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

Region I

Report No. 50-277-80-11
50-278-80-11

Docket No. 50-277
50-278

License No. DPR-44
DPR-56

Priority -- Category C
C

Licensee: Philadelphia Electric Company

2301 Market Street

Philadelphia, Pennsylvania 19101

Facility Name: Peach Bottom Atomic Power Station, Units 2 and 3

Inspection at: Delta, Pennsylvania

Inspection conducted: April 22, 1980 to May 19, 1980

Inspectors: for N. E. Dubry, Radiation Specialist — 7-22-80 date signed

_____ date signed

_____ date signed

Approved by: P. J. Knapp, Radiation Support Section, FF&MS Branch — 9-5-80 date signed

Inspection Summary:
Inspection on April 22, 1980 to May 19. 1980 (Combined Report Nos. 50-277/80-11; 50-278/80-11

Areas Inspected: Routine, unannounced inspection of the radiation protection program for operation and refueling, including: qualifications; licensee audit; training; radiation protection procedures; advance planning and preparation for refueling; instruments and equipment; exposure control; posting, labeling, and control; notifications and reports; surveys; followup on previous enforcement action, and LER review. The inspection involved 80 inspector-hours on site by three NRC regional based inspectors.

Results: Of the fifteen areas inspected, no items of noncompliance were identified in eleven areas; three apparent items of noncompliance were identified in four areas (infraction - failure to adhere to radiation protection procedures in accordance with Technical Specification (TS) 6.11, Paragraph 15; infraction - failure to maintain current procedures at the work location in accordance with 10 CFR 50, Appendix B, Criterion VI, Paragraph 13; deficiency - failure to maintain posting of Form NRC-3 current in accordance with 10 CFR 19.11, Paragraph 11).

Region I Form 12
(Rev. April 77)

DETAILS

1. Persons Contacted

°+*W. T. Ullrich, Station Superintendent
*W. H. Barley, Engineer - Health Physics
*S. A. Spitko, QA Engineer
*C. A. Mengers, EP QA Site Supervisor
°N. Gazda, Health Physics Support Supervisor
M. Sumpson, Radiation Protection Engineer
C. Lauletta, Training Coordinator
R. W. McAllister, Unit 3 Area Supervisor
K. N. Mandl, Auditor, QA Division
°S. Nelson, Assistant Training Supervisor Coordinator
D. Smith, Outage Manager
+D. Swear, QA Technical Assistant
°W. Knapp, Radiation Protection Supervising Engineer
*C. Cowgill, USNRC Resident Inspector
*A. Blough, USNRC Resident Inspector
*W. Troskoski, USNRC Inspector

*Denotes those present at the exit interview on April 25, 1980.

+Denotes those present during the telephone exit interview on May 7, 1980.

°Denotes those present during the final telephone exit interview on May 28, 1980.

The inspector also interviewed several other licensee employees, including members of the Health Physics staff (station and contractor), maintenance, operations, and quality assurance personnel.

2. General

This inspection began at 10:30 a.m. on April 22, 1980. On arrival, Unit 2 was shut down for the refueling outage and Unit 3 was operating at power. A tour and observation of the facility at the beginning of the inspection included access control points; the auxiliary service building, the reactor building, and the radwaste area. Emphasis was given to areas of work for the refueling outage. Subsequent tours included the laundry facility; the respiratory protection cleaning, deconning, inspecting, and repair facilities; the chemistry laboratory; and a revisit to torus and drywell access control. Considering the amount of maintenance and refueling activity, no significant problems or fire hazards were observed and housekeeping in general appeared adequate. This inspection also included a number of telephone interviews and conversations with licensee, NIOSH, and USNRC Headquarters' personnel between April 27, 1980, and May 7, 1980.

The preliminary telephone interview with licensee representatives was held on May 7, 1980, starting at 1430, and the final telephone exit interview was held on May 28, 1980, starting at 1530.

3. Licensee Action on Previous Inspection Findings

(Closed) Inspector Followup Item (50-277/79-16-01; 50-278/79-18-01): The licensee's respiratory man-fit refit interval was stated in a revision to HPO/CO-09 "Respiratory Protection Training and Fitting". This matter was discussed with licensee representatives as to what constitutes a waiver of requalification under the "continuous use" clause. The HP manager and reconfirmation by the Station Superintendent indicated they do not plan to invoke the "continuous use" clause but will require annual retraining with no exceptions.

(Closed) Noncompliance (50-277/79-27-02; 50-278/79-30-02): The failure to follow licensee procedure S.10.4.1.B and S.10.4.1.C by not completing the check off list in the initial step of the procedure. The licensee's response was to delete the pre-operational check off list. He indicated the turnover by shift operators is adequate. This response appears to satisfy the requirements of Technical Specifications 6.8 and ANSI N-18.7-1972.

(Closed) Noncompliance (50-277/79-14-01; 50-278/79-16-01): Failure to maintain the release rates of gross activity, except halogens and particulates with half-lives longer than eight days, below Technical Specification 3.8.C.1. Discussions with licensee personnel and review of gaseous release records from June 21, 1979, to March 18, 1980, revealed no additional problem. Licensee corrective actions as detailed in his response letter of October 15, 1979, were reviewed and appeared satisfactory.

4. Licensee Event Reports (LERs)

Reference: (1) LER 2-79-26/IT-0 dated 6/8/79
(2) LER 2-80-03/IT-0 dated 2/1/80

Technical Specification 3.8.C.8 in part states, "...and the off-gas radiation monitors shall be operable or operating whenever steam pressure is available to the air ejectors. If these requirements are not satisfied, a normal orderly shut down shall be initiated within one hour,...".

a. Reference (1) narrates an occurrence on May 24, 1979, where the offgas stack radiation monitors were inoperable for about nine hours. The operating stack gas sample pump failed due to a broken belt; the low stack sample flow alarmed in the control room but no immediate corrective action was taken.

b. Regarding reference (2), during the inspection the inspector learned of the occurrence on January 19, 1980. where the offgas radiation monitors were valved out of service. The licensee's response addressed TS3.2.D.1.(c) but not TS3.8.C.8. This matter was discussed in the telephone interview on May 7. 1980.

The resident USNRC inspectors are presently investigating these events and will make final disposition in a subsequent report.

5. Radiation Protection Organization and Qualifications

The Engineer-Health Physics has access to the Station Superintendent even though separated by three organization levels. From the Engineer-Health Physics, the organizational structure of the radiation protection group is a health physics supervisor who is served by a Unit 2 area supervisor, a Unit 3 area supervisor, and an outage planning technical assistant. The area supervisors direct technical assistants, who in turn, supervise the actions of the working health physics staff.

The Peach Bottom site relies heavily on contract health physics staff. There are about thirty utility employees, thirty contract radiation technicians permanently assigned, and about forty additional contract technicians hired for this refueling outage.

The licensee technical specification incorporates ANSI N18.1 for selection and training of personnel. Conversations with licensee representatives and review of resumes and training records revealed no problems. It was noted that the licensee conservatively evaluates the transient contract health physics personnel for work assignments.

It was learned during this inspection that the Engineer-Health Physics is resigning effective May 2, 1980.

The licensee's plans to change the organizational structure by eliminating the Engineer-Health Physics and designating a HP radiation protection manager answering to the engineer technical, and a HP support supervisor also answering to the engineer technical instead of the HP engineer as before.

This change to the licensee's organizational structure as described by Technical Specification 6.2.2, Figure 6.2-2, will be looked at in a future inspection, following USNRC licensing's action on the amendment change submittal.

The licensee stated that contract health physics turnover is about 10% yearly and turnover of PECo health physics staff is approximately 10% also.

Training and qualification of station HP coverage was described to the inspector as follows: Contract Health Physics staff resumés are reviewed by the licensee for compliance with ANSI N18.1. They are then given copies of the station HP procedures, a review of equipment used at Peach Bottom and survey procedure forms. The individual is then given an exam which he must pass before assignment to a job site in the plant. The contract individual is locked into a narrow job activity on the site and the licensee stated the only retraining he is receiving is updating on procedural changes and revisions that affect his job activity.

Training and qualification of PECo station employees appeared to be more rigorous. It consists of four major phases extending over about six years. The first phase is four to five months of academic training including: mathematics, physics, chemistry, boiling water systems, and health physics. This is followed by an exam. The second phase of training, about 15 months, consists of on-the-job training, chemistry laboratory work, and a class room refresher, followed by oral evaluations by the Chemist and HP supervisors and a written exam. The final phase of training and qualification has not been implemented as yet, because the content and format of training has not been finalized by the licensee. This area will be reviewed during a subsequent inspection.

6. Training

The inspector reviewed the syllabus for the General Employee Training (GET) course; the questions for the GET and the special GET annual retraining exams; as well as selected test results for station employees, PECo (Philadelphia Electric Company) employees, and contracted employees. Special emphasis was given to training related to the present refueling outage. The licensee requires a passing grade on the GET exam to be allowed onsite, PECo station employees may forego annual GET if a passing grade is achieved on the more rigorous special GET annual retraining exam. Both methods appeared to meet the requirements of 10 CFR 19.12.

The content of the General Respiratory Training (GRT) course was reviewed and discussed with licensee representatives. Respiratory protection qualification at Peach Bottom requires the individual to attend the GRT course, pass the exam, be medically certified, and be equipment fit tested in a challenge atmosphere. This program is utilized to take the allowances designated in 10 CFR 20.103.c.

The licensee utilizes deficiency lists to flag annual retraining/requalification GET, GRT, and medical requirements. A lapse of GET qualification results in prohibiting the employee from entering through security. The inspector verified this licensee action was being done in a timely manner. A lapse of GRT qualification deletes the employee from the respiratory equipment authorization list, licensee Form 6, and a lapse of medical qualification downgrades the individual's respiratory protection to a partial status. (Refer to Paragraph 3).

No items of noncompliance or deviations were identified in this area.

7. Radiation Protection Procedures

The inspector reviewed the following procedures for compatibility with the requirements of 10 CFR 20, 10 CFR 50, and Units 2 and 3 Technical Specifications:

Procedures	Title	Rev. No.	Issue Date
HPA-10d	Harshaw Reader Calibration	1	7/29/79
HPA-31	Calibration of GM Detector Model E-400	1	2/11/80
HPA-32	Calibration of Teletector 6112	1	2/11/80
HPA-35	Calibration of Ionization Chamber RO1	1	2/11/80
HPA-35	Calibration of Alpha Scintillation Detector	1	2/11/80
HPO/CO-4	Radiation Work Permits	15	4/18/80
HPO/CO-9	Respiratory Protection Program	7	10/9/79
HPO/CO-9a	Respiratory Protection Training and Fitting	4	10/9/79
HPO/CO-9b	Respiratory Protection Equipment Selection and Use	3	10/9/79
HPO/CO-9c	Respiratory Protection Equipment Maintenance and Quality Assurance	2	9/14/79
HPA-77	Determination of MPC Hours	4	4/7/80

With the exception of procedures HPO/CO-9b and HPO/CO-9c which are discussed under respiratory protection and the exit interview, no other problems were found.

8. Instruments and Equipment

Portable devices observed during the tours were operational and in calibration. It was noted during the tours that the majority of the continuous air monitors (CAM's) were inoperative. This matter was brought to the attention of the licensee (Refer to Paragraph 17). An active low volume air sampling routine was being carried out by the licensee.

A review of calibration data and procedures for portable survey instruments found no significant problems. It was noted that the licensee has recently started having portable instrument calibration done by a vendor.

No items of noncompliance or deviations were identified in this area.

9. Planning and Preparation

The inspector discussed with licensed representatives planning and preparation for refueling outages. The licensee indicated that preliminary refueling outage preparation is done from the previous refueling outage but active planning/preparation does not begin until about four months before the outage. It became apparent from conversations that even though the licensee has adequate supplies of anti-C clothing, respiratory protective equipment, and survey equipment; additional health physics coverage is supplied by contract technicians qualified in accordance with ANSI N18.1-1971; the station health physics group has no direct input into outage planning. This is an area of concern and was discussed during the exit interview conversation on May 7, 1980. This matter will be reviewed during a subsequent inspection.

No items of noncompliance or deviations were identified in this area.

10. ALARA

ALARA (As Low as Reasonably Achievable) efforts were apparent in the following areas:

a. ALARA is being considered in writing Radiation Work Permits (RWP's).

b. Mock-ups of high exposure jobs are being used. The inspector observed personnel practicing on a simulator under actual conditions (anti-C's and respirators in use) during the tours.

c. Tents are being set up around maintenance jobs and in maintenance areas where the activity might result in the spread of loose radioactive material contamination.

d. The licensee has constructed tents around access doors to high loose contamination rooms as buffer zones to prevent spread of radioactive material.

e. The licensee is utilizing a program of special exposure extention authorizations and daily computer deficiency and flagging lists to keep exposure levels low.

11. Posting, Labeling, and Control

The inspector toured the controlled areas and observed that posting and labeling requirements of 10 CFR 20.203 and HPO/CO-11, "Establishing and Posting Controlled Areas," appeared adequate.

An initial check of the licensee's single controlled bulletin board, during site entry on April 22, 1980, found posting according to 10 CFR 19.11 not current. The inspector observed that the Form NRC-3, "Notice to Workers", (which describes responsibilities of individuals as radiation workers) posted was significantly outdated. The inspector noted that the failure to maintain a current posting pursuant to 10 CFR 19.11(c) as constituting an item of noncompliance (50-277/80-11-04; 50-278/80-11-04). On being informed of the above, the licensee representative immediately replaced the posting with the current Form NRC-3.

Annual GET retraining of plant personnel and GET training of all non-station personnel is required before access to the protected area is allowed. The licensee's current program appeared to be effective (refer to Paragraph 6).

Annual retraining in GRT is required. If an individual does not complete GRT retraining in a timely manner, he is deleted from the respiratory qualification list and not allowed to enter areas requiring respiratory protection device use. Also, annual medical evaluation is required, and if not received, the individual will be downgraded to a "partial" qualification status which allows no protection factor to be taken. The inspector reviewed lists of individuals entering RWP areas requiring respiratory devices against the current respiratory qualification list and found no problems. During this inspection, a PECo engineer tried to make an entry into a RWP area requiring use of a respiratory protection device. He was prevented by the access control health physicist due to an elapsed qualification. The engineer and the health physicist were unaware of the inspector's observation of this event. No problems were noted in this area.

12. Surveys

Routine and special area survey records for contamination and direct radiation were reviewed for this outage from March 18, 1980, to April 24, 1980. When elevated levels of radiation or contamination were identified, followup action appeared proper and timely.

Records of airborne surveys from the Continuous Air Monitors (CAM) were not reviewed (refer to Paragraph 8). Instead the results of the portable air sample surveys were reviewed. These surveys are being used in conjunction with the MPC-hour evaluation program.

No items of noncompliance or deviations were identified in this area.

13. Exposure Control

a. External Exposure

External exposure control dose records for October 1, 1978, through April 23, 1980, were reviewed. Special attention was given to exposure doses during the refueling outages and the recent maintenance outage for pipe support inspections. Based on the vendor supplied TLD exposure program, the highest individual whole body doses received were:

Time Period	Dose (rem)
10/78 - 12/78	1.59
1/78 - 12/78	4.93
1/79 - 3/79	2.01
4/79 - 6/79	1.90
7/79 - 9/79	2.16
10/79 - 12/79	1.94
1/79 - 12/79	4.99
1/80 - 3/80	2.39

The licensee also has a daily onsite TLD program. The highest individual whole body exposure dose from April 1-23, 1980, was 2.19 rems.

During the review of exposure records it was noted that as a group, those individuals involved in the licensee's response to IE Bulletins 79-02 and 79-14 had received quarterly whole body external exposure doses ranging from 1.6 to 2.4 rem.

During outages the licensee maintains a daily exposure tracking system. In addition to a daily cumulative printout the licensee has an auxiliary printout which breaks out individuals receiving greater than 100mrem/day, and flags individuals receiving greater than 500mrem/day for immediate followup. The licensee also employs exposure extension permits, color coded TLD holders, and conservative administrative limits as an ALARA program. (Refer to Paragraph 10)

The inspector reviewed the licensee's actions regarding an individual who had entered a radiation area without dosimetry on April 22, 1980. The inspector confirmed that appropriate dose assignment was made and that the amount was incorporated into the computerized daily tracking system. Actions by the licensee appeared timely.

b. Internal Exposure

Internal exposure records, procedures, and results were reviewed for the period January 1980 to the present. The licensee maintains a tracking system on their "Form 6" which includes:

Individual Name
GRT Date
Medical Date
Respirator Qualification
Weekly MPC Hours Total
Quarterly MPC Hours Total

The licensee appeared to be tracking only MPC-hours associated with airborne exposures. During the first quarter for 1980, highest individual total was 19 MPC-hours. Licensee actions for individuals receiving greater than 2 MPC-hours/day, 10 MPC-hours/week appeared satisfactory. However, there appeared to be a substantial delay time from the actual exposure versus the calculation and record entry dates. This matter was brought to the attention of licensee representatives during the inspection, and had been addressed by the exit interview.

c. Respiratory Protection

The inspector reviewed the licensee's respiratory protection program for compliance with 10 CFR 20.103 and Regulatory Guide 8.15. It included a review of records; procedures; interviews with licensee representatives; and tours of the fit testing chamber, access control points, cleaning and decontamination areas, and the quality assurance and maintenance station.

The review of records showed that training and retraining are being done in a timely manner for station and other personnel. (Refer to Paragraph 6). Personnel files which have strip chart results of each individual's chamber fit testing were scanned. The licensee's computerized status listing program of each individual respiratory protection qualification appeared to be working satisfactorily. (Refer to Paragraph 6). Personnel files which have strip chart results of each licensee's computerized status listing program of each individual respiratory protection qualification appeared to be working satisfactorily. (Refer to Paragraph 11). A review of procedures addressing respiratory protection found them to be generally satisfactory; however, revisions are needed to handle the use of the respiratory protection hood and associated hardware. This matter was discussed with licensee representatives during interviews, the exit meeting, and subsequent telephone conversations.

During the tour of the respirator quality assurance and maintenance station, the inspector noted procedures HPO/CO-9 (Rev. 6), HPO/CO-9a (Rev. 3), and HPO/CO-9b (Rev. 2) in use. These procedures are outdated. (Refer to Paragraph 7). 10 CFR 50, Appendix B, Criterion VI states in part "Measures shall be established to control the issuance of documents, such as instructions, procedures, and drawings, including changes thereto...these measures shall assure that documents...are distributed to and used at the location where the activity is performed." The licensee NRC accepted Quality Assurance Plan, Volume III, Section 2, paragraph 6.1 states in part "...documents, including changes...are distributed to and used at the location where the prescribed activity is performed." The inspector noted that failure to distribute and use current revisions of the above procedures represents a noncompliance (50-277/80-11-01; 50-278/80-11-01). This noncompliance was recurrent and was observed during an inspection conducted from October 30 through November 1, 1979 (50-277/79-27 and 50-278/79-30).

Other procedures in use at this station were HPO/CO-9c (Rev. 2), "Respiratory Protection Equipment Maintenance and Quality Assurance," HPO/CO-9d (Rev. 1), "Sanitizing of Respiratory Protection Equipment for Training," and HPO/CO-9e (Rev. 0), "Quantitative Testing of Masks and Filters." Aspects of the quality assurance and maintenance program reviewed with workers at this job included a walk-through of actions taken with each type of mask, the rejection rate of each component, and control tests being done on associated respiratory protection hardware. The workers were knowledgeable of their responsibilities and adhering to provided procedures.

One major area of concern to the inspector was the licensee's use of a recently acquired air line supplied hood. The licensee was taking a protection factor (PF) of 2000 by their procedures. Discussions with the licensee indicated that a review for conformance with IE Bulletin 78-07 "Protection Afforded by Supplied Air Hoods" was not done.

In telephone conversations on April 30, 1980, and May 1, 2, 6, and 7, 1980, the licensee stated he had revised procedure HPO/CO-9b, per recommendations of IE Bulletin 78-07. He also said that he had pulled the records of all individuals who had used the hood to date and had re-evaluated MPC-hours using a PF of 1; he indicated there were no reportable occurrences found in this study. This matter will be verified in a future inspection.

Another concern in the use of the supplied air hood was the licensee's lack of a quality assurance and maintenance program to insure appropriate flow per IE Bulletin 78-07 and in accord with Regulatory Guide 8.15 and vendor supplied information.

This was discussed at the exit interview and in subsequent telephone conversations.

14. Audits

Audit and surveillance functions are performed from the Quality Assurance and Administrative Division (QA&A).

After conversations with licensee representatives and review of records it appeared that the QA group at the station was only covering administrative procedures. However, the station superintendent indicated QA is also responsible for surveillance checks and actively monitoring work being done at selected job sites and as directed by management for corporate QA. The one exception is the recent implementation (April 1980) of surveillance, operational and procedural audits of the radwaste system.

The inspector requested copies of the 1978 and 1979 "Operation and Safety Review Committee (OSRC) Annual Audits" during the inspection and at the exit interview on April 25, 1980, for review. This review was necessary to determine if Technical Specification (TS) 6.5.2.8; 10 CFR 50 Appendix B, Criterion XVIII; and FSAR 17.2.18 requirements were being satisfied.

Conversations with the licensee representatives on May 7, 1980, and a review of the OSRC audit package received by the inspector on May 19, 1980, indicate required complete audit functions were not performed by OSRC for 1979. However, during a subsequent telephone conversation with the cognizant licensee representative (the Manager of the Electric Production Department), on June 18, 1980, an inspector learned that the audits required by Technical Specification (TS) 6.5.2.8 had been conducted for 1979 and 1980. A licensee representative stated that copies of these reports would be sent to the NRC Region I (Philadelphia) office. An inspector noted that this item remains unresolved pending receipt and in-office review of the licensee's aforementioned audit reports (50-277/80-11-02; 50-278/80-11-02).

15. Procedural Adherence

Technical Specification 6.11, "Radiation Protection Program," requires that procedures for personnel radiation protection be prepared consistent with the requirements of 10 CFR 20 and be approved, maintained, and adhered to for all operations involving personnel radiation exposure.

During the tours of the controlled areas, the inspector reviewed Radiation Work Permits (RWP's) and observed individuals generally adhering to the requirements.

One area the inspector scanned was action on licensee identified incidents. A cursory overview of events from January 1, 1979 to April 14, 1980, found thirteen cases of personnel entering radiation areas without dosimetry; twelve instances of personnel or street clothing contamination; seven events of workers ignoring RWP and/or HP instructions; and fourteen other RWP violations.

This represents a concern which was discussed with the licensee for possible trend analyses because these identified items were being committed by both contractor and station personnel. It was noted that corrective action to date has not been effective.

This area has been cited in the resident inspector report for March 1980. To this inspector's knowledge no response has been made. This matter was discussed during the exit interview. The licensee stated he is taking additional measures to address this area. This area will be scrutinized in a future inspection to determine if the licensee's corrective action is effective.

During a tour of the access control to the torus, the inspector observed three individuals as they suited up and donned respirators, as required by Radiation Work Permit. However, the individuals did not perform a negative pressure test of their respirators.

The inspector noted that Technical Specification (TS) 6.11, "Radiation Protection Program", requires that procedures for personnel radiation protection shall be prepared consistent with the requirements of 10 CFR Part 20, and shall be adhered to for all operations involving personnel radiation exposure. Also, 10 CFR 20.103(c) requires that when respiratory protective equipment is used, the licensee may make allowance for such use in estimating exposures of individuals provided that such equipment is used as stipulated in Regulatory Guide 8.15. Regulatory Guide 8.15 requires in Section C.4.c. that procedures shall be written to ensure the testing of respiratory protective equipment prior to each use. Procedure HPO/CO-9a, "Respiratory Training and Fitting", requires that individuals who wear respirators shall perform a negative pressure test prior to each use. The inspector noted that the failure of the two individuals to perform the required negative pressure test as required by procedure in order to meet the requirements of 10 CFR 20.103(c) constituted an item of noncompliance against Technical Specification 6.11 (50-277/80-11-03).

16. Notifications and Reports

According to licensee representatives, and verified to the extent of records reviewed by the inspector, the licensee has had no theft, loss, concentrations of radioactive material, or overexposure of personnel requiring reporting pursuant to 10 CFR 20.402, 20.403, 20.405, or other reporting requirements. A review of licensee records indicates that reports to the Commission were made in a timely manner and in accord with 10 CFR 20.403. The inspector emphasized to the licensee the changes to 10 CFR 20.403d per IE Informational Notice No. 80-06.

A sampling of employee records showed that reports of personal exposure are being submitted to the Commission as required by 10 CFR 20.408 for terminated employees and to individuals as required by 10 CFR 19.13.

17. Exit Interview

The inspector met with licensee representatives (denoted in Paragraph 1) at the conclusion of the inspection on April 25, 1980. The inspector summarized the purpose, scope, and preliminary findings of the inspection.

a. The inspector stated one item of noncompliance had been identified in the area of posting, labeling, and control (Refer to Paragraph 11). The inspector indicated concern in a number of other areas but that final determination could not be made until a review of the 1978 and 1979 OSRC audits was done and the examination and collation of notes with technical specifications and regulations were complete.

b. A review of the respiratory protective program found that procedure HPO/CO-9b does not address the use of the air line supplied hood. The licensee representative stated that the procedure would be revised to reflect same. In the same area, he also stated he would look into a periodic QA program for use of this equipment. (Paragraph 11b.1)

c. The inspector mentioned the observation of a number of inoperable CAM's during his tours. (Paragraph 8)

d. The inspector remarked on the number of procedural adherence violations (Paragraph 15). The licensee representative discussed his latest efforts to remedy this situation. This area will be followed in future inspections to determine its effectiveness.

e. One item regarding an LER (Paragraph 4) was discussed with the licensee. This matter was being deferred to the resident USNRC inspector.

In a telephone conversation on May 7, 1980, with licensee representatives (denoted in Paragraph 1), the inspector summarized interim findings of this inspection. A determination of three apparent noncompliance items have been made against failure to adhere to technical specifications (Paragraph 4), failure to adhere to procedures which were previously discussed (Paragraph 15) and failure to maintain current procedures at the work location (Paragraph 13).

The following items were discussed:

a. The reorganization of the health physics structure following the loss of the Engineer-Health Physics. This matter has been referred to USNRC Headquarters and Region I for resolution. (Paragraph 5)

b. LER 2-79-26/IT-0 and LER 2-80-03/IT-0 as to why reference 2 did not address TS 3.8.C.8. The licensee representatives acknowledged this may have been an oversight. As mentioned previously in this report this item has been deferred to the resident inspectors for final disposition.

c. A review of collected data found that procedures being used in the respiratory protection, quality assurance and maintenance station were outdated (Paragraph 13.b.1) in that they did not agree with the latest controlled health physics procedures (Paragraph 7). This is a repeat of a previous noncompliance item 1/ and indicates the licensee had failed to take thorough corrective action. The licensee representative stated that updated procedures had been placed at the above station per earlier telephone conversations with the licensee.

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d. The licensee representative stated the health physics input to outage planning is through the Package Engineer. (Paragraph 9)

e. The topic of personnel procedural adherence (Paragraph 15) was again discussed and a request that copies of the 1978 and 1979 OSRC annual audits be sent to conclude this inspection. The licensee representative stated that he did not believe a 1979 audit had been done.

Reconfirmation of procedural changes to the respiratory protection program was also reviewed.

In addition, based on discussions with licensee representatives on site and during subsequent telephone discussions, the licensee indicated that revisions have been made to procedures HPO/CO-9b and HPO/CO-9c, as applicable, to the air-line supplied hood use.