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May 21, 1984 L-84-136

Mr. James P. O'Reilly Regional Administrator, Region II U. S. Nuclear Regulatory Commission 101 Marietta Street N.W., Suite 2900 Atlanta, Georgia 30303

Dear Mr. O'Reilly:

Re: Turkey Point Units 3 and 4 Docket Nos. 50-250 and 50-251 Inspection Report 84-08

Florida Power and Light Company has reviewed the subject inspection report and a response is attached.

There is no proprietary information in the report.

Very truly yours,

J. W. Williams, Jr. Group Vice President

Nuclear Energy Department

JWW/JA/awt/T3:2

Attachment

cc: Harold F. Reis, Esquire

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ATTACHMENT RE: TURKEY POINT UNITS 3 AND 4 DOCKET NOS. 50-250, 50-251 IE INSPECTION REPORT 84-08

FINDING 1:

Technical Specification 6.3.1 requires that each member of the facility staff meet or exceed the minimum qualifications of ANSI N18.1-1971 for comparable positions. Paragraph 4 of ANSI N18.1-1971 states in part, that technicians in responsible positions shall have a minimum of two years of working experience in their specialty.

Contrary to the above, chemistry technicians with less than two years of working experience in their specialty were serving in responsible positions.

RESPONSE:

- (1) FPL concurs with the finding.
- (2) The reason for the finding was the Plant Administrative Procedure (AP) 0103.9 did not require chemistry technicians to meet the requirements of ANSI 18.1-1971.
- (3) The chemistry technician in question achieved the necessary requirements, to meet the ANSI N18.1-1971 guidelines, as of February 23, 1984. In our initial review of his files, we failed to account for 5 months of lab experience at Turkey Point Plant.
- (4) All future Chemistry Department personnel will be hired to meet the requirements of ANSI N18.1-1971.
- (5) Full compliance was achieved by February 25, 1984.

FINDING 2:

Technical Specification 6.8 requires that written procedure and administrative policies be established, implemented and maintained that meet or exceed the requirements and recommendations of Section 5.1 and 5.3 of ANSI N18.7-1972, and Appendix A of Regulatory Guide 1.33, and that each procedure change thereto be reviewed by the PNSC and approved by the Plant Manager - Nuclear prior to implementation.

Contrary to the above, the requirements of the Technical Specification were not met, in that:

- (a) Between December 27, 1983 and March 22, 1984, shipments of radioactive waste were made using a draft procedure which had not been reviewed by the PNSC or approved by the Plant Manager Nuclear, and
- (b) Laboratory qualification guides were not used to document the qualifications of the chemistry technicians as required by the Nuclear Chemistry Procedure NC-120.

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RESPONSE:

- (a) (1) FPL concurs with the finding.
 - (2) The reason for the finding was an oversight on the part of the Health Physics Department in that the procedure in question HP-40 was drafted to include and implement the requirements of 10 CFR 61 and 10 CFR 20.311 but was not submitted to the PNSC for review and approval prior to its implementation. The fact that HP-40 was being updated to adequately implement the new Process Control Program contributed to the oversight.
 - (3) Upon identification of the oversight, the Health Physics Department notified the Quality Control group and a non-conformance report was issued on February 8, 1984. Subsequently, the procedure (HP-40) was submitted to PNSC and approved on March 22, 1984.
 - (4) In order to prevent recurrence of similar events:
 - a. Corresponding checklists used by HP and QC personnel in the preparations for radwaste shipments will be updated to include a check of the procedures being used. This will ensure the use of the latest and approved procedures when making radwaste shipments.
 - b. During a PNSC meeting, this event was discussed with department heads where the strict compliance with procedural and Technical Specifications requirements was emphasized.
 - (5) Full compliance was achieved by March 22, 1984.
- (b) (1) FPL concurs with the finding.
 - (2) The reason for the finding was that our Chemistry Department was conducting a training program and had records of such training but had not transferred the appropriate information to the NC-120 form.
 - (3) NC-120 has been brought up to date.
 - (4) A file has been created for NC-120 and all Chemistry Department personnel have been properly informed of the NC-120 requirements.
 - (5) Full compliance was achieved by April 6, 1984.