



Tennessee Valley Authority, Post Office Box 2000, Soddy-Daisy, Tennessee 37379-2000

Robert A. Fenech
Vice President, Sequoyah Nuclear Plant

February 22, 1994

U.S. Nuclear Regulatory Commission
ATTN: Document Control Desk
Washington, D.C. 20555

Gentlemen:

In the Matter of)	Docket Nos. 50-327
Tennessee Valley Authority)	50-328

SEQUOYAH NUCLEAR PLANT (SQN) - NRC INSPECTION REPORT NOS. 50-327,
328/93-54 - REPLY TO NOTICE OF VIOLATION (NOV) 50-327, 328/93-54-01

Enclosure 1 contains TVA's reply to Albert F. Gibson's letter to Mark O. Medford dated January 21, 1994, which transmitted the subject NOV. The violation is for three examples of failure to follow procedures. A list of commitments is included in Enclosure 2.

The following information is provided in response to NRC's question regarding the plans and schedule for strengthening the preventive maintenance (PM) program. The reliability-centered maintenance (RCM) program currently in progress will identify maintenance activities to improve plant, system, and/or component reliability. Following the approval of the RCM analysis by the system engineers, recommendations are incorporated into the PM program.

The SQN RCM program has been reviewed by the Electric Power Research Institute, the Institute of Nuclear Power Operations, and a consultant and was constructed following the review of industry benchmark programs. Following initial implementation, the living program is intended to fine-tune program effectiveness by incorporating operational and maintenance history on an ongoing basis.

Prioritization of the RCM systems to minimize risk was performed. The RCM evaluation of high-risk systems, as determined by the secondary plant reliability study, has been reprioritized and is scheduled to be complete in July of this year. The RCM scope is to analyze 74 systems by the end of 1995. The program is on schedule and has completed an equivalent of 48 systems. Approximately 1,010 PM revision requests have resulted from the RCM program to date. Approximately 630 of the PMs have been revised and issued.

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Approximately 900 PM revision requests from other sources are being worked as part of the Site Improvement Plan backlog effort. The current work-off curve projected the completion extending into 1997. Additional effort is being focused with the objective of eliminating the backlog by the end of this year.

If you have any questions concerning this submittal, please telephone J. W. Proffitt at (615) 843-6651.

Sincerely,



Robert A. Fenech

Enclosure
cc (Enclosure):

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ENCLOSURE 1

RESPONSE TO NRC INSPECTION REPORT
NOS. 50-327, 328/93-54
ALBERT F. GIBSON'S LETTER TO MARK O. MEDFORD
DATED JANUARY 21, 1994

Violation 50-327, 328/93-54-01

"Technical Specification 6.8.1 requires, in part, that written procedures be established, implemented and maintained for activities recommended in Appendix A of Regulatory Guide 1.33, Quality Assurance Program Requirements, Revision 2, February 1978. This includes procedures required for the safe operation and maintenance of nuclear power plants including equipment and work control instructions, and surveillance and test activities of safety related equipment.

"Contrary to the above, the licensee failed to follow established procedures as described below:

- "1) Site Standard Practice, (SSP)-12.15, 'Fire Protection Program,' requires that flammable material below or within 35 feet of hot work activities be removed or adequately protected and protective measures such as pans, cloth, and such be placed to catch slag, molten metal, grinding dust, etc., before performing hot work activities.

On December 1, 1993, a fire was reported in the Unit 2 turbine building. Hot Work Permit MODD15048 had been issued for the activity to Modifications personnel on December 1, 1993. Requirements of this procedure were not met in that all flammable material below or within 35 feet of hot work activities were not removed or adequately protected and protective measures such as pans, cloth, and such were not in place to catch slag, molten metal, grinding dust, etc.

- "2) Site Standard Practice, (SSP)-7.55, 'Criteria for the Erection of Scaffolds and Ladders including those in Seismically Qualified Structures,' provides guidance on the proper construction of scaffolding. It prohibits securing scaffolding to safety related equipment and structures. Further, it requires that scaffolds be restrained.

On December 4, 1993, NRC inspectors identified two scaffolds that were not erected according to program requirements. One scaffold was attached to a safety related pipe on the safety injection system, and another not restrained near an auxiliary feedwater pump.

- "3) Site Standard Practice, (SSP) 2.8, revision 1, 'Drawing Control' and SSP 2.10, 'Vendor Manual Control,' provides instructions and controls of vendor drawings and manuals. Specifically, SSP 2.8 requires that before using non-verified vendor drawings, the user shall determine if the component design information existed in other documentation.

On November 29, 1993, the licensee replaced an electronic circuit card in the Unit 2, Number 3 turbine governor valve electrohydraulic control controller. The card was replaced with a card of an incorrect design through the use of an non-verified vendor drawing.

"This is a Severity Level IV violation (Supplement 1)"

Reason for the Violation

Example No. 1

The reason for the failure to comply with fire protection requirements during modification activities was inattention to detail and inadequate verification by the responsible foreman, the personnel performing the modifications, and the fire watch to ensure that the work area was properly set up to prevent ignition of materials in the surrounding areas. The individuals involved did not give proper consideration to the established requirements.

Example No. 2

The reason for the failure to erect scaffolds in accordance with procedural requirements was inadequate training. There is no formal training program to provide scaffold training to the personnel erecting the scaffolding and the scaffold inspectors.

Example No. 3

The reason for the violation is that the users of the vendor manuals were not aware that the drawings in the approved manuals were not approved. The vendor manual program allows vendor drawings that are not approved by Engineering to be issued with an approved vendor manual. Programmatic controls were in place that prohibit the use of the drawings. The vendor manual also contains a note that the drawings were not approved; however, the drawings were not marked "limited use" like other unapproved information is identified.

Corrective Actions That Have Been Taken and the Results Achieved

Example No. 1

After the fire was extinguished, the work activities involving hot work were stopped, and a 100 percent review was performed to determine the adequacy of hot-work preparation. A few minor deficiencies were identified with the majority of the areas meeting the established requirements. The minor deficiencies were corrected, and work was allowed to resume. Fire Operations is monitoring the hot-work activities to ensure that the appropriate precautions are being taken and that

procedures are being followed. The individuals involved have been counseled regarding the event. Meetings were conducted with Modifications personnel to ensure that the personnel involved with hot-work activities are aware of their responsibilities as described in plant procedures regarding fire protection requirements during hot-work activities.

Example No. 2

The scaffold that was improperly attached to a safety-related pipe was removed. The scaffold that was not properly restrained was corrected to meet the requirements of the procedure. A 100 percent review of scaffolds in safety-related areas was conducted. Other minor deficiencies were identified and corrected. The event was discussed during stand-down meetings with Modifications personnel. Interim training was provided to the personnel involved in the erection and inspection of scaffolding to ensure that scaffolds are being erected correctly.

Example No. 3

Meetings with Maintenance personnel have been conducted to ensure that they are aware of the unapproved status of the drawings contained in vendor manuals. The discussions included the steps to take to obtain approval for vendor manual drawings to be used for work.

Corrective Actions That Will be Taken to Avoid Future Violations

Example No. 1

No further actions are required.

Example No. 2

A training program, including qualification requirements for the erection and inspection of scaffolding, will be established. The appropriate personnel will be subsequently trained.

Example No. 3

The vendor manual program procedure will be revised to clarify requirements for the limited use of drawings in vendor manuals. Training to address the procedure change and to explain the proper use of vendor manual drawings will be conducted. Also, the unapproved vendor drawings in approved vendor manuals will be appropriately identified as limited-use drawings.

Date When Full Compliance Will be Achieved

TVA is in full compliance.

ENCLOSURE 2

COMMITMENTS
INSPECTION REPORT 93-54

1. The vendor manual program procedure will be revised to clarify requirements for the limited use of drawings in vendor manuals. This action will be completed by March 7, 1994.
2. Training to address the procedure change and to explain the proper use of vendor manual drawings will be conducted. This action will be completed by March 11, 1994.
3. The unapproved vendor drawings in approved vendor manuals will be appropriately identified as limited-use drawings. This action will be completed by June 10, 1994.
4. A training program, including qualification requirements for the erection and inspection of scaffolding, will be established. This action will be completed by June 6, 1994.
5. The appropriate personnel will be subsequently trained on the erection and inspection of scaffolding. This action will be completed by July 1, 1994.