

U. S. NUCLEAR REGULATORY COMMISSION  
REGION I

Report Nos.: 50-334/91-01 and 50-412/91-01  
Docket Nos.: 50-334 and 50-412  
License Nos.: DPR-66 and NPF-73  
Licensee: Duquesne Light Company  
Post Office Box 4  
Shippingport, Pennsylvania 15077  
Facility Name: Beaver Valley Power Station, Units 1 and 2  
Inspection At: Shippingport, Pennsylvania  
Inspection Conducted: January 8 - 11, 1991

Inspectors: A. Finkel January 31, 1991  
A. Finkel, Senior Reactor Engineer Date

F. Bower January 31, 1991  
F. Bower, Reactor Engineer Date

Approved by: N. Blumberg 2/1/91  
N. Blumberg, Chief, Date  
Operational Programs Section  
Operations Branch, DRS

Inspection Summary: Inspection on January 8-11, 1991 (Inspection Report Nos. 50-334/91-01 and 50-412/91-01)

Areas Inspected: Routine unannounced inspection of the licensee activities in implementing a Quality Assurance Program that is in conformance with technical specifications, regulatory requirements, commitments, and industry guides and standards. The following areas were inspected: Audit, Procurement and the Records program. The inspection was conducted on site by two region-based inspectors.

Results: Two non-cited violations were identified in the areas of storage of records and the records verification requirements performed by the records personnel. In each of the non-cited violations, the licensee took immediate corrective actions in resolving the issues, see section 3.3 of this report.

The Audit and Purchasing programs were performed as described in both site procedures and in Section 17 of the FSAR. The organizations were well trained and staffed to perform these tasks.

## DETAILS

### 1. Persons Contacted:

#### Duquesne Light Company

- \* R. Balcerek, Manager Management Services
- \* S. Fenner, Manager Quality Services
- \* A. Hough, Data Coordinator
- \* C. Kirschner, Supervisor Engineering Quality Services
- \* W. Lacey, General Manager Corporation Nuclear Services
- \* F. Lipchick, Senior Licensing Supervisor
- \* M. Mirchick, Supervisor Mechanical Procurement Engineering
- \* A. Mizia, Supervisor Quality Services Audits
- \* M. Pavlick, Director Quality Services
- \* E. Sweeney, Director Procurement Engineering
- \* E. Titus, Manager Nuclear Procurement

#### United States Nuclear Regulatory Commission

- \* J. Beall, Senior Resident Inspector
- \* P. Wilson, Resident Inspector

\* Denotes those present at the Exit Meeting on January 11, 1991.

The inspectors also held discussions with managers, supervisors and other licensee employees during the course of the inspection, including operations, technical and administrative personnel.

### 2. Follow-Up of Previously Identified Item (92701)

(Closed) Unresolved Items 50-334/90-15-01 and 50-412/90-15-01

Evaluate the condition of safety-related items in warehouse storage prior to use in safety-related systems.

During the storage of items from the construction and test programs, the protective packaging was broken and the degree of protection for the equipment/materials had to be established. To comply with the requirements of ANSI N45.2.2-1972 the licensee issued a Deficiency Report (No. 478) which froze the issuance of all safety-related equipment in Warehouse D. The licensee developed an inspection program for evaluating all safety-related equipment stored in Warehouse D. The results of this effort has been documented in surveillance reports performed by the Nuclear Construction Department (NCD) and verified by the Quality Service Unit (QSU). The inspector selected 20 surveillance reports out of 95 during this evaluation of the DR No. 478. The acceptance of safety-related items was documented with both engineering and test data supporting documentation. The completion of this DR is scheduled for the second quarter of 1991.

This item is closed.

### 3. Quality Assurance Program Annual Review (35701)

The purpose of the inspection was to review and evaluate the licensee's implementation of its quality assurance (QA) program for handling safety-related systems and components. The inspectors reviewed and evaluated the following QA program areas for conformance to QA program requirements, as described in the Final Safety Analysis Report (FSAR), Technical Specifications, applicable codes, standards, and regulatory guides:

- Quality Assurance Program
- Procurement Program
- Audit Program
- Records Program

The quality assurance program was reviewed to determine whether organizational changes since the last review were documented, understood by personnel, and did not change the intent of the quality assurance program's overall function.

Duquesne Light Company is presently changing its organizational structure for this site. The current changes do not appear to degrade the original management involvement or control; but, rather, strengthen the organization by placing engineering personnel in various service type positions. For example, engineering personnel are in the procurement department for evaluating purchase order requirements prior to issuance. This engineering support is in conjunction with the engineering department responsible for the technical portion of the purchase order.

#### 3.1 Procurement Program (38701)

The procurement program is described in the Nuclear Group Department (NGD) Procedure No. 3, "Procurement of Materials/Surveillance." The Manager, Nuclear Procurement Department has two lists from which to procure parts and materials: the Q list for safety-related items; and, a list of non-safety grade parts and materials. The Q-listed supplies are mentioned in a data base which is controlled and issued by the quality services organization. The qualified supplies program is described in Quality Assurance Procedures (QAPs) 7.1.2., "Qualified Suppliers List". The licensee quality services organization performs their performance inspection of their suppliers/vendors in accordance with the requirements of QAP 7.1.2.

The inspector verified that the approved listing of suppliers/vendors used by the procurement personnel was verified by the quality services organization and that this listing was up-to-date with the quality services vendor file data. The inspector also verified that requirements such as 10 CFR 21.31 were understood by the procurement personnel and listed on required purchase orders. It was also determined that the

procurement personnel were knowledgeable of the site requirements and that their direction has been documented in their Nuclear Group Administrative Manual (NGAM).

No violations or deviations were identified.

### 3.2 Audit Program (40702)

The scope of this inspection was to verify that an audit program has been defined and that the program is consistent with the Final Safety Analysis Report (FSAR), Regulatory Guides, and industry guides and standards.

The present audit schedule for this site is based on a 1-year cycle, as defined in ANSI N45.2.12, Draft 3, Revision 4, February 1974, "Requirements for Auditing of Quality Assurance Programs for Nuclear Power Plants." In addition to performing the audit criteria of ANSI N45.2.12, the Offsite Review Committee (ORC) has assigned their audit performance function (Ref. FSAR 17.2-21) to the Quality Services Audit Group. Action items identified during the ORC audits are documented and tracked in the QS Tracking System as specified in NGD 8, "Audits, Inspections and Surveillances."

Both the audit schedules for the ORC and the general plant programs have been established and issued by the Quality Services Audit function. The audit personnel have completed a training course in performance based inspection during 1990. Their present audit check lists and reports have been modified to include performance based inspection criteria. The inspector verified that performance based inspection criteria was used by the audit services personnel during their audits BV-C-89-38, "Transient/Operational Cycles Not Properly Logged", and BV-C-89-41, "Fire Related Assemblies Should Be Operable." The inspector also verified that the findings of the audits have been addressed and closed by the audit services organization. A review of the engineering data to support closing of the audit finding was determined to be adequate to close the finding.

No violations or deviations were identified.

### 3.3 Records Program (39701)

The scope of this inspection was to verify that administrative controls and written procedures for implementing a records program in conformance with regulatory requirements, FSAR commitments, and industry guides and standards.

#### 3.3.1 Storage and Retention of Records

The inspector reviewed the licensee's program for record storage, retention, and retrieval. The Nuclear Group Site Administrative Procedures (SAPs) - 54, Revision 1, "Records Management" describes the records management program and the record control procedures for implementing the program. See Attachment A for additional documents reviewed.

The SAP procedures are being revised to a Nuclear Group Administrative Procedure (NGAP). The draft NGAP 6.3, Revision 0, "Record Management" procedure has made a software change to include a BAR coding tracking system. This change is part of an overall change in the plant data tracking system that is part of their material, parts, and identification program upgrade.

An index for the quality assurance records is maintained and is issued through the Records Tracking List (RTL) program. The RTL also identifies the document due date for updating as applicable.

During a tour of the records storage facilities, the inspector verified that the environmental and fire prevention systems for the areas were in an operating condition and within the requirements described in the ISAR. However, a number of records within one vault were loosely stacked on top of the filing cabinets. Operations Quality Assurance Procedure (OP-15), Revision 2, "Quality Assurance Records", requires documents to be in binders, folders, or envelopes for storage in containers. The procedure also states that loose documents shall not be stored on open surfaces such as tables or on cabinet tops. The inspector determined that the requirements of OP-15 had not been transcribed into the lower tier documents such as SAPs and Document Control and Record Management Procedures (DCRMPs). The inspectors also determined that the licensee's records personnel were not aware of this OP-15 criteria for storage of loose documentation.

The licensee's failure to transcribe the requirements of OP-15 to the lower tier documents and the failure of the personnel to implement the requirements was a violation and considered an isolated event which was of minor safety significance (Severity Level V). The licensee took immediate action to provide the required storage containers and train the records personnel in the OP-15 requirements. Changes were also scheduled to revise DCRMP 3.05, Revision 0, "Storage and Retrieval of Records". The licensee's planned corrective actions were found to be adequate. In addition, no past similar occurrences were identified. Therefore, the failure to follow OP-15 is a Violation, but is not being cited because the criteria specified in Section V.A. of the Enforcement Policy were met. (NCV 50-334/91-01-01 and 50-412/91-01-01).

### 3.3.2 Receipt and Verification of Records

The inspector verified that the procedures for records receipt were complied with in the areas of title, record number, and page number. However, SAP-54, Revision 1, "Records Management", procedure requires that the records personnel for both vendor documentation and plant documentation perform page verification, signature verification, and authentication of signature. Those requirements of SAP-54 were not transcribed into lower tier documents such as DCRMPs and the records personnel were not trained in this area.

The inspector verified that the requirements of SAP-54 for records verification applied to the line supervisor and the vendor inspection

organization in the area of vendor documentation, and is not within the scope of the records personnel. The licensee took immediate action to re-define the intent of SAP-54 in the area of records receipt and gave specific instruction to these personnel. The licensee's corrective actions were found to be adequate. In addition, no past similar occurrences were identified. Therefore, the failure to define the requirements of SAP-54 for the documentation personnel in lower tier documents is a Violation, but is not being cited because the criteria specified in Section V.A. of the Enforcement Policy were met. (NCV 50-334/91-01-02 and 50-412/91-01-02).

#### 4.0 Exit Meeting

Licensee management were informed of the scope and purpose of the inspection at an entrance meeting conducted on January 8, 1991. The findings of the inspectors were periodically discussed with licensee representatives during the course of the inspection. An exit was conducted on January 11, 1991 (see paragraph 1), at which time the findings of the inspectors were presented.

At no time during the inspection did the inspectors provide written material to the licensee nor did the licensee indicate that areas covered by this inspection contained proprietary information.

ATTACHMENT A  
DOCUMENTS REVIEWED

Nuclear Group Department Procedures (NGDs)

- NGD-3 - "Procurement of Materials/Surveillance"
- NGD-8 - "Audits, Inspections and Surveillances"

Audit Reports

- BV C-89-38 - "Transient/Operational Cycles Not Properly Logged"
- BV C-89-41 - "Fire Related Assemblies Should Be Operable"

Quality Assurance Procedures (QAPs)

- QAP-7.1.2 - "Qualified Suppliers List"

Site Administrative Procedures (SAPs)

- SAP-54 - "Records Management"

Nuclear Group Administrative Procedures (NGAP)

- NGAP-6.3 - "Records Management"

Document Control and Records Management Procedures (DCRMPs)

- DCRMP-3.05 - "Storage and Retrieval of Records"

Operations Procedures (OPs)

- OP-15 - "Quality Assurance Records"