain header.
75-11	Primary Auxiliary System Instrumentation Sensing Line upgrading.
75-10	Emergency Diesel, DC Motor Control Circuit UV alarm modification.

<u>Design Change Request</u>	<u>Description</u>
75-6	Shutdown cooling Instrumentation Piping changes.
75-5	S/G NR Level Trip System Modification.
75-2	Raising the S1 Tank (TK-28) Low Level Alarm setpoint.
75-1	Plugging of Flux Mapping Tube H-2 and K-6.

b. Procedure Approval

Contrary to 10 CFR 50, Appendix B, Criterion VI requirements that documents including changes be reviewed for adequacy and approved for release by authorized persons, and to administrative procedure 0001, paragraph H, which requires the concurrence between the original designer and a department head for changes that do not alter the intent: procedure OP-6000.44, as used on change request 75-6, was changed without obtaining the required approvals. It was noted that the revised procedure was approved by two SROs prior to use and reviewed by PORC following completion of the modification. Audit Report 75-7 completed on 12/15/75 also identified procedures which have been changed in a similar manner.

The above licensee identified audit finding indicates a failure to properly review and approve procedures and is a deficiency level Item of Noncompliance for which corrective action has been initiated and no further response is required.

4. Procurement Control

The inspector reviewed the procurement control phase of the Quality Assurance Program with respect to the requirements of 10 CFR 50, Appendix B, Criteria IV and VI and the Operational Quality Assurance Plan implementing procedures.

The following, based upon discussions held with and documentation furnished by licensee personnel, summarizes the inspector's findings.

a. Personnel

Key personnel responsible for the initiation, review and approval of procurement documents were interviewed and indicated that they have ready access to the appropriate procedures and understand their individual responsibilities.

The inspector identified no inadequacies in this area.

b. Procurement Document Control

(1) The following safety-related items were randomly selected as samples for the review described in subparagraph (2), following:

- (a) Stainless Pipe and Fittings (P.O. 202872).
- (b) Rotary Switch (P.O. U-3003).
- (c) Welding Rod (P.O. U-3016).
- (d) Switchboard (P.O. U-30 ).

(2) The procurement documents for the items listed in subparagraph (1), preceding, were reviewed to verify that the following requirements were met.

- (a) The items were purchased from vendors/suppliers that were "qualified" by the licensee.
- (b) Approvals of procurement documents were made in accordance with the licensee's established controls.
- (c) Procurement documents contained requirements for the vendor/supplier to supply appropriate documentation of quality.
- (d) The items selected were positively identified and traced to the procurement documents.

The inspector identified no inadequacies in this area.

5. Receipt, Storage and Handling of Equipment and Materials

The inspector reviewed the receipt, storage and handling of equipment and materials phase of the Quality Assurance Program with respect to the requirements of 10 CFR 50, Appendix B, Criteria II, VII, XIII, XIV, XV and XVII and the Operational Quality Assurance Plan implementing procedures.

The following, based upon discussions held with and documentation furnished by the licensee personnel, summarizes the inspector's findings.

a. Receipt Inspection

A receipt inspector responsible for the receipt inspection of safety-related items was interviewed and demonstrated that he was familiar with AP-0212, "Material Receipt" and AP-0213, "Material Identification and Control."

The inspector identified no inadequacies in this area.

b. Nonconforming Items

(1) The following three safety-related items currently in storage and identified by receiving personnel to be in nonconformance with specified requirements, were randomly selected for the review described in subparagraph (2), following:

- (a) Pressure Flow Transmitter (NCR #75-13).
- (b) Carbon Brushes for M-G Set (NCR #75-14).
- (c) 1300' of #4 Conductor, #9 Cable XLP (NCR #75-19).

(2) The items listed in subparagraph (1) preceding, were reviewed to verify that the following administrative controls are being implemented.

- (a) Provisions have been made for marking and segregating nonconforming items.
- (b) Provisions have been made for the disposition of nonconforming items.

- (c) Requirements have been established to prohibit the use of materials or equipment in a "nonconformance" status.
- (d) Provisions have been made for notifying affected organizations of nonconforming items.
- (e) Requirements have been established for the documentation of nonconforming items.

The inspector identified no inadequacies in this area.

c. Storage of Material and Equipment

- (1) The inspector noted that storeroom space was adequate and ample room was available for storeroom activity.
- (2) The inspector verified that provision had been made in the storeroom for temperature controlled ovens to store the weld rods.

The inspector identified no inadequacies in this area.

6. Quality Assurance Audits

The inspector reviewed all audits conducted during the previous year (1975) to verify that they were conducted as follows: in accordance with written procedures/checklists; by trained personnel not having direct responsibility in the area audited; that audit results were documented and reviewed; followup and/or corrective actions were initiated/completed; and, audit frequency was in accordance with the requirements of the licensee's procedure OQA KVIII-2, In Plant Audit Program.

a. Audits Reviewed

The audits listed below were reviewed with respect to the criteria set forth above.

<u>Number</u>	<u>Title</u>	<u>Date(s) Conducted</u>
75-1	Operations	May 28, 1975
75-2	Chemistry	September 17-19, 1975
75-3	Health Physics	August 12-14, 1975
75-4	Security	August 18, 1975
75-5	Training	December 29, 1975
75-6	Maintenance	September 24, 1975
75-7	Plant Changes	December 15, 1975
75-8	Procurement of Materials and Services	November 13, 1975
75-9	Material Control	July 18, 1975
75-10	Nonconformance of Material Installation	July 22, 1975
75-11	Control of Special Processes	October 3, 1975
75-12	Control of Measuring and Test Equipment	May 23, 1975
75-13	Surveillance, Tests	June 20, 1975
75-14	Nuclear Material Control	December 19, 1975
75-15	Reporting Requirements	December 15, 1975
75-16	Document Control	June 26, 1975

With respect to audit conduct, depth, scope, frequency and the qualifications/independence of the auditors, the inspector identified no inadequacies. However, three Items of Noncompliance were found as indicated in Details 6.b, 6.c and 6.d below.

b. Audit 75-3

Finding L.4 of this audit indicated that the access to the high radiation area (greater than 100 mr/hr) containing the Waste Holdup and Activity Dilution Delay tanks was not locked. As indicated above this audit was conducted August 12-14, 1975. The audit report was issued documenting this finding on August 21, 1975. When the inspector did an inspection of this access point on February 10, 1976, the access was not locked. The licensee stated that the area had not been locked since the issuance of the audit report on August 21, 1975. 10 CFR 20.203 (c)(?) requires that each entrance or access point to a high radiation area either be equipped with control devices or to be locked, except during periods of access. This failure to provide the required controls or lock is an Infraction level Item of Noncompliance.

Within twenty minutes after review by the inspector, the required lock had been installed. Although the action taken was satisfactory, the response for this item should detail the steps taken or planned to prevent recurrence of known, readily correctable noncompliances not being corrected for extended periods of time.

c. Audits 75-5, 75-7, 75-14 and 75-15

The title and date conducted for each of the referenced audits is shown in Detail 6.a preceeding. The audit reports were issued as follows: 75-5 issued 1/2/76; 75-7 issued 12/23/75; 75-14 issued 12/29/75; and 75-15 issued 12/18/75.

10 CFR 50, Appendix B, Criterion XVIII requires in part that: "Audit results shall be documented and reviewed by management having responsibility in the area audited." The licensee's Operational Quality Assurance Plan states in part in Section V, item XVIII.10 that: "Audit results shall be reviewed by management having responsibility in the area audited." 10 CFR 50, Appendix B, Criterion V, requires that activities affecting quality be accomplished in accordance with prescribed instructions and procedures.

The licensee has delineated a system for handling audit report (AR) findings, formulating positions (Plant Position Reports - PPR's) at the plant level for correction, and then forwarding those recommendations for review by the Manager of Operations (MOO) who then directs the actions to be taken. These actions are returned to the plant in a MOO Implementation Directive (ID). These systems are delineated in plant procedure AP-0208, IN PLANT AUDITS, and Operational Quality Control and Audit Department procedure OQA-XVIII-2, IN PLANT AUDIT PROGRAM. The Technical Assistant to the Plant Superintendent (TAPS) prepares the PPR. AP-0208 states, in part, in item 3 of the procedure that: "The PPR shall be prepared and submitted within 30 days of receipt of the AR."

Contrary to the above requirements, PPR's for the four referenced audits had not been prepared and submitted as of 2/9/76, exceeding the required 30 day period for all four audits. This failure to provide management review within the prescribed time-frame is a Deficiency level Item of Noncompliance with 10 CFR 50, Appendix B, Criterion XVIII.



The licensee detailed the unusually heavy workload for the TAPS during January 1976. In addition, all four PPR's were prepared and issued prior to the completion of the inspection. The inspector also observed that all four audit reports were issued within a two week time period thus requiring the four corresponding PPR's to be issued in a two week time period.

No additional response is required for this item at this time.

d. Audit 74-16-A

The referenced audit report documented an inadequacy in the system of design control/change implementation with respect to updating the FSAR (FHSR) pages following a system modification. The PPR, in answer to this audit report issued 12/27/74, stated that a procedure (WE-100B) would prescribe that Operations Engineering would either revise the FSAR (FHSR) directly or provide the contents of the needed revision to the plant. The revised procedure had not been issued to complete the corrective action as of 2/10/76, over one year after issuance of the audit report finding.

10 CFR 50, Appendix B, Criterion XVI requires in part: "Measures shall be established to assure that conditions adverse to quality...are promptly identified and corrected." The Operational Quality Assurance Plan, Section V, item XVI.2 states: "Measures shall be established to assure that conditions are corrected." This failure to establish measures to assure that corrective actions are completed is a Deficiency level Item of Noncompliance.

Other examples of failures to take corrective action include the following audit report findings which were unresolved/incomplete for the time periods indicated.

- (1) Lack of training schedules for Chemistry and Health Physics Training, identified originally in Audit Report 74-03-A issued October 16, 1974 and uncorrected after 15½ months.
- (2) Issuance of a Chemistry Department QA Program as the corrective action for six inadequacies identified during audit 75-2 (9/29/75) was specified in the PPR for completion of the procedural description on 11/15/75 and for implementation on 1/1/76. Neither procedure issuance (though one procedure had been written and rejected by PORC) or implementation was effected as of February 10, 1976.

- (3) Lack of control of a high radiation area as previously documented in Detail 6.b of this report was an uncorrected audit finding for seven months.

The response to this Item of Noncompliance should detail the measures to be established to assure that corrective actions are completed in a timely manner (immediately when conditions warrant). Provisions for modifying completion dates when justified are appropriate to such measures.

7. Records

The inspector requested the records listed below to verify that the licensee's program for control, storage, retention and retrieval of records met the requirements of Criterion XVII of 10 CFR 50, Appendix B, the Technical Specifications, and AP-0221, "Quality Assurance Records."

a. Records Selected

- (1) PORC Minutes.
- (2) NSARC Minutes and Reports.
- (3) NRC Inspection Reports.
- (4) Changes to Technical Specifications.
- (5) Inservice Inspection.
- (6) Maintenance Requests.
- (7) Plant Design Changes.
- (8) Engineering Design Changes.
- (9) Plant Information Reports.
- (10) Westboro NSD Directives.
- (11) Nonconformance Reports.
- (12) Special Tests.

(13) Plant Monthly Reports.

(14) Semi-Annual Operating Report.

In each case, the record requested by the inspector was made available by the licensee.

The inspector had no further questions in the Records area.

8. Safety-Related Materials

A review of the list of safety-related items covered by the quality assurance program indicates that boric acid used in the reactor and safety systems and fuel oil used in the emergency diesels were not included. During a review of the controls applied to these items it was determined that all incoming shipments of boric acid are analyzed in accordance with procedure DP-9113, which appeared adequate to determine the acceptability of the material. There is no procedure for analysis of the fuel oil (except for water content) prior to unloading into the plant storage tanks.

Failure to designate the materials involved as safety-related makes inapplicable the administration controls which require establishment, adherence to, and controlled modification of measures which determine the initial suitability for use of such materials. This is contrary to 10 CFR 50 Appendix B, Criterion II and the Operational Quality Assurance Manual, Section V, item II requirements that the structures, systems and components to be covered by the quality assurance program be identified and that the quality assurance program provide control over activities affecting the quality of the identified structures, systems and components to an extent consistent with their importance to safety.

This is a Deficiency.

9. Report 50-29/75-13

Detail 9 of the referenced report indicated that the completion/issuance of a referenced Fire Fighting Procedure and the implementation of training for that procedure was an Unresolved Item. The required procedure, OP-3017, FIRE EMERGENCY, was approved/issued on February 12, 1976. The training for plant personnel with respect to fire fighting had been scheduled. This item is resolved.

The licensee's response to the Item of Noncompliance set forth in Detail 3.a of the referenced report stated that procedure OP-3304 would be revised to require recording of the date of the oldest cannister on the inventory checklist. The inspector reviewed the latest completed inventory checklist and noted that the date of the oldest cannister was recorded. However, procedure OP-3304 had not yet been revised to make the recording of this date a requirement. This item will be reviewed during a subsequent inspection.

10. Engineering Drawing Control

The inspector reviewed the engineering drawing control phase of the Quality Assurance Program with respect to the requirements of 10 CFR 50, Appendix B, Criterion VI and AP-0225, "Plant Drawings."

a. Engineering Drawings Selected

Twenty safety-related drawings were randomly selected from the In Plant Index. The plant and corporate drawings were checked against the Index to determine that they were in agreement. The review produced the following results.

<u>Drawing Number and Revision From In Plant Index</u>	<u>Plant Revision No.</u>	<u>Corp. Engineering Revision No.</u>
(1) 9699-FK-3A Sh. 1 Rev. 2	2	2
(2) 9699-FK-12A Rev. 6	6	6
(3) 9699-FP-1A Sh. Rev. 7	7	7
(4) 9699-FP-2A Sh. 1 Rev. 6	6	6
(5) 9699-FP-42D Sh. 4 Rev. 8	8	8
(6) 9699-FV-1A Rev. 5	5	5
(7) 9699-FV-1X Sh. 1 Rev. 5	5	5
(8) 517F419 Rev. 5	5	Missing
(9) 646J642 Rev. 8	8	Missing
(10) 7246D25 Rev. 3	3	Missing
(11) 517F502 Rev. 12	12	Missing
(12) 549D214 Rev. 10	10	Missing
(13) 549D299 Rev. 8	8	Missing
(14) 673C331 Rev. 4	4	Missing
(15) YE-D-31 Orig.	Orig.	Orig.
(16) YM-B-21 Rev. 1	Missing	1
(17) YM-H-9 Rev. 2	2	2
(18) YM-B-10 Orig.	Missing	Orig.
(19) YM-H-7 Rev. 1	1	1
(20) YM-H-10 Rev. 2	2	2

Contrary to 10 CFR 50, Criterion VI requirement that drawings are distributed to and used at the location where the prescribed activity is performed, of the twenty drawings randomly selected for review, ten percent were missing at the site and thirty-five percent were missing at corporate headquarters.

The licensee stated that drawings are supplied to corporate engineering from the plant on an as-needed basis, thereby eliminating the need for maintaining complete engineering drawing files at corporate engineering. The licensee stated that the two missing plant drawings would be replaced within ten days of this inspection. In addition, the licensee stated that the In Plant Index would be reviewed and any missing plant drawings would be replaced by August 1, 1976. Time limitations prevented detailed review of the procedural controls established over drawings. This area is Unresolved and will be reinspected.

11. NSARC and PORC Reviews

- a. The Nuclear Safety Audit and Review Committee (NSARC) and Plant Operations Review Committee (PORC) review functions were reviewed to verify that:
- (1) All NSARC and PORC meetings convened during 1975 were held at the frequency required by the Technical Specifications;
  - (2) The meeting membership of the NSARC and PORC meetings convened during 1975 satisfied the quorum requirements of the Technical Specifications;
  - (3) Proposed tests and experiments which affect nuclear safety or whose performance may constitute an unreviewed safety question were reviewed as required by the Technical Specifications;
  - (4) Noncompliances with Technical Specifications or rules and regulations were reviewed as required by the Technical Specifications;
  - (5) Proposed changes to Technical Specifications were reviewed as required by the Technical Specifications.

- b. The review included discussions with licensee personnel and review of Technical Specifications and the following plant procedures and records.
  - (1) Operational Quality Assurance Manual.
  - (2) NSARC Charter, 4/18/75.
  - (3) NSARC Meeting Minutes 75-1-S through 75-17-S of 1/13/75 through 12/23/75.
  - (4) AP-0003, Plant Operations Review Committee, dated 2/11/74.
  - (5) Semi-Annual Reports for the periods 7/1/74-12/31/74 and 1/1/75-6/30/75.
  - (6) Technical Specification Proposed Changes 125, 130 and 134.
- c. The inspector identified no discrepancies in this area.

12. Nonroutine Event Review

- a. The licensee's practices and requirements relating to non-routine events were reviewed to verify that responsibilities have been assigned or delegated for the following.
  - (1) Prompt review and evaluation of off-normal operating events to assure identification of safety related events.
  - (2) Prompt review of planned and unplanned maintenance and testing activities to assure identification of noncompliance with the limiting condition for operation requirements of the Technical Specifications.
  - (3) Reporting safety-related operating events internally and to the NRC.
  - (4) Assuring completion of corrective actions relating to safety-related operating events.
- b. The review included discussions with licensee personnel and review of Technical Specifications and the following plant procedures.

- (1) Operational Quality Assurance Manual.
  - (2) AP-0002, Abnormal Occurrence Reports, Rev. 3, dated 10/9/75.
  - (3) AP-0004, Plant Information Reports, Rev. 2, dated 8/15/75.
- c. The inspector identified no discrepancies in non-routine event handling.