CP&L
Carolina Power & Light Company

July 28, 1982

Mr. James P. O'Reilly, Regional Administrator
United States Nuclear Regulatory Commission
Region II
101 Marietta Street, N.W., Suite 3100
Atlanta, GA 30303

RESPONSE TO
SYSTEMATIC ASSESSMENT OF LICENSEE PERFORMANCE (SALP) BOARD
ASSESSMENT OF BRUNSWICK, H. B. ROBINSON AND SHEARON HARRIS PLANTS
REPORT NOS. 50-325/82-15, 50-324/82-15
50-261/82-17, 50-400/82-14 AND 50-401/82-14

Dear Mr. O'Reilly:

Mr. R. C. Lewis's letter of May 21, 1982 forwarded to Carolina Power & Light Company (CP&L) the results of the SALP Board findings for CP&L plants for the time period July 1, 1980 through December 31, 1981. The purpose of this letter is to provide CP&L's response to those findings.

CP&L supports NRC's objectives for the SALP Program. We believe, however, that the SALP Assessment of CP&L's plant performance, if not supplemented with additional explanation, would mislead others with outdated observations and an unbalanced view of CP&L's progress in enhancing safe plant operation and our construction programs. CP&L believes that a "balanced" report is essential if the SALP Program is to achieve its objective of enhancing safe operation and construction and not create misimpressions in the minds of the public and other regulatory agencies.

We believe constructive improvements should be made in the Board's Assessment which would be beneficial in accomplishing the objectives of the program in the following areas:

1. The SALP Board Assessment fails to "consider positive and negative attributes of licensee performance" to a sufficient degree, contrary to the statement made in the introduction of the report. We believe that in fairness, your letter which transmits the SALP Board Assessment and characterizes CP&L's "overall safety performance," should present a more balanced view of our accomplishments during this rating period.

2. The supporting information cited in the SALP Board Assessment, in many categories, does not justify the assigned rating for that category. The Assessment provides a recitation of infractions, some of which are two years old, but ignores, in many categories, the other stated NRC Evaluation Criteria, such as: (a) Management involvement and control in assuring quality; (b) Approach to

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resolution of technical issues from a safety standpoint; (c) Responsiveness to NRC initiatives; (d) Reporting and analysis of reportable events; (e) Staffing (including management); and (f) Training and qualification effectiveness. We hope that your letter, which forwards the Board's Assessments, will include assessments of these other attributes and that the report will be supplemented to provide a clearer rationale for these ratings, which at this point are too incomplete to be fully useful to us or to permit independent assessment of the accuracy of the ratings. Also, the citation of past infractions, some of which occurred two years ago, without citing in each case what corrective action was taken by CP&L, can create the impression that the situation remains uncorrected when this is not the case.

3. CP&L has made tremendous progress in the areas of Radwaste Management, Staffing, Health Physics, and Emergency Training, most of which has gone unnoticed in this SALP Board Assessment. Failure to recognize these accomplishments reduces the report's effectiveness for motivating plant staff through recognizing their many positive achievements. Such recognition is vital to accomplishing the SALP Program objectives.

In summary, CP&L believes that the SALP Board Assessment, unless supplemented with additional NRC explanation, presents an unbalanced view of CP&L's past safety performance, will be counterproductive in motivating plant staff to further enhance safety programs, and will be misleading to others. For these reasons, we encourage you to expand on the Board's Assessment in your transmittal letter in order to correct these shortcomings.

Our comments on the SALP Program and the SALP Board Assessment are intended to suggest constructive improvements in this regulatory program, and support achievement of the stated objectives of the program. In this spirit, we have attached detailed comments on the SALP Board Assessment which further support our preceding suggestions for improvements.

Yours very truly,

E. E. Utley
Executive Vice President
Power Supply and
Engineering & Construction

SRZ/cr (085C1T1)
Attachments

cc: NRC Resident Inspector (SHNPP)
NRC Resident Inspector (HBR)
NRC Resident Inspector (BSEP)

ATTACHMENT 1

DETAILED REMARKS CONCERNING
SHEARON HARRIS NUCLEAR POWER PLANT UNITS 1 & 2

The following detailed remarks are provided concerning the Performance Analysis and activities contained within the Systematic Assessment of Licensee Performance (SALP) Report for the Shearon Harris Plant:

General

Carolina Power & Light Company (CP&L) considers that the several analyses cited in the Systematic Assessment of Licensee Performance (SALP) Board Report for the period July 1, 1980 through December 31, 1981 are not adequate to support the conclusions relating to the Harris Plant construction project as set forth in the Report.

The SALP procedure, as published in the Federal Register March 22, 1982, lists seven specific evaluation criteria against which the licensee's performance in a functional area is to be evaluated. Performance was to be evaluated against the following criteria: 1) Management involvement in assuring quality; 2) Approach to resolution of technical issues from a safety standpoint; 3) Responsiveness to NRC initiatives; 4) Enforcement history; 5) Reporting and analyis of reportable events; 6) Staffing; and 7) Training effectiveness and qualification. While it is recognized that the SALP procedure intends that the final rating for each functional area will be a composite tempered with judgement, the procedure also states that if information is scarce or nonexistent a decision will not be forced. CP&L considers that a report based almost entirely on enforcement history, as is generally the case here, does not provide enough underlying data to support conclusions reached and emphasizes only one of seven evaluation criteria to the exclusion of the rest.

CP&L also believes that the NRC Staff and SALP Board failed to follow the NRC Assessment Procedure (as published in the Federal Register on March 22, 1982) in several other specific respects:

1. The procedure requires construction permit holders to be assessed annually. The report CP&L was asked to comment on covers an eighteen month period (July 1980 through December 1981). Use of an eighteen month period fails to show improvements in perspective. The lack of perspective is compounded by the Board's tendency to rely almost totally on enforcement events in their analysis of functional areas. If the 12 month period during 1981 had been used in accordance with the SALP procedure, many of the violations/construction deficiencies incorporated in the report to support the conclusions would not have been used in the evaluation procedure. CP&L, therefore, believes that the report does not accurately reflect performance in 1981, which is the 12 month period that should have been used in the evaluation. The choice of the 18 month period also fails to portray the improvements that occurred during 1981 when violations dropped significantly compared to the last 6 months of 1980 when the enforcement events cited in the SALP report occurred. Failure to follow the procedure by incorporating 18 months of enforcement history in an annual assessment thus presents a biased picture of enforcement activity.

2. The SALP Procedure further requires both positive and negative aspects of licensee performance to be considered. The language of the report cites almost no positive attributes even where multiple inspections by Region II inspectors and the Resident Inspector found no violations. The lack of reference to positive attributes is even more noteworthy when it is considered that information presented by the NRC at the SALP meeting between CP&L and the NRC indicated CP&L had the lowest number of construction violations (three) in Severity Levels IV and V of any utility in the region. Information presented at the meeting also showed Harris Unit 1 had eleven construction deficiency reports and Harris Unit 2 had eight, against a Region II average of 51. The lack of mention of this information denies the Report reader an opportunity to gain a balanced perspective that includes positive attributes. This would not have been the case if the assessment procedure had been followed more precisely and included factual, positive attributes.

3. The format of the report doesn't agree with the NRC's description in the March 1982 Federal Register Notice of how the assessment will be conducted. Federal Register Notice Paragraph b. "Procedures" states that, "The SALP Board assesses licensee performance in each of a number of functional areas, . . .". However, in the SALP Board Report for CP&L, in each functional area, after Paragraph a. "Analysis", there appears Paragraph b. "Conclusion", in each case followed by Paragraph c. "Board Comments": "The Board concurs with the rating . . ." If the Board always concurs with the rating, it is not clear who they are concurring with or who is recommending the conclusion in Paragraph b. Since this document is entitled the SALP Board Assessment, we recommend that Paragraphs "b" and "c" be merged so that Paragraph b. represents the "Board's Conclusion". This would eliminate the appearance of a recommended rating to the Board from unnamed parties.

4. The assessment procedure states that quality assurance is an element of each functional area to be highlighted in a separate discussion only when there is a problem. Carolina Power & Light Company considers that a separate discussion of quality assurance as a functional area implies a problem that is not supported by the facts in the report. Quality assurance functions were inspected 24 times by the NRC during the assessment period. Only three nonrepetitive minor violations were found. Again, CP&L considers that by not following the assessment procedure more precisely, an unfair inference is being directed toward CP&L's quality assurance program and the professionals who administer it.

5. The SALP procedure states that "if information is scarce or nonexistent, a decision as to performance as it relates to an attribute will not be forced." CP&L believes that the NRC Staff and SALP Board failed to adhere to this principle in at least the following instances:

   a. The analysis of performance in the functional area of Site Preparation and Foundations makes reference to one violation resulting from three regional inspections and an unspecified number of Resident Inspector inspections. The single violation referenced is for failure to control dust at the site. CP&L would like to

point out that the violation for excess dust was in the area of environmental inspection against commitments in the Environmental Report. Inclusion of this violation in the Site Preparation and Foundation functional area (where no other violations were cited in the report) has the effect of forcing a decision as to performance in a functional area when no negative attributes were evident. In fact, available information points toward a Category 1 rating if it is recognized no other negative attributes were evident during the evaluation period.

b. The analysis of the functional area of Design and Design Changes acknowledges that no violations were found in one NRC inspection performed in this area. The analysis goes on to cite a CP&L reported item concerning failure to have sufficient interface control between the design engineer and the NSSS supplier. The design interface problem found by CP&L QA could just as easily be used to support a positive conclusion. It demonstrated that CP&L is a leader in design interface audits and that management attention and involvement are aggressive in this area and oriented toward nuclear safety.

c. The conclusions reached in the functional area of procurement depend in part on observations of housekeeping and cleanliness in the power block area.

6. It is not readily apparent that the procedure was followed with respect to use of the evaluation guidelines in Table 1. Although departures from the guidelines are sometimes allowed by the procedure, the rationale for the departures are required to be explained in the report. The use of the evaluation criteria would allow consideration of elements of CP&L's management other than enforcement history items. Several actions by CP&L over the past year should be recognized in any assessment of performance at the Harris site, including:

a. Start-up personnel were assigned to the site in permanent offices when the project was only 50% complete. The early commitment of personnel should minimize start-up problems, and lead to improved equipment operability and maintenance.

b. Nuclear Plant Engineering personnel have been located at site to coordinate all aspects of design and to insure support for construction and quality assurance.

c. A human engineering review and modification of the Main Control Boards is already complete.

d. The Harris Construction Site has maintained an admirable industrial safety record.

In summary, CP&L has taken strong, positive actions to assure a high level of performance at the Harris site. The low number of violations and the progressively lower number of reportable items is evidence of those efforts. The NRC's assessment is one sided and does not reflect the high level of achievement attained at Harris.

Specific Comments

1. Quality Assurance (NRC Category 2)

The violations listed in this area which occurred on July 7-11, 1980 and September 29 - October 3, 1980 are minor and are insignificant when the amount of inspection activity is considered. CP&L has, according to Region II statistics, the lowest number of utility construction violations in the Region. The assessment in this area appears to be too low and should be Category 1.

2. Site Preparation and Foundation (NRC Category 2)

The violation cited on July 14-16, 1980 is taken out of context and presents a distorted view (See General Comments). The one violation

cited in the Board's assessment was not in the area of Site Preparation and Foundation, but was based on an Environmental Condition of the Construction Permit to avoid unnecessary dust as a result of construction activities. Inclusion of this dust control citation in the Site Preparation and Foundation functional area (where no other violations were cited in the Board's Assessment) has the effect of forcing a decision as to performance in this functional area when no negative attributes were evident.

The Board's assessment makes no mention of the good performance CP&L has exhibited in the area of Site Preparation and Foundations. Also, Carolina Power & Light Company has taken significant action with respect to dust control since mid-1981 and achieved excellent results. The report ignores this achievement. In view of these facts, the assessment in this area appears to be too low and should be Category 1.

3. Containment Structure (NRC Category 2)

No comment.

4. Safety-Related Structures (NRC Category 2)

No comment.

5. Piping and Hangers (NRC Category 2)

No comment

6. Safety-Related Components (NRC Category 2)

No comment

7. Electrical Systems (NRC Category 2)

No comment

8. Instrumentation and Wire (NRC Category 2)

No comment

9. Fire Protection (NRC Category 2)

The Report notes three inspections and no violations. The assessment in this area appears to be too low and should be Category 1.

10. Preservice Inspection (Not evaluated by the Board)

11. Corrective Actions and Reporting (NRC Category 2)

The Report only notes one violation on December 2-5, 1980 and states that since early 1981, there has been a significant decrease in the number of events identified at the Harris site through the Design Deficiency Reports and Part 21 reporting system when compared to the previous number of reports. This performance seems indicative of an extremely well run project. The assessment in this area appears to be too low and should, therefore, be Category 1.

12. Procurement (NRC Category 2)

See General Comments

13. Design and Design Changes (NRC Category 2)

See General Comments

14. Training (NRC Category 2)

No comment

statement that "...the licensee has had problems in adhering to Technical Specification requirements..." is misleading. Only two of the twelve violations cited pertain to equipment or system inadequacies related to Limiting Conditions of Operation (LCO). The remainder identify weakness in a programmatic or procedural sense. However, as stated, the analysis infers that "operational" requirements (LCOs) of the Technical Specifications were not met to a substantial degree, when in fact this is not the case.

A good portion of the analysis is devoted to an apparent "...weakness in fulfilling commitments of post-TMI equipment installations...". While we acknowledge that equipment was removed from service for extended periods of time, it should also be noted that the underlying reason was that little guidance was provided by NRC on how the equipment was to be operated. NRC requirements for installation were very clear, however, the followup on NRC operational requirements was generally lacking.

We do wish to point out that CP&L was recognized by Mr. H. R. Denton as one of the few utilities who met the installation requirements for the equipment.

Carolina Power & Light Company concurs with the Board's rating.

2. Refueling Operations (NRC Category 2)

During the assessment period, CP&L performed massive amounts of NRC mandated work during refueling outages (Fire Protection, TMI Modifications, Responses to I&E Bulletins 79-02, 79-14, etc.). The NRC found no violations or deviations in these areas. This was a substantial achievement at significant financial expense. CP&L, therefore, believes that the assessment in this area does not reflect this fact and this actually should be defined as Category 1.

DETAILED REMARKS CONCERNING
H. B. ROBINSON UNIT 2

The following detailed remarks are provided concerning the Performance Analysis and Activities contained within the report for H. B. Robinson:

General

As detailed in the General Remarks for the Shearon Harris Plant (Attachment 1), CP&L believes that the SALP Report is unbalanced due to its almost exclusive reliance on enforcement history. This is in conflict with the SALP procedure (Federal Register 3/22/82).

The SALP Report repeatedly references violations as a measure of unit performance. Yet in the case of H. B. Robinson, when few or no violations occurred in an area an average rating was given. The standard being used by the Report, therefore, is contradictory and impossible to perceive.

Finally, though only contained in one area, CP&L wishes to object to the classification of Confirmation of Action letters as Escalated Enforcement Actions. This is contrary to the nature of these letters especially for the one cited in Section 19 which deals with Emergency Planning. CP&L believes that the inclusion of these letters adds to the unbalanced aspect of the report.

Specific Areas

1. Plant Operations (NRC Category 2)

Although CP&L does not take issue with the numerical rating within this area we would like to comment on the analysis. Specifically the

3. Maintenance (NRC Category 2)

No Comment

4. Surveillance (NRC Category 2 or 3)*

The Report notes that no violations or deviations were found with regard to Inservice Testing. The report cites two minor violations on April 11 - May 10, 1981 and a deviation with respect to Surveillance Testing. No comparison of these minor infractions to the great number of periodic tests conducted correctly during the evaluation period is shown in the report. We have been advised that the rating contained in the Report is a typographical error and that the "Category 2" rating which appears in the Summary on Page 3 of the Report is correct. We would, therefore, request that the analysis portion of the Report be corrected to show a Category 2 rating.

5. Personnel, Training, and Plant Procedures (NRC Category 3)

The following additional information should be considered when discussing this area:

a. With respect to Violation (9) on March 11 - April 10, 1981 concerning operator training, in addition to correcting the specific problem cited, Corporate Training now formally audits and documents Reactor Operator Requalification Lecture requirements. This is an example of CP&L's consistent effort to go beyond the correcting of a specific deficiency and to provide a programmatic solution to correct the weakness.

* SALP Report lists Category 2 on Page 3, but Category 3 on Page 23.

b. As stated in the Brunswick response, the statistics quoted for this period with respect to passing of licensing examinations are consistent with the industry trend at the time. These statistics reflect the increased emphasis and elevated passing requirements imposed on Operator Licensing examinations following the accident at TMI. During 1981, a significant improvement in examination performance has been achieved with four out of five (80%) Reactor Operators successfully passing the licensing examination. Although not in this assessment period, it should be noted that in 1982, 100% of the Senior Reactor Operators passed their license examinations. These statistics represent accomplishments above present industry trends.

For these reasons, the Board's assessment appears too low and should be Category 2.

6. Fire Protection and Housekeeping (NRC Category 2)

In this area, the SALP Report notes two minor infractions on September 29 - October 2, 1980 regarding inadequate storage of fire protection equipment and components and failure to follow requirements of fire prevention welding procedure. The report fails to recognize the massive effort undertaken by CP&L to implement the fire protection program at the plant, the large number of related modifications installed and completed and the tremendous efforts to restore cleanliness and housekeeping following these large construction projects. In addition, significant organization improvements, which include 24-hour coverage by a Fire Protection Technician, were implemented which we feel places CP&L and H. B. Robinson as one of the industry leaders in the area of fire protection. CP&L believes that when these factors are taken into account, the assessment in this area should be a Category 1.

7. Design Changes and Modifications (NRC Category 2)

The SALP Report notes no violations in this area. It fails to provide credit with respect to the large number of modifications completed during the period when no violations were noted. Additionally, CP&L feels that a significant achievement which occurred during the period about which the Report is silent is the major revision and upgrading of the Modification Control Procedures which were implemented on October 30, 1981 at Robinson. This has resulted in a substantial improvement in the control of these activities. Because of its significance, it is felt that this should have been considered in the analysis. When viewed in this context, CP&L believes that the assessment in this area should be a Category 1.

8. Radiation Protection, Radioactive Waste Management, and Transportation (NRC Category 3)

Although there may have been problems in this area at the beginning of the evaluation period, CP&L has made substantial improvements during the period, and instituted effective corrective actions in this area which have resulted in vastly improved performance. CP&L believes that the Report should also include these positive activities in addition to the shortcomings which were noted. Specifically, the ALARA program at the plant is in a large part responsible for a 30% reduction in exposure received on Steam Generator inspection and repair efforts between the years 1980 and 1981. Efforts in the area of contamination controls has reduced personnel contamination events by a factor of more than 3 from 1980 to 1981 and, the plant's General Employee Training (GET) which provides orientation training in the area of Health Physics has been expanded in content by approximately 300 percent. These major improvements all occurred during the SALP period but were omitted from the report.

For these reasons, the Board's assessment appears too low and should be Category 2.

9. Environmental Protection (NRC Category 1)

No Comment

10. Emergency Preparedness (NRC Category 2)

The SALP Report states that improvement in Emergency Preparedness was achieved in 1981. This is a considerable understatement when the massive numbers of new requirements, new facilities, and new capabilities which were instituted during this time period is reviewed. CP&L was extremely aggressive and responsive in addressing these new requirements and continually leading the industry in compliance and fulfilling regulatory commitments and requirements. Specifically, CP&L was the first licensee to conduct a "full scale" Emergency Exercise to the post-TMI emergency preparedness requirements in the State of South Carolina. In fact, it was this full scale exercise which was used to qualify the South Carolina Emergency Plan. The Report is silent on those efforts and does not accurately reflect the amount of management attention and CP&L resources devoted to Emergency Planning; however, CP&L concurs with the Board's overall rating of Category 2.

11. Security and Safeguards (NRC Category 2)

No Comment

12. Audits, Review, and Committee Activities (NRC Category 2)

The Report notes five inspections and no violations. Given the high inspection activity in this area and no violations, the assessment appears to be too low. Additionally, CP&L has made organizational improvements with respect to Onsite Nuclear Safety Review and Quality Assurance Activities. During the period, the onsite Quality Assurance organization at H. B. Robinson has more than doubled in size and now

reports offsite. This has substantially improved the independence and effectiveness of this function. Additionally, Quality Assurance is now conducted under one corporate department which provides consistency throughout the Company in the Quality Assurance area. Other improvements in this area were delayed due to NRC's untimely issuance of revised Administrative Technical Specifications which were submitted for approval one year ago. The Report should have given greater emphasis to these changes. CP&L believes that this area should be assessed as Category 1.

13. Administrative, QA, and Records (NRC Category 2)

No Comment

14. Corrective Actions and Reporting (NRC Category 2)

The report states that CP&L has been reluctant and slow to correct deficiencies in TMI required equipment. No basis for this statement is provided. CP&L, in fact, has been extremely responsive with respect to TMI modifications. CP&L also has paid heavily in several cases due to being the leader in the industry in installing modifications only to have NRC change the requirements and invalidate the effort. CP&L was cited as a positive example by H. R. Denton for our responsiveness in meeting the initial TMI Short Term Lessons Learned requirements and has continued to be an industry leader in responding to TMI concerns. In view of this history, no violations in this area, and the very positive comments in the analysis, the assessment of the report appears to be too low and should be assessed as Category 1.

DETAILED REMARKS CONCERNING
BRUNSWICK UNITS 1 & 2

The following detailed remarks are provided concerning the Performance Analysis and Activities contained within the Report for Brunswick Units 1 and 2:

General

As detailed in the General Remarks for the Shearon Harris Plant (Attachment 1), CP&L believes that the SALP Report is unbalanced due to its almost exclusive reliance on enforcement history which is in conflict with the SALP procedure (Federal Register 3/22/82). The Report repeatedly references violations as a measure of station performance. It should be noted, however, that data provided by the NRC on May 28, 1982 indicate that the Brunswick units incurred an average of 21 Level IV and V violations/unit which was less than the Region average of 22 violations/unit. Additionally, in comparison with comparable or "sister" plants, the number of BSEP violations was far less than the average of 29/unit derived from Gray Book data. A further assessment of the number of violations per inspector hour indicates that there were fewer inspector hours/violation for other plants in the southeast than associated with BSEP operations.

The previous SALP report made a point of looking forward beyond the evaluation period due to problems experienced with Brunswick's Auxiliary Boiler. This Report, however, does not look forward beyond the evaluation period to the many improvements and improving record of Brunswick but chooses to again concentrate on the Auxiliary Boiler problem and a few other incidents. This is inconsistent and presents a distorted view. The report should be changed to correct this view.

Specific Areas

1.0 Operations (NRC Category 3)

The SALP report indicated that the Brunswick units had incurred "significant plant outage time" due to plant operations errors during the evaluation period. CP&L disagrees with this conclusion as substantiated by the following data applicable to the SALP assessment period:

Unit 1 Outage Time

. Force Off Line

. Equipment/Other = 745 hours

. Personnel Error = 0 hours

Subtotal = 745 hours

. Maintenance Offline

Subtotal = 300 hours

. Planned Outages

. Outage in Progress = 1992 hours

. Turbine Lube Oil Outage = 1863 hours

. Planned Maintenance Outage = 1960 hours

Subtotal = 5815 hours

. Total Offline Hours - 6860 hours

. Personnel Error = 0% of total Off Line Hours

Unit 2 Outage Time

. Forced Off Line

. Equipment/Other = 2857 hours

. Personnel Error = 191 hours

Subtotal = 3048 hours

. Maintenance Off Line

Subtotal = 637 hours

. Planned Maintenance Outage

. Outage in Progress = 2603 hours

Subtotal = 2464 hours

. Total Off Line Hours = 5513

. Personnel Error = 3.5% of total Off Line Hours

The above statistics disprove the Report's conclusions and the Report should be altered to correct this incorrect conclusion.

The number of personnel errors incurred is proportional to the level of activities that plant personnel participate in which challenge their own individual abilities. Typical activities or challenges encompass surveillance testing and response to equipment malfunctions as examples. In reviewing the NRC data presented in the SALP review meeting, the number of BSEP Unit No. 2 personnel errors exceeded the average by approximately 2.5 times. This was not to be unexpected in comparing the number of equipment malfunctions to the industry average. As the NRC also pointed out in reviewing H. B. Robinson performance, the number of surveillances required for a non-standard technical specification plant was about 17,000 activities/year as compared to a standard technical specification plant which requires about 170,000 surveillances/year. This comparison alone illustrates a vulnerability for personnel errors of approximately ten times that of any other BWR in the country except Hatch Unit No. 2. A further comparison of NRC supplied LER data also illustrates that the performance of the Brunswick units does not indicate a disproportionate comparison, percentage-wise, with other BWRs in any category, including personnel errors.

It should further be noted in response to recognized operating problems that the format of our Auxiliary Operator training program was expanded to provide more specific plant-related training information. We also restructured our organization to provide dedicated personnel to the respective units, with a view towards enhancing pride-of-ownership and consequently, improved operations performance. Neither activity was recognized as a positive management action in assessing operational performance.

Additionally, the following positive steps have been taken by CP&L to improve Brunswick operations:

a. New symptom-based emergency procedures have been developed by the Brunswick Plant. These procedures represent a pioneer effort from an industry point of view.

b. The BSEP Operating Staff is currently on a five-shift rotation and will be staffed for a six-shift rotation late this year. This has provided extra shifts to provide better training and relief coverage. An additional partial seventh shift is planned to anticipate any attrition or sickness.

c. Organization changes have been made in the last six months to further enhance better supervision of operators by increasing the Shift Foreman to Operator ratio.

d. The staff organization has been strengthened to provide better control of plant modification work.

e. An aggressive program has been implemented to license as many members of the plant staff as possible. In addition, a stronger on-the-job training program has been initiated.

f. Licensed operator retraining has been expanded. This expansion includes both more classroom time and added simulator time.

g. During the last three years, CP&L's basic AO training program has been significantly enhanced to train people of mixed educational background.

h. During the evaluation period, Brunswick hired and trained 30 percent more people than the BSEP organization required, in order to provide experienced people to staff the Harris Plant. Although this training program reduced the supervisor-to-operator ratio, and increased the number of less experienced people doing tasks, the long-term benefit will be positive in that a large number of experienced personnel will start up and operate the Harris Plant. This ambitious training program initially provided increased opportunities for operator error; however, these Harris operators are now trained and will be transferring off-site soon, returning the BSEP staff to the desired supervisor-to-operator ratio.

CP&L concurs, however, with the Board's overall assessment of Category 3.

2. Refueling Operations (Not evaluated by the NRC.)

3. Maintenance (NRC Category 3)

CP&L disagrees with the SALP Report's finding that the plant experienced significant down time due to inadequate maintenance. CP&L believes that the following areas should be clarified:

a. Hydraulic Snubbers

CP&L disagrees with the SALP report's conclusion that "...many (hydraulic snubber) failures were caused by previous inadequate maintenance." This finding fails to recognize that detailed maintenance and periodic testing procedures had been developed and implemented prior to the 1981 snubber failures. Many aspects of these procedures were based upon direct input from both the snubber manufacturers (Bergen-Paterson and Grinnell) and the NRC. Additionally, the NRC had provided close scrutiny of the Brunswick Plant hydraulic snubber inspection and maintenance program through periodic on-site reviews by Region II personnel prior to the 1981 snubber failures. The maintenance program in effect in March 1981 included carefully detailed periodic tests for hydraulic snubber visual inspection and functional testing and equally precise maintenance instructions for the disassembly and rebuilding of the units. These periodic inspections and tests were scheduled and rigorously performed throughout the period prior to the 1981 inspection. As a result of these programs, the rate of hydraulic snubber visual inspection failures demonstrated an overall decrease, indicating that maintenance performed on the installed units was indeed adequate. The functional testing of snubbers prior to 1981 had not shown a high failure rate and only a limited number of snubbers were required by technical specifications to be functionally tested to ensure statistically that a high confidence in snubber performance could be expected. As a result of the 1981 inspection, testing and analysis of the failures concluded that the

design of the snubber was inadequate due to long-term wear of valve block related components. BSEP Licensee Event Report 81-041 provided a detailed report of the snubber failures during that 1981 inspection program and identified design inadequacies as the primary cause of the failures. This finding resulted in total replacement or refurbishing of the hydraulic snubbers with improved component parts.

b. Chlorination

CP&L disagrees with the NRC finding that "...the Service Water System was removed from service for maintenance and remained out of operation for approximately six months. This resulted in an excessive buildup of oysters..." This NRC finding is not consistent with the order of events which actually transpired and which were documented in detail by a separate NRC document, "Report on Service Water System Flow Blockages by Bivalve Mollusks at Arkansas Nuclear One and and Brunswick" issued February 19, 1982, by the NRC Office for Analysis and Evaluation of Operational Data. The actual events impacting the chlorination system resulted in the system being out of operations for 14 months, not 6 months. The system was removed from service during the spring/summer 1980 outage for personnel safety considerations involved with inspection activities being performed on service water piping near the intake (and chlorine system) area. During this outage, a fine mesh screen was added to one bay of the circulating water intake structure to reduce fish entrainment. This temporary feature necessitated continuous screen washing. After correcting a series of mechanical and electrical problems, the chlorination system was placed in service in November 1980 for only a short period of time. Due to the proximity of the chlorination system piping and the screen wash pump suction, highly chlorinated water was taken up by the screen wash system and resulted in an unacceptably high fish kill. Appropriate modifications were completed at the intake structure to eliminate this problem, but continuous chlorination was not again reinitiated until May 1981—14 months later, not 6. The contributing factors to

this inoperable period are more accurately categorized as design-related problems and personnel safety rather than inadequate maintenance.

According to the Senior Resident Inspector at the time, the NRC had initially intended to formally document the operations response to the oyster shell/RHR occurrence as demonstrating exceptional ingenuity and resourcefulness due to the techniques which had to be implemented in response to the event.

This recognition is not contained in the Report.

c. General - Contrary to the statement indicating a pending increase in the number of maintenance foremen, CP&L has completed all anticipated reorganizational changes within the maintenance unit. The current staffing and organizational structure provides approximately a 12 to 1 technician to foreman ratio which is consistent with recognized industry standards. This organizational change was completed in June 1981, with many staff positions filled as a result of internal Company transfers. It is anticipated that the incorporation of this expanded experience base will be another positive contribution to improved plant performance and reliability.

Additionally the report is incorrect with regard to Unit 1 outage time. Unit No. 1 did not remain shut down from April 17 through the "end of the evaluation period." The unit recommenced power operations in September 1981 and has operated almost continuously since that time.

The Report should also recognize that Unit No. 2 established a continuous generation record during this evaluation period.

For these reasons, the Board's assessment appears too low and should be Category 2.

4. Surveillance and Inservice Testing (NRC Category 2)

This section of the SALP Report concentrates on a violation on June 5 - 11, 1981 in connection with the Containment Integrated Leak Rate Test (ILRT) performed in June, 1981. The following additional comments are necessary in order to place that violation in perspective:

In accordance with the requirements of Technical Specification 6.8.1, a written procedure was implemented specifically for the performance of the ILRT in accordance with 10CFR50, Appendix J. The first operational ILRT procedure was written and plant approved in October, 1977, in anticipation of the ILRT performed in December of 1977. The procedure was reviewed without comment by an NRC inspector during the performance of Brunswick Unit No. 2's first operational ILRT in 1977. It had, therefore, been CP&L's understanding that its procedure, as written, reflected a valid interpretation of Appendix J and provided for ILRT testing in accordance with requirements of Appendix J.

The general procedure used for the Brunswick Unit No. 1 ILRT in June, 1981 was identical to the earlier version and required no substantive changes due to the similarity of plant design. CP&L was unaware of the NRC's concerns over venting and draining of systems until the day before the scheduled Brunswick Unit No. 1 ILRT at which time an IE inspector revealed to CP&L the existence of an unpublished internal NRC document which contained an interpretation of Appendix J different from that previously communicated to CP&L.

Once it became aware of this document, CP&L made an effort to reach agreement with the NRC inspector concerning the proper implementation of the requirements for venting and draining included in 10CFR50 Appendix J. As a result of this effort, CP&L performed a review of the containment penetrations and modified the test to include the NRC's requested lineup for venting and draining where feasible. This review was completed as expeditiously as possible although a delay in commencing the test necessarily resulted.

Both the interpretation of Appendix J underlying CP&L's procedure and the interpretation set forth in the NRC document are reasonable constructions of Appendix J. In light of this and the fact that CP&L's procedure had been reviewed by NRC, the reinterpretation was not a proper ground upon which to allege a violation by CP&L unless and until CP&L had been given adequate notice of the reinterpretation.

CP&L concurs, however, with the overall assessment by the Board of Category 2.

5. Personnel, Training, and Plant Procedures (NRC Category 3)

a. QA Training

Corrective action has been taken to correct the areas discussed in the two violations on October 20 - 24 and October 27 - 31, 1980. Additionally Corporate Nuclear Safety & Research has been reorganized to provide onsite units and all QA functions have been organized into a single Corporate Quality Assurance Department. These improvements are positive steps which will improve this area.

b. Operator Training

The Report provides no statistical basis for comparison of passing grades on licensing examinations. The results presented, however, are indicative of industry trends in this time period due to increased requirements for satisfactory performance established following the TMI Accident. Performance on licensing examinations has improved significantly and in 1981, 21 out of 29 Reactor

Operators passed and 5 out of 5 Senior Reactor Operators passed their examinations. This is considered to be above the industry's average.

c. Procedures

CP&L has taken or is taking the following positive steps to significantly improve performance in the procedures area at Brunswick (BSEP):

1) Brunswick Steam Electric Plant is presently developing a series of procedures to delineate actions to place instruments in a tripped condition when required by technical specfications. This will include cross-references from technical specifications to drawings, to instruments, and logic-type references. Brunswick Steam Electric Plant is believed to be the first plant developing this type comprehensive procedure.

2) As a part of the Plant Modification improvement effort, many Operating Procedures have been revised over the past six months.

3) Over the last two years, all System Descriptions have been extensively rewritten to bring them up to date.

4) Procedural changes require that procedures be in place when a modification is declared operational.

5) It is presently planned to initiate an extensive effort to update plant Operating Procedures. This is in addition to routine updates to incorporate comments, or Plant Modifications.

CP&L concurs, however, with the Board's overall assessment of Category 3.

6. Fire Protection and Housekeeping (NRC Category 3)

a. Fire Protection

CP&L disagrees that the Category 3 evaluation of the Brunswick fire protection program is an accurate assessment. Brunswick plant has historically been in the vanguard of nuclear utility fire protection program development and implementation. This leadership has been demonstrated most notably by Brunswick's becoming the first and one of the few plants to receive a fully approved fire protection safety evaluation report (SER) from the office of NRR. Brunswick's leadership has also been demonstrated by its fire protection organization. Brunswick was one of the first plants to recognize that system surveillance testing, modification design review, fire brigade training, and other fire protection functions could be best accomplished by integration into a single organization dedicated to fire protection work and staffed by personnel trained and qualified in all areas of fire protection. This concept was initially implemented utilizing a staff of contractors supervised by qualified company personnel. The success of this program resulted in staffing the organization with company personnel with appropriate experience and formal training. Brunswick has also been a pacesetter in other fire protection areas, such as in technical specification development; its fire protection program is well known in the industry. Carolina Power & Light Company believes Brunswick to be a leader in the Fire Protection field, that the violations cited are minor when compared to the scope of the program and that the assessment provided by the NRC is inaccurate and undeserved.

b. Housekeeping

The Report fails to mention plant cleanliness or housekeeping. This aspect of Brunswick plant operations has been recognized by INPO and other auditing groups as being "very good." Such observations have also been shared by NRC inspectors.

For these reasons, the Board's assessment appears too low and should be Category 2.

7. Design Changes and Modifications (NRC Category 2)

No comment

8. Radiation Protection, Radioactive Waste Management and Transportation (NRC Category 3)

a. Radiation Protection

The following information is necessary to place in perspective the violations cited:

1) Violation (3) Dated July 27 - 29, 1981: Violation for assigning a radiation control technician to a position of responsibility with less than minimum experience required by Technical Specifications.

This violation was contested by CP&L at the time of the assessment of the violation. CP&L believes the violation to be a matter of interpretation.

2) Violation (4) Dated November 16, 1980 - May 8, 1981: Relates to evaluations of radioactive releases from the auxiliary boiler.

These incidents and evaluations occurred prior to the evaluation period.

3) Violation (7) Dated November 16, 1980 - May 8, 1981: Violation for not properly notifying NRC operations of an unplanned release of radioactivity from the auxiliary boiler. This violation existed prior to the evaluation period.

4) Violation (9) Dated November 16, 1980 - May 8, 1981: Violation for not including certain liquid and gaseous releases in the facility's semiannual effluent release report. This situation existed prior to the evaluation period. This has since been corrected. Citing this violation in the SALP Report is equivalent to double jeopardy.

5) Violation (10) Dated December 8 - 19, 1980: Failure to take adequate breathing zone air sample. This was a violation subject to some significant interpretation by the inspector.

6) Violation (12) Dated December 8 - 19, 1980: Violation for not following procedures controlling the release of radioactive material outside the Radiation Control Area. This should not be listed as a violation since this item was denied by CP&L as a violation and has never been responded to by the NRC either in a response to the IE report or to a special request made of NRR to interpret the situation. CP&L has not received a NRC response to either inquiry.

The subject report makes reference to the Health Physics Appraisal Team reviews which identified weaknesses in internal exposure control, contamination control, liquids, radwaste management, and routine surveillance of operating parameters. They also found strengths in some of these same areas. To present only the weaknesses and violations attributed to the program is not a balanced review of the program. Attached are items included in a recent NRC radiological assessment program for the industry which Brunswick was credited for having outstanding practices in certain areas. Also attached are excerpts from a recent INPO report.

b. Radwaste Management

The SALP Report fails to recognize the substantial progress made in reducing waste generation. Solid waste generation has been reduced from approximately 21,000 ft^3/month to approximately 8,000 ft^2/month

during non-outage periods. Further progress is expected pending return of various pieces of process equipment to service.

c. General

While pointing out the difficulties incurred by CP&L in this area, the report fails to show the substantial progress made by CP&L in this area. CP&L considers its Radiation Protection Program now in place to be one of the best in the country.

For these reasons, the Board's assessment appears too low and should be Category 2.

EXCERPTS FROM HEALTH PHYSICS APPRAISAL RPOGRAM (NUREG 0855)

Examples of Good Training

Since the most frequently observed weakness was failure to provide adequate training for radiation protection technicians, a number of examples of good approaches to training are given below.

A few utilities have made a substantial committment to training. Health physics technician training for Carolina Power and Light is highly formalized in conjunction with the utility's Nuclear Training Section located near Raleigh, N. C. Technicians are removed from the job pressures and provided an uninterrupted classroom and laboratory work environment, staffed by well-qualified professional educators. There appeared to be a close liaison between the corporate training center and the individual plant training group.

EXCERPTS FROM HEALTH PHYSICS APPRAISAL RPOGRAM (NUREG 0855)

Examples of Good Internal Exposure Control

The calibration and utilization of the whole-body/thyroid/lung counter at the Maine Yankee Nuclear Power Station was found to be exceptional. This finding is based on the following elements of the licensee's in vivo counting program: performance of daily background and radioisotopic source checks on the whole-body/thyroid/lung counter; performance of a semi-annual electronic/radioisotopic calibration on the counter; frequency of the routine in vivo counting program; competence of the health physics department staff member performing in vivo counting; and analysis of in vivo data by the Health Physics Department management.

As a result of previously identified contamination program weaknesses, and resultant positive, responsive improvements, the Brunswick Units 1 & 2 site's, program ensuring adequate personnel contamination surveys was found exceptional. Personal survey instruments (friskers) were calibrated both electronically and to a radiation source, and functionally checked at least daily and usually each shift. Frisker stations were located at exits from the radiation control areas and at selected places inside. Survey areas were shielded, if required, to reduce background radiation levels. Each frisker station was continuously manned by a "frisker watcher" who was instructed to observe each individual surveying to ensure that each one performed an adequate survey and that hand-carried objects were either surveyed or had a valid health physics survey release form. The frisker watchers were trained in appropriate survey techniques such as speed of probe movement and distance from surveyed surface to detector window. The portions of the body to be surveyed depended on the area being exited. Each station was prominently identified with the extent of survey required, such as hands and feet, whole body, and so forth.

Example of Good Surveillance

A high-quality instrumentation performance program was noted at Brunswick Units 1 and 2 in that a functional check of all portable instruments was done as recommended by ANSI N323-1979. Each normal working day and within 24 hours before use of portable instruments not routinely used, each instrument was returned to the calibration facility. It was visually inspected, a battery check was made, and it was response tested at points on each range using a Cs-137 well source. A checklist, used to record data, provided the acceptable response range. Those instruments not responding as required were removed from service until repaired and/or recalibrated.

16

Examples of Good Selection and Qualification Criteria

Several plants were noted to have developed and implemented selection and qualification criteria. The Farley and Browns Ferry plants had documented selection and qualification criteria for each position in their radiation protection organizations. These criteria related to job descriptions, included formal training and experience factors, and were used as standards for hiring and promotions. The Brunswick plant used job descriptions for each position category within the radiation organization. These descriptions were detailed and comprehensive and provided an excellent basis for performance evaluation as well as guidelines for job requirements at each proficiency level.

EXCERPTS FROM 1981 INPO EVALUATION AT BRUNSWICK PLANT

EXTERNAL RADIATION EXPOSURE

PERFORMANCE OBJECTIVE: Minimize personnel external radiation exposure.

Finding (RC.4-1)

The following Good Practice was noted: Laminated drawings with isometric views of plant areas and equipment with their associated radiation levels are posted throughout the reactor building.

Finding (RC.4-2)

The following Good Practice was noted: An "ALARA Problem" identification system, with appropriate follow-up by the ALARA committee, is functioning to minimize sources of radiation exposure within the plant. "ALARA Problem" forms are located throughout the plant so that any worker can submit suggestions for radiation exposure reduction. The ALARA committee reviews the suggestions and, where appropriate, assigns a committee member to complete additional investigation and action to implement worthwhile improvements.

CHEMISTRY

PERFORMANCE OBJECTIVE: Ensure accurate measurement and effective control of chemistry parameters.

Finding (RC.10-1)

The following Good Practice was noted: A corporate quality control program, which includes spiked samples, has been established to frequently check the performance of laboratory equipment and individual technicians and the adequacy of chemistry procedures.

RADIATION PROTECTION AND CHEMISTRY

MANAGEMENT OF RADIOLOGICAL PROTECTION

PERFORMANCE OBJECTIVE: Provide effective management of the radiological protection program.

Finding (RC.1-1)

The following Good Practice was noted: Plant management receives a weekly update of radiological protection and chemistry trends. Items such as the number of contaminated areas within the plant, the number of personnel skin contaminations, the number and volume of radioactive waste shipments, radioactive environmental releases, and major plant chemistry parameters are included.

9. Environmental Protection (NRC Category 3)

The following information is necessary to place the violations cited within the proper perspective:

a. Violation 1 Dated April 21 - 24, 1981: Failure to implement automatic intermittent surface water sampling at the intake canal.

The assessment that a sampling program had never been implemented is not true. Grab samples were taken as required by Technical Specifications from the origination of the requirement. A statement to the contrary is definitely not warranted.

b. Violation 2 Dated April 21 - 24, 1981: Failure to provide quality assurance procedures for monitoring sampling collection, sample analysis required by Technical Specifications is not accurate. The licensee did not attach calibration stickers to the meters.

The calibrations were done and were available for the inspector to review which he did. To state that there were no calibration procedures for these monitors is incorrect.

c. Violation 3 Dated April 21 - 24, 1981: Failure to notify the Commission within 30 days as required in Technical Specifications when a sample point was dropped from the surveillance program.

The point was dropped basically because there was no cow and therefore no sample existed. CP&L, however, acknowledges that it should have informed the NRC that this sampling point was no longer feasible.

d. Violation 4 Dated April 21 - 24, 1981: Failure of the Harris Energy and Environmental Center to effectively manage temporary procedure changes. This did not relate to the Brunswick plant operation.

The conclusion of a category 3 rating cannot be justified based on the above evaluations and inspections. With respect to the absence

of the water sampler from the intake canal, BSEP was meeting the requirements of the Technical Specifications by performing grab samples. The other violations are primarily clerical in nature and do not represent any substantial deviation from NRC requirements, nor any compromise of the public health and safety.

For these reasons, the Board's assessment appears too low and should be Category 2.

10. Emergency Preparedness (NRC Category 2)

The SALP Report fails to acknowledge the aggressive and assertive actions CP&L has taken to meet the vastly increased requirements (e.g. drills, revised plans, new facilities) in this area and the timeliness of our actions. Our planned program is being utilized as a model by other utilities in the Region. The report is silent on these issues. Attached are exerts from a recent INPO evaluation of the Brunswick Program. In view of these facts, CP&L believes that the rating in this area should be Category 1.

INPO

Institute of
Nuclear Power
Operations

1820 Water Place
Atlanta, Georgia 30339
Telephone 404 953-3600

June 10, 1982

Mr. E. E. Utley
Executive Vice President
Carolina Power & Light Company
P. O. Box 1551
Raleigh, N.C. 27602

Dear Mr. Utley:

The purpose of this letter is to forward the recommendations identified during INPO's Emergency Preparedness Review and Assistance visit to the Brunswick Steam Electric Plant (BSEP) during the week of May 10, 1982. These recommendations are a refined version of the material presented and discussed at the exit meeting on May 14, 1982.

During the review, the team identified several good points in your emergency preparedness program that deserve mentioning, including the following:

- In the area of the Emergency Plan, the plan itself is concise, readable and well organized. Therefore, it provides a good basis for the emergency preparedness training program.

- In the area of Emergency Response Training, the quarterly drills being conducted are a definite benefit to the training effort.

- In the area of Emergency Facilities, Equipment, and Resources, we noted the excellent personnel resources in health physics, environmental monitoring, and technical support. In addition, the Harris Energy and Environmental Center provides an excellent resource of technical analysis in environmental sampling and chemical analysis for extended emergencies.

- In the area of Emergency Assessment and Notification, we noted the cooperative effort between Carolina Power & Light, Duke Power Company, and South Carolina Electric and Gas in standardizing dose assessment and notification procedures with the states of North Carolina and South Carolina. This effort could become a model for other regional utility/state groups to emulate.

- In the area of Emergency Public Information, we noted the following good points:

  - utilizing the government affairs coordinator as both a formal communications liaison with state media officials and as an informal communications facilitator with other state officials involved in technical areas of emergency response

  - hard-copying news releases to neighboring nuclear utilities

  - providing speaker phones between the near-site media center and the civic center in Raleigh, where additional media could gather and participate in news briefings being conducted in Brunswick

In conducting a review in the limited time available, we were not able to look at every aspect of the emergency preparedness program. During this visit, your commitments to the outage prevented us from reviewing initial dose assessment and the new post-accident sampling system. The following recommendations should, therefore, be viewed as potential indicators of other related problems that did not come to light during the review. A response to the recommendations is not requested by INPO; however, INPO suggests that Carolina Power & Light develop internal plans to deal with each recommendation as considered appropriate.

The following recommendations for improvements are correlated to the attached Emergency Preparedness Performance Criteria and Objectives developed by INPO.

Emergency Operating Organization

The criteria for this performance objective have been met.

Emergency Plan

- o Inconsistencies exist between the BSEP Emergency Plan Implementing Procedures and within the procedures themselves. The emergency plan, implementing procedures and routine procedures should be reviewed and correlated to improve coordination of all the procedures.

- o Letters of agreement with off-site organizations need to be reviewed and updated. Some of the agreements should be removed (those covered by offsite emergency plans); the remainder should be updated.

- o The BSEP Emergency Plan does not have a mechanism to indicate management approval. An approval sheet or other instrument should indicate upper management approval of the emergency plan.

Emergency Response Training

- o No central tracking program exists for emergency response training. A tracking program should be developed that includes the following:

  - who should be trained and by whom
  - procedures on which personnel need to be trained
  - frequency for training and retraining
  - training documentation
  - proficiency requirements for training

- o The quarterly table-top drills are not documented properly as part of the emergency response training program. These drills are also not critiqued formally. Drills should be documented as part of the tracking program noted above. Critiques should be conducted similar to those held for BSEP exercises.

Emergency Facilities, Equipment, and Resources

- o The emergency environmental monitoring teams do not have a dedicated frequency for field radio communications. A separate frequency should be assigned, which would ensure improved communications for these teams.

Emergency Assessment and Notification

- The BSEP high volume air samplers cannot obtain a representative I-131 sample nor achieve the sensitivity stated in the emergency plan. These samplers should be replaced with equipment capable of producing representative samples and adequate sensitivity.

- The BSEP Emergency Plan does not define the physical limits for the site boundary. The site boundary should be properly defined since it is the basis of reference for offsite dose assessment.

- The Harris Energy and Environmental Center does not have a twenty-four hour point of contact for notifications. A point of contact should be established to provide prompt activation of this emergency response group.

Emergency Personnel Protection

The criteria for this performance objective have been met.

Emergency Public Information

- A liaison for the corporate spokesman between the Emergency Operations Facility/Technical Support Center and the Near-site Media Center has not been formally designated. This function has been exercised during drills and should be formally assigned in the emergency plan and implementing procedure.

- Procedures in some areas of emergency public information are lacking necessary detail or need clarification. An inventory of equipment and supplies for the near-site media center should be provided in these procedures. A statement describing the transfer of authority between the corporate headquarters to the near-site media center should also be provided.

- Adequate provisions for rumor control have not been made. An expanded rumor response function should be provided to address the following areas:

  - identify and assign additional people to staff rumor control phones

  - specify provisions to make rumor control numbers available to the public in an emergency

- include the rumor control function in emergency drills

- conduct training for rumor control specialists, and provide them with adequate resources.

o Provisions have not been made to monitor broadcasts by media in the vicinity of the Brunswick station. This responsibility should be assigned to an appropriate group to monitor reports by media in the Wilmington/Brunswick area and to report any inaccuracies to the public information coordinator.

o The Near-site Media Center is inadequate for coping with media groups for plant incidents that would generate national attention. Establishment of an adequate near-site center should be considered. In the interim, the existing informal agreement with the backup facility in Wilmington should be made formal to ensure availability of facilities for use in media briefings during an emergency.

We welcome any suggestions for improving the emphasis of our Review and Assistance visits. Any questions regarding this report or the visit may be directed to me or Travis Beard, the team manager, at (404) 953-3600.

Sincerely,

P. W. Lyon, Director
Radiological Protection
& Emergency Preparedness
Division

PWL:jky

Attachment

cc: S. H. Smith, Jr.
B. J. Furr
P. W. Howe
A. L. Morris
C. R. Dietz
R. G. Black, Jr.
E. P. Wilkinson

11. Security and Safeguards (NRC Category 2)

The report when assessing H. B. Robinson in this area cites the corporate management program's apparent security emphasis as an enhancement to the site security program. No mention of the corporate program is provided in the Brunswick section. The program is the same across all plants and is an enhancement to Brunswick as well as H. B. Robinson. Equal recognition should be given to Brunswick.

Carolina Power & Light Company concurs with the Board's assessment of Category 2.

12. Audits, Review and Committee Activities (NRC Category 3)

The violation on October 20 - 24 and October 27 - 31, 1980 cited concerning failure of the corporate nuclear safety unit to review a plant modification has been taken out of context. The modification in fact had been reviewed for Unit 1. The violation was for the exact same modification for Unit 2 and the nuclear safety unit had requested the plant to forward the "sister" modification for review prior to the citation. The report is silent on these points.

Additionally, the report fails to recognize the development of the On-Site Nuclear Safety function and its contribution to the quality of the review process as well as special investigative efforts. This is not an NRC requirement for operating plants; however, CP&L views this as a major improvement in this area. CP&L initiated this change on its own in the absence of NRC requirements. Other improvements in this area have been delayed due to NRC's failure to issue Administrative Technical Specifications for onsite organizations which were submitted a year ago.

Finally, the rating during this evaluation period in this area seems to be based on a very small sample set and the rating is inconsistent with the data. The basis for the statement that insufficient management attention has been placed in this area is unsubstantiated.

For these reasons, the Board's assessment appears to be too low and should be Category 2.

13. Administrative, QA and Records (NRC Category 3)

The NRC has given CP&L little credit for its responsiveness in addressing and closing a number of enforcement items that were identified during the inspection period. Although the enforcement items identified appear to be factually accurate, the context in which they are presented imply a more serious problem than actually existed. In fact, all of the identified NRC items but one, that are QA related, have been satisfactorily addressed and closed out for some time. This was recently verified by an NRC representative in a recent inspection.

CP&L concurs, however, with the Board's overall assessment of Category 3.

14. Corrective Actions and Reporting (NRC Category 2)

The Report fails to recognize that the large number of LERs is a direct result of the use of Standard Technical Specifications. Although our efforts are directed to improve the quality of all aspects of our operation, the large numbers in themselves are counter-productive to safety through unnecessary dilution of manpower resources. Brunswick and Hatch Unit No. 2 are the only operating BWRs under Standard Technical Specifications.

NRR's review and assessment of CP&L's responses to inquiries have conveyed recognition and acceptance of the technical content and comprehensiveness of CP&L's presentations.

During the period of the SALP evaluation, July 1, 1980, through December 31, 1981, CP&L and the NRC mutually recognized a need to augment the staffing levels of the Regulatory Compliance subunit at Brunswick. Three additional senior level positions were approved by CP&L management. Also, an experienced staff level Regulatory Engineer was temporairly reassigned from Corporate Licensing to Regulatory Compliance subunit at Brunswick. As a result of management attention and response,

noteworthy improvements have been made in the Brunswick Regulatory Compliance subunit's performance.

A computerized action item tracking system has been implemented and refined. Renewed emphasis in defining root causes of problems and a common effort in implementing corrective actions have greatly improved the quality of Brunswick Licensee Event Reports. Every attempt is being made to submit required reports in a concise, meaningful, accurate, and timely manner.

The SALP Report for Brunswick identified two past violations regarding corrective actions and reporting. These items have been previously closed out. There are no lingering contentions or unresolved questions concerning these violations. A Category 2 SALP appraisal of Brunswick corrective actions and reporting is fair and satisfactory.

Attachment 4

COMPARISON OF CP&L AND NRC
RATINGS OF AREAS

CP&L believes that a balanced assessment of plant performance using NRC SALP Program guidelines would yield the following rating:

Shearon Harris Plant

	Area	NRC Rating	CP&L Rating
1.	Quality Assurance	2	1
2.	Site Preparation and Foundation	2	1
3.	Containment Structure	2	2
4.	Safety-Related Structure	2	2
5.	Piping and Hangers	2	2
6.	Safety-Related Components	2	2
7.	Electrical Systems	2	2
8.	Instrumentation and Wire	2	2
9.	Fire Protection	2	1
10.	Preservice Inspection	NA	NA
11.	Corrective Actions and Reporting	2	1
12.	Procurement	2	2
13.	Design and Design Changes	2	2
14.	Training	2	2

H. B. Robinson

	Area	NRC Rating	CP&L Rating
1.	Operations	2	2
2.	Refueling Operations	2	1
3.	Maintenance	2	2
*4.	Surveillance	2	2
5.	Personnel, Training and Plant Procedures	3	2
6.	Fire Protection and Housekeeping	2	1
7.	Design Changes and Modifications	2	1
8.	Radiation Protection, Radioactive Waste Management and Transportation	3	2
9.	Environmental Monitoring	1	1
10.	Emergency Prepardness	2	2
11.	Security and Safeguards	2	2
12.	Audits, Review and Committee Action	2	1
13.	Administrative, QA and Records	2	2
14.	Corrective Actions and Reporting	2	1

*SALP Report lists Category 2 on Page 3, but Category 3 on Page 23.

Brunswick

	Area	NRC Rating	CP&L Rating
1.	Operations	3	3
2.	Refueling Operations	N/A	N/A
3.	Maintenance	3	2
4.	Surveillance	2	2
5.	Personnel, Training and Plant Procedures	3	3
6.	Fire Protection and Housekeeping	3	2
7.	Design Changes and Modifications	2	2
8.	Radiation Protection, Radioactive Waste Management and Transportation	3	2
9.	Environmental Monitoring	3	2
10.	Emergency Preparedness	2	1
11.	Security and Safeguards	2	2
12.	Audits, review and Committee Action	3	2
13.	Administrative, QA and Records	3	3
14.	Corrective Actions and Reporting	2	2