



UNITED STATES
 NUCLEAR REGULATORY COMMISSION
 REGION II
 101 MARIETTA STREET, N.W.
 ATLANTA, GEORGIA 30323

DEC 21 1990

Report Nos.: 50-369/90-26 and 50-370/90-26

Licensee: Duke Power Company
 422 South Church Street
 Charlotte, NC 28201-1007

Docket Nos.: 50-369 and 50-370

License Nos.: NPF-9 and NPF-17

Facility Name: McGuire Nuclear Station

Inspection Conducted: November 29-30, and December 6, 1990

Inspector:

[Signature]
 G. B. Kuzo

12/21/90
 Date Signed

Approved by:

[Signature]
 J. B. Potter, Chief
 Facilities Radiation Protection Section
 Radiological Protection and Emergency
 Preparedness Branch
 Division of Radiation Safety and Safeguards

12/21/90
 Date Signed

SUMMARY

Scope:

This routine, unannounced inspection involved review of licensee radiation protection (RP) programs including radiological controls, quality assurance (QA) program implementation, "As Low as Reasonably Achievable (ALARA)" program status, radioactive waste management, transportation activities, and review of previously identified enforcement and inspector followup items.

Results:

Quality assurance audits of radiation protection activities were both compliance and performance oriented for the reviewed subject areas and exceeded license requirements. Training and qualifications of individuals processing and shipping radioactive waste were considered program strengths. Radioactive controls associated with radioactive waste and transportation activities were adequate. One issue regarding nonconservative biases in scaling factors used to meet compliance with 10 CFR Part 61 requirements was identified (Paragraph 6.b). Transportation and waste management programs met regulatory requirements.

No violations or deviations were identified.

REPORT DETAILS

1. Persons Contacted

Licensee Employees

- *D. Britton, General Supervisor, Radiation Protection (RP)
- S. Copp, Manager, Maintenance/Planning and Materials
- J. Correll, Supervisor, Radioactive Materials Control (RMC), RP
- J. Foster, Manager, RP
- *G. Gilbert, Superintendent, Technical Services
- *L. Kunka, Nuclear Production Engineer, Compliance
- C. Martinec, Scientist, RP
- S. Mooneyhan, General Supervisor, RP
- K. Murray, Scientist, RP
- #J. Puckett, ALARA Supervisor, RP
- *R. Sharpe, Manager, Compliance
- H. Sloan, Scientist, RP

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

Nuclear Regulatory Commission

- *T. Cooper, Resident Inspector
- P. Van Doorn, Senior Resident Inspector
- S. Vias, Resident Inspector

*Attended Exit Interview on November 30, 1990

#Participated in Telephone Conference on December 6, 1990

2. Audits (83750, 86750)

10 CFR 20.311(d)(3) requires that each licensee transferring radioactive waste to a land disposal facility or a licensed waste collector conduct a quality control program to assure compliance with 10 CFR Parts 61.55 and 61.56 of this chapter and that the program must include management evaluation of audits.

10 CFR 71.137 requires licensees who package, prepare for shipping, and transport licensed material in excess of Type A quantities to carry out a comprehensive system of planned and periodic audits to verify compliance with all aspects of the quality assurance (QA) program and to determine the effectiveness of the program. The audits must be performed in accordance with written procedures or checklists by appropriately trained personnel not having direct responsibilities in the areas being audited. Audited results must be documented and reviewed by management having responsibility in the area audited.

Technical Specification (TS) 6.5.2.1 requires that the Nuclear Safety Review Board (NSRB) provide independent review and audit of designated activities in the areas of radiological safety and administrative controls and QA practices.

TS 6.5.2.9 requires, in part, that audits of unit activities be performed under the cognizance of the NSRB encompassing conformance of unit operation to provisions contained within TS and applicable license conditions at least once per 12 months and the Process Control Program and implementing procedures for solidification of radioactive wastes at least once per 24 months.

During the current inspection, licensee programs for auditing radiation protection controls, radioactive waste management, and transportation activities to meet TS, 10 CFR 20.311, and/or 10 CFR 71.137 requirements were reviewed and discussed with cognizant licensee representatives.

a. Auditor Qualifications

The inspector discussed and reviewed the experience and/or training of licensee QA personnel conducting recent audits of radiation protection, radioactive waste processing, and transportation activities.

QA procedure QA-130, Qualification and Training of Auditors, Revision (Rev.) 18, dated August 10, 1989, establishes the minimum qualifications and training requirements for personnel conducting QA audits. Training is provided in the areas of applicable Federal Codes and Standards, QA Procedures, and includes on-the-job training (OJT) for the auditors. Personnel utilized to complete RP audit teams includes both permanent corporate office QA and specialist staff with previous or current technical expertise in the areas audited.

From review and discussion of qualifications for personnel conducting radiation protection audits, the inspector determined that all personnel met appropriate procedural requirements. The inspector verified that audit teams included personnel with significant operational experience in the areas reviewed. The training and experience of the audit teams were considered program strengths.

No violations or deviations were identified.

b. Program Guidance and Implementation

QA-210, Audit Division Audit Procedure, Rev. 22, dated June 19, 1989, provides the general administrative guidance for the preparation, conduct, and followup of audits performed by the Audit Division. The procedure requires that audit plans, written procedures and/or checklists are utilized during the audit.

The following audits were reviewed and discussed with cognizant licensee representatives.

- ° Audit Number (No.) NP-87-22(FL), High Level Radwaste Shipment, Conducted November 9, 1987 through February 25, 1988.
- ° Audit No. NP-89-25(MC), Chemistry Activities, Conducted August 21, 1989, through September 1, 1989.
- ° Audit No. NP-89-06, Health Physics, Radwaste, Environmental and Quality Assurance Activities, conducted from February 13-24, 1989.
- ° Audit No. NP-90-04(MC), Radiation Protection, Environmental Monitoring, and ODCM Activities, conducted from February 12 through March 5, 1990.

The inspector selectively reviewed and discussed with cognizant licensee representatives the subject audit reports. No significant violations of 10 CFR Part 20 or Part 61 requirements regarding radiological controls or waste criteria were identified. However, the inspector noted and discussed with licensee representatives that no reviews regarding 10 CFR Part 71 activities were referenced in the reports. The inspector noted that Regulatory Guide 7.10, Establishing Quality Assurance Programs for Packaging Used in the Transport of Radioactive Material, Rev. 1, dated June 1986, specifies an annual audit frequency. Licensee representatives provided approved documentation specifying that audits of 10 CFR Part 71 be conducted every 24 months based on the infrequent shipping of Type A radioactive material quantities each year. Licensee representatives provided Audit Plan NP-89-06(MC) which verified that an audit of 10 CFR Part 71 requirements was conducted February 1989 in accordance with licensee procedures. All audits were performed in accordance with regulatory requirements.

No violations or deviations were identified.

3. Organization and Staffing (86750)

The current status of the onsite RP organization directly responsible for providing support for radioactive waste storage, classification, and transportation activities was reviewed and discussed with cognizant licensee representatives.

From discussions with cognizant licensee representatives, the inspector determined that no changes occurred within the Radioactive Materials Control (RMC) group since a previous NRC inspection of radioactive waste activities conducted February 26 through March 16, 1990, and documented in Inspection Report (IR) number (No.) 70-369, 370/90-01. The RMC supervisor reports directly to the RP general supervisor. The RCM supervisor's staff included six permanent senior ANSI qualified technicians. Technical

support services are provided by an onsite RP staff scientist and by corporate personnel involved in the development of Part 61 scaling factors. Sampling of radioactive waste streams to meet 10 Part 61 requirements is conducted by the chemistry group. During outages, the RMC staff is supplemented by approximately three contract technicians.

During the inspection, the ability of the PMC and staff to conduct radioactive waste processing and shipping activities was reviewed by the inspector through direct observation of ongoing activities and through discussions with licensee management, general employees, and RP technicians. Staffing for observed job activities appeared adequate. The inspector noted that the organization and staffing was adequate to conduct radiation control activities associated with the temporary storage, characterization, and transportation of radioactive waste material.

No violations or deviations were identified.

4. Training and Qualifications (83750, 86750)

10 CFR 19.12 requires the licensee to instruct all individuals working or frequenting any portions of the restricted areas in the health protection aspects associated with exposure to radioactive material or radiation, in precautions or procedures to minimize exposure, and in the purpose and function of protection devices employed, applicable provisions of Commission Regulations, individual's responsibilities and the availability of radiation exposure data.

10 CFR 20.103(c)(2) requires that the licensee maintain and implement a respiratory protection program that includes determination by a physician prior to use of respirators, that the individual user is physically able to use respiratory equipment.

a. General Training and Medical Qualifications

The inspector verified that general employee training, respiratory protective program training, fit testing, and determination of appropriate medical qualifications were current for the RMC technicians.

No violations or deviations were identified.

b. Specialized Training

During the onsite inspection, the inspector observed a dewatering operation of resins in preparation for shipment offsite to a licensed burial facility. Specialized training provided to RMC personnel conducting radioactive waste processing, storage, and transportation activities was discussed and reviewed.

RP Manual, Section 7.13, ETQS/DTQS Duties and Responsibilities of Personnel, Rev. 15, dated June 16, 1990, defines the responsibilities

and duties of personnel in the RP training programs. The procedure details the responsibilities based on mandatory task requirements and/or training for each job classification. In addition to specific tasks, licensee representatives stated that RMC personnel were required initially to take Course 79-19, "Radioactive Materials Shipping Training" and subsequent retraining on an annual basis. Review of the course outline indicated that topics reviewed provided adequate guidance in the processing and shipping of radioactive waste materials from the site. In addition, individuals involved in shipping of resins were qualified on the specific task in accordance with completion of Employee Training and Qualification System Task Number (No.) RP-257, "Shipment of Dewatered Resins," Rev. 8, dated October 10, 1990. Licensee training records indicated that all RMC technicians had completed the required courses and were qualified in the current revision of the specified task. Specialized training for individuals involved in the preparation and shipping offsite of radioactive materials was considered a program strength.

No violations or deviations were identified.

5. Radiation Controls (83750, 86750)

During the onsite review, the inspector toured radioactive waste processing and storage facilities and verified implementation of applicable radiological controls.

a. High Radiation Area Controls

During the onsite review, the inspector toured the facility and verified that radiation controls regarding locked high radiation areas associated with radioactive waste processing operations and temporary storage of high level radioactive waste were adequate.

No violations or deviations were identified.

b. Labeling and Posting

10 CFR 20.203(e) requires each area in which licensed material is used or stored and which contains any radioactive material in an amount exceeding ten (10) times the quantity of such material specified in Appendix C of this part to be posted with a sign or signs bearing the radiation caution symbol and the words: "Caution, Radioactive Material(s)."

10 CFR 20.203(f) requires each container of licensed material to bear a durable, clearly visible label identifying the radioactive contents and providing sufficient information to permit individuals handling or using the containers, or working in the vicinity thereof, to take precautions to avoid or minimize exposures.

During tours of radioactive waste storage and processing areas, the inspector noted that all areas and containers were posted and labeled in accordance with 10 CFR 20.203 requirements.

No violations or deviations were identified.

c. Surveys

10 CFR 20.201(b) requires each licensee to make or cause to be made such surveys as may be necessary for the licensee to comply with the regulations in 10 CFR Part 20 and are reasonable under the circumstances to evaluate the extent of radiation hazards that may be present.

The inspector reviewed and discussed radiation surveys for temporary radioactive waste storage and processing areas. All surveys conducted appeared adequate to identify the hazards present. In addition, the inspector verified that monitoring conducted by personnel leaving the radiologically controlled area (RCA) was conducted in accordance with the current approved procedure.

No violations or deviations were identified.

6. ALARA (83750)

10 CFR 20.1(c) states that persons engaged in activities under licenses issued by the NRC should make every reasonable effort to maintain radiation exposures ALARA.

The inspector reviewed and discussed the collective dose for the current Unit 2 outage in regard to the ALARA initiatives reviewed during a previous inspection and documented in IR 50-369, 370/90-22. Licensee representatives stated that for the current outage, collective dose remained below original estimates. With the majority of Unit 2 high dose tasks completed as of November 29, 1990, the licensee reported a total expenditure of approximately 294 person-rem relative to an estimated value of approximately 484 person-rem. Licensee representatives stated that for the Unit 2 outage, collective dose expenditure was expected to be approximately 200 person-rem below the original estimates. Continuation of the licensee's ALARA dose management program throughout the Unit 2 outage was considered a program strength.

No violations or deviations were identified.

7. Radioactive Waste Classification (86750)

10 CFR 20.311 requires, in part, that each licensee who transfers radioactive waste to a licensed land disposal facility must classify the waste according to 10 CFR 61.55.

The inspector reviewed and discussed the licensee program for 10 CFR Part 61 waste class determination.

a. Program Guidance

The inspector reviewed selected procedural guidance for meeting 10 CFR Part 61 waste classification. Selected procedures reviewed and discussed included the following procedures and manuals.

- ° PT/O/B/4600/69, "Sample Analysis Requirements for Determination of Waste Classification Scaling Factors," dated May 21, 1990.
- ° HB/O/B/1004/03, "Determination of the Waste Classification for Radioactive Waste Offered for Shallow Land Burial," dated May 7, 1990.
- ° Nuclear Production Department, 10 CFR Part 61, "Waste Classification and Waste Form Implementation Program," dated December 19, 1983.

The inspector noted that the guidance detailed waste stream sample types, provided a schedule for collection of waste stream samples and subsequent processing of the samples by a vendor laboratory for radionuclide analysis, and required the results to be forwarded to the General Office (GO) RP group for development of the scaling factors for use. The scaling factors are determined annually and, as appropriate, any required changes are entered into the a vendor-supplied radioactive waste data processing management system utilized at the site. An annual reverification of scaling factors is required, that is, a comparison of measured to calculated radionuclide concentrations. The inspector noted that the licensee procedural guidance met the requirements of 10 CFR Part 20 and Part 61.

No violations or deviations were identified.

b. Program Implementation.

The inspector verified collection of the annual 1987 through 1990 waste stream samples and subsequent determination of radioactive waste processing scaling factors. During review of the licensee's verification of the scaling factors, that is comparison of calculated to measured radionuclide quantities, the inspector noted a nonconservative bias for the calculated results for spent bead resins, spent filter media, and dry active waste/waste oil materials. The ratios were within a factor of 10 as allowed by the NRC "Branch Technical Position on Low Level Radioactive Waste Classification," dated April 1983. However, licensee representatives were unable to explain the consistent bias noted. Potential contributing factors to the bias included change in the radionuclide composition of the waste streams or with the change in vendor laboratory analytical method.

The inspector noted that the observed trend would result in a non conservative reporting of radioactive waste material shipped offsite. Licensee representatives stated that responsible Corporate personnel would be contacted and the identified bias would be evaluated further. The inspector informed licensee representatives that this evaluation would be considered a followup issue and would be tracked as an Inspector Followup Item (IFI) (50-369/90-26-01).

No violations or deviations were identified.

8. Transportation (86750)

10 CFR 71.5 requires that licensees who transport licensed material outside the confines of their plant or other place of use, or who deliver licensed material to a carrier for transport, comply with the applicable requirements of the regulation appropriate to the mode of transport of the Department of Transportation (DOT) in 49 CFR Parts 170 through 189.

The inspector reviewed and discussed the following procedures with cognizant licensee representatives.

- ° Licensee Health Physics (HP) procedure HP/O/B/1004/02, "Preparation and Shipment of Radioactive Materials," dated October 24, 1990.
- ° HP/O/B/1004/10, "Preparation and Shipment of Dry-active Radwaste Materials," Rev. 0, dated July 6, 1990.
- ° Radiation Protection Manual, Section 14.3, "Inspection of Containers and Packages Used for Shipping Radioactive Materials," Rev. 8, dated August 3, 1989.
- ° Radiation Protection Manual, Section 14.7, "Accountability of Radioactive Waste Shipments," Rev. 3, May 9, 1989.
- ° Radiation Protection Manual, Section 14.8, "Radioactive Waste Shipments Scheduling and Notifications," Rev. 4, September 13, 1990.

The inspector noted that the procedures provided instructions to ensure all radioactive material shipments are in compliance with the current 49 CFR requirements regarding radioactive waste shipments.

The inspector reviewed and discussed with cognizant licensee representatives, supporting documentation for two radioactive waste shipments processed with Type B quantities of radionuclides. From review and discussion of the data with licensee representatives, the inspector verified that radioactive waste materials were shipped in accordance with the applicable regulations specified in 10 CFR Part 71 and 49 CFR Parts 170 through 189.

No violations or deviations were identified.

9. Followup Items (92701)

The following IFIs were reviewed and discussed with cognizant licensee representatives.

a. IFIs

- ° (Closed) IFI 50-369, 370/89-28-01: Lack of plant-wide procedure for development and submittal of ALARA job action plans and for selection of ALARA job sponsors.

This issue concerned the lack of general facility guidance and understanding regarding the preparation of ALARA job action plans and for the selection of ALARA job sponsors.

The licensee's response dated January 15, 1990, stated that guidance for submittal of ALARA job action plans for each sponsor was provided in the RP Manual, Section 3.11, Exposure Estimate and Exposure Goal Determination. Each sponsor was provided with an ALARA Planning Guideline to assist with the development of routine and non-routine tasks. During the onsite inspection, licensee representatives stated that the job action plans documentation was replaced by the ALARA Planning Work Sheet. In addition, coordination between the job supervisor and sponsor, with assistance from an ALARA technical contact, was upgraded to improve the overall ALARA program processes. Written guidance for selection of a job sponsor was not provided. Selection for the position continued to be made by the superintendents based on an individual's expertise in a particular area. Licensee representatives believed the current process to be sufficient and no additional guidance was planned.

From discussion with selected job sponsors involved in current outage activities, the inspector noted a continued lack of awareness regarding ALARA planning guidelines and documentation requirements. Licensee representatives stated that the issuance of a station-wide ALARA manual would increase awareness of the ALARA job sponsor responsibilities. During discussions and review of previous enforcement actions (Paragraph 10), the licensee committed to develop a station-wide ALARA manual which would include the current guidance for job sponsors. Subsequent training was to be provided to selected site personnel. During a teleconference on December 6, 1990, a cognizant licensee representative committed to complete training on the applicable sections of the ALARA for all responsible individuals by May 1, 1991.

The inspector informed licensee representatives that based on the above referenced actions this issue would be considered closed.

- (Closed) IFI 50-369, 370/89-28-02: Lack of appropriate guidance for proper evaluation of on-going dose estimates.

This issue involved lack of a consistent documented policy for evaluation of on-going dose control activities for tasks exceeding established collective dose goals.

The licensee's response dated January 15, 1990, stated that guidance to initiate actions when jobs exceeded or were likely to exceed estimates were incorporated into Section II of the Duke Power Company (DPC) "ALARA Manual." The guidance included investigation of the causes of collective dose overruns, determination of actions to minimize current and future collective dose expenditure, and increase monitoring to maintain awareness of job progress with respect to ALARA goals.

From discussion with corporate HP personnel, the inspector verified that DPC "ALARA Manual," Section II, Program Elements, Rev. 4, requires routine reports to be issued to supervisors, managers, and selected site functional groups regarding collective exposure. In addition, selective collective dose data regarding the current collective dose status, percent of established goal, and percentage of group and task goals are provided. The inspector verified distribution of the appropriate information to the applicable supervisors and managers.

Based on licensee actions regarding this issue, the inspector informed licensee representatives that this issue would be considered closed.

- (Closed) IFI 50-369, 370/89-28-03: Inadequate job site visits in the RCA by job planners.

The issue concerned lack of physical review by responsible job planners for tasks conducted within the facility's RCA.

The licensee's response dated January 15, 1990, stated that Maintenance Management Procedure 1.7, "Maintenance ALARA Planning," Rev. 2, dated August 13, 1990, was revised to require planners to estimate job doses and to review ALARA aspects of tasks. The requirements were expected to result in increased OTJ review of the proposed and on-going work.

The inspector verified changes to the referenced procedure. In addition, the number of January 1 through November 29, 1990 entries made into the RCA by selected planning staff was reviewed. A significant increase in RCA entries since the NRC ALARA inspection conducted August 28 - September 1, 1989, and documented in IR 50-369, 370/89-28 were noted.

The inspector informed licensee representatives that based on these actions this issue would be considered closed.

- o (Closed) IFI 50-369,-370/89-28-04: Lack of use of maintenance and job history files by job planners.

This issue concerned the lack of updating maintenance job history files by job planners subsequent to completion of specific tasks.

The licensee's response dated January 15, 1990, stated that Maintenance Management Procedure 1.7 required documentation of ALARA planning and provided for feedback from work supervisors on the effectiveness of the ALARA plan. The documentation is to be incorporated into the ALARA job history files in the Planning Office.

The inspector reviewed Maintenance Management files for the previous 1989 Unit 1 outage. Completion of ALARA dose estimates, planning worksheets, and post-job evaluations was verified. In addition, discussion with cognizant maintenance workers indicated that personnel were knowledgeable of the procedural requirements.

The inspector informed licensee representatives that based on the material reviewed and subsequent discussion with appropriate personnel, the issue was considered closed.

- o (Closed) IFI 50-369, 370/89-28-05: Lack of an ALARA Committee objective to perform post-job reviews for high dose jobs in cases where the actual dose was significantly greater than estimate.

This issue concerned the lack of documentation specifying requirements for pre- and post-job ALARA reviews.

The licensee's response dated January 15, 1990, indicated that the station was establishing the criteria for the high dose rate jobs to be reviewed by the ALARA Committee. During the onsite inspection, cognizant licensee representatives stated that RP Manual, Section 3.2 requires post-job evaluations for all jobs exceeding 10 person-rem and for jobs exceeding 5 person-rem where the actual collective dose varied by 25 percent from the original estimate.

The inspector informed licensee representatives that based on the documented procedure changes this item was considered closed.

- ° (Closed) IFI 50-369, 370/89-28-08: Lack of guidance on acceptability of TLD versus PIC correlations for work groups exposed to elevated dose rates

This issue concerned potential problems in exposure estimation and/or ALARA planning resulting from significant variability among monthly ratios of TLD to PIC exposure results for selected site groups.

The licensee's response dated January 15, 1990, stated that cognizant licensee representatives believed that the range of monthly variability observed for the ratio of TLD to PIC results was acceptable. During discussions with licensee representatives, the inspector was informed that the overall site TLD/PIC ratio for the year, and not the monthly ratio observed for each of the site groups was utilized for ALARA planning purposes. TLD to PIC data were presented to the inspector which demonstrated that the overall annual 1987 through 1989 ratios, and the overall ratio for January 1, 1990 through October 31, 1990, ranged between 0.79 to 0.81. Furthermore, licensee representatives stated that based on the consistency of the ratio throughout the year, ALARA planning was not appreciably affected. Licensee representatives stated that no additional actions regarding this issue were planned.

The inspector informed licensee representatives that based on the data presented this item would be considered closed.

- ° (Closed) IFI 50-369, 370/89-28-09: General lack of knowledge and awareness by individuals and supervisors of departmental and section dose goals.

This issue involved the lack of information and knowledge regarding department and section dose goals. At the time of the ALARA inspection, only trending of job status dose was conducted on a weekly basis and provided to management during outage meetings.

The inspector reviewed and verified implementation of the licensee's actions as detailed in their letter dated January 15, 1990. Licensee representatives outlined initiatives conducted to provide relevant exposure data to both individuals and supervisors of selected site groups. The majority of information provided during outages is directed to seven groups accumulating approximately 97 percent of the site dose. The groups included maintenance, radiation protection, Construction Maintenance Division, Operations, and Station Systems. During outages daily Outage Job Exposure Reports and Daily Group Exposure reports are presented to outage management and group supervisors. The ALARA group provides management with weekly trending/status reports of dose associated with selected tasks and details the contribution

of each major group's collective dose for the subject tasks. In addition projections regarding the dose expenditures for selected tasks/groups are provided on a weekly basis to management.

From discussions with selected workers, supervisors, and managers, the inspector determined that the understanding and subsequent management of individual and collective worker dose was improved since the comprehensive review of ALARA activities conducted August 28 - September 1, 1989, and detailed in IR 50-369, 370/89-28.

The inspector informed licensee representatives that based on the improvement noted for this area this issue would be considered closed.

- ° (Closed) IFI 50-369, 370/89-28-10: Lack of guidance for conducting and responding to general office evaluations, reviews, and audits.

This issue involved the lack of guidance for conducting audits, for completing followup actions, and for resolving disagreements regarding ALARA audit findings as conducted by the DPC corporate office.

The licensee's response dated January 15, 1990, stated that guidance would be incorporated into the DPC "HP Manual" detailing conduct of assessments including review criteria, schedules, personnel selection, methods, reports, responses, and problem resolution. Tracking of identified items were to be conducted using the McGuire Action Directory (MAD) tracking system.

The inspector reviewed licensee guidance regarding corporate assessments contained in the DPC System "HP Manual," Change , dated September 1990. The inspector noted that guidance for conducting ALARA audits appeared adequate. However, the guidance did not address the tracking, followup, and resolution of any issues identified but not resolved during the audit. Cognizant licensee representatives stated that the appropriate reference to the tracking and resolution of issues would be included in future revisions to the HP manual.

The inspector informed licensee representatives that based on the completed and proposed actions this issue was considered closed.

10. Licensee Actions on Previous Enforcement Matters (92702)

(Open) Severity Level 5 (SL5) Violation (VIO) 50-369, 370/90-01-03: Failure to follow procedures for maintaining ALARA pre-job planning documentation.

The violation concerned the failure of job sponsors to complete ALARA documentation for selected tasks. A general lack of understanding ALARA sponsor responsibilities for completing the documentation was also noted.

The inspector reviewed implementation of corrective actions stated in DPC's response dated May June 5, 1990. The response stated that personnel responsible were counseled on the importance of the documentation. Further, the applicable section of the "HP Manual" was being revised to clarify the ALARA process and responsibilities. Applicable sections of the "HP Manual" were being consolidated for a possible station-wide ALARA manual/program and completion was expected by August 31, 1990.

From discussion with selected job sponsors involved in current outage activities, the inspector noted that although guidance regarding the ALARA job sponsor's responsibilities and directives were updated, a continued lack of awareness regarding ALARA planning guidelines and documentation requirements remained. Licensee representatives stated that although not completed by the date specified in the response, the work on a station-wide ALARA manual was continuing and when completed was expected to increase awareness and improve ALARA job sponsor responsibilities. Licensee representatives stated that the August 31, 1990 completion date in the January 15, 1990 response referred to the revision of the current procedures and not to the issuance of the station-wide ALARA manual. The licensee committed to develop, and issue a station-wide ALARA manual and provide subsequent training regarding the current guidance for ALARA job sponsors. Licensee representatives stated that following a review of estimated times for development of the ALARA manual and training a commitment date would be provided to the inspector. During a teleconference on December 6, 1990, a cognizant licensee representative committed to complete the referenced manual and provide training on the applicable sections for all responsible ALARA sponsors by May 1, 1991.

The inspector informed licensee representatives that this issue would be considered open pending completion of licensee actions.

11. Exit Interview (83750 86750)

The inspection scope and results were summarized on November 30, 1990, with those individuals indicated in Paragraph 1. The inspector detailed the RP program areas reviewed. RP program strengths included the QA audits, transportation activities, and radioactive waste management. A general concern regarding an identified nonconservative bias in licensee 10 CFR Part 61 quantitative measurements was identified. The inspector informed licensee representatives that pending NRC management review the issues detailed in Paragraph 9 of the report would be considered closed. In response to licensee corrective actions regarding ALARA program concerns documented in Paragraph 10, the licensee committed to develop, and issue a station-wide ALARA manual and provide subsequent training regarding the current guidance for ALARA job sponsors. Licensee representatives stated that following a review of estimated times for

development of the "ALARA Manual," and for subsequent training, a commitment date would be provided to the inspector.

Licensee representatives acknowledged the inspector's comments. The licensee did not identify as proprietary any of the material provided to or reviewed by the inspector during this inspection.

During a teleconference on December 6, 1990, a cognizant licensee representative committed to issue a station ALARA manual and complete training for all ALARA job sponsors by May 1, 1991.

Item Number

Description and Reference

50-369/90-26-01

IFI: Review licensee evaluation of nonconservative biases identified for recent 10 CFR Part 61 quantitative analyses (Paragraph 6.b).