



UNITED STATES
NUCLEAR REGULATORY COMMISSION
WASHINGTON, D. C. 20555

January 16, 1990

Docket No. 50-313

Mr. T. Gene Campbell
Vice President, Nuclear
Arkansas Power and Light Company
Post Office Box 551
Little Rock, Arkansas 72203

Dear Mr. Campbell:

SUBJECT: PROGRAMMATIC AUDIT REPORT - SAFETY AND PERFORMANCE IMPROVEMENT
PROGRAM AT ARKANSAS NUCLEAR ONE, UNIT 1 (TAC NO. 68199)

Enclosed is an evaluation of the Babcock & Wilcox Owners Group (BWOG) safety and performance improvement program (SPIP) at Arkansas Nuclear One, Unit 1 (ANO-1). This evaluation is based on the NRC audit conducted at the ANO-1 site from September 18 to 20, 1989. The audit was performed with the assistance of Idaho National Engineering Laboratory consultants.

The NRC staff's verification of SPIP implementation consists of two phases: (1) a programmatic audit to evaluate the commitment and involvement of corporate management and the site organization regarding the SPIP program, and the process for disposition of SPIP technical recommendations (TRs), and (2) an implementation audit to perform a detailed review of the implementation and disposition of individual SPIP TRs. We have completed the programmatic audit, and will schedule the implementation audit at a future date.

As a result of the programmatic audit, the staff found evidence of adequate Arkansas Power and Light (AP&L) corporate and site management involvement in the SPIP process. The staff also found that AP&L has established a formal process governed by AP&L policies and procedures. This process appeared to be adequate to control the disposition of BWOG SPIP recommendations.

However, a few shortcomings were noted. These were: (1) AP&L procedures did not require written justification for slippage of TR evaluation and implementation schedules, or a final implementation due date; (2) the TR review and

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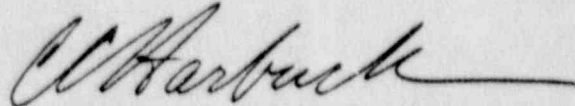
Mr. T. Gene Campbell

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implementation process had no provisions for reprioritization of TRs that have schedular slippage; and (3) management may not have been placing enough emphasis on timely completion of TRs that had schedular slippage.

The staff intends to followup these items during the implementation audit.

Sincerely,



C. Craig Harbuck, Project Manager
Project Directorate IV
Division of Reactor Projects - III,
IV, V and Special Projects
Office of Nuclear Reactor Regulation

Enclosure:
As stated

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UNITED STATES
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SAFETY AND PERFORMANCE IMPROVEMENT PROGRAM

PROGRAMMATIC AUDIT BY THE OFFICE OF NUCLEAR REACTOR REGULATION

ARKANSAS POWER AND LIGHT COMPANY

ARKANSAS NUCLEAR ONE, UNIT 1

DOCKET NO. 50-313

1.0 SAFETY AND PERFORMANCE IMPROVEMENT PROGRAM AUDIT

1.1 Introduction

From September 18 to 20, 1989, the Nuclear Regulatory Commission (NRC) staff conducted a programmatic audit of Arkansas Power and Light Company (AP&L) Safety and Performance Improvement Program (SPIP) for its Arkansas Nuclear One, Unit 1 (ANO-1).

The Babcock and Wilcox Owners Group (BWOOG) developed the SPIP program in order to reduce both the frequency of reactor trips and the complexity of post-trip responses. The purpose of this audit was to evaluate AP&L's SPIP program for ANO-1.

1.2 Background

After the accident at Three Mile Island, Unit 2 (TMI-2), nuclear power plant owners made a number of improvements to their nuclear facilities. Despite these improvements, the U.S. Nuclear Regulatory Commission (NRC) staff was concerned that the number and complexity of events at B&W nuclear plants had not decreased as expected. This concern was reinforced by the total-loss-of-feedwater event at Davis-Besse Nuclear Power Station on June 9, 1985, and the overcooling transient at Rancho Seco Nuclear Generating Station on December 26, 1985.

By letter dated January, 24, 1986, the NRC Executive Director for Operations (EDO) informed the Chairman of the BWOOG that a number of recent events at B&W-designed reactors should be reexamined. In its February 13, 1986, response to the EDO's letter, the BWOOG committed to lead an effort to define concerns relative to reducing frequency of reactor trip and the complexity of post-trip response in B&W plants. The BWOOG submitted a description of the B&W program entitled "Safety and Performance Improvement Program" (BAW-1919) on May 15, 1986. Five revisions to BAW-1919 have been submitted. Included in BAW-1919 were specific tasks to be completed by each utility under a Safety and Performance Improvement Program (SPIP).

The NRC staff reviewed BAW-1919 and its five revisions and presented its evaluation in NUREG-1231, dated November 1987, and in Supplement No. 1 to NUREG-1231, dated March 1988. The NRC staff has previously performed an audit

of the BWOG's disposition of the technical recommendations (TRs) that were developed by various BWOG committees and task groups. The results of that audit, which were favorable, were reported in NRC Inspection Report 99900400/87/01. However, the staff determined that an NRC audit program to ensure the quality of each utility's program used to control the disposition and implementation of TRs is required since the majority of the recommendations developed by the BWOG did not provide specific design details. Initially, a programmatic audit would be conducted to evaluate the adequacy of the SPIP programmatic process and TR disposition. This would be followed by an implementation audit to evaluate the adequacy of the TR implementation process.

The scope of the SPIP programmatic audit includes an evaluation of (1) the commitment and involvement of corporate management in the SPIP process, (2) the commitment and involvement of site organizations in the SPIP process, and (3) the SPIP process for disposition of TRs. The SPIP programmatic audit also included a review of the disposition of 35 selected TRs to determine the acceptability of the decisions regarding TR applicability and the evaluation for TR implementation. The acceptability of the TR implementation process will be evaluated later during the SPIP implementation audit.

1.3 BWOG Recommendation Categories

All BWOG recommendations are to be tracked through closure. The following categories have been selected as the "bins" to be used by the utility when assigning tracking status. These categories, as well as the explanatory notes, are addressed in the BWOG Recommendation Tracking System (RTS), in BAW-1919, and in NUREG-1231.

Evaluating for Applicability (E/A)

The recommendation is being evaluated by the utility for applicability to their particular plant. The evaluation may conclude that the recommendation (a) is not applicable, (b) was implemented previously and is operable, or (c) if applicable, requires further evaluation to determine if it should be implemented.

Evaluating for Implementation (E/I)

An evaluation of the recommendation for applicability has been completed, and the recommendation is now being evaluated to determine if it should be implemented.

Implementing (I)

Utility evaluation is complete and the need for software/hardware changes to meet the intent of the recommendation has been identified.

Software changes have been assigned to appropriate organization and are scheduled and budgeted. Hardware changes have been assigned to appropriate organization for implementation, funding is approved, and the changes are included in a corporate plan for implementation.

Additional comments on implementation status or method of implementation are appropriate.

Closed/Operable (C/O)

Utility meets the intent of the recommendation, and implementation is complete.

Review of existing plant software or hardware results in conclusion that intent of recommendation is already met. If software changes were required, new/revised procedures, training plans, etc. are approved and issued. Personnel are trained and procedures issued.

Closed/Not Applicable (C/NA)

Utility evaluation determines that the recommendation does not apply to plant-specific configuration; no past experience of underlying problems has occurred.

Software/hardware of concern does not exist, and existing software/hardware is such that a similar problem could not develop at their plant.

Additional comments on why it is not applicable are required.

Closed/Rejected (C/R)

Utility evaluation determines software/hardware changes meeting the intent of the recommendation are unacceptable and will not be implemented.

Recommendations may be unacceptable because:

- (1) Implementation would not result in an overall improvement in plant safety or performance.
- (2) Implementation of recommendation as described would not effectively resolve problem of concern.
- (3) Resources required for implementation are excessive for expected plant improvement or benefit.

Additional comments on why it is rejected are required.

2.0 ARKANSAS POWER AND LIGHT COMPANY - SPIP TECHNICAL RECOMMENDATION EVALUATION AND IMPLEMENTATION PROCESS

AP&L established a formal, proceduralized process to control SPIP TR disposition. This process used by AP&L is administered through the Nuclear Program, NP-40, "Transient Reduction Program" (TRP). The transient reduction program was developed to provide a coordinated method of processing and tracking transient reduction recommendations. The SPIP TRs as well as transient reduction recommendations from other sources are administered through the TRP. The following description of the AP&L organizational structure and TRP/SPIP procedures and policies is based on written information (NP-40) and flow charts (see Appendix A) provided by AP&L. Additional information was obtained during interviews with AP&L and ANO-1 personnel.

2.1 Organizational Structure - Transient Reduction Program

The Vice President, Nuclear has the overall responsibility for corporate management of the Transient Reduction Program. The Vice President's additional responsibilities included the formulation of the TRP policy statement, issuance of the program document, and formulation of trip reduction and transient reduction goals.

The Director, Nuclear Operations, has the overall responsibility for on-site program administration. In addition, the director designates the on-site coordinator.

The Superintendent, Operations Assessments, who serves as the on-site coordinator is responsible for implementation of the TRP, overall program administration, and also serves as chairman of the Management Review Group. In addition, the Superintendent designates the Transient Reduction Program Coordinator (TRPC) and ensures that any transient related recommendations resulting from industry or plant data reviews are communicated to the TRPC for inclusion into the program.

The Transient Reduction Program Coordinator is responsible for implementation and revision of program procedures and documents. In addition, the TRPC is responsible for the coordination of site and corporate activities, maintaining the recommendation tracking system, reviewing recommendations for intent and applicability, establishing a preliminary priority for action, providing written status reports to management and other related organizations within AP&L and ANO-1 as well as B&W, CE, INPO, etc., and maintaining program files. The TRPC also works with the Little Rock Coordinator (LRC) to assure that both the site and corporate are kept up to date on all recommendation actions.

The LRC is responsible for coordinating all Little Rock program activity, tracking all Little Rock actions, assisting the TRPC by ensuring all recommendations generated in Little Rock are transmitted to the TRPC, and providing the TRPC with status updates of those items assigned to Little Rock.

As explained above, the TRPC is the central coordinator for the Transient Reduction Program. All recommendations for TR implementation or rejection are coordinated by this person. However, final approval of TR disposition or implementation is the responsibility of the Management Review Group (MRG).

The MRG reviews each recommendation prior to closure to ensure that recommendation disposition is technically correct and adequately documented. The MRG periodically reviews the status of the TRP and any open items to ensure that sufficient resources are being used to meet TRP commitments. In addition, the MRG assists the TRPC in defining recommendation scope and resolving any concerns over recommendation scope or intent.

The General Manager, Nuclear Quality, is responsible for periodic review of the TRP to ensure all required actions are documented in accordance with the TRP guidelines.

In addition to the above, all Nuclear Operations personnel have the responsibility to ensure that actions are taken to inform the TRPC or the LRC if any recommendations or concerns arise that address a potential to reduce plant transients. This includes concerns originating from owners groups or other industry groups, external to B&W and AP&L.

Where possible, the TRP uses existing procedures such as Engineering Action Requests and organizations such as the Site Priority Review Committee. Memorandums and an action tracking system are used to coordinate and track activities that require actions at the AND site. Communications between the AND site and AP&L corporate offices in Little Rock are conducted through single contacts (LRC and TRPC) to ensure that effective communication channels are maintained.

AP&L's TRP is intended to provide a formal approach for managing trip and transient reduction program activities. The TRP provides a common method of processing all recommendations including SPIP TRs related to transient reduction, and prescribes a means of tracking each recommendation from the Evaluation for Applicability process through final closure.

2.2 Processing of BWOOG Recommendations

The BWOOG SPIP Technical Recommendations are processed in accordance with the guidelines set forth in NP-40 and the Transient Reduction Program Procedure Flow Diagram (see Appendix A). The following provides a description of that process.

As stated earlier, all recommendations are sent to the TRPC where the Evaluation for Applicability begins. The TRPC assigns a status to the recommendation, enters the recommendation into the tracking system, establishes a documentation file and performs an initial evaluation to determine recommendation applicability. If the TRPC categorizes the recommendation as not applicable, superceded, or rejected, a closeout memo with written justification to support the evaluation results is sent to the MRG for approval. The MRG either approves closure and transmits the closeout memo back to the TRPC who places the closeout memo in the recommendation file, notifies the originator, and updates the recommendation status. Or, the MRG disapproves the closeout memo and returns it to the TRPC for further evaluation.

If the TRPC categorizes a recommendation as applicable, the TRPC presents the applicability evaluation to the MRG for review and a confirmation decision on recommendation intent/position. The TRPC then assigns a priority rating to the now applicable recommendation and identifies the organization responsible for recommendation implementation. Once the assigned organization is identified, the TRPC either 1) issues an action item memo requesting the LRC to provide a resolution for recommendation implementation and updates the status to E/I, or 2) issues an action item memo to generate recommendation implementation resolution on-site and updates the status to E/I, or 3) personally provides a recommendation implementation evaluation and updates the status to E/I. These three actions are discussed more fully as follows:

- (1) If the E/I is controlled by the LRC, the LRC identifies the LR organization to resolve recommendation implementation and issues an Engineering Action Request (EAR). The assigned LR organization performs an implementation evaluation and forwards the findings to the LRC for review and concurrence. If the LRC does not concur with the implementation evaluation, the evaluation findings are processed through the TRPC and the MRG Chairman and returned to the LRC for re-evaluation. If the LRC accepts the proposed implementation evaluation, the LRC transmits the evaluation results to the TRPC.
- (2) The following disposition process applies once the LRC transmits the recommendation resolution results back to the TRPC, or the TRPC has written an action item memo to generate recommendation resolution on-site. The TRPC reviews the E/I resolution and either approves or disapproves the basis for resolution. If the resolution is approved and addresses the full intent of the recommendation, the TRPC assigns the appropriate organization an action to implement the resolution and updates the recommendation status to I. If the E/I resolution is disapproved or the full intent of the recommendation is not met, it is sent to the MRG for review. The MRG reviews the recommendation resolution on intent acceptability and recommends actions necessary to resolve all concerns. Once the intent actions are complete and the MRG accepts the E/I resolution, the MRG Chairman notifies the Vice President, Nuclear, and the TRPC, and authorizes implementation. The TRPC assigns action to implement recommendation resolution and updates recommendation status to I.

If any portion of the E/I resolution process or interpretation of intent is disapproved or cannot be resolved by the above described methods, the Superintendent, Operations Assessments reviews the resolutions and assigns the TRPC resolution actions. Once the actions are complete and the recommendation resolution is processed through the E/I resolution paths, the TRPC assigns action to implement resolution and updates the recommendation status to I.

- (3) If the TRPC updates the recommendation status from E/I to I, and provides the implementation actions, the TRPC prepares a closeout memo and transmits it to the MRG for review. If the MRG approves the closeout memo, it is transmitted back to the TRPC who places the closeout memo in the recommendation file, notifies the recommendation originator, and updates the status to Closed/Operable. If the MRG does not approve the closeout memo, the MRG forwards the memo to the Superintendent, Operations Assessment for review. The Superintendent reviews the recommendation file and closeout memo, then assigns the TRPC actions to resolve the recommendation and changes the recommendation status back to E/I.

When the TRPC changes a recommendation status to I, either an ANO on-site organization or the LRC is assigned the responsibility for recommendation implementation resolution, as discussed in item 1 or 2 below:

- (1) The TRPC issues action requirements to the appropriate AND on-site organization and monitors the recommendation implementation process. If a Design Change Package (DCP) is involved, the TRPC reviews documentation for applicability and determines if the resolution is acceptable. If acceptable, the TRPC issues a closeout memo and the procedure as discussed earlier is followed.

If a DCP is not involved in the recommendation resolution process, the Operations Assessment Superintendent and the Plant Support General Manager review the implementation resolution. If the resolution is found acceptable, the TRPC issues a closeout memo and the procedure as discussed earlier is followed. If the resolution is found to be not acceptable, it is returned to the respective on-site organization for further action and is processed in accordance with the normal procedure.

- (2) The LRC issues action requirements to the appropriate LR organization and monitors implementation. Once implementation is complete at the LR offices, the LRC transmits the results of the implementation resolution to the TRPC.
 - (a) If on-site implementation action requires a DCP, the TRPC reviews implementation documentation for acceptability. If acceptable, the TRPC issues a closeout memo and the normal procedure discussed earlier follows. If not acceptable, the TRPC returns the file to the Operations Assessment Superintendent for review and further action in accordance with procedures discussed earlier.
 - (b) If on-site implementation does not require a DCP, the TRPC reviews implementation documentation for acceptability, issues a closeout memo, and the recommendation is processed in accordance with procedures as discussed earlier.

In summary, for final closure of a recommendation, the TRPC prepares a recommendation closeout memo and transmits it to the MRG for review. The MRG either (1) approves or (2) disapproves all actions, as follows:

- (1) If the MRG approves the closeout memo, it is transmitted to the TRPC with an appropriate categorization of Closed/Operable, Not Applicable, Rejected, or Superseded. The TRPC includes the closeout memo in the recommendation files, notifies the originator and updates the status.
- (2) If the MRG does not approve the closeout memo, it is transmitted to the Superintendent, Operations Assessment for review and reassignment to the TRPC for E/A or F/I resolution. The recommendation is then processed in accordance with procedures discussed in the body of this section until final closure is achieved.

3.0 REVIEW OF SELECTED RECOMMENDATIONS

3.1 Selected Criteria

The staff reviewed 35 TR files (see Appendix B) and evaluated the timeliness and acceptability of TR disposition. These TRs were selected based on NUREG-1231, "Safety Evaluation Report Related to Dabcock and Wilcox Owners Group Plant Reassessment Program," and on the most recent Recommendation Tracking System (RTS) report. A broad spectrum of TRs were selected so that representative TRs from the following categories were reviewed: 1) TRs designated "key" by the BWOG and also TRs which were considered high priority by the NRC although not designated key; 2) TRs associated with each of the plant systems (see Appendix B) having a bearing on the SPIP goal of reducing the number of reactor trips and the complexity of post trip responses; 3) TRs at each point in the disposition process (i.e., C/O, C/R, C/NA, E/A, E/I, and I).

3.2 Results of Staff Review

The staff found evidence of adequate corporate and site management commitment and involvement in the SPIP process. The staff also found that the Transient Reduction Program (TRP) and associated procedures provided a formal, well documented, systematic process to evaluate SPIP recommendations for disposition. In addition, the staff found that AP&L personnel (i.e., members of the Management Review Group, the Vice President Nuclear, the Director Nuclear Operations, the Superintendent Operations Assessment, the Little Rock Coordinator, the Transient Reduction Program Coordinator, the General Manager Nuclear Quality, and support staff involved in the TRP/SPIP process) were knowledgeable with respect to their duties and responsibilities. Also, good communication channels existed among these personnel as evidenced by the smooth transfer of the program from the Little Rock General Office to the site, and by procedure changes that reflect the change in location of the program and in the responsibilities of personnel.

The documentation contained in the recommendation files which the staff reviewed was complete and auditable. In addition, the file documentation maintained throughout the SPIP recommendation disposition process provided adequate information regarding recommendation disposition decisions. Furthermore, the resolution actions necessary to implement a recommendation appeared to adequately address the intent and basis for the recommendation. The engineering analysis for rejecting a recommendation or portions of a recommendation were also found to be adequate.

The staff found that the membership of the MRG consisted of managers with a broad spectrum of responsibilities (e.g., operations, maintenance, quality assurance, instrumentation and control, etc.), and that the MRG Chairman effectively interfaced with the BWOG and adequately reviewed recommendations related to industry experience and events on a periodic basis. The staff also found that the MRG satisfactorily evaluated the adequacy of all disposition decisions related to the recommendations reviewed and satisfactorily reviewed and approved all recommendation closeout documentation.

The staff found that previously closed TRs were promptly reopened for evaluation based on BWOG Steering Committee recommendations and internal reviews by the TRPC following the January 1989 ANO-1 and Oconee Nuclear Station over-cooling events, and that the reevaluations and closures were performed in a satisfactory manner.

The staff found that Closeout Memorandums contained in the recommendation files adequately documented the determination of recommendation intent, the associated engineering analysis, the conclusions formulated during the evaluation for applicability, the conclusions formulated during the evaluation for implementation, and the implementation phases. In addition, the staff found that when additional information or feedback was required to resolve differences of opinions in the recommendation disposition process, the information appeared to be well documented and sufficiently detailed to support final recommendation disposition conclusions.

The staff found that cross check provisions were included in the TRP process to assure that all TRPC decisions on recommendation applicability and/or implementation were confirmed or denied by the MRG. The staff also found that the TRPC and the MRG adequately reviewed the recommendation decisions of other B&W facilities to aid them in their final recommendation disposition decisions.

The staff found that recommendation status was adequately tracked in the TRP data base. This allowed the TRPC to update SPIP recommendation status and related information and provide timely and concise monthly reports to AP&L management. The staff also found that SPIP recommendation status was updated in accordance with the guidelines provided in the BWOG RTS report in all but one case.

The staff found that initial prioritization of recommendations was adequate and assured that the majority of the recommendations were being implemented in a timely manner.

During the staff's review of the 35 selected recommendations, some documentation deficiencies (see Appendix C) as well as concerns associated with recommendation schedule slippage and prioritization were found.

TR-048-MSS (evaluation of the turbine bypass and atmospheric dump valve preventative maintenance programs) was prematurely categorized as C/O. The closeout memo identified the Preventative Maintenance Electrical Engineering group requirements for an adequate preventative maintenance procedure. However, the procedure was not developed and not addressed in the site training, operations, or maintenance programs.

TR-066-MFW (evaluation to ensure that a single electrical failure will not cause a loss of both feedwater trains) and TR-179-MFW (identification of areas to enhance the reliability of main feedwater and condensate control) both had an Engineering Action Request (EAR) currently in effect. However, no action had been taken to resolve these recommendations for nearly 2 years. AP&L stated it

was concerned over the cost benefit of a complete main feedwater and condensate failure modes and effects analysis (FMEA) and requested additional guidance from the BWO. This guidance, clarification of recommendation scope, and intent was not provided until February 1989. Even though not timely, action on these recommendations had been reactivated in accordance with a redirection memo of May 3, 1989.

TR-015-MFW (evaluation to determine if a MFW pump low suction pressure trip is needed) had an error in the BWO RTS report. The RTS stated that a 2/3 logic was installed to closeout this recommendation whereas a 2/2 logic was actually installed in the plant.

The staff found that current TRP procedures had not required written justifications for schedular slippage in the evaluation and implementation phases and the basis for slippage was not required to be documented in the TR file. In addition, final closure due dates had not been established for each TR, and a means to reestablish priorities for TRs that had schedular slippage was not specifically addressed. The staff found that a combination of the above concerns could potentially result in a TR being slipped indefinitely (i.e., never fully implemented). The utility stated that actions to address these concerns will be taken in the near future and that the staff will be updated as resolution actions are implemented.

The staff also found that even though management had the authority to assure all TRs are implemented in a timely manner, it may not have placed enough emphasis on the TRP. This was evidenced by the June 1, 1989 status report that depicts an average slip time of 10.5 months for those TRs that had schedular slippage.

The staff found that 51 (see Appendix D) of the approximately 222 SPIP recommendations were still in the E/I or I phase: 13 recommendations were in the E/I phase; 38 recommendations in the I phase, with 6 requiring a plant modification for closure and 1 requiring a procedure change for closure. Of the 142 recommendations categorized as C/O, 30 required a plant modification and 20 required a procedure change for closure. Twenty-nine of the recommendations were categorized C/R, C/NA or Superseded.

AP&L plans to have all software recommendations implemented by the ninth refueling outage (1R9-late 1990) and all hardware recommendations implemented by the tenth refueling outage (1R10-mid 1992).

4.0 CONCLUSIONS - SPIP PROGRAMMATIC AUDIT

The staff found that AP&L had established a formal process governed by AP&L and ANO-1 TRP policies and procedures, that adequately controls the disposition of BWO SPIP recommendations from identification on the BWO Recommendation Tracking System (RTS) through final disposition with two exceptions. The TRP procedures had not required written justification for schedule slippage in the evaluation and implementation phases and had not required a final implementation due date.

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The staff found that corporate and site management and site organizations were adequately involved in the TRP process and were committed to ensuring that the process effectively controls SPIP recommendation disposition with the exception that management may not be placing enough emphasis on timely completion of recommendations that had schedular slippage.

The staff found that the personnel in the various AP&L departmental organizations involved in the TRP process appeared to be knowledgeable with respect to their TRP duties and responsibilities and good communication channels existed between these organizations. The staff also found that recommendations were receiving adequate initial prioritization for disposition and/or modification but the TRP process had not made provisions for reprioritization of recommendations that had schedular slippage.

The staff found that the documentation presented in the recommendation files was complete, adequate, and contained only a few minor deficiencies. The staff also found that recommendation documentation was auditable and adequately supported the decisions regarding recommendation disposition.

The staff reviewed 35 selected TRs and found that 20 were categorized as C/O, 3 were categorized as C/NA, one was categorized as C/R, 8 were being implemented, and 3 were being evaluated for implementation. Therefore, the staff concluded that recommendations were being closed out in a timely manner.

Based on the above, a review of TRP documents, a review of AP&L policies and procedures, and discussions with AP&L personnel, the staff determined that the TRP program used for ANO-1 satisfactorily controlled recommendation disposition and is, therefore, acceptable. (Persons present at the September 20, 1989 exit meeting are listed in Appendix E.)

The staff noted that AP&L is also applying the TRP to ANO-2. This shows an overall strong utility commitment to improve the safety of operations for both ANO-1 and 2.

The adequacy of TR implementation will be evaluated at a future date during the implementation audit.