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LaSalle Generating Station
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August 25, 1995

**United States Nuclear Regulatory Commission
Washington, D.C. 20555**

Attention: Document Control Desk

Subject: LaSalle County Station Units 1 and 2
Response to Notice of Violation
Inspection Report Nos. 50-373/95005; 50-374/95005
NRC Docket Numbers 50-373 and 50-374.

Reference: 1. H.B. Clayton letter to R.E. Querio,
Dated July 26, 1995, Transmitting
NRC Inspection Report 50-373/95005, 50-374/95005

Enclosed is ComEd's response to the three violations that were transmitted with the Reference 1 letter.

These Violations of NRC requirements concerned a failure of onsite personnel to properly report to management an individual who was impaired (inattentive); emergency lighting units inoperable due to missed surveillances; and failures to implement compensatory fire watches at the appropriate frequency. LaSalle County Station recognizes that there has been inadequate management oversight concerning our Fire Protection Program and we are implementing fundamental changes to correct this. The attachment to this letter contains the immediate corrective actions taken as well as longer term corrective actions which will be effective in precluding recurrence of these violations.

If there are any questions or comments concerning this letter, please refer them to me at (815) 357-6761, extension 3600.

Respectfully,

R. E. Querio
Site Vice President
LaSalle County Station

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PDR ADOCK 05000373
Q PDR

A Unicom Company

cc: H. J. Miller, Regional Administrator, Region III
W. D. Reckley, Project Manager, NRR
P. G. Brochman, Senior Resident Inspector, LaSalle
D. L. Farrar, Nuclear Regulatory Services Manager, NORS
Central file

**ATTACHMENT
RESPONSE TO NOTICE OF VIOLATION
NRC INSPECTION REPORT
50-373/95005, 50-374/95005**

VIOLATION: 373(374)/9506 5-02

10 CFR 26.20 states written policies and procedures must address fitness for duty. Further, 10 CFR 26.20 requires the licensee's fitness for duty policy address factors that could affect fitness for duty such as fatigue.

ComEd's Fitness For Duty Policy states, in part, it is the intent of the policy to provide reasonable assurance that nuclear plant personnel are not mentally or physically impaired, which in any way adversely affects their ability to safely and competently perform their duties.

LaSalle Administrative Procedure 1100.25, "Testing for Cause," paragraph 8.a, requires any observed behavior of a contractor or vendor indicating degradation in performance, impairment or change in behavior be reported to the contractor's supervisor. Corporate Nuclear Security Guideline No. 200, Revision 5, dated March 1994, paragraph 5.5.1, requires that all individuals granted unescorted nuclear station access are responsible for reporting to their supervisor instances of violation of the Fitness for Duty policy.

Contrary to the above, on May 27, 1995, at various times between 3:08 a.m. and 5:45 a.m., a security officer, six ComEd employees, and one contractor employee observed a security watchman, posted at containment to control personnel and material access, impaired (inattentive) and failed to notify or notify in a timely manner supervision of their observations.

This is a Severity IV violation (Supplement I).

VIOLATION: 373(374)/95005-03

LaSalle County Station Operating Licenses for Unit 1, NPF-11, section 2.C(25)(a), and for Unit 2, NPF-18, section 2.C(15)(a), require that the licensee shall maintain in effect all provisions of the approved fire protection program.

"Nuclear Plant Fire Protection Functional Responsibilities, Administrative Controls and Quality Assurance," dated August 29, 1977, implemented by the Safety Evaluation Report (NUREG-0519), requires in part that periodic inspections and testing of emergency lighting be performed to assure that the equipment will function properly. Periodic inspection of safe shutdown pathway emergency lighting units is implemented, in part, by LaSalle Electric Maintenance Procedure LES-DC-106, "Safe Shutdown (Appendix R) DC Emergency Light Quarterly Inspection."

**ATTACHMENT
RESPONSE TO NOTICE OF VIOLATION
NRC INSPECTION REPORT
50-373/95005, 50-374/95005**

Contrary to the above, from July 25, 1994, through January 23, 1995, none of the required quarterly inspections of the safe shutdown pathway emergency lighting units were performed.

This is a Severity Level IV violation (Supplement I).

VIOLATION: 373(374)/95005-04

Technical Specifications 3.3.7.9.a, 3.7.5.2.a, 3.7.5.3.a, and 3.7.6.a, require in part, that an hourly fire watch patrol be established as a compensatory measure when the fire detection system, a deluge or sprinkler system, a low pressure CO₂ system, or a fire rated assembly is inoperable.

Technical Specification 4.0.2, requires that each surveillance requirement be performed within the specified surveillance interval with a maximum allowable extension not to exceed 25 percent of the specified surveillance interval.

Nuclear Fire Protection Transmittal 91-106, "Fire Watch Definitions," which is referenced by LaSalle Administrative Procedure 900-40, "Fire Watch Guidelines," defines the interval of an hourly fire watch as sixty minutes with a margin of fifteen minutes.

Contrary to the above, from July 19, 1993, through June 21, 1995, the fire watch patrols required by LaSalle's Technical Specifications were frequently not performed at the specified interval.

This is a Severity Level IV violation (Supplement I).

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NRC INSPECTION REPORT
50-373/95005, 50-374/95005**

REASON FOR VIOLATION: 373(374)/95005-02

A contract security watchperson, performing personnel and material access control duties to containment, was observed on several occasions, during a nearly three hour period, to be inattentive (impaired). These observations were not communicated to supervision.

The watchperson was posted at the Unit 2 containment hatch from 2 a.m. to 6 a.m. on May 27, 1995, for the purpose of controlling personnel and material access. Section 7.3.3 of the approved security plan stated that any time frequent access is permitted to containment, such as during refueling, a member of the security organization will be posted to assure that only authorized personnel and materials are permitted into containment. In a period from 3:08 a.m. to 5:45 a.m., a member of the security force (sent to relieve the watchperson), five ComEd employees, and one contract employee observed that the watchperson was impaired. They failed to notify supervision of their observations contrary to ComEd's fitness for Duty (FFD) policy and procedures.

The reason these observations were not communicated to Security supervision was a lack of understanding, by Security and ComEd employees, of the fitness for duty actions to be taken upon notification or discovery of inattentiveness. Inattentiveness to duty was not generally understood to be a Fitness for Duty issue. This failure to connect inattentiveness to duty with being fit for duty is where our understanding of the Fitness for Duty program broke down. The safety significance of the inattentive watchperson was minimal as no unauthorized material or personnel entered containment during the period. However, failure of personnel to report the inattentive watchperson suggested a broader concern with potentially greater consequences.

**CORRECTIVE ACTIONS TAKEN AND RESULTS ACHIEVED
(373(374)/95005-02):**

Immediate corrective actions included removing the watchperson from post and suspension of her duties. A memorandum dated May 28, 1995, was issued to all employees concerning the security inattentiveness event and ComEd's policy on reporting of potential FFD events. LaSalle Security management reviewed and revised LAP 1100-18 to clarify the handling of inattentiveness issues. A General Information Notice(GIN) was issued to all station employees stating that 10 CFR 26, "Fitness for Duty" encompasses more than drug or alcohol impairment. Other factors that can render a employee unfit for duty are mental stress, illness, and fatigue.

**ATTACHMENT
RESPONSE TO NOTICE OF VIOLATION
NRC INSPECTION REPORT
50-373/95005, 50-374/95005**

**CORRECTIVE ACTIONS TO BE TAKEN TO AVOID FURTHER VIOLATIONS
(373(374)/95005-02):**

During annual General Employee Training(N-GET), LaSalle will enhance the Fitness for Duty module to stress all the factors that can make an employee unfit for duty. Security Contract Management immediately provided written post order guidance for security personnel to follow with respect to their ability to perform their duties. Security management will periodically reinforce that FFD responsibility and that the reporting of potential FFD events is a condition of employment at LaSalle County Station

DATE WHEN FULL COMPLIANCE WILL BE ACHIEVED (373(374)/95005-02):

Full compliance was achieved on May 27, 1995 when the security watchperson was removed from post and suspended from her duties.

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NRC INSPECTION REPORT
50-373/95005, 50-374/95005**

REASON FOR VIOLATION: 373(374)/95005-03:

From July 25, 1994 through January 23, 1995, the quarterly inspection of the safe shutdown pathway emergency lighting units required by "Nuclear Plant Fire Protection Functional Responsibilities, Administrative Controls and Quality Assurance," dated August 29, 1977, as described in LES-DC-106, "Safe Shutdown (Appendix R) DC Emergency Light Quarterly Inspection," was not conducted. These surveillance requirements were omitted during the transfer of work scheduling to the Electronic Work Control System due to inadequate control of the databases.

A subsequent review of the inoperable emergency lights initially determined that any safe shutdown equipment or any operator actions required to be performed in the affected areas would not be significantly impeded by their failure alone. This review was deficient in that it made the erroneous assumption that supplemental lighting could be assumed to exist. The requirement for emergency lights, as outlined in Appendix R, is to provide sufficient illumination of safe shutdown equipment needed to be manually operated and to provide sufficient illumination of pathways to this equipment from areas such as the control room, Auxiliary Electric Equipment Room (AEER), or remote shutdown panel during a loss of off-site power (LOOP). For the purpose of evaluating Appendix R emergency lighting, no other lighting can assumed to be available.

**CORRECTIVE ACTIONS TAKEN AND RESULTS ACHIEVED
(373(374)/95005-03):**

Overdue surveillance LES DC-106 was immediately performed on all 170 Appendix R lights. Of the 170 lights 31 were found to be degraded with 21 of these lights inoperable. Repairs on these lights were completed on February 7, 1995. Administrative controls have been established to require appropriate levels of review and concurrence prior to allowing any change to the surveillance program database that affects a technical specification surveillance requirement.

The administrative procedure controlling the surveillance program, LAP 100-11, "LaSalle County Station General Surveillance Program", was revised on August 10, 1995 to address:

- a. Roles and responsibilities for personnel administering and implementing the surveillance program.

**ATTACHMENT
RESPONSE TO NOTICE OF VIOLATION
NRC INSPECTION REPORT
50-373/95005, 50-374/95005**

- b. Detailed instructions for making changes to the database and expectations for the review and approval process were established.
- c. Independent verification of authorized changes to the surveillance database. This will include in-line verification, as well as periodic change summary reports sent to cognizant personnel.

**CORRECTIVE ACTIONS TO BE TAKEN TO AVOID FURTHER VIOLATIONS
(373(374)/95005-03)**

Prints of all the areas that contain Appendix R lights have been marked to highlight all the areas, equipment, and pathways affected by the degraded/inoperable emergency lights. A detailed assessment of the safety significant impact of these inoperable lights is being performed to re-evaluate all plant operations and time constraints to safe shutdown requirements. The results of this assessment will be transmitted in a supplemental response to this violation.

A controlled matrix of technical specification surveillance requirements and the surveillance procedures that reference the requirements is being maintained. Any future changes to the surveillance procedures will be verified against the matrix of technical specification surveillance requirements. The scope of the surveillance issue investigation has been significantly expanded to the entire LaSalle Surveillance program. This will be a rigorous effort that will result in a quality surveillance program and will include provisions for maintaining the quality of the surveillance program.

To improve management oversight of the Fire Protection Program, a fire protection group led by an experienced Fire Protection Engineer, has been formed within the System Engineering Department. This group leader has oversight responsibility for all aspects of the LaSalle County Station Fire Protection Program. An ongoing assessment of the entire Fire Protection Program at LaSalle is currently underway and we will be meeting with Region III to discuss the results of our efforts in this area.

DATE WHEN FULL COMPLIANCE WILL BE ACHIEVED (373(374)/95005-03):

Surveillance LES DC-106 was immediately performed on all 170 Appendix R lights. Full compliance was achieved on February 7, 1995 when repairs on these lights that were found degraded/inoperable were completed.

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50-373/95005, 50-374/95005**

REASON FOR VIOLATION: 373(374)/95005-04

An NRC inspection of the hourly fire watch patrols and a review of selected fire watch logs from July 19, 1993 through June 21, 1995, identified that some fire watch patrols were not performed at the frequency prescribed by appropriate requirements. At the time of this inspection, LaSalle had two impairments that required compensatory measures.

Both LaSalle's Technical Specifications, section 4.0.2, and Nuclear Fire Protection Transmittal 91-106 "Fire Watch Definitions," which is referenced by LaSalle Administrative Procedure 900-40, "Fire Watch Guidelines," require that the hourly fire watch patrols be performed at the specified frequency not to exceed a 25 percent margin. The hourly fire watches routinely exceeded this requirement and were performed as far apart as one hour and 42 minutes. In addition, the reviews of the fire watch logs by the security supervisor and the fire marshal did not note that the fire watch tours were not being conducted at the required time interval. A contributing factor was that the personnel assigned to perform fire watches were not dedicated to that task. Contractor security guards with concurrent security responsibilities were performing the fire watches. These additional duties routinely delayed the fire watch rounds beyond the 60 minute interval. The root cause and contributing causes are collectively classified as management deficiencies.

**CORRECTIVE ACTIONS TAKEN AND RESULTS ACHIEVED
(373(374)/95005-04)**

Immediately following notification of the discrepancy on June 21, 1995, the Station implemented 60 minute fire watch intervals using individuals dedicated solely to fire watch duty. Administrative procedures and post orders were revised to assure that technical specification requirements are not exceeded. In addition, administrative procedures and post orders have been revised to require that fire watches be performed by individuals dedicated solely to that function.

**ATTACHMENT
RESPONSE TO NOTICE OF VIOLATION
NRC INSPECTION REPORT
50-373/95005, 50-374/95005**

**CORRECTIVE ACTIONS TO BE TAKEN TO AVOID FURTHER VIOLATIONS
(373(374)/95005-04)**

An overall assessment of the Fire Protection Program is currently underway. The Independent Safety Evaluation Group (ISEG) will provide oversight to this assessment. LaSalle Station will take action to enhance the Fire Protection Program based on the results of this assessment. Security management personnel for both ComEd and the security contractor have been counseled on the need to assure that expectations are enforced. Administrative procedures and post orders have been revised to require that a Problem Identification Form (PIF) be written whenever administrative limits on the hourly watches are exceeded.

DATE WHEN FULL COMPLIANCE WILL BE ACHIEVED (373(374)/95005-04):

Full compliance was achieved on June 21, 1995, when the Station implemented 60 minute fire watch intervals using individuals dedicated solely to fire watch duty.