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MURRAY R. EDELMAN

VICE PRESIDENT
NUCLEAR

August 8, 1983

Mr. J. F. Streeter, Chief
Engineering Branch I
Division of Engineering
U.S. Nuclear Regulatory Commission, Region III
799 Roosevelt Road
Glen Ellyn, Illinois 60137

RE: Perry Nuclear Power Plant
Docket Nos. 50-440; 50-441

Dear Mr. Streeter:

This letter is to acknowledge receipt of Inspection Report Number 50-440/83-13; 50-441/83-12 attached to your letter dated July 25, 1983. This report identifies areas examined by Messrs. J. N. Kish, T. E. Vandel, and G. F. Maxwell during their inspection conducted April 4-8, 13-15, May 10-13, and June 15, 1983, at the Perry Nuclear Power Plant.

Attached to this letter is our response to the one (1) Severity Level V Violation described in the Notice of Violation dated July 25, 1983. This response is in accordance with the provisions of Section 2.201 of the NRC's "Rules of Practice", Part 2, Title 10, Code of Federal Regulations.

Our response has been submitted to you within thirty days of the date of the Notice of Violation as you required. If there are additional questions, please do not hesitate to call.

Very truly yours,

M. R. Edelman
Vice President
Nuclear Group

MRE:pab
Attachment

cc: Mr. M. L. Gildner
USNRC Site

Mr. R. C. Knop, Chief
Projects Branch I
Division of Project and Resident Programs
U.S. Nuclear Regulatory Commission, Region III
799 Roosevelt Road
Glen Ellyn, Illinois 60137

U.S. Nuclear Regulatory Commission
c/o Document Management Branch
Washington, D.C. 20555

RESPONSE TO ENFORCEMENT ITEM

Below is our response to the Notice of Violation appended to United States Nuclear Regulatory Commission I.E. Report 50-440/83-13; 50-441/83-12.

Noncompliance 440/83-13-01; 441/83-12-01.

A. Severity Level V Violation

10CFR Part 50, Appendix B, Criterion II, requires a quality assurance program be documented by written policies, procedures, or instructions and shall be carried out throughout plant life in accordance with those policies, procedures or instructions and that the applicant regularly review the status and adequacy of the program.

The Cleveland Electric Illuminating Company (CEI) Corporate Nuclear Quality Assurance Program Manual (QAM), Section 0200, Revisions 0 through 3 (in effect until September 15, 1982), requires that the Quality Assurance Advisory Committee perform quarterly reviews of the program and to report the results of these reviews, in writing, to upper level CEI management.

Contrary to the above, this committee conducted only two meetings during 1981. Additionally, the meeting documents did not include any review of ongoing program activity as required even though several significant program deficiencies were reported during 1981 by the monthly performance analysis reports. Furthermore, a formal charter was created and approved in June 1982 for the Quality Assurance Advisory Committee activities. This charter prescribed semiannual meetings to be conducted contrary to the then current Revision 3 of the QAM.

B. Background Information

The Quality Assurance Advisory Committee (QAAC) is established to conduct regular review and evaluation of the Quality Assurance program and advise the Vice President-Nuclear on the adequacy of the scope, implementation, and effectiveness of the Quality Assurance program. The QAAC is able to fulfill this function by conducting reviews of the Corporate Nuclear Quality Assurance Program (CNQAP) and major changes, overviewing the development and implementation of NQAD procedures and reviewing documentation such as internal audits, NRC Inspection Reports, assessments of Quality Assurance Program Effectiveness and Performance Analysis Reports.

The QAAC was not established in response to the regulatory requirement to periodically assess the adequacy of the Quality Assurance program but was established to provide advice to management on quality assurance matters.

Management does assess the adequacy of Quality Assurance program quarterly via a documented "Assessment of Quality Assurance Program Effectiveness". This quarterly assessment has been described by and performed in accordance with Project Administration 0204, since February 1979. Performance Analysis Reports and Assessments of Quality Assurance Program Effectiveness have continually addressed QA problems. These reports are management tools and are supported by separate administrative systems to track, monitor and control the status of any deficiencies discussed. Each month the Manager of NQAD prepares a Performance Analysis Report to the Vice President-Nuclear.

Although the attachment to this monthly report discussing each contractor's performance was deleted in April of 1982, monthly assessments of each contractor continue to be maintained and are used as input for the NQAD Performance Analysis Report and the quality Assessments of Quality Assurance Program Effectiveness. This was done to better focus management attention on contractor performance that was out of the ordinary.

C. Response

1. Corrective Action Taken and Results Achieved

In response to the noncompliance cited above, the following explanation is set forth.

In 1981, the QAAC had scheduled four meetings. The March and June meeting were held on site. The June meeting emphasized the need to evaluate the Operations QA program and during the third quarter of 1981, three members of the QAAC (including the Managers of Quality Assurance and Perry Plant Departments) visited three operating nuclear power plants. The December 1981 meeting was postponed until January of 1982. The QAAC met four times in 1980, eight times in 1982, and has met already six times in 1983.

The charter for the QAAC existed as a paragraph in Section 0200 of the CNQAP until June of 1982 when a separate, more detailed charter was developed. The revised charter required a semi-annual QAAC meeting frequency. The CNQAP requirement of quarterly QAAC meeting was not revised until September of 1982.

2. Corrective Action Taken To Avoid Recurrence

The charter of the QAAC was revised in July of 1983 to again require quarterly meetings.

3. Date When Full Compliance Will Be Achieved

Full compliance has been achieved.