Wayne H. Jens Vice Presiden. Nuclear Operations Detroit 2000 Second Avenue Detroit, Michigan 48226 (313) 586-4150 September 21, 1984 EF2-69714 Mr. James G. Keppler Regional Administrator Region III U. S. Nuclear Regulatory Commission 799 Roosevelt Road Glen Ellyn, Illinois 60137 Dear Mr. Keppler: Reference: Fermi 2 NRC Docket No. 50-341 Subject: Noncompliance at Fermi 2 Inspection Report 50-341/84-32 This letter responds to the items of noncompliance described in your Inspection Report No. 50-341/84-32. This inspection of activities regarding the Operational Quality Assurance Program was performed by Messrs. W. Kropp and M. Moser on August 1-3, and 6-10, 1984. The items of noncompliance are discussed in this reply as required by Section 2.201 of the NRC's "Rules of Practice", Part 2, Title 10, Code of Federal Regulations. The enclosed response is arranged to correspond to the sequence of items cited in the body of your report. The number for the items of noncompliance and the applicable criterion are referenced. We trust this letter will satisfactorily respond to the noncompliances cited in your report. If you have questions regarding this matter, please contact Mr. Lewis P. Bregni, (313) 586-5083. Drayne H. Jens SEP 28 1984. Sincerely, cc: Mr. P. M. Byron Mr. R. C. Knop Mr. W. Kropp 8410100447 841001 PDR ADOCK 05000341

THE DETROIT EDISON COMPANY

FERMI 2

NUCLEAR OPERATIONS ORGANIZATION

RESPONSE TO NRC REPORT NO. 50-341/94-32

DOCKET NO. 50-341 LICENSE NO. CPPR-87

INSPECTION AT: FERMI 2, NEWPORT, MICHIGAN

INSPECTION CONDUCTED: AUGUST 1-3 AND 6-10, 1984

RESPONSE TO NRC INSPECTION REPORT NO. 50-341/84-32

Statement of Noncompliance, 84-32-04, Criterion XVI

10 CFR 50, Appendix B, Criterion XVI, as implemented by Detroit Edison Company's Quality Assurance Program Requirement 16, requires that conditions adverse to quality be promptly corrected.

Contrary to the above, the licensee failed to provide prompt corrective action on an NRC finding issued in September, 1983 (Inspection Report 83-20). Specifically, the finding dealt with the licensee's failure to implement a shelf life program. At the time of this inspection, the licensee was continuing to issue material without determining if the shelf life had expired.

Corrective Action Taken and Results Achieved

In December of 1983, Detroit Edison responded to NRC concerns regarding shelf life cited in Inspection Report 83-20. The response described a computerized program under development at that time. Information gathering and any necessary changes to implementing procedures were expected to be completed in June of 1984.

By June 30, 1984, approximately 8000 of the 14000 items stocked had been researched to identify items with a limited shelf life and establish shelf life expiration dates.

On August 9, 1984, immediate corrective action was taken by requiring that the General Supervisor-Nuclear Materials stop issuing safety related material with shelf life expiration dates unknown or expired unless Technical Review approval was obtained. Temporary revisions to Maintenance and Warehouse procedures were made at that time. These temporary revisions required warehouse personnel to retagitems on the shelf with "Do Not Issue" tags where shelf life expiration dates were in question or unidentified.

Maintenance Instruction MI-M329, "Identification and Implementation of Shelf Life Requirements" has been issued. This instruction addresses material already in stock, new stock items and material ordered for immediate repair activities. Maintenance Instruction MI-M245, "Criteria for Technical Review", Rev. 2, has incorporated the standards for technical establishment of shelf life when vendor information has not been provided. Warehouse procedure revisions reflecting MI-M329 and MI-M245 have been issued.

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Corrective Action and Results Achieved (Cont'd)

A detailed Technical Review of all safety related items in stock has been performed. Those items with limited shelf life have been identified, and data entry and verification in the IMPACT SHELFLIFE computer program is complete. The retagging of this material by warehouse personnel has been completed. The Technical Review Group is reviewing consumable/controlled materials for shelf life requirements. Any of these items with shelf life requirements will be listed as stock items and controlled through the Shelf Life Program as identified in MI-M329. Thus review will be complete by September 22, 1984. In addition, material issuances over the past year are being reviewed to ensure that no safety related material with a questionable shelf life was issued.

Corrective Action Taken to Avoid Further Noncompliance

Affected maintenance personnel have been trained in the use and application of MI-M245 and MI-M324, as required by Maintenance Procedure 31.000.07.

Warehouse personnel associated with shelf life material have been trained on the requirements of MI-M329 and MI-M245. The warehouse personnel have also been trained on the procedure to 12.000.28 and the revisions to procedure 12.000.29.

Date When Full Compliance Will be Achieved

The necessary procedure revisions will be completed by September 22, 1984. The Shelf Life Program will be fully implemented, and the review for material potentially beyond its shelf life will be complete by September 28, 1984. Evaluation of expired material that had been issued, as discussed above, and any corrective action necessary will be complete before initial criticality.

RESPONSE TO NRC INSPECTION REPORT NO. 50-341/84-32

Statement of Noncompliance, 84-32-05, Criterion V

10 CFR 50, Appendix B, Criterion V, as implemented by Detroit Edison Company's Quality Assurance Program Requirement 5, requires activities affecting quality to be accomplished in accordance with procedures.

Contrary to the above, the licensee has not implemented a trending program in accordance with procedure NQA 1602, "Trending of Corrective Action."

Corrective Action Taken and Results Achieved

This noncompliance had been noted and identified as an audit finding by Nuclear Quality Assurance (NQA) during audit No. A-QS-P-84-24, Audit Finding Report (AFR) No. 7. The procedure in question, NQA-1602, had not been implemented due to the need to establish a common coding system for the data base that the principal NQA sections could utilize. NQA and its predecessor organization, Project Quality Assurance (PQA), have been performing manual trending activities of various types, and will continue to do so until NQA 1602 is revised, implemented, and validated.

Corrective Action Taken to Avoid Further Noncompliance

The procedure will be revised by September 28, 1984, to include a common coding system. A specific person has been assigned the responsibility to implement the procedure, including issuance of periodic reports.

Date When Full Compliance Will be Achieved

Implementation of the procedure will commence October 1, 1984. The first Monthly Summary Report will be issued by November 9, 1984. and the first quarterly Trend Analysis Report will be issued in January of 1985.