

Public Service
Electric and Gas
Company

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Vice President and Chief Nuclear Officer

March 9, 1990
NLR-N90050

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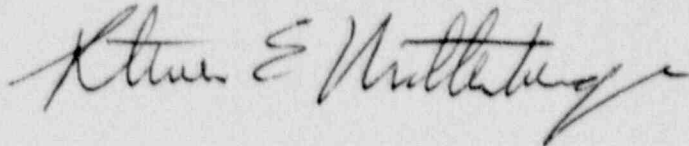
Gentlemen:

RESPONSE TO NOTICE OF VIOLATION
NRC INSPECTION REPORT 50-354/89-80
DOCKET NO. 50-354
HOPE CREEK GENERATING STATION

Public Service Electric and Gas Company (PSE&G) is in receipt of your letter, dated February 7, 1990, which transmitted a Notice of Violation citing multiple failures to comply with requirements of approved station procedures.

Pursuant to the provisions of 10 CFR 2.201, our response to the Notice of Violation is provided in Attachment 1.

Sincerely,



Attachment

- C Mr. C. Y. Shiraki
USNRC Licensing Project Manager

- Mr. T. P. Johnson
USNRC Senior Resident Inspector

- Mr. W. T. Russell, Administrator
USNRC Region I

- Mr. K. Tosch, Chief
Bureau of Nuclear Engineering
New Jersey Department of Environmental Protection

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ATTACHMENT 1

10 CFR 2.201 INFORMATION
PUBLIC SERVICE ELECTRIC AND GAS COMPANY
HOPE CREEK GENERATING STATION
RESPONSE TO NOTICE OF VIOLATION
INSPECTION REPORT NO. 50-354/89-80

NLR-N90050

Hope Creek Technical Specification 6.8.1 requires that written procedures be established, implemented and maintained for various plant activities. As described in Appendix A of your February 7, 1990 letter, eight examples were identified where activities were not performed in accordance with established procedures.

I. PUBLIC SERVICE ELECTRIC AND GAS COMPANY DOES NOT DISPUTE THE VIOLATION. Each example is addressed separately, below, by ITEM number.

ITEM 1 - Contrary to the requirements of Station Administrative Procedure SA-AP.ZZ-023(Q), dismantled scaffolding components were found leaning against the impulse (instrument) lines for safety related instruments.

1. **IMMEDIATE CORRECTIVE ACTIONS:** The scaffolding material was immediately removed from contact with the impulse (instrument) lines and returned to within the confines of the storage area.
2. **CORRECTIVE ACTION TO PREVENT RECURRENCE:** Station Aid ICA-089-011, a red warning sign, was installed on October 18, 1989 in the immediate area of the subject lines that cautions all personnel that the instrument lines are sensitive and not to be impacted or disturbed under any circumstance.
3. **WE ARE NOW IN COMPLIANCE ON THIS ITEM.**

ITEM 2 - Contrary to the requirements of Station Administrative Procedure SA-AP.ZZ-032, about 50% of Electrical, Mechanical, and I&C Maintenance procedures were overdue for biennial review.

1. **IMMEDIATE CORRECTIVE ACTIONS:** Two additional procedure writers were added to the permanent staff in November, 1989 along with six consultants to eliminate the biennial review backlog by June, 1990. As of the date of this letter, the backlog has been reduced to less than 5% (8 of 268) for mechanical procedures, about 10% (16 of 150) for electrical procedures and less than 20% (301 of 1591) for I&C procedures.
2. **CORRECTIVE ACTION TO PREVENT RECURRENCE:** Periodic management evaluation of the procedure writing effort will be conducted to ensure that no recurrence of the backlog problem takes place.
3. **WE WILL ELIMINATE THE BIENNIAL REVIEW BACKLOG BY JUNE, 1990.**

ITEM 3 - Contrary to the requirements of Station Administrative Procedure SA-AP.ZZ-0009, a valve identified as damaged, with a work order written to make repairs, had no EMIS tag hung on it.

1. **IMMEDIATE CORRECTIVE ACTIONS:** An EMIS tag was hung on the valve and the valve was subsequently repaired.
2. **CORRECTIVE ACTION TO PREVENT RECURRENCE:** A review of the procedure involved determined that the procedural requirement, "All personnel shall..." should be revised to read, "All personnel should attach an (EMIS tag) to or near the component as soon as practicable." This revision is now in progress.
3. **WE ARE NOW IN COMPLIANCE.**

ITEM 4 - Contrary to the requirements of Station Administrative Procedure SA-AP.ZZ-013, a Temporary Modification Request for a number of floor drain to be plugged was not prepared.

1. **IMMEDIATE CORRECTIVE ACTIONS:** An Operations Department Directive was immediately issued to control floor drain plugging.
2. **CORRECTIVE ACTION TO PREVENT RECURRENCE:** A procedural revision was made to SA.AP.ZZ-013(Q) which specifically included criteria and Attachments to improve control over the installation of floor drain temporary plugs and the Operations Department Directive that previously addressed floor drain plug installation was deleted. A Closing Document notation was included in the revision to the procedure to ensure continued compliance.
3. **WE ARE NOW IN COMPLIANCE.**

ITEM 5 - Contrary to the requirements of Station Administrative Procedure SA-AP.ZZ-0009, fifteen completed work orders were closed out with no "cause of failure" or cause code entered on each work order.

1. **IMMEDIATE CORRECTIVE ACTIONS:** A Work Order Repair/Cause Maintenance Status form was developed and is now included in work order packages. The form is filled out and reviewed by each department or group prior to returning the completed work order to the Work Control Group. The use of the form was discussed with Controls and Mechanical Maintenance personnel.
2. **CORRECTIVE ACTION TO PREVENT RECURRENCE:** The use of the Work Order Repair/Cause Maintenance Status form will substantially enhance the reporting of cause codes.
3. **WE ARE NOW IN COMPLIANCE.**

ITEM 6 - Contrary to the requirements of Maintenance Department Directive Procedure IC-DD.ZZ-020(Q), the system engineer for Rosemount Transmitters did not generate periodic status reports from test results.

1. **IMMEDIATE CORRECTIVE ACTIONS:** During the short period that the Maintenance Department Directive was in effect only a few transmitter calibrations were done, with most being scheduled for the refueling outage, there was no significant data available to write a report. Since the purpose for the directive is to utilize calibration data to determine transmitter performance and initiate corrective action when found necessary, the requirement for a report in the directive has no real purpose. Therefore, it was determined that no report should be required by the directive.
2. **CORRECTIVE ACTION TO PREVENT RECURRENCE:** Based upon the determination that the directive requirement for periodic system engineer status reports was needlessly included, the Maintenance Department Directive has been revised to eliminate the requirement.
3. **WE ARE NOW IN COMPLIANCE.**

ITEM 7 - Contrary to the requirements of Station Administrative Procedure SA-AP.ZZ-031, an oil leak on the "C" Standby Diesel Generator was not cleaned up until several days after NRC identified the problem.

1. **IMMEDIATE CORRECTIVE ACTIONS:** The oil leakage was cleaned up.
2. **CORRECTIVE ACTION TO PREVENT RECURRENCE:** Procedure SA-AP.ZZ-031, "Station Housekeeping Program", is currently undergoing its biennial review and will be revised by April, 1990. The revision will include a restatement of the requirement to clean up oil leakage immediately after identification to as soon as practicable after identification. This change better states the original intent of the procedure.
3. **WE ARE NOW IN COMPLIANCE.**

ITEM 8 - Contrary to the requirements of Station Administrative Procedure SA-AP.ZZ-013, a temporary differential pressure gage that was installed across a lube oil filter of the "B" Standby Diesel Generator Generator for troubleshooting was left in place longer than 16 hours after work activity stopped.

1. **IMMEDIATE CORRECTIVE ACTIONS:** The subject gage was removed on the day that it was identified.

2. **CORRECTIVE ACTION TO PREVENT RECURRENCE:** The shift technician was directed to install the subject gage against a work order that was "open" on the computer tracking system, but manually "closed" and in the "in basket" to be changed in the computer. No additional paper work was initiated to highlight the gage's installation. To prevent recurrence, administrative controls were reemphasized to all shift personnel to ensure any test equipment installed is properly documented.
3. **WE ARE NOW IN COMPLIANCE.**