

UNITED STATES NUCLEAR REGULATORY COMMISSION REGION II

101 MARIETTA STREET, N.W., SUITE 2900 ATLANTA, GEORGIA 30323-0199

Report Nos.: 50-413/94-002 and 50-414/94-002

Licensee: Duke Power Company

422 South Church Street Charlotte, NC 28242

Docket Nos.: 50-413 and 50-414 License Nos.: NPF-35 and NPF-52

Facility Name: Catawba 1 and 2

Inspection Conducted: February 7-10, 1994

Inspector:

Anathan 2/ Bartley
Jonathan H. Bartley

Approved by: Same Tayer, Chief Operator Licensing Section

Operations Branch

Division of Reactor Safety

SUMMARY

Scope:

This routine, announced inspection was conducted in the area of Emergency Operating Procedures (EOP) programmatic controls using sections of Inspection Procedure 42001.

Results:

The licensee's program for developing and maintaining the EOPs was good. The licensee staff was very knowledgeable in the area of EOP development.

The inspector identified as a non-cited violation of Technical Specification 6.8.1, the failure to maintain Operations Management Procedure (OMP) 4-9 (paragraph 2.a).

REPORT DETAILS

1. Persons Contacted

Licensee Employees

*M. Brady, Operations Support Manager

*W. Byers, Security Support Supervisor

*W. Kelley, Human Resources Manager

*R. Kimray, Operations Training *W. McCollum, Station Manager

*K. Nicholson, Compliance Specialist

*J. Roach, Security Manager

*R. Seasely, Regulatory compliance

*P. VonStaden, Senior Technical Specialist

Other licensee employees contacted included instructors, engineers, technicians, operators, and office personnel.

NRC Personnel

*R. Freudenberger, Senior Resident Inspector

*D. Thompson, Region II, Security Inspector

*Attended exit interview

2. EOP Programmatic Controls (42001)

The NRC reviewed the licensee's administrative procedures for controlling the development and maintenance of Emergency Procedures (EPs) and Abnormal Procedures (APs). The NRC also reviewed the licensee's implementation of these administrative procedures to verify the process was being followed and documented. The inspector used the guidelines provided by NUREG-0737 and NUREG-1358, Supplement I which addressed EP development and maintenance. The inspector determined the licensee's administrative procedures were adequate to control the development and maintenance of the EPs and APs. The inspector also found that the procedures were being properly implemented, and the appropriate documentation was being maintained. The inspector identified one inadequate administrative procedure.

- a. The inspector reviewed the following administrative procedures.
 - Writer's Guide for Emergency and Abnormal Procedures, Rev 12. Operations Management Procedure (OMP) 1-7, Emergency/Abnormal

Procedure Implementation Guidelines, Rev 6.

OMP 4-9, Verification Process for Emergency Procedures and Abnormal Procedures, Rev 3.

- OMP 4-10, Validation Process for Emergency Procedures and Abnormal Procedures, Rev 2.

The inspector determined that the procedures were adequate to control the development and maintenance of the EPs and APs. However, the inspector found that OMP 4-9 had not been adequately maintained. Section 8.0, Documentation, required that a completed EP/AP Verification Checklist be retained as part of the procedure process record. This checklist did not exist. The current revision changed the verification checklist to verification criteria for the verifier to follow. This was done to reduce the volume of paperwork retained in the records. However, the revision failed to modify the documentation requirements. This is identified as non-cited violation (NCV) 50-413,414/94-002-01, "Failure to maintain Operations Management Procedure (OMP) 4-9." This NRC identified violation is not being cited because criteria specified in Section VII.B of the NRC Enforcement Policy were satisfied.

- b. The inspector reviewed portions of the deviation document and completed Team Exercise Validation Checklists, observed a validation scenario, and reviewed the process controls for tracking the resolution of procedure changes. The inspector determined the facility was adequately controlling the development of the EPs.
- 3. Action on Previous Inspection Findings (92701)

(Closed) Inspector follow-up item (IFI) 50-413,414/93-01-01, "Corrective action implementation to prevent a repeat of the October 1992 initial examination high failure rate." This item concerned the implementation of corrective action recommendations made by R. E. Kimray in a memorandum dated December 12, 1992. During the current inspection, the inspector reviewed the licensee's resolution of the Kimray corrective action recommendations. The inspector determined that the licensee adequately implemented the recommended corrective actions. Corrective actions included ensuring the candidates wanted to get a license, instituting more rigorous pass criteria to be eligible for the NRC examinations, significantly modifying the examination bank, not releasing the examination bank to the students, and increasing the amount of time between the audit examinations and the NRC examinations. The inspector considered the licensee's corrective action to be adequate; therefore, this IFI is closed.

(Open) IFI 50-413/93-300-01, "Lack of attention to detail in procedure implementation." This item concerned the poor performance of operators during the walkthrough examinations. In addition to missing 6 of 65 Job Performance Measures (JPMs), the operators skipped or for other reasons did not perform procedure steps in other JPMs. During this inspection, the inspector reviewed the licensee's corrective action which was to develop, implement, and train the licensed operators on Nuclear Site Directive (NSD) 704, "Technical Procedure Use and Adherence," and reemphasize the "Stop, Think, Act, Review" (STAR) program during requalification training. The inspector found the licensee issued NSD-704 with an effective date of January 1, 1994. The inspector reviewed

training records and determined all licensed operators were trained on NSD-704 and the STAR program during segment nine of the requalification cycle. Although the licensee's planned corrective actions were complete, this item will remain open until the corrective actions are shown to be adequate.

(Open) IFI 50-413/93-300-02, "Borderline performance of the licensed operator requalification training program." This item concerned the third sequential borderline performance of the requalification program. The licensee concluded that this IFI was directly associated with the poor performance during the JPMs, thus, the corrective actions for IFI 93-300-01 also applied to this IFI. The inspector agreed with the licensee's determination. Although the licensee's planned corrective actions were complete, this item will remain open until the corrective actions are shown to be adequate.

4. Exit Interview

The inspector summarized the inspection scope and findings on February 10, 1994, with those persons indicated in paragraph 1. The NRC described the areas inspected and discussed in detail the inspection findings. No proprietary material is contained in this report. No dissenting comments were received from the licensee.

Item Number	Status	Apparent Violations
NCV 50-413,414/ 94-02-01	Closed	Failure to maintain Operations Management Procedure (OMP) 4-9 (paragraph 2.a).
IFI 50-413,414/ 93-01-01	Closed	Corrective action implementation to prevent a repeat of the 10/92 initial examination high failure rate (paragraph 3).