

U. S. NUCLEAR REGULATORY COMMISSION
REGION I

Report No. 50-219/82-21

Docket No. 50-219

License No. DPR-16 Priority -- Category C

Licensee: GPU Nuclear Corporation

100 Interpace Parkway

Parsippany, New Jersey 70754

Facility Name: Oyster Creek Nuclear Generating Station

Inspection At: Forked River and Parsippany, New Jersey

Inspection Conducted: August 24-27, 30, 31 and September 1-3, 1982

Inspectors: *G. Napuda* 10/6/82
G. Napuda, Reactor Inspector date

P. K. Eapen 10/6/82
P. K. Eapen, Ph.D., Reactor Inspector date

T. Shaub 10/6/82
T. Shaub, Reactor Inspector date

Approved by: *D. L. Capton* 10/6/82
D. L. Capton, Chief, Management Programs date
Section, Engineering Programs Branch

Inspection Summary: Inspection on August 24-27, 30, 31 and September 1-3, 1982 (Inspection Report 50-219/82-21)

Areas Inspected: Routine, unannounced inspection by three region based inspectors of the Quality Assurance Program implementation including audits; design change/modification program; offsite support staff; procurement; QA Program changes review; QA/QC surveillance (monitoring); and, followup on previously identified items. The inspection involved 110 inspector hours onsite and 48 inspector hours at the corporate offices by three region based inspectors.

Results: No items of noncompliance were identified in the nine areas inspected.

DETAILS

1. Persons Contacted

- W. Behrle, Manager-Startup and Test Department
- B. Bader, QA Program Development Manager
- A. Baig, Project Engineer - Technical Functions Division (TF)
- * J. Carroll, Jr., Deputy Director
- J. Chardos, Supervisor-Engineering Projects - TF
- C. Chen, Project Engineer - TF
- D. Corbett, QA Engineer
- T. Corrie, QC Manager
- * P. Fiedler, Vice President and Director
- J. Flynn, Engineering Procedures and Standards Manager - TF
- * J. Frew, Maintenance and Construction Division (M&C) Production Director
- S. Fuller, Operations QC Manager
- * R. Hawkins, Manager of Production - M&C
- D. Dryden, Documents Administrator - M&C
- * N. Kazanas, Director of QA
- P. Kennedy, Planning and Scheduling - M&C
- * M. Laggart, Licensing Manager
- A. Laird, M&C Manager Methods and Procedures
- L. Lundsrom, QC Lead Receipt Inspector
- P. Magitz, QA Audit Supervisor
- F. Manganaro, M&C Vice President
- * R. Markowski, Site Audit Manager
- W. Popow, Director - M&C
- D. Reil, M&C Manager Planning
- G. Rowe, Manager Warehousing
- G. Simonetti, Senior Operations Engineer
- J. Solakiewicz, QA Engineering and Systems Manager
- M. Stromberg, QA Manager Program/Development/Audit
- * J. Sullivan, Jr., Plant Operations Director
- R. Thoms, QA Engineer
- * C. Tracy, Manager QA Modifications/Operations
- L. Twombly, Area Manager Human Resources (GPU corporate offices)
- R. Wayne, Manager QA Design and Procurement
- F. Weinzimmer, M&C Director of Engineering Projects

U.S. Nuclear Regulatory Commission

- * C. Cowgill, Senior Resident Inspector
- * J. Thomas, Resident Inspector

The inspectors also held discussions with and interviewed other licensee and contractor employees including administrative, engineering, maintenance and construction, operations, quality assurance and quality control, technical, and warehousing personnel.

*denotes those present at the exit interview conducted September 3, 1982.

2. Licensee Actions On Previously Identified Items

(Closed) Unresolved Item (219/78-04-01) Licensee audit 77-07 found that purchase requisition documentation was not reviewed as required and that purchase requisitions did not always contain the required specifications, (audit finding 77-07-01 was issued). During NRC inspection 80-13 the inspector verified that the Purchase Department procedures were revised to require review by appropriate management. However, the corrective action for the audit finding was not verified as completed by the licensee QA audit section. The inspector reviewed Oyster Creek site audit 80-32 Procurement, that verified adequate corrective action was taken.

Based on the above this item is closed.

(Closed) Unresolved Item (79-04-01): Containment Spray Heat Exchanger rated at 250 psi vs. rating of 300 psi in original specification. The inspector reviewed Design Criteria #141-75-5, Containment Spray System, Rev. 0 which discusses factors influencing the design parameters of the subject heat exchangers such as: the interfacing Emergency Service Water Supply piping built to a design pressure of 250 psig; the 227.5 psig shut off head of the Emergency Service Water Pump; and, the Containment Spray System service conditions of 150 psig. Based on the foregoing and other specification information, discussions with licensee engineers, and applicable prints/flow diagrams the inspector stated that he had no further questions.

(Closed) Unresolved Item (79-05-05): Contractor Classification List (CCL) Not Revised. Procedure 4023, Rev. 4, which addressed the CCL and its use was deleted and GPUN Procedure 7-7-MA-009, Contractor Classification List, Rev. 0, replaced it. The licensee representative stated that the CCL is in a three stage phase out process. Approximately 75 of an original 400 suppliers still remain on the list. The first stage removed commercial grade suppliers from the list since QA Program requirements are not placed on those suppliers. The second stage removed those suppliers that were already on the GPU supplier list, now called the Supplier Quality Classification List (SQCL), that has been in use for a number of years. The third stage is currently underway where those remaining suppliers are being re-evaluated to either add them to the SQCL or eliminate them from further procurement consideration. Procedure 7-7-04, Evaluation of Suppliers for Suppliers Quality Classification List, Rev. 4, addressed the methods of selecting suppliers for inclusion on the SQCL and the control/use of the list. The inspector also noted that the SQCL is issued monthly and that the CCL has been re-issued eight times in the past year. Based on the above and the findings discussed in paragraph 6. This item is closed.

(Open) Unresolved Item (79-18-28): Shelf Life Traceability. Materials Management Policy and Procedures Number 7240-WHP-6470.0, Shelf Life, Rev. 1 (a draft in the final review process) discusses the manner in which the licensee intends to establish all encompassing shelf life controls.

This item will remain open until the procedure is issued and its implementation reviewed further by RI.

(Closed) Unresolved Item (80-13-01): Failure to clearly describe methods utilized to document data into official records. Based on the findings of the program and implementation reviews discussed in paragraphs 4 and 5, this item is resolved.

(Closed) Unresolved Item (80-13-02): Leak Test Procedure 759.4.005 due for periodic review. The inspector verified that the procedure had undergone its periodic review and noted that the current issue is Rev. 3.

(Closed) Violation (81-06-03): Safety related material purchased without QA review of the requisition. The inspector reviewed Requisition 61619, Purchase Order #37138 and other records associated with Modification Proposal #464-1 and verified that QA had performed a review of the requisition after-the-fact and identified no discrepancies. The above and the findings discussed in paragraph 6 are consistent with the corrective action described in the licensee's July 8, 1981 response to RI's June 9, 1981 letter.

(Closed) Violation (81-08-02): Unsatisfactory Storehouse conditions. The inspector toured the Level B Storehouse and noted that those conditions that had been previously identified as unacceptable had been corrected. The foregoing and findings discussed in paragraph 6 were consistent with the corrective action described in the licensee's October 26, 1981 response to RI's September 24, 1981 letter (also refer to Item 78-04-01 above).

(Open) Unresolved Item (81-08-09): Documentation for verification of closeout of JCP&L audit item 76-12-1 to confirm weights of certain Isolation Condenser Valves. Licensee representatives stated that several searches of files could not locate documentation confirming the weight of the valves. Also, the lead responsibility for followup on this item has recently been transferred to the onsite Technical Functions group. A decision has been made by this group to visually inspect the subject valves at an opportune time for nameplate data, etc. The weight data can then be requested from the vendor. The licensee representative also stated that should the results of these efforts indicate a need for a seismic evaluation, it and any other activities would be performed. Pending further review of the adequacy of licensee action(s) this item remains open.

(Closed) Unresolved Item (219/81-08-11) Technical Specification 6.5.3.5 requires that audits which encompass the conformance of facility operations to all provision contained within the Technical Specifications (T.S.) and applicable license conditions be performed under the Director Nuclear Assurance at least once per year. The licensee previously didn't have a management system to ensure coverage. The inspector reviewed the matrix that the licensee has developed to ensure coverage of the Technical Specification and licensee conditions in the annual audit

schedule. In addition the inspector randomly selected 25 T.S. specific line items and verified that these items were included in the scope of either late 1981 or 1982 audits.

However, the licensee representative stated that their interpretations of the Technical Specifications requirement to annually audit "All provisions of the Technical Specifications" was that a sample of the line items (such as plant surveillances) for each Technical Specification section would be selected and the audit would verify that those line items were accomplished. To further clarify this position the licensee intends to initiate a change to the Technical Specifications to remove the word "all".

Based on the above this item is closed.

(Closed) Unresolved Item (81-08-12): Provide evidence that a member of GORB meets T.S. 6.5.4.2.e requirements for Instrument and Controls expertise. Letter Chairman, GORB/Supervisor, Oyster Creek Licensing, October 12, 1981 forwarded resumes of two members deemed to be qualified in the subject discipline. The inspector reviewed the resumes but was aware that one of these individuals had been re-assigned and questioned whether that individual still remained a member of GORB. The licensee representative confirmed that this individual was no longer a member of GORB. The inspector stated that he had no further questions and the item was closed.

(Open) Violation (82-05-01): Certain Administrative procedures for control of design changes/modifications not issued nor were issued procedures updated to reflect current practices. Based on the results of this inspection as discussed in paragraphs 4 and 5 the inspector had no questions on the status of corrective actions as described in the licensee's response May 18, 1982 response to RI's April 12, 1982 letter.

This item remains open pending further RI review.

3. General

An item of noncompliance was identified during an NRC inspection (see Report 50-219/82-05) in the functional area of design changes/modification controls. The licensee's May 18, 1982 response to RIs April 12, 1982 letter outlined a number of corrective actions including organizational and programmatic changes. Subsequent to this, RI management conducted a Systematic Appraisal of Licensee Performance (SALP) as described in Meeting Report 50-219/82-12. This report expressed concern on the ability of the licensee to control the significant number of modifications scheduled for the upcoming outage and recommended increased frequency of routine inspections in this area. Another management meeting (as described in Report 50-219/82-13) was held during which modification controls were again discussed.

Licensee corrective action outlined in the aforementioned letter was not due for completion until October, 1982. Therefore this inspection reviewed the status of licensee corrective action and evaluated the probable readiness of the licensee for adequate control and overview of modifications during the upcoming outage. Also reviewed was engineering work already accomplished on such modifications. The results of these reviews are discussed in subsequent paragraphs.

The inspectors also reviewed changes to the procedures, identified by an asterisk in subsequent paragraphs of this report, to assure they were consistent with the licensee's approved QA Program.

4. Technical Support Staff

4.1 Review

The inspectors' review of the support staff included procedure reviews, reviews of personnel qualifications, personnel interviews, procedure implementation and audit reviews (reference paragraphs 3, 5 and 7) to verify the following:

- Developed administrative controls which describe the responsibilities, authorities and lines of communication are readily available
- The managers, group leaders and support staff who were interviewed are aware of their responsibilities and authority as defined by applicable procedures
- The interviewed personnel which comprise the support staff are technically competent and qualified to execute their responsibilities and authority as defined by applicable procedures
- The workload of the interviewed individuals involved in contractor oversight is not excessive
- The procedures referenced in other paragraphs of this report are in conformance with the requirements of 10 CFR 50, Appendix B, and the licensee's approved QA Program
- The licensee has ability to direct, modify and control contracted engineering services in a timely and efficient manner
- The support staff activities are effective and any deficient condition, including QA audit findings, are dispositioned in a timely and adequate manner

4.2 Findings

4.2.1 Maintenance and Construction Division (M&C)

Only the two groups of this division associated with plant activities were examined during this inspection. One is located at the corporate offices and the other is located onsite. The onsite group is divided into four sections with the engineering sections of technical support, planning and production each headed by a manager. These managers and an administrator of the remaining section report to an onsite director.

The group at the corporate offices is similarly structured and one of its roles is to support the onsite group and a second group located onsite at another nuclear station. A vice president is the senior executive directly responsible for the division. The vice president discussed the status of the management program and its presentation on September 1, 1982, to plant operations management and others with the inspectors. During this discussion the vice president outlined his intent to provide continuing strong management controls and direction for the division's assigned functional activities and to assure the support/services provided by others is adequate.

The eight management level, three supervisor level and two professional level personnel with whom discussions were held did know their individual functional responsibilities and authority. The inspector stated during the exit interview that the only apparent weakness was the general lack of knowledge among management level personnel of the status of the new written management program and the events surrounding the licensee's commitments to establish it (see paragraph 2). The licensee acknowledged the inspector's statement.

The inspector also reviewed records of qualifications (resumes, etc.) for three management level personnel.

4.2.2 Technical Functions Division (TF)

This group is located primarily at the corporate offices and provides engineering type services to this and another nuclear station with onsite representatives located at both facilities. The corporate group has been examined previously during inspections of the other station as documented in inspection reports such as 50-289/80-05, 80-11, 81-22 and 82-11.

TF either performs the detail engineering work or overviews contracted engineering services (technical aspects) so that the engineering package that is forwarded to M&C (onsite) needs only to have implementing installation procedures developed by the latter during the onsite planning/scheduling phase. Any engineering changes to an issued package is reviewed/resolved and approved by TF. An examination of this group's activities is discussed further in paragraph 5.

No violations were identified.

5. Design Change/Modification Program

5.1 References

- NUREG 0737 (November 1980), Clarification of TMI Action Plan Requirements.
- ANSI N 45.2 (1977) Quality Assurance Program for Nuclear Power Plants
- ANSI N 45.2.11 (1974) Quality Assurance Requirements for the Design of Nuclear Power Plants
- Tech Functions Procedures
 - EP-002, GPUN Drawings, Rev. 5
 - EP-003, Vendor Document Review, Rev. 3
 - EP-004, Technical Specifications, Rev. 2
 - EP-005, System Design Descriptions, Rev. 4
 - EP-009, Design Verification, Rev. 3
 - EP-016, Safety Evaluation, Rev. 2
 - EP-020, Installation Specifications, Rev. 1
 - EP-025, As-Built Drawings, Rev. 1
 - PO-002, Technical Functions Division
 - Organizational Flow Charts, Rev. 2
 - EMP-014, Design Review, Rev. 0
 - EMP-015, Field Questionnaires, Change Notices, and Change Requests, Rev. 3
 - EMP-016, Plant Configuration Control Lists, Rev. 0
 - EMP-019, Plant Modifications Engineered by Plant Engineering, Rev. 1
- Maintenance and Construction Division Procedures
 - A000-ADM-1220.1, Work Request, Rev. 2
 - A000-ADM-1220.2, Preliminary Planning Meeting, Rev. 2
 - A000-ADM-1220.3, Work Authorization, Rev. 2
 - A000-ADM-1220.4, Work Order/Sub-Order, Rev. 2
 - A000-ADM-1220.7, Work Authorization Installation Procedure, Rev. 0
 - A000-ADM-1220.8, Job Order, Rev. 0
 - A000-ADM-1220.9, Work Closeout, Rev. 0
 - A000-ADM-1220.10, Work Permit, Rev. 0
 - A000-ADM-1220.11, Change Process, Rev. 0
 - A000-ADM-1220.12, Emergency Maintenance, Rev. 0
 - A000-ADM-1220.13, Short Form, Rev. 0

5.2 Program Review

The inspector reviewed the licensee's program for design changes and facility modifications to verify the following.

- Procedures have been established for control of design changes and modifications
- Appropriate responsibilities have been established and assigned
- Administrative controls have been established to preclude unauthorized activities; assure prompt recall of obsolete documents; and facilitate distribution of approved documents
- Administrative control procedures have been established to revise the plant procedures, the training program and the facility drawings as necessary to reflect any facility changes as described in this section
- Proper communication channels have been established among participating organizations such as design service contractors
- Provisions have been established to transfer the records to the records storage facility
- Provisions have been established to assure that activities are conducted using approved procedures, whenever applicable
- Program controls assure that post implementation testing and acceptance criteria are established
- Responsibility and the method for reporting activities to the Nuclear Regulatory Commission have been established.

The above procedures were reviewed to assure the program complies with the referenced requirements.

5.3 Program Findings

Technical Functions Division (TF) procedures such as EMP-007, Engineering Cost Estimates, and EMP-017, Capital Project Closeout (e.g. non technical work related) are still under development. The licensee representative stated that a few procedures related to technical work (e.g. EP-010, Evaluating and Reviewing A/E Work) that are not yet issued are in the review process.

The Maintenance and Construction Division (M&C) has developed a work management system as described in the GPU Nuclear Maintenance and Construction Work Management System, Vol. 1 (a manual). This manual contained visual presentation aids, functional organizational charts, statement of objectives, functional flow charts, filled out samples of forms, implementing procedures (reference paragraph 5.1), etc. The inspector noted that procedures for training and material

ordering/status remain to be developed. This system and manual were presented to and discussed with plant operations executives, managers and other selected personnel on September 1, 1982 (during the course of this inspection) by the M&C Vice President (VP) and his senior staff. The VP stated that approval and implementation of M&C procedures was expected to occur in October, 1982, as scheduled.

The inspector determined that the above was consistent with the actions described in the licensee's May 18, 1982 response to RI's April 12, 1982 letter and further, that the status of these corrective actions did not raise any concern about the licensee's readiness for the upcoming outage in the areas examined.

No violations were identified.

5.4 Design Changes/Modifications Implementation

The design change packages listed in 3.3 below were reviewed on a sampling basis to verify that the following requirements have been met, as applicable:

- Design Input Requirements such as design bases, regulatory requirements, codes, and standards were identified, documented, and their selection reviewed and approved.
- Design activities shall be prescribed and accomplished in accordance with procedures that would assure the applicable design inputs are correctly translated into specifications, drawings, procedures, or instructions.
- Interface controls were established to identify, control, and maintain responsibilities, lines of communications, and documentation requirements for internal and external interfaces.
- Design verification was established to determine the adequacy of the design to meet the requirements specified in design inputs.
- Document control procedures were established to control the issuance of design documents and their changes.
- Design change control procedures were established to control design changes.
- Design documentation and records were maintained.
- Audits were conducted to verify compliance with all aspects of QA programs for design and design changes.
- New or modified systems were installed in accordance with the approved design.

5.4.1 Document/Record Packages Reviewed

The inspector reviewed the following design modification packages:

- Task Assignment No. 438-1 Containment Pressure, Water and Hydrogen Monitoring Systems
- Design Criteria No. 438.00-2 Additional Containment Instrumentation Required by NUREG 6578
- Installation Specification No. 438.00-6, Electrical Installation for Additional Incontainment Instrumentation
- Engineering Services Agreement No. 398-1, Relief and Safety Valve position Indication
- Procurement Specification No. 398-2 Positive Safety/Relief Valve position Indication
- Design Criteria No. 398-5 Positive Safety/Relief Valve position Indication
- Procedure No. Special 81-179 (Rev. 1) Core Drilling of Base Mat for the Installation of Torus Mid-Bay Anchor Bolts
- Procedure No. Special 81-182 (Rev. 0)
Moving Saddle, Hoop Straps and Related Material into the Torus Room
- Procedure No. Special 82-073 (Rev. 0) Containment Hydrogen Monitoring

5.5 Implementation Findings

- 5.5.1 The first twenty-seven feet of piping from the torus for the Torus Water level indication system is not redundant. This is not consistent with the guidelines of NUREG 0737. This difference should have been communicated to the office of Nuclear Reactor Regulation, (NRR) in accordance with the guidelines stated in Mr. D. G. Eisenhut's letter dated October 31, 1980. Licensee's Project Engineer recollected discussions between the Architect/Engineer and the licensee about the same issue. However, due to the unavailability of the licensee's cognizant licensing personnel, the Licensee's Project Engineer could not verify whether this difference was addressed to the NRR and resolved. The inspector stated to the licensee that

the status and the resolution of this item would be followed in future NRC inspections (IFI-82-21-01).

The inspector also stated that all TMI - related design changes should be carefully reviewed, differences between the actual design and NUREG 0737 should be identified and the identified differences should be resolved with NRR prior to the completion of the said design changes.

- 5.5.2 The licensee's acceptance documentation for the Rosemont generic transmitter qualification data was not available with the rest of the engineering data at the corporate office. The inspector stated the licensee should confirm that the profiles used for qualification were indeed conservative for the Oyster Creek Nuclear Generating Station. Licensee's efforts to obtain and maintain the proof of acceptance of vendor and other outside documents along with engineering documents will be followed in future NRC inspections (IFI 82-21-02).
- 5.5.3 Step 6.7.1.2 of Procedure No. Special 81-16-7 was changed by a former licensee employee from "The megger will encompass in accordance with the enclosed data sheet 5, megger between each phase and ground at 50 volts." to "The megger will encompass in accordance with the enclosed data sheet 5, Megger between each phase and ground at 2500 volts." Licensee representatives stated that the former employee considered the above change a typographical error as the Startup Group had no 50 volt maximum megger instrument. The available documents did not identify the range of the megger equipment used (i.e. 500 volt max or 2500 volt max. range). The inspector stated that the licensee should identify the meggering instrument used in this case and if indeed a 2500v maximum instrument was used, the licensee should investigate the impact of this usage on the tested equipment. Licensee's effort in this regard would be followed in a future NRC Inspection (IFI-82-21-03).

The Licensee's representatives acknowledged the inspector's statements.

No violations were identified in the inspected area.

6. Procurement

6.1 References

- Technical Functions Procedure (TF) EP-011, Quality Classification List, Rev. 0

- *-- TF TAP-011, Purchase Requisitions, Rev. 2
- *-- Engineering, Licensing and Drafting Standard ES-011, Methodology and Content of GPUN Quality Classification List, Rev. 4
- *-- Quality Assurance Department Procedure (QA) #7-7-MA-003, Guidelines for Evaluation of Suppliers, Rev. 3
- *-- QA #7-7-MA-009, Contractor Classification List, Rev. 1
- QA #7-7-04, Evaluation of Suppliers for Supplier Quality Classification List, Rev. 4
- *-- Materials Management Policy and Procedure Number 7240-WHP-6470.0, Shelf Life, Rev. 1 (a draft)

6.1 Review

The inspector reviewed the above documents to verify that the processing of material and equipment required the following.

- Material and equipment received are receipt inspected by qualified personnel
- Appropriate storage and packaging requirements have been specified
- Adequate identification and control of non-conforming material
- Shelf life control of items identified as being subject to deterioration during storage

6.2 Implementation

The inspector toured the Level B warehouse and observed storage and cleanliness conditions; identification of items; control of newly received and nonconforming items; evidence of shelf life control; and, acceptability/status of inspected items to verify that the above established requirements were met. (see paragraph 2, Items 79-05-05 and 81-08-02).

The inspector also selected the following stored items and reviewed the procurement/receipt inspection records associated with each to verify conformance with the above requirements including QA review of the purchase orders and use of an approved supplier (see paragraph 2, Item 81-06-03).

- Shutdown Cooling Isolation Valve, Purchase Orders (PO) 200383 and 301104 (PQAs 81-675, 676 and 677)
- Valve Solenoid, PO 301822 (PQA 82-166)

- Pipe Support Material, PO 70749 DN (PQA 80-857)
- Radioactive Gaseous Effluent Monitoring System Fuses, PO 7240-0957 (PQA 82-583)

6.3 Findings

The inspector noted that the number of storage racks now placed in the warehouse is such that rack or bin space is available for the items in storage. This space availability precludes overstacking of cartons, etc. Although the concrete floor has not yet been replaced/repared and continues to create dust, the frequent house-keeping effort has succeeded in minimizing the problem. (see paragraph 2, Item 81-08-02). Items subject to shelf life are clearly identified, however the procedure describing the shelf life control system is still in a draft form (see paragraph 2, Item 79-05-05). Evidence of management overview of warehousing activities is the permanent assignment of a QA receipt inspector to that area in addition to other QA/QC overview.

No violations were identified.

7. Audits

7.1 Requirements

The requirements governing the performance of quality assurance audits of safety-related activities are specified in 10 CFR 50, Appendix B "Quality Assurance Criteria for Nuclear Power Plants" and Technical Specification, Section 6, "Administrative Controls". In addition the Jersey Central Power and Light Operational Quality Assurance Plan, Revision 5, April 1, 1981, requires compliance with the following Regulatory Guide and Standards.

- Regulatory Guide 1.28 "Quality Assurance Program Requirements (Design and Construction)", Revision 2, February 1979
- Regulatory Guide 1.33, "Quality Assurance Program Requirements (operation)", Revision 2, February, 1978
- ANSI 18.7-1978, "Administrative Controls for Nuclear Power Plants"
- Regulatory Guide 1.144 "Auditing of Quality Assurance Program for Nuclear Power Plants," January, 1979

7.2 Program Review

The inspector reviewed the audit program as described in the following licensee administrative documents to verify that the audit program has been defined and that it is consistent with the Final

Safety Analysis Report (FSAR), Jersey Central Power & Light Operational QA plan commitments, and the requirements of those documents referenced in paragraph 7.1.

- 7-18-01, Quality Assurance Audits, Revision 7, November, 1981
- 7-18-02, Quality Assurance Auditor Qualifications, Revision 4, November, 1981
- 7-2-PDA-001, Monthly Audit Status List, Revision 0, April, 1982
- 7-18-MDA-001, QA Audit Plan, Revision 0, November, 1980
- 7-18-MDA-002, QA Audit Scheduling, Revision 0, December, 1980
- 7-18-MDA-003, QA Audit Checklists, Revision 0, December, 1980
- 7-18-MDA-004, QA Audit Report Filing, Revision 0, December, 1980
- 7-18-MDA-005, QA Audit Reports, Revision 0, December, 1980
- 7-18-MDA-006, Management Reporting, Revision 0, January, 1982

The audit program was inspected for the following.

- Audits are performed by qualified audit personnel who are independent of the area being audited
- A long range audit schedule exists and the planned audits are being completed in a timely manner
- Each audit utilizes an audit checklist or procedure covering the areas scoped for audit
- Deficiencies identified during the audit are resolved or are being carried as open items
- Periodic review of the audit program is performed to determine its status and adequacy
- Review of the audit program by the offsite safety review committees [Independent Safety Review Group (ISRG) and the General Office Review Board (GORB)] is performed in an effective manner and satisfies the Technical Specification requirements,
- Frequency of the audits was in conformance with Technical Specifications and QA program

- Administrative channels or methods have been defined for taking corrective action and appropriate escalation as necessary

7.3 Implementation

The inspector reviewed the implementation of the Oyster Creek Audit Program by discussions with QA department supervision and reviewing the following.

- 1982-1984 Long Range QA audit schedule with July 1982, 6 month update
- Audit Finding status list, August, 1982
- Site Audit Group Monthly Progress Reports January through July, 1982
- 1981 Annual Assessment Report, April 30, 1982 O.C. Site audit group
- 1981 Annual Assessment Report, July 1982 presented to GPU Board of Directors
- 1981 Cooperative Management Audit August 10-13, 1981
- Management seminar with plant management to discuss effective use of audit program
- Audit S-OC-81-03, Major Plant Maintenance, July 8, 1981
- Audit S-OC-81-04, Modifications, July 20, 1981
- Audit S-OC-82-01, Information Management, June 11, 1982
- Audit S-OC-81-19, Emergency Preparedness, December 23, 1981
- Audit S-OC-81-15, Training, December 2, 1981
- Audit S-OC-82-05, Maintenance and Construction Division suspended June 25, 1982
- Audit S-OC-81-22, Corrective Action, July 14, 1982
- Audit S-OC-81-23, Safety Review, July 7, 1982
- Audit O-COM-82-06, Burns and Roe (Operating Plant Systems Division), June 21, 1982
- Audit O-OC-82-03, Oyster Creek QA Modification/Operations, May 3, 1982

- Audit 0-COM-82-02, Stone and Webster (CHOC), March 18, 1982 follow-up
- Audit 0-OC-82-11, Stone and Webster (CHOC), November, 1981
- Audit 0-COM-82-01, Technical Functions, March, 1982
- Audit 0-OC-82-02, MPR Associates, March, 1982
- Audit 0-OC-82-01, GE, NED San Jose Ca. April 2, 1981
- Audit 0-OC-81-05, Science Applications June 2, 1981

7.4 Findings

Due to previous personnel shortages and the lack of certified auditors the 1981 and 1982 site audit schedules slipped and a large number of audit findings (approximately 95) remain open pending QA verification. The inspector discussed the current staffing, the revised 1982 audit schedule and plans to incorporate the follow-up of the open audit findings into the remaining 1982 audits with the Site Audit Manager. Timely completion of the 1982 audit schedule and the closing of the open audit finding is unresolved pending licensee action and will be reviewed in a subsequent NRC:RI inspection (219/82-21-04).

Technical Specifications 6.5.3.6 requires the results of all audits to be reported to the chairmen of the General Office Review Board (GORB). The GORB has a QA standing committee which reviews QA activities and audit reports for the GORB. The inspector discussed, with the GORB chairman, the QA standing committee's activity and their interface with the QA department. The inspector expressed a concern for lack of an active interface between the QA standing committee and the QA audit sections. The licensee's representative acknowledged the inspector's concern and committed to revising the Oyster Creek GORB "Responsibility, Authority, Organization and Resources" document to further delineate the responsibilities and active interfaces of the QA standing committee. Revision of the GORB document and the QA standing committee's activity is an unresolved item and will be reviewed in a subsequent NRC:RI inspection (219/82-21-05).

8. QA/QC Surveillance (Monitoring) Program

8.1 Requirements

The requirements governing the performance of quality assurance inspections of safety-related activities are specified in 10 CFR 50, Appendix B, "Quality Assurance Criteria for Nuclear Power Plants."

8.2 Program Review

The inspector reviewed the inspection/monitoring program as described in the following documents.

- 7-10-OC-004, Oyster Creek QA Mod/OPS Monitoring Program, Revision 1, June 23, 1982
- OC-15-01, Material Nonconformance Report, Revision 0, November 12, 1981
- OC-15-02, Quality Deficiency Report, Revision 0, November 16, 1981

8.3 Implementation

The inspector reviewed the implementation of inspection/monitoring program by reviewing the following.

- Monthly monitoring schedules, August and September, 1982
- Quarterly evaluation reports of Chemistry and Rad Con, 1st and 2nd quarters 1982
- Several monitoring reports with associated Quality Deficiency Reports
 - 1) 81-07-0B, D/G surveillance
 - 2) 82 25002, Document Control
 - 3) 82 24003, Fire Protection
 - 4) 82 23004, Preventative Maintenance Program, etc.

The program was inspected for the following.

- Monitoring coverage was adequate enough to cover all plant safety-related activities
- QA personnel performing monitoring/inspection meet the minimum education, experience and qualifications for the activity monitored
- Deficiencies identified during the inspection were resolved or carried as open items

No violations were identified.

9. Unresolved Items

Unresolved items are matters about which more information is required in order to ascertain whether they are acceptable, deviations of items of noncompliance. Two unresolved items were identified during this inspection and are discussed in paragraph 7.4.

10. Management Meetings

Licensee management was informed of the scope and purpose of the inspection at entrance interviews conducted at the Oyster Creek Nuclear Station on August 24, 1982 and the General Public Utilities offices on September 1, 1982. The findings of the inspection were discussed with licensee management at the Oyster Creek Nuclear Station periodically during the inspection and at the General Public Utilities offices on September 2, 1982. An exit interview was conducted at the Oyster Creek Nuclear Station on September 3, 1982, (see paragraph 1 for attendees) at which time the findings of the inspection were presented.