

U.S. NUCLEAR REGULATORY COMMISSION

REGION I

Report Nos. 50-245/82-10
50-336/82-14

Docket Nos. 50-245 & 50-336

License No. DPR-21 Priority - Category C
DPR-65 - C

Licensee: Northeast Nuclear Energy Company
Millstone Point Nuclear Power Station
Waterford, Connecticut

Facility Name: Millstone Point Nuclear Power Station Units 1 & 2

Inspection at: Waterford and Hartford, Connecticut

Inspection conducted: June 21-25 1982

Inspector: E. Shaub for 8.11.82
G. Napuda, Reactor Inspector date signed
P. Bissett 8/10/82
P. Bissett, Reactor Inspector date signed
E. Shaub for 8.11.82
G. Meyer, Reactor Inspector date signed
E. Shaub 8.11.82
E. Shaub, Reactor Inspector date signed
Approved by: D. L. Caphton 8/12/82
D. L. Caphton, Chief, MPS Section, DETP date signed

Inspection Summary:

Combined Inspection on June 21-25, 1982 (Report Nos. 50-245/82-10 and 50-336/82-14)

Areas Inspected: Routine, unannounced inspection of the Quality Assurance Program including QA Program annual review, QA/QC administration, QA records program, document control program, site organization and administration, personnel qualifications, receipt, storage and handling of safety related materials, and IE circular followup. The inspection involved 113 inspector hours onsite by four region based inspectors, 15 hours at the corporate offices by two region based inspectors, and 7 hours offsite by two region based inspectors.

Results: In the nine areas inspected one violation was identified in one area (violation - failure to maintain procedures and engineering drawings current, paragraph 8.4.1).

DETAILS

1. Persons Contacted

- G. Baston, Chairman-Millstone Point (MP) 1 Nuclear Review Board
(Director-Nuclear Engineering and Operations Services)
- J. Beauchamp, Lead Engineer-MP 1 QC
- * C. Brazel, NUSCO Operations QA Engineer
- D. Brocks, Instrument Control Specialist
- R. Cikatz, Lead Engineer-MP 2 QC
- * F. Dacimo, Quality Services Supervisor (Station)
- D. Diedrich, Manager-NUSCO QA
- * E. Farrell, Station Services Superintendent
- R. Griswold, Supervisor-Storerooms
- R. Herbert, Superintendent-MP 1
- * M. Hornyak, NUSCO Operations QA Engineer
- J. Jerome, NUSCO QA Auditor
- J. Kelley, Superintendent-MP 2
- * E. LaWare, NUSCO QA Engineer
- F. Libby, NUSCO Senior QA Engineer
- G. McElhone, Supervisor-Betterment and Construction QA
- R. Mizhaud, Supervisor-Generation Construction QC
- * E. Mroczka, Station Superintendent
- D. Nordquist, Supervisor-NUSCO Design and Operations QA
- * V. Papadopoli, Supervisor-QA (Station)
- M. Sforza, NUSCO QA Engineer
- D. Wilkens, Assistant Chemistry Supervisor-MP 1

NRC

- * D. Lipinski, Resident Inspector
- * T. Shedlosky, Senior Resident Inspector

The inspector also held discussions with and interviewed other administrative, craft/trades, engineering, operations, QA/QC, stores, and technical personnel.

* denotes those present at the exit interview.

2. Quality Assurance Program Review

The inspectors reviewed changes to the procedures, identified by an asterisk in subsequent paragraphs of this report, to assure they were consistent with the Northeast Utilities Quality Assurance Topical Report NU-QA-1, Rev. 4. The inspectors also verified that the remaining listed procedures were not affected by the recent revision to the Quality Assurance Topical Report (Rev. 4). During the conduct of the inspection, discussions with licensee personnel indicated that they were aware of and understood the changes made to the identified procedures.

No violations were identified.

3. Onsite Organization and Administration3.1 References

- Millstone Nuclear Power Station, Final Safety Analysis Report (FSAR), Section 12.2, Organization and Responsibility
- Technical Specifications, Section 6.3. Facility Staff Qualifications
- Technical Specifications, Figure 6.2-2 Facility Organization Chart

3.2 Program Review

The inspector conducted discussions with licensee representatives and reviewed the documents referenced above to verify the following.

- The onsite organizational structure is as described in the Facility Technical Specifications
- Personnel qualification levels are in conformance with applicable codes and standards as described in Technical Specifications

- Lines of authority and responsibility are in conformance with Technical Specifications
- Changes, if any, in the organizational structure have been reported to the Commission as required by Technical Specifications

No violations were identified.

4. Personnel Qualification Program

4.1 References

- Millstone Nuclear Power Station Final Safety Analysis Report (FSAR), Section 12.0, Conduct of Operations
- Technical Specifications, Section 6.3, Facility Staff Qualifications
- ANSI N18.1 - 1971, Standard for Selection and Training of Personnel for Nuclear Power Plants

4.2 Program Review

The inspectors reviewed the plans and procedures referenced above to verify the following.

- Minimum educational, experience, and/or qualification requirements have been established
- Position descriptions, including responsibilities, have been assigned in writing

4.3 Implementation Review

The inspectors reviewed resumes, **training files** and conducted a number of interviews with selected personnel in the following positions to verify qualifications and experience as required by ANSI N18.1 - 1971 and Millstone Nuclear Power Station Exempt Position and Physical Job Descriptions.

- Principal operating staff
- First level supervisors
- Technical engineering staff
- Plant craftsmen
- Plant operators

- NDE examiners and QC inspectors
- Members and alternate members of offsite review committees

No violations were identified.

5. Quality Control

5.1 Reference

The requirements governing the performance of quality control inspections and surveillances of safety-related areas are specified in the following documents.

- 10 CFR 50, Appendix B, Quality Assurance Criteria for Nuclear Power Plants
- Regulatory Guide 1.30/ANSI N45.2.4 - 1972, Quality Assurance Requirements for Inspection and Testing of Instrumentation and Electrical Equipment
- Regulatory Guide 1.33/ANSI N45.2.4 - 1972, Quality Assurance Program Requirements
- Regulatory Guide 1.58, Rev. 1/ANSI N45.2.6 - 1978, Qualification of Inspection Personnel
- Regulatory Guide 1.116/ANSI N45.2.8 - 1975, Quality Assurance Requirements for Inspection and Testing of Mechanical Equipment

5.2 Program Review

The above documents specify that quality control work achieve the following.

- Inspections are performed by trained personnel, independent of the work being inspected and qualified for the applicable inspection
- Administrative procedures provide sufficient guidance to direct the overall inspection effort
- Detailed instructions are used to ensure thorough inspections
- Documentation exists for the results of the inspection

The inspector reviewed the following procedures to verify that the licensee maintains an administrative system to meet the above requirements.

- ACP-QA-2.02, Performing Category I Work
- ACP-QA-2.02A, Installation Inspections
- * -- ACP-QA-9.05, Monitoring of QA Activities
- * -- NQA-2.10, Performance, Reporting and Follow-up of Surveillance Activities
- * -- NUSCO Generation Construction Quality Control Manual

5.3 Implementation

The inspector reviewed the following areas to verify compliance with the quality control program requirements.

- Qualifications of three NUSCO QC personnel
- 1982 Millstone 2 Job Order Log
- File on inspections for Job Order 282-92 (PCDR 2-160-81)
- 1982 Monitor Log for Millstone 1
- Three monitor reports for Millstone 1
- NQA Surveillance Report Log from February 4, 1982 to June 17, 1982
- Three QC reviews of Final Documentation Turnover Package

5.4 Findings

The inspector did not identify any violations.

However, during the review of licensee inspection records, the inspector noticed an apparently large time lag between completion of the inspected work and the closeout of the documentation package. A summary of open documentation packages revealed that over 900 open job order documentation packages existed from 1979, 1980, and 1981 as of June 1, 1982. The inspector noted that the review of such documentation packages, required by procedure, is unlikely to yield any meaningful results when the actual work has been completed for many months or even years. A licensee representative acknowledged the inspector's observation and stated that this area would be evaluated for possible improvements.

Any improvements in the licensee administrative system to achieve better timeliness of job order documentation closeouts will be reviewed during a future NRC inspection (245/82-10-01; 336/82-14-01).

6. Audits

6.1 Reference

The requirements governing the performance of quality assurance audits of safety-related areas are specified in the following documents.

- 10 CFR 50, Appendix B, Quality Assurance Criteria for Nuclear Power Plants
- Technical Specifications, Section 6, Administrative Controls
- Regulatory Guide 1.33, Rev. 2/ANSI 18.7 - 1976; Quality Assurance Program Requirements
- Regulatory Guide 1.144/ANSI N45.2.12 Auditing of Quality Assurance Programs

6.2 Program Review

The above documents specify that audits achieve the following.

- The content of audit reports clearly defines the scope of the audit and the results
- Audits are conducted by trained personnel not having direct responsibility in the area being audited
- Frequency of audits is in conformance with Technical Specifications and the QA program
- Appropriate followup actions (including reaudit, if necessary) are being taken, are in progress or are being initiated
- The audited organization's response to the audit findings is in writing, is timely, and adequately addresses the findings and recommendations

The inspector reviewed the following procedures to verify that the licensee maintains an administrative system to meet the above requirements.

- * -- ACP-QA-9.01, Internal In-Plant Audit Program
- NEO-2.02, Charter for Nuclear Review Board
- * -- NEO-3.01, Conduct and Format of Nuclear Review Board Audits
- * -- NQA-1.14, Conduct, Reporting, and Followup of Audits

6.3 Implementation

The inspector reviewed the following areas to verify compliance with the audit program requirements.

- 1982 Schedule for In-Plant Audits
- 1981 & 1982 Log for In-Plant Audits
- Audit files, including checklist, report, and response for five in-plant audits (A58143, A58151, A58152, A58156, and A58157)
- 1982 Schedule for NUSCO Operations QA Plant Audits
- 1981 & 1982 Log of NUSCO Plant Audits for Millstone 1 & 2
- Audit files, including checklist, report, and response, for three NUSCO plant audits (A60158, A60177, and A60347)
- 1982 Schedule for Nuclear Review Board (NRB) Audits at Millstone 1
- Audit file, including checklist, report, and response for Millstone 1 NRB Audit A20100
- Report of Combined Utility Assessment of the Adequacy of the NUSCO QA Program, May 4-8, 1981 (CU Audit)
- NUSCO 1981 Management Review (CU Audit) - Corrective Action, June 17, 1982
- Audit file, including checklist, report and response, for Betterment Construction QA Audit A40713

6.4 Findings

- 6.4.1 There are four organizational units which perform audits of the operating reactor plants (i.e., plant QA, NUSCO Operations QA, NUSCO Betterment Construction QA, and the NRB). Schedules exist for the audits performed by each organizational unit. These schedules represent the only administrative means to coordinate the coverage of the different audits to ensure thorough auditing of each area of plant operations. To verify that auditing is thorough, the inspector reviewed audits of training contained in the audit reports from the different auditing organizations and found the coverage to be comprehensive. However, the potential for incomplete coverage of an area exists.

A licensee representative stated that licensee management had identified the need for additional administrative control of audit coverage. Currently, a matrix of areas to be audited and the organizations responsible is being developed. The projected completion date is August 1, 1982.

Any administrative controls of audit coverage, in addition to current scheduling, between NUSCO QA, plant QA, and the NRB will be reviewed during future NRC inspections (245/82-10-02; 336/82-14-02).

- 6.4.2. During review of audit reports from the different auditing organizations, the inspector observed the many nonstandard means of handling observations other than findings.

Violations of requirements and procedures were consistently described as findings. The details of the example found and the requirement violated were listed. However, suggested improvements in the quality assurance program and areas where requirements were likely to be violated in the future were addressed by a variety of means. In-plant audits had "recommendations" in the audit which represented suggested program improvements, while other "recommendations" represented suggested corrective actions to specific findings. Further, other in-plant audits had recommendations (program improvements) listed separately from the audit report as a memo to the audit file. NUSCO plant audit reports appeared to have no recommendations, but referred to "unresolved open items." NUSCO Betterment Construction QA Audit Report A40713 identified "areas of concern" separate from audit findings.

The inspector discussed with the licensee the continued utilization of audit reports to identify suggested recommendations, e.g., improvements to the quality assurance program with identified benefits, and the need to standardize the use of recommendations between the auditing organizations. A licensee representative stated that the area of recommendations would be evaluated and appropriate action taken. The results of this evaluation will be reviewed during future NRC inspections (245/82-10-03; 336/82-14-03).

No violations were identified.

7. QA Record Program

7.1 References

-- Technical Specifications, Section 6 Administrative Controls

- Quality Assurance Program Topical Report, Revision 4A, April 5, 1982, Sections 5 and 17
- ANSI N45.2.9-1974, Requirements for Collection, Storage, and Maintenance of Quality Assurance Records for Nuclear Power Plants
- Regulatory Guide 1.88, Rev. 2
- ANSI N18.7-1976, Administrative controls and quality assurance for the operational phase of nuclear power plants
- ANSI N45.2-1977 Quality Assurance Program Requirements

7.2 Program Review

The licensee's QA program for records management was reviewed for conformance with references in paragraph 11.1 for the following.

- Requirements to maintain and retain Quality Assurance type records
- Responsibilities are assigned to ensure QA records identified will be maintained
- Responsibilities are assigned and controls established to assure transfer and retention of construction and preoperational phase records
- Record storage controls are established which identify the record storage facility, designated custodian(s) in-charge of storage facilities, the filing system for record retrieval, a method for verifying records received are in agreement with preestablished checklists, access control to files and accountability maintained when files are removed from storage, and a method for correcting files and disposing of superceded records
- Responsibilities assigned to establish retention periods for records not covered by the FSAR, Technical Specifications or 10 CFR
- Authority and responsibility for authorizing disposal of records assigned

7.2.1 The following procedures were reviewed.

- Administrative Control Procedure (ACP)-QA-10.04, QA Records, Revision 19, August 27, 1981

- SF 1001 Records Retention and Turnover Schedule, Revision 5, March 26, 1982
- ACP-QA-3.03, Document Control, Revision 17, April 13, 1981
- Nuclear Plant Records Manual (NPRM)
- Nuclear Plant Records Facility Departmental Instructions, Revision 0, February 22, 1982
- NPRM 2.06, Inspection of the Physical Condition of Nuclear Plant Documents and Records Stored with Nuclear Records Vaults, Revision 3, May 20, 1980

7.3 Implementation

7.3.1 The inspector selectively sampled various QA records to verify that the record:

- Was listed on a records checklist or index;
- Was readily retrievable from its designated file or microfilm storage location as applicable;
- Was provided suitable protection and stored in file cabinets or containers in a predetermined location; and,
- Was processed in accordance with the SRMS manual and work instructions.

The following record types were examined for each unit.

- Various Northeast Utilities Correspondence
- Six plant design change request (PDCR) packages including 2-148-80, 2-9-81, 1-30-81 and 1-75-80
- Four material receipt inspection reports including 1-131-80, 1-81-39, 2-103-80 and 2-11-80
- Six surveillance reports
- QA audits MPS-QA-586 and A58147/149
- Radiation Work Permits including 113750, 113464 and 113117

- Plant Operations Review Committee (PORC) meeting minutes 80-24 and 80-62
- Unit 1 bypass and jumper log June 1980
- Chemistry log daily log CP-805-1 for week of June 15, 1981
- Site Operations Review Committee (SORC) meeting minutes 80-18

7.3.2 The inspector toured the licensee's nuclear plant records facility to verify that: 1) file room was being controlled 2) micro filming and record processing was being performed as described in work instructions, and 3) records were being transmitted to the records center with the required transmittal. The inspector also toured the nuclear records vault to verify environmental conditions and fire suppression systems were as required by ANSI-N45.2.9-1974.

7.4 Findings

No violations were identified, however, the following unresolved item was identified.

7.4.1 During the tour of the Nuclear Records vault the inspector noted that both temperature and humidity were out of specification for storage of radiographs and other temperature and moisture sensitive films, as required by NPRM 2.05, "Inspection of Permanent Storage Vaults for Temperature Humidity and General Conditions," Revision 4, May 1, 1981. Further review of the inspection logs showed that the out of specification temperature and humidity conditions have existed since mid 1979.

The licensee representative informed the inspector that the problem has been identified and that corrective action was in a "hold" status awaiting corporate approval of a new site administration building and records storage vault. In addition, the licensee's interim corrective action was to increase the frequency of nuclear record inspections (NPRM 2.06, Inspection of the Physical Condition of Nuclear Plant Documents Stored in the Nuclear Record Vaults) to monthly and investigate the option of an offsite record storage facility if the monthly records inspections revealed signs of deterioration or other abnormal conditions. Subsequently, the monthly inspections have not revealed any deterioration and have been reduced to a semiannual frequency.

This item is unresolved pending further review during a subsequent inspection(s) to determine that the licensee's resolution of the temperature/humidity problem is adequate and timely (245/82-10-04; 336/82-14-04).

8. Document Control Program

8.1 References

- Technical Specifications, Section 6, Administrative Control
- Quality Assurance Program Topical Report, Revision 4A, April 9, 1982, Sections 5, 6, & 17
- ANSI N45.2-1977, Quality Assurance Program Requirements
- ANSI N18.7-1976, Administrative Controls and Operational Quality Assurance for the Operational Phase of Nuclear Power
- Reg. Guide 1.33, Rev. 2, February 1978, Quality Assurance Program Requirements

8.2 Program Review

The licensee's program for document control was reviewed to verify that the program is consistent with the requirements of the references in paragraph 12.1 above and to determine that the program:

- Requires that current as-built drawings, including piping and instrument drawings (P&ID's) be provided to the plant in a timely manner;
- Requires that proposed drawing changes and the revised drawings receive the same level of management review required of the original drawings;
- Provides provisions for identifying and marking of drawings that have outstanding revisions;
- Establishes control of obsolete drawings;
- Requires that discrepancies found between as-built drawings and as constructed facility are handled as design changes;
- Requires master indices to be maintained for drawings, manuals technical specifications, procedures that indicate the current revision; and,
- Provides a mechanism for document issuance, distribution, use, and periodic review.

The following procedures, which describe the administrative controls for document control were reviewed by the inspector.

- ACP-QA-3.01, ACP's and Station Forms, Revision 9, January 6, 1982
- ACP-QA-3.02, Station Procedures and Forms, Revision 21, March 29, 1982
- ACP-QA-3.03, Document Control, Revision 17, April 1, 1982
- NPRM 3.01, NUPOC/NUSCO Drawing Control System, Revision 3, May 1, 1981

8.3 Implementation

The following documents, indices, and instructions were reviewed to verify implementation of the established document control program.

- Master document indices
- Controlled document distribution list
- Master drawing list and controlled distribution lists
- Station Form (SF)-328 1 & 2 Operations Critical Drawings Lists
- Drawing Change Request (DCR) Log Units 1 & 2

Drawings, procedures, manuals, station forms and surveillance data sheets were selectively sampled at the site to verify that controlled copies were consistent with the Master Document Indices. The following controlled copy locations were checked.

- Control room - procedures, station forms and drawing files
- Technical support center (TSC) - procedures, Technical Specifications, drawing files and station forms
- Instrument & Control Shop-procedures, station forms, and drawing files
- Emergency Operations Facility (EOF) - procedures and drawing files
- Document Control Center - procedures, station forms, master indices and controlled Document Distribution Lists

At each location twenty or more administrative, operating, surveillance, or maintenance procedures, and P&ID's were checked against the master indices.

8.4 Findings

The following violation and inspector follow items were identified by the inspector.

- 8.4.1 Criterion VI, Appendix B 10 CFR 50 requires that, "Measures shall be established to control the issuance of documents, such as instructions, procedures, and drawings including changes thereto, ... These measures shall assure documents including changes, ... and are distributed to and used at the location where the prescribed activity is performed."

Contrary to the above, the inspector identified procedures and drawings in the control room, Technical Support Center (TSC) and Emergency Operations Facility (EOF) that were no longer effective or depicted the current system status. The following matrices indicates the sample size at each location and the number of discrepancies.

	<u>Unit 1</u>					
	<u>Control Room</u>		<u>TSC</u>		<u>EOF</u>	
	<u>Sample Size</u>	<u>Discrepancies</u>	<u>Sample Size</u>	<u>Discrepancies</u>	<u>Sample Size</u>	<u>Discrepancies</u>
Drawings (Revision and Pen & Ink Changes)	20	2	20	4	20	3
Procedures	19	0	15	0	15	2
	<u>Unit 2</u>					
	<u>Control Room</u>		<u>TSC</u>		<u>EOF</u>	
	<u>Sample Size</u>	<u>Discrepancies</u>	<u>Sample Size</u>	<u>Discrepancies</u>	<u>Sample Size</u>	<u>Discrepancies</u>
Drawings (Revision and Pen & Ink Changes)	12	0	15	9	15	5
Procedures	15	3	15	4	12	1

The controlled documents sampled included operations critical drawings, administrative procedures, plant operation and emergency procedures, surveillance and maintenance procedures, station forms, and site emergency response implementing procedures.

Failure to maintain procedures and drawings current in the control room, technical support center, and emergency offsite facility is contrary to Appendix B 10 CFR 50,

Criterion VI, Northeast Utilities QA program Topical Report Section VI and ACP-QA-3.03, Document Control and constitutes a violation (245/82-10-05; 336/82-14-05).

- 8.4.2 The licensee's Engineering Staff and Operations Support Staff are currently making pen & ink changes to operations critical drawings in the Control Room, TSC, and EOF. The inspector noted that ACP-QA-3.03, Document Control only requires the Control room drawings be marked to reflect the as-built conditions shown on Drawing Change Requests (DCR) and does not administratively control the TSC and EOF drawings.

The licensee's representative acknowledged the inspector's findings and stated that they would evaluate the need to administratively control and make pen & ink changes at the TSC and EOF.

This item will be reviewed in a subsequent NRC:RI inspection (254/82-10-06; 336/82-14-06).

- 8.4.3 Controlled documents are distributed to persons or positions authorized to receive documents in accordance with the Controlled Document Distribution List. However, the inspector noted that a transmittal form for distribution and receipt acknowledgment is not being used.

The licensee's representative acknowledged the inspector's findings and stated that a document transmittal form was currently being developed. This item will be reviewed in a subsequent NRC:RI inspection (245/82-10-07; 336/82-14-07).

9. Receipt, Storage and Handling

9.1 References

- * -- ACP-QA-4.01 Plant Housekeeping, Rev. 8
- * -- ACP-QA-4.02 Procurement, Control and Identification of Material, Rev. 15
- ACP-QA-4.03 Classifying and Upgrading Spare Parts, Rev. 7
- * -- ACP-QA-4.04 Instructions for Packaging, Shipping, Receiving Storage and Handling, Rev. 7
- ACP-QA-4.05 Product Acceptance Inspection and Testing, Rev. 3
- ACP-QA-4.06 Control of Weld Material, Rev. 9

- QC-G-6.01 Receiving and Handling of Materials, Equipment and Parts, Rev. 2
- QC-G-6.02 Storage of Materials, Equipment and Parts, Rev. 1
- QC-G-7.01 Inspection Status (Tagging), Rev. 2

9.2 Program Review

The documents referenced above were reviewed to determine that administrative controls for receipt, storage, and handling of safety related items have incorporated the requirements as described in NU-QA-1, Rev. 4.

This review determined that administrative controls included the following.

- Receipt and inspection of safety-related items including documentation thereof
- Dispositioning acceptable, nonconforming, and conditional release items
- Maintenance and care of items in storage including appropriate environmental conditions, control of access to, and periodic inspections of storage areas
- Qualification requirements for personnel performing receipt inspections
- Qualification requirements for inspection and use of handling equipment and rigging

No violations were identified, however unresolved items are addressed in sub paragraph .4 below.

9.3 Implementation Review

The onsite warehouses, HP chemical/reagent in-plant storage area, and I&C Test and Measurement Instruments Storage Room were toured to verify that receipt inspection, disposition, storage controls, traceability, storage, maintenance, nonconformance control and warehouse housekeeping requirements were in accordance with the appropriate procedures.

No violations were identified, however unresolved items are addressed below.

9.4 Findings

The licensee has assigned the responsibilities of modification work to a Backfit and Betterment group, which reports to offsite nonoperations management. This group has its own internal QC personnel who inspect and monitor activities such as warehousing. An onsite QA group, which reports to the offsite QA Manager, audits and monitors (quality surveillance) Backfit and Betterment activities. Another onsite QA group, which reports to plant management, audits, inspects and monitors (quality surveillance) ongoing plant activities such as maintenance, operations, and warehousing. Both the plant and modification groups do purchasing. These procured items/materials are then received and stored at warehouses under the custody of the plant. The inspection and surveillance of Backfit and Betterment purchased items (upon receipt and during storage) is retained by that group's QC personnel. The inspector reviewed the various interfaces of the program and its implementation and identified the following.

- 9.4.1 The QC-G series (modification group) procedures do not address the reinspection of those items/materials that had been issued for use and are subsequently returned to the warehouse and are to remain under the cognizance of the modification group. The inspector stated that requirements call for appropriate inspection(s) to verify physical identification/traceability of the items, damage or deterioration, etc. The inspector also stated that no instances were identified where such items/material had actually been accepted for reissue. The licensee representatives acknowledged the inspector's comments and stated that this area would be reviewed and appropriate action taken. This item is unresolved pending further review to verify that appropriate licensee action will establish written instructions to preclude the issuing of such unacceptable items/material (245/82-10-08; 336/82-14-08).
- 9.4.2 The ACP-QA series procedures (plant) address the reinspection of items/materials that have been issued for use by plant personnel, but are returned to be stored and reissued at some subsequent time. Also addressed is the inspection of items/materials that are transferred to the cognizance custody of the plant by contractors. However, the inspection of previously issued items/materials returned to the warehouse, that are transferred from the modification group to the custody of the plant, is not addressed. The inspector stated that appropriate reinspection of all transferred items/material is a requirement. The inspector also stated that no instances were identified where unacceptable items/material had been accepted for reissue. The licensee representatives acknowledged the inspector's

comments and stated that this area will be reviewed and appropriate action taken. This item is unresolved pending further review to verify that appropriate licensee action will preclude the issuing of unacceptable items/materials that were so transferred (245/82-10-09; 336/82-14-09).

9.4.3 NU-QA-1, paragraph 8.2, requires that items/material be permanently identified. The ACP-QA series procedures specify how and when the affixing of permanent identification is done. However, the QC-G series of procedures do not address this subject. The inspector stated that implementing procedures such as the QC-G series must describe when and the manner in which this identification is affixed and by whom. The licensee representatives acknowledged the inspector's comments and stated that this area will be reviewed and appropriate action taken. This item is unresolved pending further review to verify that licensee action establishes such written descriptions and a selected sample of applicable items/material is permanently identified (as practicable) (245/82-10-10; 336/82-14-10).

9.4.4 The inspector noted that procurement documents request vendors to furnish shelf life data for items/materials that could deteriorate during storage. However, the inspector identified that the shelf life control system did not include all such items/materials that are currently in storage (e.g., purchases made a number of years ago). The inspector stated that shelf life limits, if not supplied by a vendor, must be determined for all safety-related items in storage that are subject to deterioration. Once determined, these limits can then be incorporated into the shelf life control system. The inspector did not identify any instance where suspect items/materials were issued for use. The licensee acknowledged the inspector's comments and stated this area will be reviewed and appropriate action taken. Pending further review of the licensee's actions and verification by sampling that all such items/materials are included in the shelf life system, this item is unresolved (245/82-10-11; 336/82-14-11).

10. IE Circular Followup

10.1 IE Circular No. 80-22: Confirmation of Employee Qualifications

The inspectors, through discussions with the Nuclear Personnel Manager, determined that the licensee has in effect, employment policies which confirm the professional qualifications of employees. Educational diplomas/certificates and a personal background investigation, performed by an independent investigative firm, are used to

confirm the validity of technical and educational qualifications as presented in employment applications. The inspectors reviewed applicable documentation that supported the completion of personal background investigations of several employees.

11. Unresolved Items

Unresolved items are matters about which more information is required in order to ascertain whether they are acceptable, deviations or violations. Five unresolved items were identified during this inspection and are detailed in paragraphs 7.4.1, 9.4.1, 9.4.2, 9.4.3 and 9.4.4.

12. Management Meetings

Licensee management was informed of the scope and purpose of the inspection at an entrance interview conducted on June 21, 1982. The findings of the inspection were periodically discussed with licensee representatives during the course of the inspection. An exit interview was conducted on June 25, 1980, (see paragraph 1 for attendees) at which time the findings of the inspection were presented.