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October 6, 1995

U. S. Nuclear Regulatory Commission Washington, DC 20555

ATTENTION:

Document Control Desk

SUBJECT:

Calvert Cliffs Nuclear Power Plant

Unit Nos. 1 & 2; Docket Nos. 50- 17 & 50-318

Reply to Notice of Violation - NRC Inspection Report Nos. 50-317(318)/95-06

REFERENCE:

(a) Letter from Mr. C. J. Cowgill (NRC) to Mr. R. E. Denton (BGE), dated August 31, 1995, Notice of Violation, Combined Inspection Report Nos. 50-317/95-06 and 50-318/95-06

In response to Reference (a), Attachments (1) through (3) detail our response to cited violations concerning control of foreign material at the station blackout diesel generator, control of hard copy drawing revisions, and qualification records for safety and fire personnel. The report dated August 31, 1995, was received on September 7, 1995. Per discussion with a Calvert Cliffs Resident Inspector, the response date for this Notice of Violation will be thirty days from the date of receipt.

Should you have questions regarding this matter, we will be pleased to discuss them with you.

Very truly yours,

RED/DWM/bjd

Attachments

cc: D. A. Brune, Esquire

J. E. Silberg, Esquire

L. B. Marsh, NRC

D. G. McDonald, Jr., NRC

T. T. Martin, NRC

Resident Inspector, NRC

R. I. McLean, DNR

J. H. Walter, PSC

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ATTACHMENT (1)

NOTICE OF VIOLATION 50-317/95-06-01 AND 50-318/95-06-01

Notice of Violation 50-317/95-06-01 and 50-318/95-06-01 describes a nonconformance involving failure on the part of craft and supervisory personnel to implement foreign material exclusion controls during maintenance and inspection activities on the station blackout diesel generator.

I. REASON FOR THE VIOLATION

On the night of July 12, 1995, a Mechanical Maintenance crew working night shift was performing maintenance on new station blackout (SBO) Diesel Generator 0C-2. The maintenance was covered by a Maintenance Order which specified use of Diesel Generator Procedure DGP-SU-008, "DGP System Cleaniness Requirements and Control," which requires that unattended openings be covered. When the workmen left the area for another job, they failed to implement adequate Foreign Material Exclusion (FME) controls. This condition was found the following morning by an Nuclear Regulatory Commission inspector.

The cause of this event is personnel error. The workmen failed to pay sufficient attention to detail in that, before leaving the jobsite, they started to cover some openings but did not complete the job. Because of a lack of sufficient concern for FME, the Mechanical Maintenance personnel involved in this incident left a number of openings exposed.

II. CORRECTIVE STEPS TAKEN AND RESULTS ACHIEVED

Immediately upon discovery, all openings on 0C-2 were covered, the diesel generator was examined for debris (none was found), and an investigation into the incident was initiated. This resulted in appropriate personnel actions being taken.

Awareness training has been given to all appropriate maintenance personnel. Procedure DGP-SU-008 has been revised to include additional guidance on FME controls.

III. CORRECTIVE STEPS WHICH WILL BE TAKEN TO AVOID FURTHER VIOLATIONS

An interdepartmental team is currently evaluating our FME program as a part of our response to INPO SOER 95-01, "Reducing Events Resulting From Foreign Material Intrusion." They have identified three causal factors that have contributed to FME problems in the past: inadequate review of hazard potential, inconsistent discipline in problem solving and work control, and inconsistent accountability to existing standards and expectations. The team has emphasized both the accountability of first line supervisors for changing behavior and ensuring that expectations are met, and the responsibility of management to clearly communicate and reinforce these expectations.

Management is reviewing several recommendations made by the FME team which are intended to help simplify the process and effect a culture change. These include reiterating management expectations regarding FME and supervisory follow-up and reinforcement, standardized sitewide training, inclusion of FME and good housekeeping reviews in pre-job briefings, and revision of

ATTACHMENT (1)

NOTICE OF VIOLATION 50-317/95-06-01 AND 50-318/95-06-01

appropriate procedures to enhance control of FME. The emphasis on this issue is a continuing site priority.

IV. DATE WHEN FULL COMPLIANCE WILL BE ACHIEVED

Full compliance was achieved on the morning of July 13, 1995, when adequate FME controls were instituted at SBO Diesel Generator 0C-2.

ATTACHMENT (2)

NOTICE OF VIOLATION 50-317/95-06-02 AND 50-318/95-06-02

Notice of Violation 50-317/95-06-02 and 50-318/95-06-02 describes a nonconformance involving more than one thousand controlled drawings found to be either missing or not of the correct revision at many locations, including the Control Room.

I. REASON FOR THE VIOLATION

In February 1995, an Issue Report was written documenting two Control Room drawings that were not the correct revision. A random sample audit of the Control Room drawings identified no additional discrepancies, so a planned 100 percent audit of the drawing was not immediately conducted, but scheduled for later in the Spring after the Control Room was remodeled. Following Nuclear Regulatory Commission notification in May 1995 of additional drawing errors, Receipt and Distribution personnel performed the 100 percent audit of the Control Room drawing files and identified a 3 percent revision error rate. The audit was then expanded to include all hard copy drawing locations onsite. This resulted in identifying a gross revision error of five percent sitewide. Considering the estimates of revisions in transit, the net revision error was postulated at two percent. An analysis of the Control Room drawing revision errors indicated no significant nuclear safety concerns resulted from the errors. Based on this, it was determined that there was no need to evaluate the safety significance of revision errors at other site locations.

Document Control performed a root cause analysis of the revision control problem. The primary causal factors identified include problems with the accuracy of the drawing distribution list, administrative procedural compliance problems, adequacy of training of Receipt and Distribution staff, handling of hard copy drawings at controlled document locations, and supervisory follow-up on drawing distribution issues. Additionally, contributing causal factors were identified in problems with the tracking of drawing transmittal forms and the adequacy of controlled drawing verification audits.

II. CORRECTIVE STEPS TAKEN AND RESULTS ACHIEVED

During the site-wide drawing audit, specific errors and omissions were identified and on-the-spot corrections made. By the end of this audit, all drawing locations were corrected. A second audit of the Control Room locations was completed with no discrepancies noted.

The drawing distribution list was updated to reflect the correct distribution. Training on procedural requirements was conducted for Receipt and Distribution Unit personnel. Management expectations for compliance with admir strative procedures has been re-emphasized. Existing procedural requirements have been reviewed and work practices brought into compliance. A formal schedule of drawing location, verifications and a formal method of drawing transmittal tracking have been developed. The Document Control Master Unit has been reorganized and appropriate personnel actions have been taken.

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NOTICE OF VIOLATION 50-317/95-06-02 AND 50-318/95-06-02

III. CORRECTIVE STEPS WHICH WILL BE TAKEN TO AVOID FURTHER VIOLATIONS

Appropriate procedures are being reviewed for improvement and reassignment of responsibilities. They will be revised as necessary. The existing Document Control Master Unit Qualification Card program will be strengthened to ensure adequate training of Document Control personnel. A site-wide effort will be undertaken to raise awareness of the Document Control procedural requirements to maintain adequate control of hard copy locations in the field.

IV. DATE WHEN FULL COMPLIANCE WILL BE ACHIEVED

Full compliance was achieved on July 20, 1995, when the site-wide audit was completed, all drawing locations were correct, and distribution lists were updated.

ATTACHMENT (3)

NOTICE OF VIOLATION 50-317/95-06-03 AND 50-318/95-06-03

Notice of Violation 50-317/95-06-03 and 50-318/95-06-03 describes a nonconforming condition in the area of Safety and Fire Technician Personnel Qualification. Specifically, between 1991 and March 1995, twelve month performance evaluations and triennial recertifications required by the Qualification Manual for Safety and Fire Protection Unit technicians performing surveillance test procedures were allowed to expire without renewal. In several cases, documentation of personnel certification and requalification was not maintained as required.

I. REASON FOR THE VIOLATION

The cause of the violation was inadequate oversight of the Safety and Fire Protection Unit personnel certification and requalification programs. Safety and Fire Protection Unit supervision did not pay adequate attention to the qualification status of their personnel. Contributing to the cause of this event was that there was no formalized process for tracking the expiration dates for the Safety and Fire Protection Unit personnel certification and requalification programs.

The Baltimore Gas and Electric Company Safety and Fire Protection Unit has a program to qualify and certify its personnel to American National Standards Institute N45.2.6, "Qualification of Nuclear Power Plants Inspection, Examination, and Testing Personnel." This program is referred to as the certification program and is implemented under the Calvert Cliffs Test and Inspection Personnel Qualification Manual. The Safety and Fire Protection Unit also has developed a plant specific continuing training program referred to as the requalification program.

II. CORRECTIVE STEPS TAKEN AND RESULTS ACHIEVED

On June 8, 1995 an Issue Report (IR0-0165-181) was prepared documenting this nonconforming condition. An a aluation was immediately initiated to determine the validity of all Fire Protection Surveillance Test Procedures (STPs) performed since late November of 1993. This evaluation was completed on June 13, 1995, and concluded that the STPs in question were valid.

All personnel certification documentation for the Safety and Fire Protection Unit is complete and up to date in accordance with the Calvert Cliffs Test and Inspection Personnel Qualification Manual. Appropriate personnel actions have been taken.

III. CORRECTIVE STEPS WHICH WILL BE TAKEN TO AVOID FURTHER VIOLATIONS

As a result of this and other previous problems in Safety and Fire Surveillance Testing program, a broad action plan has been developed to improve overall performance in this area. Enhancements to the quality of Safety and Fire Protection Unit personnel training, qualification and certification programs, STPs and other procedures are currently being implemented. In addition, this action plan also includes the development and implementation of a self-assessment program and evaluation of the staffing, schedules, and organizational structure of the Safety and Fire Protection

ATTACHMENT (3)

NOTICE OF VIOLATION 50-317/95-06-03 AND 50-318/95-06-03

Unit for improvements. This action plan includes the following items that will prevent recurrence of this specific violation:

- A. We have developed and implemented a more effective Safety and Fire Protection Unit qualification program. This new program contains performance standards in the areas of Safety and Fire Technician watchstanding, system level knowledge, Technical Specification knowledge, and task level performance criteria such as STP and preventative maintenance. Three senior Safety and Fire personnel are already qualified to the new requalification program. The remainder of Safety and Fire Protection Unit personnel will have completed the new qualification program by November 4, 1995. In the interim, measures are being taken to ensure all tests and inspections conducted by the Safety and Fire Protection Unit are performed by personnel who are fully qualified in the areas required for completion of the test.
- B. We have developed a computerized database that will accurately track Safety and Fire personnel certification and requalification expiration dates for all STP Inspector Level Personnel. This database will be used by the Technical Training Unit and the Safety and Fire Protection Unit to develop reports for supervisory review which clearly show the certification and qualification expiration dates.
- C. Upon completion of all requirements to establish full qualification and certification for the Safety and Fire Protection Unit we plan to verify the completeness of all their individual training records to ensure that no additional documentation deficiencies exist in this program. We expect to complete this verification process by the end of the year.

IV. DATE WHEN FULL COMPLIANCE WILL BE ACHIEVED

Documentation of personnel certification has been verified complete for all Safety and Fire Protection Unit personnel. We expect that all Safety and Fire Technicians will be fully qualified to their new qualification program by November 4, 1995.