SALP RIII

U. S. NUCLEAR REGULATORY COMMISSION

REGION III

SYSTEMATIC ASSESSMENT OF LICENSEE PERFORMANCE

Commonwealth Edison Company

LaSalle County Station, Units 1 and 2
Docket Nos. 50-373 and 50-374
Report Nos. 50-373/82-38; 50-374/82-08

Assessment Period
July 1, 1980 to December 31, 1981

May 1982

CONTENTS

Docket No. 50-373
Docket No. 50-374

Commonwealth Edison Company
ATTN: Mr. Cordell Reed
Vice President
Post Office Box 767
Chicago, IL 60690

Gentlemen:

This is to confirm the conversation between Mr. C. Reed and Mr. R. C. Knop of the Region III staff scheduling May 18, 1982 at 1:00 p.m. as the date and time to discuss the Systematic Assessment of Licensee Performance (SALP) for the LaSalle County Station, Units 1 and 2. This meeting is to be held at NRC Region III Office, Glen Ellyn, Illinois.

Mr. James G. Keppler, the Regional Administrator, and members of the NRC staff will present the observations and findings of the SALP Board. Since this meeting is intended to be a forum for the mutual understanding of the issues and findings, you are encouraged to have appropriate representation at the meeting. As a minimum we would suggest Mr. C. Reed, Mr. F. Palmer, Mr. B. Stephenson and managers for the various functional areas where problems have been identified.

The enclosed SALP Report which documents the findings of the SALP Board is for your review prior to the meeting. Subsequent to the meeting the SALP Report will be issued by the Regional Administrator.

Enclosure 1 to this letter summarizes the more significant findings identified in the SALP Board's evaluation of the LaSalle County Station for the period of July 1, 1980 to December 31, 1981.

If you desire to make comments concerning our evaluation of your facility, they should be submitted to this office within twenty days of the meeting date; otherwise, it will be assumed that you have no comments.

In accordance with Section 2.790 of the NRC's "Rules of Practice" Part 2, Title 10, Code of Federal Regulations, a copy of this letter, the SALP Report and your comments, if any will be placed in the NRC's Public Document Room when the SALP Report is issued.

The comments requested by this letter are not subject to the clearance procedures of the Office of Management and Budget as required by the Paperwork Reduction Act of 1980, PL 96-5111.

If you have any questions concerning the SALP Report of the LaSalle County Station we will be happy to discuss them with you.

Sincerely,

J. A. Hind, Director
Division of Emergency Preparedness
and Operational Support

Enclosures:
1. Significant Findings
2. LaSalle County Station
SALP Report (5 copies)

cc w/encls:
Resident Inspector, RIII

Enclosure 1

During this evaluation period, July 1, 1980 to January 1, 1982, Unit 2 was in the construction phase and Unit 1 in final construction and pre-operational testing. Unit 1 is the first BWR plant to be licensed under the TMI requirements and inspected, in this phase, under the new more comprehensive NRC inspection program. Major efforts have been put forth by the licensee in preparing for fuel load and by the NRC in the appraisal of this effort and the assessment of the plant's readiness for licensing.

Even though many problems were encountered, as would be expected in any program of this magnitude and complexity, Region III believes these problems have been properly resolved and the construction and preoperational testing have been completed in substantial agreement with docket commitments and regulatory requirements.

Following the previous SALP evaluation period, June 30, 1979 to July 1, 1980, the SALP Board recommended additional licensee effort and improvement in the areas of design controls, procedural controls, communications and interfacing between construction and preoperational testing groups, vendor audits and the overall Quality Assurance Program.

Improvements were noted in all of these areas, particularly in the latter half of the evaluation period; although, problems still exist in some of the functional areas to be described later. Some of these problems and their resolution may be pertinent to other CECo sites especially in the preoperational testing and piping suspension design areas.
Many of the noncompliances in the construction phase could have been prevented by assuring that all safety-related work was accomplished using documented and approved procedures. Others may have been prevented by better contractor design controls and by more effective auditing in these areas.

Numerous problems have also occurred during the preoperational testing phase, particularly in the early part of the period. Improvements were noted in the areas of instrument calibration, deficiency documentation, processing procedure changes and the control of preoperational tests. Performance and attitude of site personnel also appear to have improved. In the area of housekeeping and equipment cleanliness, improvement has been noted since the middle of 1981. Some of the improvements were gained only through enforcement actions and the perseverance of the assigned inspectors.

The Board has recommended increased attention and effort in the following functional areas. Since these areas have been essentially completed for Unit 1 the recommendations should be directed to these areas during the completion of Unit 2 and, possibly at other CECo sites.

Functional Area

Containment and other Safety-Related Structures

During the special team inspection in December 1981, to determine the facilities readiness for licensing, deficiencies were noted in the areas of structural as-built documentation, material control, inspections and lack of procedures. Increased attention should be directed in these areas.

Piping Systems and Supports

During an inspection in December 1981, problems with the placement of piping snubbers indicated a lack of design control in that rigid restraints were installed close to mechanical snubbers making them inoperable. In addition the suspension system design did not adequately consider the ALARA program with respect to the placement of mechanical snubbers which require testing and maintenance. These problems appear to be generic to other sites. Additional management attention is required in piping suspension and particularly the control of A/E design in this area.

Security and Safeguards

The noncompliances identified, although minor, were repetitive and indicate a problem in site and corporate managements approach to security program issues. Progress towards completion and implementation of the security system has not been satisfactory. Additional management attention is required in this area.

Preoperational Testing

Many deficiencies were identified early in the evaluation period, predominately in conducting tests without adequate procedures, using improper test controls, tests or procedures for tests that did not cover FSAR requirements and inadequate test evaluations. These problems indicated weaknesses in management controls. These have been satisfactorily corrected throughout the period. The Board recommends additional attention be extended to this area to prevent problems of this type in future preoperational testing phase plants.

The Board also recommends an indepth review and corrections to the Startup Manual in light of experiences gained during the Unit 1 testing and particularly the manual should better define responsibilities.

Commonwealth Edison
One First National Plaza, Chicago, Illinois
Address Reply to: Post Office Box 767
Chicago, Illinois 60690

June 2, 1982

Mr. James G. Keppler, Regional Administrator
Directorate of Inspection and
Enforcement - Region III
U.S. Nuclear Regulatory Commission
799 Roosevelt Road
Glen Ellyn, IL 60137

Subject: Systematic Assessment of Licensee Performance (SALP)
Commonwealth Edison Company Comments
LaSalle County Station Units 1 and 2;
Byron Staton Units 1 and 2; and
Braidwood Station Units 1 and 2
NRC Docket Nos. 50-373/374, 50-454/455, and 50-456/457

References (1): 47 FR 12240, dated March 22, 1982

(2): J. A. Hind letter to Cordell Reed dated May 6, 1982 (LaSalle County Station)

(3): J. A. Hind letter to Cordell Reed dated May 7, 1982 (Byron Station)

(4): J. A. Hind letter to Cordell Reed dated May 5, 1982 (Braidwood Station)

Dear Mr. Keppler:

The purpose of this letter is to transmit comments as allowed in Reference (1) in response to the Systematic Assessment of Licensee Performance (SALP) reports provided in References (2), (3), and (4). Specific detailed comments for each of the subject sites were presented to your staff at the public meeting on May 18, 1982, and are documented in the enclosures to this letter.

There are two general observations that we believe need to be made relative to the SALP process which are evidenced by our specific comments. First, it is very difficult for this licensee to understand how the evaluation criteria are applied to categorize activities. We are unable to understand what constitutes the threshhold for any of the categories; but most importantly, we see no objective standard for a finding that an area is Category 1 (Reduced NRC attention may be appropriate). Although functional area 2 at Byron Station was identified as Category 1, our review of your bases for that finding as opposed to the findings for

functional areas 4, 9 and 13 at LaSalle County (all Category 2) provided no basis for distinction. If we are to devote the resources to improve our performance, as evaluated by your staff, we must have a better understanding not only of the criteria you use but also of the way in which these criteria are applied to reach decisions. It is not enough to say that Category 2 performance is acceptable. We are firmly committed to improve our performance and feel justified in this request for clarification of the bases upon which we will be judged.

Second, the application of the Category 3 designation in at least two instances - LaSalle County Area 17 and Byron Area 6 - does not appear consistent with the definition of this category provided in Section II of Enclosure 2 of the SALP Reports. Specifically, the definition indicates that both NRC and licensee attention should be increased, presumably, beyond that attention then being applied at the time the SALP report is issued. In the case of the two referenced areas, performance at the time of the SALP report was categorized as "more than adequate" and improved from early in the evaluation period. It is our understanding, based on comments by your staff, that our performance at the time of the SALP report for both stations and, in the case of Byron Area 6, at the time the SALP period ended, would have been acceptable. In both instances, we know of no increased licensee attention that could or necessarily should be applied in these areas. We request that you clarify your position relative to any future action on our part judged necessary by your office.

You will also see in reviewing our specific comments on the Category 3 designation for Braidwood Functional Area 9, that we believe this finding is not justified by the facts, which we have attempted to summarize in the enclosure. We would greatly appreciate any additional attention you may devote to this area. At a minimum, we request a more comprehensive discussion of the bases upon which the SALP finding was made.

We are available at your convenience to discuss these comments. Should you have any questions, please direct them to this office.

Very truly yours,

C. Reed

Cordell Reed
Vice President

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ENCLOSURE 2

Comments on LaSalle SALP Report

1. Functional Area 4 - Safety-Related Components

The SALP draft report for this item states:

"....No items of noncompliance were identified. Two unresolved items were identified.... These were satisfactorily resolved by the licensee. Inspection reviews indicated that records, record control systems, personnel qualifications and training exceeded the norm."

The board recommendations for this item states only that "Normal inspection activity will be conducted in this area."

Thus, to our knowledge, we have done everything required, all is in order, inspections revealed that records, record control systems, personnel qualifications, and training exceeded the norm, and the NRC had no recommendations for any potential areas of improvement. Based on this, Commonwealth Edison must ask what acceptance criteria was utilized by the NRC staff to deny issuance of a Category 1 rating on this item. We are committed to improve performance, but in order to accomplish this, we must understand the acceptance criteria which are being utilized to judge our performance.

2. Functional Area 9 - Preservice Inspections

During discussions with the NRC staff regarding LaSalle Preservice Inspection Program, the staff indicated that the program submitted for LaSalle was "among the best" that they had reviewed. The inspections performed indicated that records, record control, personnel qualifications, and training were acceptable. The board recommendations for improvement in this area were "NONE".

Thus, to our knowledge, we have done everything required, all is in order, and the NRC cannot even suggest any potential areas of improvement. Based on this, Commonwealth Edison must ask what acceptance criteria was utilized by the NRC staff to deny issuance of a Category 1 rating on this item. We are committed to improve our performance, but in order to accomplish this, we must understand the acceptance criteria which are being utilized to judge our performance.

3. Functional Area 13 - Environmental Protection and Confirmatory Measures

The SALP draft report "Analysis" indicated numerous positive aspects of the LaSalle Program, including:

- Satisfactory development and implementaton of all programs
- 100% agreement on 17 confirmatory measurements
- Participation in implementing standardized procedures and centralized data reporting.
- Spacious and well equipped laboratories
- Adequately trained and eager personnel

Based on what we perceive as very positive statements regarding this functional area, Commonwealth Edison must ask what acceptance criteria we did not meet that downgraded our performance from Category 1 to Category 2. We note that the NRC's conclusion in this area states "....but performance has not been proven." This statement raises the question of whether it is possible for ANY preoperational plant to attain a rating of Category 1. Once again, the staff had NO recommendations for possible improvement. We request that the staff again provide us with the specific acceptance criteria that we failed to meet which caused us to be downgraded from a Category 1 to a Category 2 rating.

We are committed to improve performance, but in order to accomplish this, we must understand the specific acceptance criteria which are being utilized to judge our performance.

4. Functional Area 17 - Surveillance and Preoperational Testing

In the draft SALP report, Section III, Criteria, states in part:

"Category 3. Both NRC and licensee attention should be increased. Licensee management attention involvement is acceptable and considers nuclear safety, but weaknesses are evident; licensee resources appear to be strained or not effectively used such that minimally satisfactory performance with respect to operational safety or construction is being achieved."

This functional area has been rated Category 3.

Commonwealth Edison must make the following observations:

1. As stated on page 23 of the draft report, during the 18 month inspection period there was an overall "noncompliance to inspector hour-ratio of 0.0062" for Unit 1.

This report assigns 17 noncompliances to the preoperational testing functional area. Notwithstanding the fact that several of these non-compliances are in no way attributable to surveillance and preoperational testing, we note that with approximately 5500 inspector hours spent on preoperational testing the result is 0.003 non-compliances per inspector hour, or only half of that of all inspection activities at LaSalle.

2. The report clearly states, in its conclusion that:

"....In the later part of the period much improvement has taken place and the licensee's performance in this area would now be considered adequate...., Region III personnel actively engaged in the inspection program are confident that a more than adequate test program has been accomplished."

Given these two facts (a non-compliance to inspector hour ratio of only half of that of the overall station and explicit statements that the test program is "more than adequate") Commonwealth Edison is truly surprised that the NRC has decided to rate this functional area Category 3. We also note with interest that, if NRC management truly intends to follow the SALP program, they are hereby committing to provide increased NRC attention for the Unit 2 preop program, i.e. more than the 5500 inspector hours spent on Unit 1 pre-op test inspections in this period.

Commonwealth Edison agrees that "a more than adequate test program has been accomplished" and must request reconsideration by the NRC of classification of this area as "minimally satisfactory performance" (See definition for Category 3).

I. INTRODUCTION

The NRC has established a program for Systematic Assessment of Licensee Performance (SALP). The SALP is an integrated NRC Staff effort to collect available observations and data on a periodic basis and evaluate licensee performance based upon these observations. SALP is supplemental to normal regulatory processes used to insure compliance to the rules and regulations. SALP is intended from a historical point to be sufficiently diagnostic to provide a rational basis: (1) for allocating future NRC regulatory resources, and (2) to provide meaningful guidance to licensee management to promote quality and safety of plant construction and operation.

A NRC SALP Board composed of managers and inspectors who are knowledgeable of the licensee activities, met on April 6, 1982, to review the collection of performance observations and data to assess the licensee performance in selected functional areas.

This SALP report is the Board's assessment of the licensee safety performance at LaSalle County Station, Units 1 and 2, for the period July 1, 1980 to December 31, 1981. Unit 1 was in the final stages of construction and for most of the evaluation period was preparing for and conducting preoperational tests of equipment and instruments. Unit 1 is the first BWR plant to be licensed under the new TMI requirements and the new, more comprehensive, NRC inspection program. Unit 2 was ir the final construction phase during the evaluation period.

The results of the SALP Board assessments in the selected functional areas were presented to the licensee at a meeting held May 18, 1982.

II. CRITERIA

The licensee performance is assessed in selected functional areas depending whether the facility is in a construction, pre-operational or operating phase. Each functional area normally represents areas significant to nuclear safety and the environment, and are normal programmatic areas. Some functional areas may not be assessed because of little or no licensee activities or lack of meaningful observations. Special areas may be added to highlight significant observations.

One or more of the following evaluation criteria were used to assess each functional area.

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 analysis of reportable events.

6. Staffing (including management).

7. Training effectiveness and qualification.

However, the SALP Board is not limited to these criteria and others may have been used where appropriate.

Based upon the SALP Board assessment each functional area evaluated is classified into one of three performance categories. The definition of these performance categories is:

Category 1. Reduced NRC attention may be appropriate. Licensee management attention and involvement are aggressive and oriented toward nuclear safety; licensee resources are ample and effectively used such that a high level of performance with respect to operational safety or construction is being achieved.

Category 2. NRC attention should be maintained at normal levels. Licensee management attention and involvement are evident and are concerned with nuclear safety; licensee resources are adequate and are reasonably effective such that satisfactory performance with respect to operational safety or construction is being achieved.

Category 3. Both NRC and licensee attention should be increased. Licensee management attention or involvement is acceptable and considers nuclear safety, but weaknesses are evident; licensee resources appear to be strained or not effectively used such that minimally satisfactory performance with respect to operational safety or construction is being achieved.

III. SUMMARY OF RESULTS

Functional Area Assessment	Category 1	Category 2	Category 3
1. Soils and Foundations		Not Rated	
2. Containment and other Safety-Related Structures		X	
3. Piping Systems and Supports		X	
4. Safety-Related Components		X	
5. Support Systems		Not Rated	
6. Electrical Power Supply and Distribution		X	
7. Instrumentation and Control Systems		X	
8. Licensing Activities		X	
9. Preservice Inspections		X	
10. Fire Protection		X	
11. Security and Safeguards			X
12. Emergency Preparedness		X	
13. Environmental Protection and Confirmatory Measurements		X	
14. Operational Quality Assurance and Quality Control		X	
15. Radiation Protection, Radioactive Waste Management and Transportation		X	
16. Maintenance		X	
17. Surveillance and Preoperational Testing			X

IV. PERFORMANCE ANALYSES

1. Soils and Foundations

The licensee is not rated in this area. No inspections were performed in this area.

2. Containment and other Safety-Related Structures

a. Analysis

Seven inspections or portions of inspections were conducted during the evaluation period. Areas reviewed were containment post-tensioning at Unit 2 and as-built structural conformance to the FSAR at Unit 1. No noncompliances were identified in the first six inspections. However, during a special inspection in December 1981 (50-373/81-48) to determine the conformance of structural components with FSAR and design requirements, five items of noncompliance were identified as follows:

(1) Severity Level V - three examples of failure to control design changes for structural as-built drawings.

(2) Severity Level IV - two examples of failure to provide adequate bolting instructions.

(3) Severity Level IV - failure to provide inspections of structural components.

(4) Severity Level V - material identification of high strength steel pieces used in a structural beam connection was not maintained.

(5) Severity Level V - failure to provide documented and approved procedures for laboratory inspectors.

Management meetings were held to discuss the results of this inspection on December 22, 1981 and January 28, 1982. It was determined that corrective actions had been undertaken for the beam connection problem. The licensee had also conducted an expanded inspection of structural steel connections to provide increased assurance that the problems identified were isolated in nature. Although the significance of the individual non-compliances was not great, the number did indicate weaknesses in the QA/QC program mainly in the areas of as-built documentation, constructing to design and QC inspections.

Priorities were appropriately assigned and procedures were adequately defined for control of post-tensioning activities at Unit 2. Procurement of post-tensioning components and hardware was well controlled and documented.

b. Conclusion

The licensee is rated Category 2 in this area.

c. Board Recommendations

Normal inspections will be made in this area. The Board recommends that the licensee place additional emphasis at Unit 2 in the area of as-built confirmation and documentation.

3. Piping Systems and Supports

a. Analysis

Eleven inspections or portions of inspections were performed in this area during the evaluation period. The inspections consisted of reviews of personnel qualification and training, procedures, design control, records and record controls, and observation of design and construction activities. Inspections were conducted at the site and at offices of the Architect-Engineer (A/E), Nuclear Steam Supply System (NSSS) Contractor and their subcontractors.

In addition two investigations were conducted concerning allegations that:

(1) Nuclear Service Corporation (NSC), a division of Quadrex Corporation, personnel performing piping stress analyses were not qualified and that proper analyses were not performed (Paragraph V.E).

(2) Tech Sil Inc. used materials not covered in the FSAR for fire barrier sealants and QA records were falsified (Paragraph V.E.).

An inspection conducted in August 1980 (50-373/80-32(20))[1] after the first investigation resulted in five infractions as follows:

(1) Morrison Construction Co's. (MCCo) small bore piping hanger inspections and preliminary design work were conducted without approved procedures and responsibilities were not formally established.

(2) MCCo design personnel had not been formally indoctrinated and trained.

(3) Interoffice memorandums from MCCo and Sargent and Lundy (S&L) were issued in lieu of approved procedures.

[1] Where an inspection for both units is documented in the same report, the report numbers for Unit 2, Docket No. 50-374, will follow in parenthesis.

(4) S&L staff used nonsafety-related criteria for the design of safety-related hangers.

(5) CECo did not carryout audits and surveillances of small bore pipe hanger activities.

As a result of this inspeciton, CECo suspended work and issued a 10 CFR 50.55(e) report. NRC Region III issued an Immediate Action Letter (IAL) confirming the stop work and planned corrective actions. Management meetings were held August 29 and September 5, 1980, to review corrective actions and after corrective actions were taken, to rescind the Stop Work Order.

During an inspection in November 1980 (50-373/80-48(30)), at the offices of General Electric Company (GE), NSC, and Reactor Controls Inc. (RCI), two items of noncompliance, Severity Level IV, were identified as follows:

(1) RCI, the designer and installer of Control Rod Drive (CRD) piping, did not have a QA/QC program that addressed organizational interfaces, design control and document control. The program also lacked procedures for design, installation and inspection activities.

(2) There was no systematic licensee evaluation of contractor performance and audit findings were not resolved in a timely manner.

As a result of this inspection, CECo stopped all RCI work on November 20, 1980. An enforcement conference was held at the Region III offices with CECo management on January 29, 1981, to discuss measures to correct the licensee's ineffective QA relative to the design and installation of the CRD system. Followup inspections to review corrective actions were made in early 1981.

During an inspection in May 1981 (50-373/81-17(11)) at the General Electric Co. office, the following item of noncompliance, Severity Level V, was identified:

> Inadequate control of design information resulted in outdated design drawings being used and referenced in a stress analysis.

During a preoperational inspection in August 1981 (50-373/81-28), two items of noncompliance concerning piping were identified as follows:

(1) Severity Level IV - modified sections of pipe in the 1B and 2B diesel generator system had not been designed and built to code as stated in the FSAR.

(2) Severity Level VI - as-built isometric piping drawings did not maintain correct traceability for five items in the standby liquid control system and one item in the drywell pneumatic system.

In two inspections performed in late 1981, twelve allegations concerning deficiencies in piping QC were reviewed by a Region III inspector. Only one allegation could be substantiated and another partially substantiated. Neither of these were determined to affect plant safety.

During an inspection in December 1981 (50-373/81-44), one item of noncompliance, Severity Level IV, was identified:

> The licensee's control over the A/E's suspension system design, including the proper selection of required snubbers, was inadequate in that rigid restraints were installed in close proximity with mechanical snubbers. The snubbers were made inoperable by restricting the minimum snubber travel required to initiate unit lock-up. Restricting the snubber's travel could cause an increase in the design loads at the affected rigid restraints.

The inspection also determined that the piping suspension design did not adequately consider the placement of mechanical snubbers with respect to the resultant radiation exposure that would be acquired in testing and maintaining them.

Based on Region III findings in the area of safety-related piping and piping suspension systems, the licensee's control of contractor activitiy was found to be inadequate in the early part of the evaluation period. Following the January 29, 1981, management meeting, the licensee's program has been markedly improved. Followup inspections have resolved all identified issues in this area except for the snubber placement problem.

b. Conclusion

The licensee is rated Category 2 in this area. The rating is considered marginal in this area due to the continued evident weakness in the licensee's administration of the A/E's and other contractors design controls. The identified piping suspension design problems are not restricted to the LaSalle site.

c. Board Recommendations

The Board recommends that additional inspection effort be given to what appears to be a generic problem in piping suspension and the possible incompatiblity of mechanical snubber placement with the ALARA program.

The Board recommends that the licensee place additional effort in the area of design control.

4. Safety-Related Components

a. Analysis

Six inspections or portions of inspections were performed in this area during the evaluation period. No items of noncompliance were identified. Two unresolved items were identified, one relating to the certification of Reactor Pressure Vessel Holddown Bolts, the other to weld repair on a Traveling In-core Probe. These items were satisfactorily resolved by the licensee. Inspection reviews indicated that records, record control systems, personnel qualifications and training exceeded the norm.

b. Conclusion

The licensee is rated Category 2 in this area.

c. Board Recommendation

Normal inspection activity will be conducted in this area.

5. Support Systems

The licensee is not rated in this area. Inspections performed in this area are covered in Section 17, Surveillance and Preoperational Testing.

6. Electrical Power Supply and Distribution

a. Analysis

Eight inspections or portions of inspections were performed in this area during the evaluation period. Two items of noncompliance were identified as follows:

(1) Deficiency - Failure to maintain records of temporary power supply according to procedures (50-374/80-19).

(2) Severity Level V - Cable trays at riser openings in the diesel room floors were not enclosed for a distance of eight feet above the floor (50-373/80-34(34)).

The overall effectiveness and attitude of the licensee was good. Quality records were generally complete, well maintained and available.

b. Conclusion

The licensee is rated Category 2 in this area. No significant strengths or weaknesses were identified.

c. Board Recommendations

Normal inspection activity will be conducted in this area.

7. Instrumentation and Control

a. Analysis

Four inspections or portions of inspections were performed in this area during the evaluation period. One item of non-compliance of an isolated nature was identified as follows:

> Severity Level V - Instrument cable installed in a safety-related system did not have the required certificate of conformance (50-373/81-52(22)).

The overall effectiveness and attitude of the licensee was considered to be good. Quality records were generally complete, well maintained and available.

b. Conclusion

The licensee is rated Category 2 in this area. No significant strengths or weaknesses were identified.

c. Board Recommendations

Normal inspection activity will be conducted in this area.

8. Licensing Activities

a. Analysis

The applicants licensing inputs are mainly from its NSSS vendor and A/E but are reviewed by the CECo Engineering Department. Prior to the SER issuance, a concerted effort was made by both the applicant and the NRC staff to reduce open items. However, since the issuance, the licensee has reverted back to late responses. The quality of the licensee's responses is considered to be adequate.

The applicant has competent, experienced managers and a large qualified engineering department with vast experience and a good working knowledge of the Federal Regulations. The staff is aggressive, prepares very well for meetings and tries to understand the staff's position in areas of difference.

b. Conclusion

The licensee is rated Category 2 in this area.

c. Board Recommendations

None.

9. Preservice Inspections

a. Analysis

Two inspections have been performed during this evaluation period. No items of noncompliance were identified. A review of records, record control, personnel qualifications and training indicated these areas were acceptable.

b. Conclusion

The licensee rated Category 2 in this area. No significant strengths or weaknesses were identified.

c. Board Recommendations

None.

10. Fire Protection

a. Analysis

Four inspections were performed during the evaluation period. Two inspections were conducted to assess the applicants Fire Prevention Program during construction and preoperational testing and two were conducted to assess the applicants progress toward implementing the fire protection and prevention program necessary to satisfy the requirements of their proposed operating license. This program is required to be fully implemented prior to Unit 1 fuel load. One item of noncompliance was identified as follows:

> Fire hose mounts were obstructed by construction materials, damaged or improperly madeup and several isolation valves were inoperable. An assigned fire extinguisher was removed from its mount and stored in another area (50-373/80-50(31)).

Most of the issues raised by the staff have been acceptably dealt with by the applicant on a timely basis. Site management is responsive to sound technical concerns and attempts to resolve these concerns. Appropriate levels of site and corporate management have been involved in these resolutions. Upper level management addresses the minimum requirements when resolving issues and concerns. A major strength at this site is the very able Fire Marshal.

b. Conclusion

The licensee is rated Category 2 in this area.

c. Board Recommendations

NRC attention should be maintained at normal levels in this area.

11. Security and Safeguards

a. Analysis

Six inspections or portions of inspections and one investigation were performed during the evaluation period. One inspection reviewed material control and accountability requirements for stored fuel; two others the security requirements for stored fuel. Three inspections were conducted under Docket No. 50-373 to review the status of installation, operability and preoperational testing of security-related equipment. Allegations of improper security practices for stored fuel were also investigated. The three inspections and the investigation concerning stored fuel were made under Special Materials Licenses No. SNM-1801 and No. SNM-1833 under Docket No. 70-2609 and No. 70-2883 and five items of noncompliance were identified as follows:

(1) Infraction - A physical barrier to a Controlled Access Area (CAA) was found degraded (70-2609/80-02).

(2) Severity Level V - Failure to man an entry point to a CAA (70-2609/81-02).

(3) Severity Level V - Failure to maintain areas adjacent to physical barriers clear of objects (70-2609/81-02).

(4) Severity Level V - Failure to provide adequate control of the fuel storage area (70-2609/81-02).

(5) Severity Level V - Failure to control access to a CAA (50-373/81-30).

The noncompliances identify a problem in site and corporate security management's approach to security program issues. The approaches to security program issues, although technically adequate, on occasion have been lacking in thoroughness and depth. The identified noncompliances, although minor in nature, were repetitive indicating a lack of management attention to the program.

Certain security related management relationships are less than clearly defined. Specifically, the licensee in attempting to avoid co-employer status has not provided necessary management overview of daily security activities.

The preoperational inspection activities initially identified 41 findings which required completion prior to fuel load. During the evaluation period, another four findings were identified. The licensee has made less than satisfactory progress in completing or resolving these items. Twenty items have been closed and several more are close to completion or have been completed but not yet closed in an inspection report. However, each inspection developes additional items.

The licensee's management involvement in assuring quality and control of the security program has showed some evidence of prior planning, assignment of priorities, and control of activities. However, some established goals for completion and implementation of security programs and systems have not been met. It appears that site security management has had occasional difficulty in accomplishing goals. The unique forces focusing on the "joint employer" problem has led to problems. Certain decisions and actions have been made without adequate licensee management review.

b. Conclusion

The licensee is rated Category 3 in this area.

Progress towards system completion and implementation has not been satisfactory, due in large measure to the absence of management support and direction of the program. The licensee has demonstrated a combination of attributes indicating marginally satisfactory performance.

c. Board Recommendations

The Board recommends that licensee management attention be increased in this area. Augmented and prioritized NRC inspection effort will continue to be required prior to fuel load.

12. Emergency Preparedness

a. Analysis

Four inspections have been performed during the evaluation period. Emergency Preparedness activities at the LaSalle site were observed during the licensee's exercise and during the Emergency Preparedness Implementation Appraisal (EPIA). The NRC Headquarters and Regional offices participated in the licensee's emergency exercise. Based on our observation, we find the licensee's management is maintained at an adequate level of skill. NRC concerns identified during the December 1980 exercise were addressed and actions necessary to resolve these concerns were implemented. Several significant deficiencies were identified as a result of the EPIA of which most have been resolved. However, several items

remain open which must be resolved prior to full power operation. There are no open items relevant to initial fuel load. An adequate staff is maintained by the licensee devoted to Emergency Preparedness.

The most significant emergency preparedness problem identified was the inadequate training of the Rad/Chem Technicians. The licensee has made significant improvements to correct these deficiencies since the EPIA of April 1981; however, this item remains open. Other open items needing resolution following licensing deal mostly with installation and operation of equipment and facilities as defined in the license.

The licensee's prompt public notification/warning system has been installed and tested. Minor deficiencies were identified which the licensee is correcting in accordances with 10 CFR 50.54S(2).

b. Conclusion

The licensee is rated Category 2 in this area. The licensee is prepared for a low power license and should have no problems resolving the open items prior to full power operation.

c. Board Recommendations

None.

13. Environmental Protection and Confirmatory Measurements

a. Analysis

Three inspections have been performed during the evaluation period. The Radiological Environmental Monitoring Program has been conducted satisfactorily during the preoperational phase. The licensee has developed the necessary log books and records for collection of samples, air monitoring calibration and maintenance. In the nonradiological monitoring programs, the licensee has also developed an adequate fog monitoring program, a cooling lake ecological monitoring program, a ground water and cooling lake dike integrity and erosion program. The Armstrong Run erosion problem has been closed out during the year.

In the area of confirmatory measurements, the licensee had 17 agreements out of 17 comparisons of simulated effluent samples. Sample split comparisons and the assessment of the licensee's quality control performance for analytical measurements will be reviewed when the plant is operational. The licensee has developed adequate routine chemical procedures and will be participating in implementing standardized chemical procedures and centralized data reporting through a computerized system

tied to CECo's central laboratory in Maywood, Illinois. The laboratory facilities are spacious and well equipped with new counting and analytical equipment. Licensee personnel seem adequately trained and appear eager to do a good job.

b. Conclusion

The licensee is rated Category 2 in this area. Resources in this area appear to be ample but the performance has not been proven.

c. Board Recommendations

Normal inspection activity will be conducted in this area.

14. Operational Quality Assurance and Quality Control

a. Analysis

Six inspections or portions of inspections at the site and one inspection at the corporate office were conducted during the evaluation period. These inspections covered offsite support staff; offsite review committee, quality assurance training; procurement control; audits; QA/QC administration; qualification of personnel; design changes and modifications; test and measurement equipment; tests and experiments; receipt, storage and handling; records; surveillance testing and calibration control; corrective action and nonroutine reporting; inservice testing; interim release of components; and maintenance. Five items of noncompliance were identified as follows:

(1) Severity Level VI - Failure to conduct receipt inspection on one item (dial indicator) taken off hold (50-373/81-22(12)).

(2) Severity Level VI - Failure to document certifications of receipt inspectors (50-373/81-22(12)).

(3) Severity Level VI - Failure to store quality records in a fire rated room; failure of the Central File Room to conform to FSAR commitments (50-373/81-22(12)).

(4) Severity Level VI - Failure to report a deficiency discovered during testing (50-373/81-22(12)).

(5) Severity Level V - Failure to reference applicable regulatory and quality assurance requirements in procurement documents (50-373/81-16).

Four of the noncompliances have been resolved and did not indicate significant programmatic deficiencies and the long term corrective action for item (3) has not been demonstrated.

b. Conclusion

The licensee is rated Category 2 in this area. The licensees program appears satisfactory; no significant weaknesses or strengths were identified.

c. Board Recommendations

Normal inspection activity will be conducted in this area to determine if the program implementation is satisfactory.

The licensee's program for record storage is acceptable, but the implementation of the microfilming process requires considerable licensee attention to reduce the backlog and assure adequate record storage.

15. Radiological Protection, Radioactive Waste Management and Transportation

a. Analysis

Nine preoperational inspections were performed during the evaluation period by region based inspectors. Several matters which were inconsistent with the FSAR were identified and resolved. The Rad/Chem Technician's training meets the FSAR requirements for fuel load; however, the long term requirements defined in the license condition need further review. The licensee's management attention and resource allocation in this area have been adequate.

b. Conclusion

The licensee is rated Category 2 in this area.

c. Board Recommendations

The inspection program should be maintained at normal levels, except as necessary to resolve outstanding items which are to be completed shortly before initial criticality. Additional inspection effort may be necessary to resolve these items in an expeditious manner.

16. Maintenance

a. Analysis

Seven inspections or portions of inspections were conducted during the evaluation period. One noncompliance was identified as described below:

> Severity Level V - A maintenance activity involving an emergency diesel generator was conducted without an approved procedure (50-373/81-22(12)).

Management controls in the area of plant maintenance were undergoing change as a result of ongoing procedure development.

Very little plant maintenance was conducted during the evaluation period as nearly all work was performed under construction controls or is addressed under the other functional areas. The revised maintenance organization and procedures have been reviewed and the LaSalle Maintenance program is judged ready for plant operation.

b. Conclusion

The licensee is rated Category 2 in this area. The licensees program appears to be satisfactory; no significant strengths or weaknesses were identified.

c. Board Recommendation

None.

17. Surveillance and Preoperational Testing

a. Analysis

The preoperational testing inspection effort was divided between region based inspectors and resident inspectors, who were assigned the ECCS testing. Continuous onsite reviews by from 2 to 5 resident inspectors were documented in twelve reports during the evaluation period. Region based inspectors in teams of from 3 to 8 inspectors conducted eight team inspections. Other preoperational inspections were also performed in the other functional areas. The results of those inspections are documented in the preceding paragraphs.

Seventeen noncompliances were identified as follows:

(1) Two Level IV's for five cases where the plant was not built in accordance with the FSAR, 50-373/81-20.

(2) One Level IV with five examples where the reviews and approvals of the test acceptance criteria and the test results were inadequate in that they failed to meet FSAR design requirements, 50-373/81-28.

(3) One Level V where a test failed to demonstrate a FSAR design requirement, 50-373/81-20.

(4) Two Level V's for the use of uncalibrated instruments during tests. One led to the overloading of a diesel generator and possibly contributed to the cracking of a cylinder liner, 50-373/81-20.

(5) One Level V for failure to prevent the inadvertent use of a noncomforming component, 50-373/81-20.

(6) One Level IV and one Level VI for poor housekeeping practices, 50-373/81-07 and 81-30.

(7) One infraction for failure to control the jumper log 50-373/80-36.

(8) One infraction and Level VI for failure to control a design document which caused the incorrect setting of motor operated valve (MOV) torque switches, 50-373/81-36 and 81-28.

(9) One Level IV for failure to control the installation and removal of temporary brackets from the containment liner, 50-373/81-28.

(10) One deficiency for failure to report a construction deficiency under 10 CFR 50.55(e), 50-373/80-43.

(11) One Level V for not following procedures for tagging out equipment before working on it, 50-373/81-06.

(12) Two Level IV's for performing preoperational tests without approved procedures. Both instances were pressure tests of Secondary Containment and one overpressurized and damaged the building, 50-373/81-30 and 81-36.

Improvements over the previous evaluation period were noted in the area of instrument calibrations, documentation of deficiencies, controls during conduct of preoperational tests and processing of procedure changes. Performance and attitude of site personnel have also improved when compared with the previous evaluation period. These improvements resulted from much management and NRC attention in this area.

In the first part of the evaluation period, the Operation Analysis Department (OAD) and Station Nuclear Engineering Departments (SNED) performances had shown little improvement over the previous evaluation period as noted by:

(1) OAD's disregard of SNED's design criteria for the setting of MOV torque switches, replacement and calibration of 2A diesel generator wattmeter and errors in the jumper log.

(2) SNED's lack of control over MOV torque switch settings, inadquate reviews of acceptance criteria and test results to ensure they met FSAR requirements.

In the latter part of the period, OAD and SNED performance had improved and is now considered to be more than adequate.

Weaknesses in the area of test results evaluation and acceptance had been identified in several instances. Corporate management appears to be highly involved in site activities and following a management meeting with NRC in late 1981, they instituted an additional level of review to upgrade this area. After this change, a marked improvement in the review process has been made and test reviews and evaluations are now acceptable.

Both the region based inspectors and the resident inspectors identified significant problems with housekeeping, two noncompliances were issued. Little improvement was noted in the housekeeping area during the first 12 months of the reporting period. Corrective actions by the licensee during the first 12-months proved to be of short duration. Since July 1981, corrective actions appear to be working as housekeeping and cleanliness has been markedly improved.

No significant problems were identified in the surveillance program and it is judged ready for plant operation with the exception of some minor revisions that are currently in process.

b. Conclusion

The licensee is rated Category 3 in this area. The number of problems and significant and repetitive noncompliances and ineffective corrective actions in the first part of the evaluation period was indicitive of weaknesses in management controls in this area. In addition it took considerable effort to obtain improvements in some areas i.e., housekeeping and equipment cleanliness and in the test review process. In the later part of the period much improvement has taken place and the licensee's performance in this area would now be considered more than adequate.

Although many problems were encountered in the area of preoperational testing, as would be expected in any undertaking of this complexity, Region III personnel actively engaged in the inspection program are confident that a more than adequate test program has been accomplished.

c. Board Recommendations

Since the preoperational program is essentially complete for Unit 1, the Board recommendations for this area are pertinent to Unit 2 and other CECo sites as they near this phase of completion.

The Board recommends increased inspection activity in the early part of the preoperational testing program to assure that an effective program has been established.

The Board recommends that the licensee place additional emphasis on the control of activities to assure they are covered by approved instructions or procedures, that tests and procedures meet all FSAR requirements and that tests results are evaluated to assure FSAR requirements are met. In addition, the Startup Manual needs to be revised to better define responsiblities and to reduce the latitude of operator-engineer actions.

V. SUPPORTING DATA AND SUMMARIES

A. Noncompliance Data

Facility Name: LaSalle County Station, Unit 1 Docket No. 50-373
Inspections No. 80-29 through 80-56 Docket No. 70-2609
No. 81-01 through 81-52

Functional Area Assessment	Noncompliances and Deviations[2] Severity Levels I	II	III	IV	V	VI	Categories Viol.	Infr.	Def.	Dev.
1. Soils and Foundations										
2. Containment and other Safety-Related Structures				2	3					
3. Piping Systems and Supports				2(2)	(1)	1		(5)		
4. Safety-Related Components										
5. Support Systems										
6. Electrical Power Supply and Distribution					(1)					
7. Instrumentation and Control Systems					(1)					
8. Licensing Activities										
9. Preservice Inspections										
10. Fire Protection					(1)					
11. Security and Safeguards					1(3)			(1)		
12. Emergency Preparedness										
13. Environmental Protection and Confirmatory Measurements										

[2] Numbers in parenthesis indicate noncompliances common to both units.

Functional Area Assessment	Noncompliances and Deviations[2] Severity Levels I	II	III	IV	V	VI	Categories Viol.	Infr.	Def.	Dev.
14. Operational Quality Assurance and Quality Control				(1)	(4)					
15. Radiation Protection, Radioactive Waste Management and Transportation										
16. Maintenance				1						
17. Surveillance and Preoperational Testing			7	5	2			2		1
Totals			11(2)	10(8)	3(4)			2(6)		1(1)

Because of the increased number of noncompliances in the SALP-2 assessment period, the following evaluation was carried out to account for the lengthened assessment period for SALP-2 (18 verses 12 months) and the increased NRC inspection effort due to increased licensee activity preparing for an operating license. In the SALP-1 evaluation period (12 months) there were 14 Infractions and 2 Deficiencies for a noncompliance to inspector-hour ratio of 0.0068; while in the present period (18 months) there were 8 Infractions, 15 Severity Level IV's, 17 Severity Level V's, 7 Severity Level VI's and 1 Deficiency for a noncompliance to inspector-hour ratio of 0.0062. Twenty-one of these noncompliances were assigned to both La Salle units. Sixty-seven percent of the noncompliances were identified in the last half of the evaluation period for a ratio of 0.0069. This indicates no overall improvement during the evaluation period, but compared to SALP-1 there is a slight improvement in the ratio.

[2] Numbers in parenthesis indicate noncompliances common to both units.

Facility Name: LaSalle County Station, Unit 2 Docket No. 50-374
Inspections No. 80-18 through 80-34 Docket No. 70-2883
No. 81-01 through 81-22

Functional Area Assessment	Noncompliances and Deviations[2] Severity Levels I	II	III	IV	V	VI	Categories Viol.	Infr.	Def.	Dev.
1. Soils and Foundations										
2. Containment and other Safety-Related Structures										
3. Piping Systems and Supports				(2)	(1)			(5)		
4. Safety-Related Components										
5. Support Systems										
6. Electrical Power Supply and Distribution					(1)				1	
7. Instrumentation and Control Systems					(1)					
8. Licensing Activities										
9. Preservice Inspections										
10. Fire Protection					(1)					
11. Security and Safeguards					(3)				(1)	
12. Emergency Preparedness										
13. Environmental Protection and Confirmatory Measurements										
14. Quality Assurance and Quality Control					(1)	(4)				
Totals			(2)		(8)	(4)		(6)	1	

In the SALP-1 evaluation period (12 months) there were four Infractions for a noncompliance to inspector-hour ratio of 0.0158; while in the present period (18 months) there were six

[2] Numbers in parenthesis indicate noncompliances common to both units.

Infractions, two Severity Level IV's, eight Severity Level V's, four Severity Level VI's and one Deficiency for a noncompliance to inspector-hour ratio of 0.0175. All but one of the noncompliances were assigned to both LaSalle units. This indicates an increase in noncompliances in this evaluation period.

B. Licensee Report Data

1. Construction Deficiency Reports

During the evaluation period, fifteen 10 CFR 50.55(e) reports were issued and corrective action initiated. These reports cover a broad range of problems in design, material, equipment and QA/QC controls. Compared to the eighteen months prior to this evaluation period the number of 50.55(e) reports have increased significantly from 3 to 15 and the number of reports considered to be preventable by good licensee control has increased from 1 to 8 (see Items a, b, c, e, i, j, l, m, and o below). The licensee uses 10 CFR 50.55(e) reports for any Part 21 reports received.

(a) MSIV Leakage Control System bleed-off drain-line was not located at low point of system (piping design error).

(b) Small bore pipe hanger deficiencies identified by NRC inspection (50-373/80-32(20)) (QA/QC of contractor and licensee).

(c) Decrease in suppression pool volume due to modifications, required reanalysis to determine long term pool cooling capability and to amend the FSAR (design control).

(d) Anchor/Darling valve yoke material did not meet specifications causing cracking (vendor material QA).

(e) Improper sized terminal lugs used in control room electrical panels. The licensee was cited (50-373/80-43) for not reporting this under 10 CFR 50.55(e) regulations (QA/QC program).

(f) Electrical terminal blocks in 480 volt power circuits of Limitorque valve controls were of wrong rating (vendor QA).

(g) Cracking of Lexan coil spools in HFA relays in main control boards. Found as a result of inspection conducted in response to IE Information Notice No. 81-01 (vendor materials).

(h) Possible deficient environmental qualification of "Rexolite" insulation used in Local Power Range Monitoring connectors (vendor material qualification).

(i) Water level in the suppression pool was above the hydrogen recombiner return line (licensee and contractor design control).

(j) Reactor Building metal deck damaged by overpressurization during secondary containment testing. Licensee was cited

(50-373/81-30) for conducting the test without approved procedures (quality assurance).

(k) Report from GE that Crosby safety relief valve solenoid valves would not actuate at low DC voltages under LOCA conditions. This was discovered during environmental qualification testing (vendor QA).

(l) Dragon Valves excess flow check valves, used in containment low-pressure instrument sensing lines, would not close with the low differential pressure available (licensee-contractor design control).

(m) Use of materials not meeting specifications and incomplete material certification documentation of HVAC structural steel (licensee-vendor QA/QC).

(n) Unqualified ASCO solenoid valves installed (licensee-vendor QA/QC).

(o) Leaks from defective welds in the Reactor Core Isolation Cooling eight inch underground suction and return piping to the cycled condensate tank (licensee/contractor QA/QC).

2. Part 21 Reports

The licensee issues 50.55(e) reports for all reportable deficiencies. For deficiencies reportable under Part 21, the required information is provided in the 50.55(e) report.

C. Licensee Activities

The main construction areas during the evaluation period were small bore piping, pipe supports, hangers, restraints and snubbers; cable trays and conduits; electrical and instrument cabling. Preoperational testing was performed during all of the evaluation period.

Design and construction of Unit 1 is considered to be complete with many open items to be resolved; preoperational testing is complete except for reviews and evaluations.

The Advisory Committee on Reactor Safeguards met in April 1981, to review pertinent issues of the Safety Evaluation Report (SER). The SER for both units, NUREG-0519 with Addendums 1 and 2, was issued during the evaluation period.

D. Inspection Activities

Team inspections and special inspections are listed in chronological order as follows:

	Date	Report No.	Inspection Subject
1.	09/8-9/80	50-373/80-41	Onsite Staffing, NUREG-0694
2.	10/29/80 - 11/19/80	50-373/80-47(29)	Emergency Planning
3.	12/3-4/80	50-373/80-53	Emergency Response Exercise
4.	04/20 - 5/01/81	50-373/81-14(09)	Emergency Planning
5.	04/6 - 05/29/81	50-373/81-22(12)	Quality Assurance Program
6.	07/20-24/81	50-373/81-26(14)	Quality Assurance Performance
7.	11/30 - 12/1/81	50-373/81-48	Readiness for operating license

In the functional area of preoperational testing, the regional staff made seven inspections using teams of 3 to 8 inspectors. Other inspections to review preoperational status of functional areas were also made using inspector teams. These are included as inspections under those functional areas in Section IV.

E. Investigations and Allegations Review

Three significant investigations resulting from allegations were conducted during the evaluation period and are documented in Investigation Reports No. 50-373/80-34(21), 50-373/80-46, and 70-2609/81-02(02). Several other allegations were investigated during regular or special inspections and documented in Inspection Reports No. 50-373/80-54(34), 81-29(15), and 81-33(17).

Investigation Report No. 80-34(21) - This investigation was in response to allegations that Tech Sil Inc., a subcontractor, had used penetration sealant materials that were not within specifications and that QA/QC records were falsified. It was also alleged that QC inspectors had falsified density check readings made during formulation of these products. The first two allegations were substantiated; the last was not. No items of noncompliance regarding CECo's QA/QC program were identified.

Investigation Report No. 50-373/80-46 (this investigation covered design work for both LaSalle Units) - This investigation conducted by Region V, was in response to allegations that NSC, a division of Quadrex Corporation and a subcontractor of S&L was using unqualified personnel to perform piping stress analyses and proper analyses were not being performed. The investigation determined that NSC was conducting educational and experience verifications

of employees. The records of two of the four employees mentioned in the allegations had been determined to be falsified and they had been terminated. The qualification records of the other two employees were determined to be valid. Allegations of deficiencies in the NSC analyses were not substantiated. The adequacy of the NSC Program was further reviewed during inspections by Region III at the site and at the NSC offices. The inspections did not identify any noncompliances in the work performed by NSC.

Investigation Report No. 70-2609/81-02(02) - This investigation was conducted in response to four allegations that reactor fuel stored at the site was not properly safeguarded. During the investigation, the allegations were substantiated and three items of noncompliance were identified (Paragraph IV.11). No information was obtained to indicate that unauthroized access had occurred.

An allegation by a former employee of Tech Sil Inc., was investigated and documented in Inspection Report No. 50-373/80-54(34). The allegation concerned inadequate or no fire testing of booted, fiber filled mechanical penetration seals. The allegation was not substantiated.

Six allegations by a former MCCo. employee on QC deficiencies were investigated and documented in Inspection Report No. 50-373/81-29(15). None of the allegations could be substantiated.

An allegation concerning Quadrex Corporation (NSC) piping design received by IE Headquarters was investigated by a Region III inspector and documented in Inspection Report No. 50-373/81-33(17). This allegation was not substantiated.

F. Escalated Enforcement Action

1. Civil Penalties

None.

2. Orders

None.

3. Immediate Action Letters

(a) August 14, 1980, confirming a CECo Stop Work Order and corrective actions to be taken for small bore piping deficiencies noted during Inspection No. 50-373/80-32(16).

(b) September 4, 1980, confirming a CECo stop work order on Tech Sil Inc., fire resistant wall and floor penetration sealing due to allegations that the sealant did not meet specifications and QC records were falsified.

G. Management Conferences

1. August 29, 1980, at Glen Ellyn, held to discuss corrective actions to be taken relative to installation of small bore safety-related piping.

2. September 5, 1980, at Glen Ellyn, held following an inspection to review small bore piping corrective actions.

3. November 25, 1980, at CECo offices, held to review the results of the first Systematic Assessment of Licensee Performance.

4. January 29, 1981, at Glen Ellyn, held to discuss deficiencies in the QA Program relative to small bore piping and supports.

5. Management meetings were held to review substantive issues that remained to be resolved prior to licensee issuances on June 26, 1981 (Glen Ellyn), July 27, 1981 (Glen Ellyn), August 14, 1981 (Glen Ellyn), August 20, 1981 (La Salle Station), October 29, 1981 (La Salle Station), and November 12, 1981 (LaSalle Station).

6. December 10, 1981, at Glen Ellyn, held to discuss CECo's proposed responses to two Notices of Violation with significant finding and the status of preoperational testing.

7. December 22, 1981, at Glen Ellyn, held to discuss licensee's response to NRC's concerns about as-built structural design drawings.