

SALP 3

U.S. NUCLEAR REGULATORY COMMISSION

REGION III

SYSTEMATIC ASSESSMENT OF LICENSEE PERFORMANCE

Northern States Power Company

PRAIRIE ISLAND NUCLEAR GENERATING PLANT

Docket Nos. 50-282; 50-306

Reports No. 50-282/82-23; 50-306/82-23

Assessment Period

July 1, 1981 through June 30, 1982

ERRATA SHEET

Facility: Prairie Island
SALP Report Nos. 50-282/82-23; 50-306/82-23

<u>Page</u>	<u>Line</u>	<u>Now Read:</u>			<u>Should Read</u>		
18	6	<u>3</u>	<u>5</u>	9	9	9	9
18	7	<u>10</u>	<u>5</u>	0	4	1	0
18	9	<u>1</u>	<u>0</u>	0	0	1	0
18	10	2	<u>0</u>	3	2	1	3
18	11	<u>16</u>	13	15	14	13	15
18	12	<u>2</u>	<u>2</u>	4	9	4	4
18	13	34	<u>25</u>	31	29	29	31

CONTENTS

	<u>Page</u>
Letter to Licensee from SALP Board Chairman	iii
Licensee's Comments	vi
I. Introduction	1
II. Criteria	2
III. Summary of Results	3
IV. Performance Analyses	4
V. Supporting Data and Summaries	17

I. INTRODUCTION

The NRC has established a program for the Systematic Assessment of Licensee Performance (SALP). The SALP is an integrated NRC Staff effort to collect available observations and data on a periodic basis and evaluate licensee performance based upon those observations. SALP is supplemental to normal regulatory processes used to insure compliance to the rules and regulations. SALP is intended primarily from a historical point to be sufficiently diagnostic to provide a rational basis for allocating future NRC resources and to provide meaningful guidance to the licensee's management to promote quality and safety of plant construction and operation.

A NRC SALP Board, composed of the staff members listed below, met on September 27, 1982, to review the collection of performance observations and data to assess the licensee performance in accordance with the guidance in NRC Manual Chapter 0516, Systematic Assessment of Licensee Performance. A summary of the guidance and evaluation criteria is provided in Section II of this report.

This report is the SALP Board's assessment of the licensee safety performance at Northern States Power Company for the one year period July 1, 1981 through June 30, 1982.

The results of the SALP Board assessments in the selected functional areas were presented to the licensee at a meeting held on November 10, 1982.

SALP Board for Prairie Island Nuclear Generating Plant:

J. A. Hind, Chairman SALP Board, Director, DEPOS
C. E. Norelius, Director, DETP
J. F. Streeter, Chief, Projects Branch 2, DPRP
C. J. Paperiello, Chief, EPPS Branch, DEPOS
T. N. Tambling, Chief, Program Support Section
J. N. Jackiw, Chief, Test Program Section, DETP
R. L. Greger, Chief, Facilities Radiation Protection Section, DETP
L. A. Reyes, Chief, Project Section 2B, DPRP
W. L. Axelson, Chief, Emergency Preparedness Section, DEPOS
C. D. Feierabend, Senior Resident Inspector
D. C. DiIanni, Licensing Project Manager, NRR
B. L. Burgess, Resident Inspector
D. L. Williams, Resident Inspector
J. P. Patterson, Emergency Preparedness Specialist

II. CRITERIA

The licensee performance is assessed in selected functional areas depending whether the facility is in a construction, pre-operational or operating phase. Each functional area normally represents areas significant to nuclear safety and the environment, and are normal programmatic areas. Some functional areas may not be assessed because of little or no licensee activities or lack of meaningful observations. Special areas may be added to highlight significant observation.

One or more of the following evaluation criteria were used to assess each functional area.

1. Management involvement in assuring quality
2. Approach to resolution of technical issues from safety standpoint
3. Responsiveness to NRC initiatives
4. Enforcement history
5. Reporting and analysis of reportable events
6. Staffing (including management)
7. Training effectiveness and qualification.

However, the SALP Board is not limited to these criteria and others may have been used where appropriate.

Based upon the SALP Board assessment each functional area evaluated is classified into one of three performance categories. The definition of these performance categories is:

Category 1. Reduced NRC attention may be appropriate. Licensee management attention and involvement are aggressive and oriented toward nuclear safety; licensee resources are ample and effectively used such that a high level of performance with respect to operational safety or construction is being achieved.

Category 2. NRC attention should be maintained at normal levels. Licensee management attention and involvement are evident and are concerned with nuclear safety; licensee resources are adequate and are reasonably effective such that satisfactory performance with respect to operational safety or construction is being achieved.

Category 3. Both NRC and licensee attention should be increased. Licensee management attention or involvement is acceptable and considers nuclear safety, but weaknesses are evident; licensee resources appear to be strained or not effectively used such that minimally satisfactory performance with respect to operational safety or construction is being achieved.

III. SUMMARY OF RESULTS

<u>Functional Area Assessment</u>	<u>Category 1</u>	<u>Category 2</u>	<u>Category 3</u>
1. Plant Operations	X		
2. Radiological Controls	X		
3. Environmental Protection/ Confirmatory Measurements		X	
4. Maintenance	X		
5. Surveillance and Inservice Testing	X		
6. Fire Protection and Housekeeping	X		
7. Emergency Preparedness		X	
8. Security and Safeguards	X		
9. Refueling Activities	X		
10. Licensing Activities	X		
11. Quality Activities, Corrective Action Systems, and Training		X	

IV. PERFORMANCE ANALYSES

1. Plant Operations

a. Analysis

Routine inspections were performed in this area by the resident inspectors covering direct observation of activities, review of logs and records, verification of selected equipment lineup and followup of significant operating events to verify that facility operations were in conformance with the Technical Specification and plant procedures. No items of noncompliance were identified.

Unit 1 reliability was in the top five percent in the country during the assessment period. Except for a reactor trip on August 31, 1981, caused by turbine control system component failure (21 hours) and scheduled refueling (September 19 - October 27), the unit operated at power throughout this assessment period. The licensee reduced power to 90% on November 18, 1981, after a sudden increase in radioiodine activity. Power was maintained at less than 90% for investigation and evaluation until December 4, 1981, when it was determined that activity levels had stabilized. The unit operated at power without restrictions from then through the end of this assessment period.

Unit 2 experienced several forced outages during the assessment period; however, there was no apparent reason for the differences in availability between the two units. The licensee took conservative measures on three occasions, in shutting down the plant to repair a steam generator tube leak, to repair the containment purge valves and to repair the control rod drive system.

Licensee strength in the area of plant operations is evident from the positive attitude towards operating within license limits and in the stability and attitude of all levels of corporate and plant staff.

b. Conclusion

The licensee is rated Category 1 in this area. This is the same rating as the previous assessment period and is based on the licensee's level of attention and involvement in the effective operation of the facilities as indicated by their operating records and compliance with regulatory requirements.

c. Board Recommendations

None.

2. Radiological Controls

a. Analysis

Two inspections of TMI Action Plan Items and followup of previous inspection findings were performed in this area by regional specialists, in addition to daily observations by the resident inspectors throughout the assessment period. In addition to observing routine radiation controls, the resident inspectors observed shipment of radioactive materials including shipment of fuel element top nozzle and a shipment of spent resins. Preparation, controls and documentation of the shipments were well managed. No deviations nor items of noncompliance were identified.

The licensee's corrective actions for previous noncompliances were timely and responsive. Licensee management, both plant and corporate, remained very responsive to health physics program needs and continued to exhibit a positive radiation safety attitude during this assessment period. These positive attributes are exemplified by the licensee's expeditious implementation of the health physics related TMI Action Plan Items. This was the first plant in Region III to complete these modifications.

The licensee's ALARA Program remains effective. This is reflected in the personal radiation exposures which remained well below the average for pressurized water reactors both in total person-rem and when normalized for power (person-rem/MWe). Liquid and gaseous radioactive releases were well below average both in total curies and when normalized for power (Ci/MWe); releases were well within Technical Specification limits. No problems were identified with the radwaste transportation program during this assessment period.

b. Conclusion

The licensee is rated Category 1 in this area. This is the same rating as the previous assessment period and is based on: (1) the identification of no noncompliances during the assessment period; (2) the timely and effective corrective action regarding previous problems; (3) the very responsive effort of licensee management, both plant and corporate, to health physics program needs as evidenced by apparent leadership in completing actions regarding TMI Action Plan Items; and (4) the better than average performance in limiting exposure of personnel and liquid and gaseous effluents.

c. Board Recommendations

Reduced inspection frequency should be considered.

3. Environmental Protection/Confirmatory Measurements

a. Analysis

One inspection was conducted in this area by regional specialists. No items of noncompliances or deviations were identified.

The Radiological Environmental Monitoring Program (REMP) appears well managed and implemented. Samples are collected by the licensee's Environmental and Regulatory Activities Department (ERAD) and analyzed by a contractor, Hazleton Environmental Service Corporation. The REMP manager from the licensee's Nuclear Support Services Department (NSSD) maintains close contact with the contractor and the NSSD staff audits both sample collection by ERAD and the analytical measurements program of Hazleton. Sample recovery is good and problems are handled in a timely manner.

Confirmatory measurements comparisons were made on four collected samples (liquid waste, charcoal adsorber, offgas, and air particulate filter) and on a spiked air particulate filter furnished by the NRC reference laboratory (RESL). Of the twenty gamma emitters compared, the licensee achieved fifteen agreements, three partial agreements, and two disagreements. The disagreements and two of three partial agreements occurred in the collected and spiked filter samples and indicated a persistent bias in licensee quantification ranging from twenty to sixty percent high. The licensee is recalibrating this geometry.

The inspectors also identified two potential laboratory quality control problems. One was loss of radioactivity from particulate filters when they are removed from protective plastic envelopes which could significantly affect Sr89-90 quantification. The second involved possible efficiency variation owing to apparent shape differences between different glass Marinelli containers used for effluent gas counting. The licensee is investigating these matters. Other aspects of laboratory quality controls such as blind sample tests of analysts, counter performance tests, procedures review, reagent quality, and training appeared satisfactory.

b. Conclusion

The licensee is rated Category 2 in this area.

c. Board Recommendations

None.

4. Maintenance

a. Analysis

Portions of ten routine inspections were performed in this area by resident inspectors and one inspection was performed by a regional specialist to followup the licensee's action on IE Bulletin No. 80-11, Masonry Wall Design. No items of noncompliance or deviations were identified.

The licensee maintains a scheduled preventive maintenance program which appears to be effective. For Unit 1, there were no major maintenance items except for those completed during the refueling outage.

Unit 2 major maintenance activities included replacing a reactor coolant pump shaft and repairing a steam generator tube leak. The unit was also off line to repair containment purge valves, a feedwater regulating valve, and the control rod drive system. Licensee maintenance personnel also retrieved a spent fuel assembly that had separated from the top nozzle and moved it to a safe storage location. The licensee maintenance staff completed these major activities without incident or excessive exposures. Close attention to scheduling and preplanning allowed maintenance outages to be completed with minimum shutdown times.

Evaluation of LER's indicates a possible trend of events attributable to personnel errors or procedure deficiencies. On several occasions following maintenance or troubleshooting, equipment was found degraded or inoperable due to a lifted wire not reconnected, post maintenance testing not completed, filter installed backwards and a valve left closed (LERs 81-16, 81-27, 82-09 and 82-11). While these events have not had a significant impact on plant safety nor degraded an otherwise effective maintenance program, they do indicate a possible increasing trend. The licensee has taken positive corrective action in each case.

b. Conclusion

The licensee is rated Category 1 in this area. This is the same rating as the previous assessment period and is based on the licensee's effective maintenance of the facilities and compliance with regulatory requirements.

c. Board Recommendations

Reduced inspection frequency should be considered.

5. Surveillance and Inservice Testing

a. Analysis

Inspections in this area were routinely conducted by the resident inspectors and one inspection was performed by a regional specialist in the area of core physics surveillance activities. No items of noncompliance or deviations were identified.

The licensee has a well developed surveillance program that has been effectively implemented by a normally competent staff. The scheduling and tracking of surveillance requirements has been effectively implemented for routine requirements. Inspector observations indicated a thorough and timely followup of testing results. Records and documentation of testing are most always complete and readily available.

Evaluation of LERs and reactor trips indicate some problems in the area of personnel error and procedures. Three reactor trips were initiated during reactor protection safeguards system logic tests due to personnel error by operators or instrument technicians. Two surveillance requirements were missed due to communication breakdowns (LERs 81-19 and 82-05). A combination of procedural deficiencies and personnel errors were apparent contributing factors when undervoltage relays were found out of calibration on four occasions (LERs 81-09, 81-26, 81-29 and 81-30), a pressure transmitter was improperly calibrated (LER 81-22), and diesel generator locked out during testing (LER 81-11). Although the licensee corrective action has been responsive and individually these events were not of major safety significance they do represent an undesirable trend.

b. Conclusion

The licensee is rated Category 1 in this area. This is the same rating as the previous assessment period. Although there appears to be an increasing trend in the number of personnel errors and procedural deficiencies, this rating is based upon the good compliance history, an effective program, and the thorough and timely followup on identified problems.

c. Board Recommendations

Reduced inspection frequency should be considered.

6. Fire Protection and Housekeeping

a. Analysis

One inspection in these areas was conducted by the resident inspectors in addition to routine observations conducted regularly throughout the assessment period. No items of noncompliance were identified.

The inspectors observed that the licensee continues to maintain good practices in these areas, including scheduled fire protection training and unannounced drills.

b. Conclusion

The licensee is rated Category 1 in this area.

c. Board Recommendations

Normal inspection activity should continue.

7. Emergency Preparedness

a. Analysis

Emergency Preparedness activities were observed during the licensee's emergency preparedness exercise and during the Emergency Preparedness Implementation Appraisal (EPIA). The appraisal was conducted by regional specialists. The exercise was observed by regional specialists and the resident inspectors. The resident inspectors also conducted a special inspection to verify the installation and testing of the Prompt Public Notification System. No items of noncompliance were identified.

During the EPIA, NRC identified significant deficiencies dealing with the primary meteorological measurements system, the prompt public notification system, and procedures. These items were transmitted to the licensee by Confirmation of Action Letter. The licensee's response to the significant items was timely and appears to be adequate. The followup inspection has not been conducted.

Six deficiencies were identified as a result of the emergency preparedness exercise. The deficiencies dealt with inadequate technical review of data provided in the scenario as provided to the NRC one day prior to the exercise, communications problems, and records management and notification problems from the TSC. Several of these deficiencies were corrected prior to the Monticello exercise held after the Prairie Island exercise. During the Monticello exercise, NSP demonstrated adequate scenario review and development. The licensee's response to the items identified during the emergency preparedness exercise was timely and appears to be adequate.

The prompt notification system was installed, operational and tested by February 1, 1982. Two concerns dealing with the documentation of the siren project and distribution of upgraded public information brochures were closed in a followup inspection subsequent to the assessment period.

The licensee has committed to having acceptable minimum shift staffing, as per NUREG-0654, Table B-1. The licensee has demonstrated, through a drill using a telephone call system with documentation of time required for the person to reach the site, that minimum shift staffing can be accomplished as required by Table B-1 of NUREG-0654.

NRC has received FEMA's evaluation of offsite emergency preparedness for the Prairie Island exercise held on December 8, 1981. In that report, several significant findings were identified. NRC review and overall evaluation of FEMA's findings will be forthcoming and appropriate actions will be taken. The followup of the FEMA's findings will be addressed in the next SALP period.

b. Conclusion

The licensee is rated Category 2 in this area. This rating is based on weaknesses in the initial planning, preparation and implementation of the emergency preparedness plan and exercise. Continued evidence of management involvement and responsiveness should result in a high rating in the next SALP period.

c. Board Recommendations

Normal followup inspections for the EPIA and the emergency preparedness exercise.

8. Security and Safeguards

a. Analysis

One Security and one Material Control and Accountability (MC&A) inspection were conducted during the assessment period. The resident inspectors also conducted routine observations of security activities.

The security inspection addressed: security plan and implementing procedures; testing and maintenance; response by the security organization; security records and reports; protected and vital area physical barriers and detection aids; security lighting; and access controls for personnel, packages, and vehicles. The MC&A inspection addressed: measurements and controls; shipping and receiving; storage and internal controls; inventory; records and reports; facility organization and operations; and management of Material Control Systems.

One item of noncompliance was identified:

Severity Level V - Two unattended vehicles within the protected area not controlled as required by the security plan (IRs 282/81-25; 306/81-27).

This represents a significant improvement from the previous SALP assessment.

Additionally, physical security safeguards event reports required by 10 CFR 73.71(c) were reviewed for this SALP assessment period. No significant degradations of physical security effectiveness were reported.

The timely review and approval of some security procedures was an area of concern developed during this assessment period. This concern was resolved when the licensee committed to complete the review and approval of identified security procedures by January 20, 1982.

The adequacy of compensatory measures for some security areas during security equipment outages and unescorted access for certain categories of plant employees remain unresolved items. Both issues are being evaluated by NRC Headquarters.

The security computer system has proven to be very reliable. The Supervisor of Security and Services knowledge of the system's capabilities and limitations and the licensee's actions to upgrade and improve the computer system software have contributed directly to the low number of unplanned security computer system outages. Other security equipment is also well maintained.

The major safeguards tasks confronting the licensee include (1) continued implementation of their Security Force Training and Qualification Plan and (2) full implementation of the Safeguards Information Protection program required by 10 CFR 73.21. The licensee has requested specific exemption from certain provisions and implementation schedules of 10 CFR 73.21. The exemption request is being evaluated by NRC Headquarters.

b. Conclusion

The licensee is rated Category 1 in this area. This is an improvement from the previous SALP period. Site supervision of the security force is strong and aggressive. Corporate level support and guidance to site operations appears in depth and timely. Effective lines of communication exist between site and corporate security managers. Licensee's management responds to NRC concerns in a timely and cooperative manner.

c. Board Recommendations

Reduced inspection frequency should be considered.

9. Refueling Activities

a. Analysis

Portions of several inspections by the resident inspectors were conducted in this area during refueling of both units and fuel handling related to modification of the spent fuel storage pools. No items of noncompliance or deviations were identified. Refueling outage time was minimized by effective scheduling. The Unit 1 outage was completed in 50 days and the Unit 2 outage was completed in 39 days. Both refueling outages included major maintenance items, including rebuilding the impellers for both circulating water pumps and 100% eddy current testing of steam generator tubes.

b. Conclusion

The licensee is rated Category 1 in this area. This is the same rating as the previous assessment period. Refueling outages were well managed with effective scheduling and communication between groups.

c. Board Recommendations

Reduced inspection frequency should be considered.

10. Licensing Activities

a. Analysis

The assessment of licensee performance was based on the following licensing activities:

- Responses to NUREG-0737 items
- Appendix R activities
- Measured RCS boron concentration and top rod thermal hydraulic design
- Station distribution voltage adequacy
- Operator licensing
- Auxiliary feedwater system evaluations
- Containment purge
- Appendix J activities
- Appendix I activities
- Equipment qualification IE Bulletin No. 79-01B

(1) Management Involvement in Assuring Quality

The licensee has consistently showed evidence of prior planning and superior assignment of priorities indicating a high level of management review. Typical areas where management involvement was evident are in meeting the requirements of containment purge, Appendix I activities and response to NUREG-0737 items.

(2) Approach to Resolution of Technical Issues from a Safety Standpoint

The licensee has shown an adequate understanding of issues. In regard to the Appendices I and J and response to NUREG-0737 items, the licensee has demonstrated a clear understanding of the issues based on the timely manner of the responses which were technically sound and thorough. However, in the case of Appendix R, the resolution of some fire protection items has been delayed due, in part, to the confusing nature of the Commission's Fire Protection Rule. The licensee submitted a comprehensive analysis judged to be better than those submitted by other licensee's for Section III G; however, their exemption request for emergency lighting (Section III J) did lack adequate supporting information.

(3) Responsiveness

The licensee performance on the auxiliary feedwater system evaluation fell below licensee's usual standard which may be due to a lack of adequate communication between the licensee and the technical reviewers. This communication problem was minor in nature since all issues (except for seismic review) regarding the auxiliary feedwater system review have been resolved. In other areas where information has been requested by the project manager, the licensee responsiveness and cooperation is judged to be excellent. Deadlines are usually met and the responses are technically sound.

(4) Reportable Events

Events are reported promptly and within the time prescribed by the Technical Specifications. The description of the events is usually clearly presented and the corrective actions appear technically sound. In addition for the events important to plant safety the project manager is notified promptly by telephone prior to the issuance of the report.

(5) Staffing

The licensee has exhibited well thought out staffing requirements for the implementation of the new Radiological Environmental Technical Specification. In addition the licensee staffing appears ample as indicated by the realistic schedules given by the licensee for completing NRC action items. The scheduled completion dates given by the licensee for the NRC action items are rarely missed.

(6) Training

The results of the operator licensing program indicate that 100% of the RO and SRO candidates successfully passed the examination on the first attempt. Such a perfect record indicates a well defined training and qualification program exists at the licensee's facility. During this reporting period, the licensee initially requested that the licensing examination be administered to 12 SRO and 5 RO candidates. However, prior to administering the examination, the licensee modified the candidate roster by withdrawing two SRO candidates and one other candidate was downgraded to RO. One other SRO candidate was withdrawn after taking only the simulator portion of the examination. Such changes exhibit that the licensee has an adequate understanding of staff capabilities based on the results of the examinations of those candidates who were finally examined. In addition the licensee is developing a well defined training program in the implementation of the requirements to be imposed by the Radiological Environmental Technical Specifications.

b. Conclusion

The licensee is rated Category 1 in this area. Management attention and involvement with matters of nuclear safety is evident and the licensee's resources are effectively used, based on the responses to our concerns regarding safety issues. The licensee's responses in most cases are timely and technically sound. However, in certain areas responsiveness can be improved regarding clarity and completeness (e.g., fire protection).

c. Board Recommendations

None.

11. Quality Activities, Corrective Action Systems, and Training

a. Analysis

(1) QA Program

A portion of one inspection was performed by a regional specialist to verify that changes to the approved QA Program were understood and that implementing procedures conformed with QA Program changes. The resident inspectors also periodically observed QA activities related to operations and maintenance. The inspection effort also included followup to previous findings in this area. One item of noncompliance was identified:

Severity Level VI - failure to ensure the timely closeout of design changes (IR's 282/82-04; 306/82-04).

There has been marked improvement in processing and control of QA records since the completion of the administration building addition and installation of new microfilming equipment. However, the licensee has not completed his corrective action as many of the records remained stored in unlocked file cabinets.

Although most QA changes were reflected in implementing procedures, two examples were identified where the implementing procedures did not fully reflect QA Program changes regarding the Fire Protection Program.

In the area design control implementing procedures, administrative controls appeared to be adequate in the initial approval and installation of design changes but weaknesses were identified in the following areas:

- documenting completion of specified training for modified systems prior to placing them in service
- documenting transfer of modified systems to operations when a design change is complete
- physical control of design change records
- control of marked up drawings
- timely closeout of the design change package including "as built" drawing revisions.

The last item above was the basis of the noncompliance.

(2) Corrective Action Systems

Resident inspectors periodically observed functioning of the licensee's systems for following corrective actions during followup of items of noncompliance, IE Bulletins and Circulars and Licensee Event Reports (LER's). One item of noncompliance was identified in this area:

Severity Level VI - Failure to prepare and review an investigative report (IRs 282/82-01; 306/82-01).

(3) Training

Portions of one inspection was conducted by a regional specialist in this area to review general employee and licensed operator training programs. One item of noncompliance was identified:

Severity Level VI - 12 licensed operator and senior operators failed to conduct assigned review of plant changes, procedure changes, or applicable reportable events (IRs 282/81-24; 306/81-26).

In addition to the noncompliance several unresolved items were identified in the translation of training commitments to procedures, keeping the training department adequately informed of design and procedures changes, and the quality of training records. Training record management had been previously identified as a problem area and there appeared to be little improvement.

Notwithstanding these problem areas, the licensee's training programs were found to meet regulatory requirements and licensee commitments in most cases. In addition the licensee has been in the process of upgrading training. The responsibility for all training has been transferred from the plant to corporate management. The training staff has been increased. New procedures were drafted covering the entire training program.

b. Conclusion

The licensee is rated Category 2 in this area. Although several weaknesses were identified, overall performance was satisfactory.

c. Board Recommendations

Inspections should be conducted to examine licensee actions for the noncompliance and to close unresolved items.

V. SUPPORTING DATA AND SUMMARIES

A. Noncompliance Data

Facility Name: Prairie Island Nuclear Docket Nos. 50-282; 50-306
 Generating Plant

Inspections: Unit 1 No. 81-14 through 81-25
 No. 82-01 through 82-10
 Unit 2 No. 81-16 through 81-27
 No. 82-01 through 82-10

<u>Functional Area Assessment</u>	Noncompliances and Deviations						Dev.
	Severity Levels						
	I	II	III	IV	V	VI	
1. Plant Operations							
2. Radiological Controls							
3. Environmental Protection/ Confirmatory Measurements							
4. Maintenance							
5. Surveillance and Inservice Testing							
6. Fire Protection and Housekeeping							
7. Emergency Preparedness							
8. Security and Safeguards						1	
9. Refueling Activities							
10. Licensing Activities							
11. Quality Activities, Corrective Action Systems and Training							3
TOTALS	0	0	0	0	1	3	0

B. Licensee Report Data

1. Licensee Event Reports (LERs)

LERs No. 81-08 through 81-31
82-01 through 82-11

<u>Proximate Cause</u> ¹	<u>SALP 1</u> ²	<u>SALP 2</u> ²	<u>SALP 3</u> ²
a. Personnel Error	3	5	9
b. Design, Mfg., and Const./Installation	10	5	0
c. External	1	0	0
d. Defective Procedures	2	0	3
e. Component Failure	16	13	15
x. Other	<u>2</u>	<u>2</u>	<u>4</u>
TOTALS	34	25	31

2. LER Evaluation

The total number of LERs was average for this vintage plant and Technical Specifications. The increase in those attributed to personnel error appears to be at least partially due to more critical licensee assessment in assigning cause.

C. Licensee Activities

1. 6/11 - 7/24/81 Unscheduled Unit 2 shutdown to replace No. 21 reactor coolant pump shaft.
2. 9/3-13/81 Unscheduled Unit 2 shutdown to repair steam generator tube leak.
3. 9/19 - 10/27/81 Unit 1 refueling and maintenance outage.
4. 10/29-31/81 Unscheduled Unit 2 shutdown to repair containment purge valves.
5. 12/16/81 - 1/20/82 Recovery and storage of failed spent fuel element D-34.
6. 1/29/82 Completion of testing Prompt Public Notification System.

¹ Proximate cause is the cause assigned by the licensee according to NUREG-0161, "Instructions for Preparation of Data Entry Sheets for Licensee Event Report (LER) File."

² The number of events are a tabulation for both Units 1 and 2.

7. 5/2-3/82 Unscheduled Unit 2 shutdown to repair control rod drive system.
8. 6/2 - 7/16/82 Unit 2 refueling and maintenance outage.

D. Inspection Activities

During the assessment period the following significant team inspections were performed:

1. Prairie Island Nuclear Generating Plant Emergency Preparedness Appraisal (November 2-13, 1981).
2. Prairie Island Nuclear Generating Plant Emergency Plan Exercise (December 7-9, 1981).

E. Investigations and Allegations Reviews

None.

F. Escalated Enforcement Action

1. Civil Penalties

None.

2. Orders

None.

G. Administrative Actions

1. Confirmation of Action Letters (CAL)

A CAL was issued November 18, 1981, to document the corrective actions for deficiencies identified during the Emergency Preparedness Appraisal.

2. Management Conferences

On October 8, 1981, a management meeting was held to discuss the results of the SALP 2 assessment.