U.S. NUCLEAR REGULATORY COMMISSION
REGION I

Report No. 84-09

Docket No. 50-220

License No. DPR-63

Licensee: Niagara Mohawk Power Corporation
300 Erie Boulevard West
Syracuse, New York 13202

Facility Name: Nine Mile Point Unit 1

Inspection At: Oswego, New York and Syracuse, New York

Inspection Conducted: May 29 - June 1, 1984

Inspectors: E. Thomas Shaub — 6/18/84
E. T. Shaub, Reactor Engineer — date

E. Thomas Shaub — 6/18/84
for W. Oliveira, Reactor Engineer — date

Approved by: A. T. Gody — 6/19/84
A. T. Gody, Management Programs Section, EPB, DETP — date

Inspection Summary:

Unannounced Inspection Conducted on 29 May - 1 June 1984 (Inspection Report No. 50-220/84-09

Areas Inspected: Quality Assurance Program and Training. The inspection involved 26 inspector-hours onsite, 12 inspector-hours at the training facility and 3 inspector-hours at Corporate by two Region-based inspectors.

Results: One violation (failure to conduct a complete SRAB audit of the results of actions to correct deficiencies in technical specification Section 6.5.2.8.C) was identified.

## DETAILS

1. Persons Contacted

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|---|---|
| *W. Connolly | Supervisor, Quality Assurance Operations |
| K. Dahlberg | Maintenance Superintendent |
| A. Kovac | Quality Assurance Engineer |
| A. Kordalewski | Supervisor, Quality Assurance - Nuclear Services |
| D. Palmer | Manager, Quality Assurance - Nuclear |
| *T. Perkins | General Superintendent |
| *T. Roman | Station Superintendent |
| K. Shea | Associated Quality Assurance Technician |
| R. Smith | Technical Superintendent |
| F. Stelter | Quality Assurance Technician |
| B. Taylor | Supervisor, Instrumentation and Control |
| T. Wood | Training Supervisor - Nuclear |
| *K. Zollitsch | Nuclear Training Superintendent |

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*S. Hudson Senior Resident Inspector

*denotes those present at the exit meeting on 31 May 1984.

The inspectors also interviewed other personnel during the inspection.

2. Nonlicensed Plant Training

2.1 References

The training of personnel at nuclear power plants is specified in the following documents:

- 10 CFR 50, Appendix B, Quality Assurance Criteria
- ANSI N18.1 - 1971, "Selection and Training of Nuclear Power Plant Personnel"
- Regulatory Guide 8.13 "Instruction Concerning Prenatal Radiation Exposure"

2.2 Program Review

The inspectors reviewed the licensee's program to verify that a program was in place that addressed the indoctrination, training and retraining of personnel in the areas of radiological health and safety, emergency plan, security and access control, industrial safety, quality assurance and prenatal radiation exposure. Also reviewed were those training programs and procedures that specifically addressed training appropriate to various nonlicensed technical disciplines.

2.3 Implementation

The inspectors reviewed the implementation of the nonlicensed training programs to verify that the training was being conducted in accordance with approved plant procedures and regulatory requirements and to ensure that:

- Training was meaningful to those in attendance.
- Topics presented were covered accurately and sufficiently.
- Mechanisms were in place which identified those areas where training was needed.

The inspectors reviewed the following areas to verify the implementation of nonlicensed training programs:

- Records of attendance for general employee training (GET) and retraining.
- Interviews with twelve employees in regard to GET quality and effectiveness. Interviews included two female employees (re: R.G. 8.13).
- Interviews with two auxiliary operators, two chemistry technicians, three I&C technicians, three electricians and two mechanics.

The inspectors had discussions with various departmental supervisors and the training department to further assess the adequacy of the programs in place. Interaction between personnel, supervisors and the training department occurs on a continuing basis to identify the needs of each department and to evaluate the effectiveness and quality of training received. Several training programs, such as Chemistry, I&C and Health Physics, were developed using INPO guidelines for accredition. These programs are reflected in the levels of advancement training, e.g., Technician A to Technician B, and Technician B to Technician C and Technician C to Chief Technician. Actual classroom observations were not possible since training was postponed until the outage is completed. The licensee is also building a new training center to facilitate training.

The inspectors reviewed and discussed the audits of the training department with training and Quality Assurance personnel to ensure corrective actions for audit findings were performed in a timely manner.

2.4 Findings

No violations were identified.

3. Quality Assurance Program

3.1 References/Requirements

The requirements for the quality assurance (QA) organization are specified in the following documents:

- 10 CFR 50, Appendix B, Quality Assurance Criteria for Nuclear Power Plants.
- Quality Assurance Program for Nine Mile Point 1, June 10, 1983.
- Technical Specifications, Section 6, Administrative Controls.
- Regulatory Guide 1.33/ANSI 18.7-1976, Quality Assurance Program Requirements.
- Regulatory Guide 1.58/ANSI N45.2.6-1973, Qualifications of Inspection Personnel.

3.2 Organization/Administration

A. Review

The inspectors held discussions with licensee management and quality assurance personnel and reviewed the documents referenced above to verify the following:

- The organizational structure is as described.
- Lines of authority and responsibility are delineated.
- Responsibilities and qualifications are specified.
- Activities, structures, systems and components to which the Quality Assurance program applies are defined.
- Procedures for review, inspection and surveillance activities are governed by administrative controls.
- Mechanisms are in place to review the overall effectiveness of the Quality Assurance program.
- Corrective Action systems are well defined and being effectively implemented.
- Responsibilities for administering and controlling the Quality Assurance program, including implementation procedures, changes and revisions, are specified.

B. Implementation

Selected Quality Assurance Procedures (QAP) and Station Administrative Procedures (APN) were reviewed and discussed with Quality Assurance and station personnel to ensure Quality Assurance program changes were reflected in the QAP's and APN's and personnel were aware of the changes.

3.3 Operations Quality Assurance Activities

A. Review

The documents referenced in paragraph 3.1 specify that Quality Assurance activities (inspection and surveillance) achieve the following:

- Inspection and surveillance is performed by trained personnel, independent of the work being inspected and qualified for the applicable activity.
- Procedures provide sufficient guidance to direct the overall inspection and surveillance program.
- Detailed instructions or checklists are used to ensure thorough inspections.
- Documentation exists for the results of the inspection and surveillance activities.
- Timely and effective corrective actions are provided for inspection and surveillance findings.

The applicable Quality Assurance procedures and instruction were reviewed to ensure that these controls were adequately delineated in procedures.

B. Implementation

The following areas were reviewed to verify compliance with Quality Assurance inspection and surveillance program requirements:

- Organization chart for the station QA/AC staff
- April 1984, Quality Assurance activities report
- 12 Surveillance Reports, associated checklists, findings and corrective actions

- Matrices for Quality Assurance surveillance versus 10 CFR 50, Appendix B criterion
- Quality Control Inspection Report Log
- Project Quality Plans for QA/QC coverage of modifications

3.4 Corrective Action

A. Review

The documents referenced in paragraph 3.1 specify that the corrective action system provide the following:

- Prompt identification of conditions adverse to plant safety.
- Prompt corrective action including measures to preclude reoccurance.
- Documentation of adverse conditions and corrective actions taken.
- Appropriate review by management and Quality Assurance personnel.
- Corrective action status is monitored and reviewed for adverse trends.

B. Implementation

The following areas were reviewed to ensure that corrective actions were adequate and timely for deficiencies identified during Quality Assurance inspections and surveillance activities, the ISI program and routine operations.

- 1984 Nonconformance Log, and the open nonconformances for 1982 and 1983 (6 total)
- Monthly Nonconformance Status Report
- Findings and corrective actions associated with 6 Quality Assurance surveillance and inspection activities
- Trending reports for nonconformances, LER's NRC Inspection Reports

- Trend report of APN-13 and Nonnotification of Quality Assurance
- Quarterly Summary of Trend Analysis
- SRAB Deficiency Audit (semi-annual corrective action audit) performed for 1983
- Annual review and analysis of Work Requests by Department Supervisor to identify trends and equipment problem
- Disposition of reportable indications in the ISI program

Discussions were held with Quality Assurance and station personnel to assure that they understood their responsibilities in reporting conditions adverse to plant safety and the reporting system available to document and initiate corrective actions.

Trending activities were reviewed and discussed with the Quality Assurance Department to verify that trending reports were distribution to management to ensure any adverse trends identified can be acted on promptly. Trending of nonconformances indicated a large problem in the maintenance area and resulted in further evaluation of the administrative controls for maintenance.

3.5 Findings

Technical Specificatio 6.5.2.8.C. requires semi-annual audits be performed under the cognizance of the SRAB, encompassing the results of all actions taken to correct deficiencies occuring in facility equipment, structures, systems, or methods of operations that effect nuclear safety.
The licensee's Deficiency Audit, February 13, 1984, performed to meet this Technical Specification only included deficiencies identified in other SRAB audits. The audit does not address nonconformances, audit and surveillance findings, occurence reports and LER's, and the corrective maintenance system.

This is a violation (220/84-09-01).

4. Management Meeting

Licensee management was informed of the scope and purpose of the inspection in the entrance interview conducted May 23, 1984. The findings of the inspection were periodically discussed with licensee representations during the course of the inspection. An exit interview was conducted on June 1, 1984 (see paragraph 1 for attendees) at which time the findings of the inspection were presented.

At no time during the inspection was written material provided to the licensee by the inspectors.