

Gilbert/Commonwealth engineers and consultants

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May 20, 1980

United States Nuclear
Regulatory Commission
Region IV
611 Ryan Plaza Drive, Suite 1000
Arlington, Texas 76012

ATTENTION: Mr. U. Potapovs

RE: Docket No. 99900525/80-01
Letter dated April 21, 1980,
U. Potapovs to H. Lorenz

Dear Mr. Potapovs:

The NRC inspection report transmitted by your referenced letter, included a three part Notice of Deviation, and one Unresolved Item. Each item is quoted or paraphrased below, followed by the Gilbert/Commonwealth response.

Deviation Item A

The Topical Report commitment to perform an annual management review, is not also included in the Nuclear Quality Assurance Manual. The management review was not conducted in accordance with a written procedure.

Discussion

We will implement the corrective action described below. The wording of the finding, unless carefully read, may appear to infer that Gilbert/Commonwealth is not committed to an annual management review, and have not performed one.

Criterion II requires management to regularly review the status and adequacy of the quality assurance program. We accomplish this through regular meetings of the Quality Assurance Policy and Advisory Committees, the annual management review, and various other methods. Because of our management commitment to the total quality assurance program,

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we do not feel that the lack of a documented management review procedure should constitute a deviation from our commitment.

Corrective Action

A procedure will be prepared to describe planning, scheduling, preparing, executing, reporting, and follow-up of the annual management review. The Nuclear QA Manual will be revised to include the commitment to perform an annual management review of the corporate quality assurance program. Both of these actions will be completed by August 30, 1980.

Preventive Measure

The Nuclear QA Manual will be reviewed to determine whether there are any other requirements of the Topical Report and Standard Review Plan which are not adequately covered. The review will be completed by June 20, 1980, and the revised NQAM will be issued by August 30, 1980.

Deviation Item B

1. The Checker did not initial and date the System Flow Diagrams for the Perry Project as required by DCP 1.30.
2. Title pages of the safety-related TMI-1 Restart specifications were not imprinted with "Safety Related" or printed on salmon colored paper, as required by the Specification Department Instruction Manual.
3. Safety class TMI-1 Restart drawings were not imprinted with "Safety Related" as required by DCP 1.30.
4. Several safety-related Perry drawings were not marked to indicate that the design review had been completed, as required by the Perry Project Procedures Manual.
5. Design verification records for TMI-1 Restart structural designs have not been reviewed quarterly, as required by DCP 2.05.

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Corrective Action

1. It had been the Perry Project policy to delay signing the check block on a system diagram until the physical piping drawings were completed. The signature in the check would assure all parties that the system diagram and the physical piping drawings were in agreement.

We have reviewed this policy against our procedures and will have all system diagrams signed and checked by October 1, 1980.

2. Cover sheets of safety related specifications issued after May 1, 1980 (date of approval of the revised Project Management Manual) are imprinted with the words "Safety Related", and will be printed on salmon colored paper.
3. TMI Continuing Services drawings depicting safety class items, issued after April 1, 1980, are being imprinted with the words, "Nuclear Safety Related."

Where original TMI design drawings are changed to indicate continuing service modifications (interim drawings) a circle is drawn around the modified portion, and the words "safety related" are imprinted inside the circle and above the title block.

4. A review of safety related Perry Project drawings, indicated that the finding is limited to electrical discipline drawings. A review of the electrical drawings indicated that design verifications had been appropriately performed, but were not noted on all of the drawings. The drawings have been revised, where required, to indicate completion of the design verification.
5. The design verification records for the structural discipline are being reviewed, and the status will be indicated for the quarter ending June 27, 1980. The status will be reviewed on a quarterly basis in the future.

Preventive Measures

A memorandum dated April 8, 1980, was issued by the Engineering Manager, to all engineering personnel. The memo directed all personnel to "examine your activities and assure yourself that you are following the applicable DCP's or Project Procedures, and the specified evidence of this compliance is being produced". The memo also requested

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Supervisors, Section Managers and Project Managers to include discussions on design control in their regularly scheduled meetings.

The Quality Assurance Division will increase the number, scope and depth of design control audits.

DCP 4.15, "Procurement Documents", will be revised by August 30, 1980, to require the words "safety related" on the cover sheet of safety related specifications.

Deviation Item C

1. Responses had not been submitted for audit SA 79-1. Corrective action had not been performed for audit IA 79-1 (and others), as required by the NQAM.
2. Audits performed during 1979 did not cover indoctrination and training, and other areas as required by the NQAM.
3. Follow-up action was not scheduled to correspond with implementation of corrective action as required by QAP 10.3.
4. Formal notices were not transmitted for overdue responses, as required by QAP 10.3.
5. A procedure was not established to implement management actions to correct deficiencies revealed in audit SA 79-1.

Corrective Action

1. The open finding of audit SA 79-1 has been responded to and accepted. The audit is now closed.
2. A review will be performed of the 1979 audits to determine which areas were not covered to the extent intended by our procedures. A revised and expanded 1980 Audit Schedule will be issued to adequately cover those areas. This will be accomplished by June 30, 1980.

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3. Internal Audit IA 80-1 was performed in March, 1980, to follow-up and verify implementation of corrective action to open findings for audits performed in 1979. Fourteen findings were closed as a result of verifications performed during this audit. Eighteen additional findings have subsequently been verified and closed by the Internal Audit Coordinator. The eleven remaining open findings will be closely followed by the Internal Audit Coordinator.
4. Procedure QAP 10.3 will be revised to transfer audit follow-up responsibility from the Audit Team Leader to the Internal Audit Coordinator. This will provide more direct control and responsibility for follow-up. The procedure will be revised by July 31, 1980.
5. Corrective action was taken to resolve deficiency No. 1 of Audit SA 79-1. Corrective action involved changes in the design control program, which required extensive changes to the Project Management Manual. The effort was complicated by major changes in the Owner's corporate organization. GAI management was aware of the actions being taken to resolve this finding. The revised Project Management Manual was approved by the Owner on May 1, 1980 and the finding is now closed.

Preventive Measure

The Internal Audit Coordinator has developed a monthly report of the status of internal audits. The first report was issued on April 30, 1980, covering all open audit findings to that date. A copy of the status report is distributed to the Corporate QA Program Manager who, with the QA Division General Manager, is a member of the QA Policy and QA Advisory Committees. Status of internal audit findings will be an agenda item for the monthly QA Advisory Committee meetings. This will provide direct top management participation in resolving audit findings.

Unresolved Item

A defined quality assurance plan for TMI-1 Restart does not appear to be in place.

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Discussion

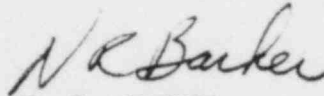
A "Quality Assurance Plan - TMI Continuing Services Project", had been prepared and transmitted to the Client for review, on February 6, 1980. It had not been approved by the Client, or issued, prior to Audit 80-1.

Corrective Action

The revised GAI TMI Continuing Services Project Management Manual, including the QA Plan, was approved by the Client on May 1, 1980. The Manual has been distributed to project personnel.

In addition to the corrective action discussed above, we are also taking steps to correct the follow-up items mentioned in the report.

Very truly yours,



N. R. BARKER
General Manager
Quality Assurance Division

cc: H. Lorenz
T. M. Demers
W. B. Shields

RCF:NRB:lsa