

NIAGARA MOHAWK POWER CORPORATION

NIAGARA  MOHAWK

300 ERIE BOULEVARD WEST
SYRACUSE, N. Y. 13202

B. G. HOOTEN
EXECUTIVE DIRECTOR
NUCLEAR OPERATIONS

July 31, 1984
(NMP2L 0117)

Mr. R. W. Starostecki, Director
Region I
Division of Project and Resident Programs
631 Park Avenue
King of Prussia, Pennsylvania 19406

Dear Mr. Starostecki:

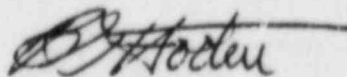
Nine Mile Point Unit 2
Docket No. 50-410

Enclosed is our detailed response to the Notice of Violation dated June 29, 1984 and the accompanying Inspection Report No. 50-410/84-06.

As a general response, however, I would like to emphasize that our company's reaction to these violations is one of strong recognition that our continuing management attention to quality matters is necessary to effect significant improvement in our quality performance.

It should be noted that the cited violations occurred in close proximity to the implementation of our CAT Action Plan. In effect, we were still developing and initiating the corrective and preventive action described in our letter to the Commission dated May 4, 1984. I am certain that our implementation of revised procedures, coupled with our quality training programs, will serve to minimize any recurrence of such violations. Increased management attention at all levels is being utilized to effect continuing improvement in our quality performance.

Very truly yours,



B. G. Hooten
Executive Director
Nuclear Operations

Enclosure

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NIAGARA MOHAWK POWER CORPORATION
NINE MILE POINT - UNIT 2
DOCKET NO. 50-410

Response to Notice of Violation
Attached to NRC Inspection Report
No. 50-410/84-06

The first violation was identified as follows:

Violation 1

10CFR50, Appendix B, Criterion V and the Nine Mile Point - Unit 2 PSAR state that activities affecting quality shall be accomplished in accordance with documented procedures. Johnson Controls, Incorporated procedure QAS-904-NM2 requires that weld material issued to the field be maintained at temperatures above 120°F and that nonconforming weld material shall be scrapped.

Contrary to the above, on April 12, 1984, field-issued weld material was identified within portable rod oven A094 which was not maintained at above 120°F, and Johnson Controls, Incorporated weld material requisition 21835 indicates that nonconforming weld material was not scrapped upon return of the material to the rod issue station.

This is a Severity Level V violation (Supplement II).

The following is submitted in response to this violation.

NOTE: Page 11 of the subject inspection report states that the violation is considered closed and a written response is not required.

The second violation was identified as follows:

Violation 2

10CFR50, Appendix B, Criterion V and the Nine Mile Point - Unit 2 PSAR state that activities affecting quality shall be accomplished in accordance with documented procedures. SWEC procedure QS14.1-NM defines a program to control rework to previously QC-inspected items. A punchlist item report (PLIR) is required to be generated prior to initiating such rework.

Contrary to the above, on April 19, 1984, the licensee was informed that structural steel beams A5080 and E5080 had been disassembled without generating a PLIR, and that structural steel beam D6869 had been reworked resulting in hardware damage without the issuance of a PLIR.

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

The following is submitted in response to this violation:

Corrective Actions

1. The rework performed on beams A5080 and E5080 has now been documented on Rework Control Form CS-007 as required by revised Quality Standard QS 14.1- NM. The Rework Control Form replaces the PLIR form for rework control.
2. Rework in connection with beams D6869 and D6800 has been documented on Rework Control Form CS-001, as required by revised Quality Standard QS 14.1-NM.

Inspection Report S4027376 documents these activities and indicates that corrective actions are satisfactory and complete.

Preventive Actions

A training program was augmented to train approximately 170 nonmanual personnel on the Post Acceptance Work Control of QS 14.1-NM and was initiated on July 27, 1984. The personnel that will be trained include supervising engineers, chief supervisors, senior supervisors, and the initiators of the form.

Schedule

Full compliance will be achieved on September 14, 1984.

Additional Quality Improvements

The section entitled Supplementary Information (Concern 2) describes additional quality assurance improvements.

The third violation was identified as follows:

Violation 3

10CFR50, Appendix B, Criterion X and the Nine Mile Point - Unit 2 PSAR require that safety-related items shall be inspected to verify conformance to applicable specifications and procedures.

- a. SWEC Specification S204A requires that structural steel high-strength bolted connections shall be inspected in accordance with the criteria disseminated by the Research Council on Riveted and Bolted Structural Joints (RCRBSJ).

Contrary to the above, on May 11, 1984, the licensee was informed that structural steel beams B6308 and B6312 had been accepted by Quality Control in Inspection Report No. S2023436 when the slotted hole width exceeds that allowed by RCRBSJ.

- b. ITT Grinnell procedure FQC 4.2-14-9 requires that inspection be conducted to verify full-thread engagement for pipe support-threaded assemblies.

Contrary to the above, on April 19, 1984, the licensee was informed that 30 ITT Grinnell Type A spring canisters had been accepted by Quality Control without verification of the required thread engagement of the support rod.

The above examples constitute a Severity Level IV violation (Supplement II).

The following is submitted in response to this violation:

Corrective Action

- a. On May 10, 1984, the affected nonconforming slotted holes were documented on N&D No. 7698. The disposition of N&D 7698 indicates that certain of the materials were accepted and others require repair. Additional evaluations will be performed to determine the nature of potential additional problems regarding improper oversized holes which may be associated with shop connections. The evaluation will determine what further sample inspection is required to determine the extent of further problems as well as associated acceptance criteria and attributes for these sample inspections.
- b. Investigation of this matter revealed that the inspectors accepted the spring canisters due to inadequate procedural guidance and/or training.

As a matter of clarification, ITT Grinnell Quality Control had accepted only six canisters rather than the 30 stated in the violation. These were documented on the inspection checklist from Procedure FQC 4.2-14-9.

One-quarter inch holes were drilled on opposite sides of the installed spring cans to verify thread engagement. The spring canisters' thread engagement was verified and found acceptable as documented on Form F10.1B.

Preventive Action

- a. Procurement Quality Assurance will be directed to take the following steps to ensure that slotted holes in steel members meet specification requirements.

SWEC Procurement Quality Assurance (PQA) will review and revise, if necessary, the PQA inspection plan for structural steel at Cives Steel Shop to ensure that inspection attributes properly identify specification inspection requirements and acceptance criteria.

Additionally, PQA will review Cives Steel procedures to ensure that manufacturers' drawings are reviewed for specification compliance. Changes will be directed if these procedures/plans do not identify specification requirements and acceptance criteria.

PQA action to review inspection requirements and identify required changes will be completed by August 30, 1984. If procedural changes are identified, the changes will be completed prior to September 30, 1984.

- b. On June 15, 1984, an inspection attribute was added to the ITT FQC Procedure 4.2-4-11 to require sight holes. Verification of thread engagement by the use of sight holes is being performed in accordance with the above procedures. The applicable inspection personnel will be trained for this revised procedure requirement.

Schedule

- a. Full compliance will be achieved on September 30, 1984.
- b. Full compliance will be achieved on August 15, 1984.

Additional Quality Improvements

The section entitled Supplementary Information (Concern 1) provides additional quality assurance improvements.

The fourth violation was identified as follows:

Violation 4

10CFR50, Appendix B, Criterion XIV and the Nine Mile Point - Unit 2 PSAR state that measures shall be established to identify the inspection status of safety-related structures. SWEC procedure QS-10.17 defines a system to document and identify the inspection status of structural steel member.

Contrary to the above, on May 11, 1984, the licensee was informed that the inspection status of beam A6110 was indeterminate and that neither the civil nor mechanical QC groups claimed cognizance of the inspection status of beams B6427 and D6426.

This is a Severity level IV violation (Supplement II).

The following is submitted in response to this violation.

Corrective Action

Investigation of the status of beam A6110 was performed with the following results:

- a. In process erection inspection for mating surfaces was performed and is documented on I.R. No. S1013496 dated March 28, 1981. The inspection report records that this work was acceptable.

- b. Welding inspections for pieces A6110 to G6007 and B6110 to A6110 were performed and are documented on I.R. No. W1008651 and W1008663 dated April 10, 1981 and April 15, 1981, respectively. The inspection reports record that this work was acceptable.
- c. Welding inspection for piece A6110 to D6110 was performed and is documented on IR W1008677 dated April 21, 1981, and was found acceptable.
- d. N & D 7699 was issued May 10, 1984 for gaps at connection of beam A6110 to the lubrite plate, and was dispositioned to be repaired .
- e. Beam A6110 has not been released to FQC for final inspection.

Investigation of the status of beams B6427 and B6426 was performed with the following results:

- a. These beams will be inspected by SWEC Civil/Structural FQC personnel when construction completes installation.

Preventive Action

NMPC considers the existing system covering inspection status to be adequate. We believe that in this instance the violation resulted from a miscommunication among the parties. However, to avoid any misunderstanding in the future the following action will be taken:

A FQC memo will be issued re-emphasizing the need to understand and identify areas and activities where multiple inspections are required that involve different FQC disciplines. In addition, the memo will advise FQC personnel to obtain pertinent information from the requestor, to facilitate FQC in obtaining the current inspection status.

Schedule

Full compliance will be achieved when the FQC memo is issued, which will be completed by August 15, 1984.

The fifth violation was identified as follows:

Violation 5

10CFR50, Appendix B, Criterion XVI and the Nine Mile Point - Unit 2 PSAR state that conditions adverse to quality are identified and corrective actions are promptly initiated to correct the deficiencies. NRC Inspection Report No. 50-410/81-05, Unresolved Item 81-05-02, identified that inadequate housekeeping measures were observed within the primary containment.

Contrary to the above, on April 19, 1984, the licensee was informed that inadequate corrective action had been implemented in response to Unresolved Item 81-05-02. The plant housekeeping and fire prevention practices were found to be deficient in that tours of the containment building identified gross quantities of debris and inadequate control to prevent the use of nonfire-retardant lumber.

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

The following is submitted in response to this violation:

Corrective Action

As noted in the inspection report, the debris was removed and non-fire retardent lumber was either removed or painted with a fire retardent covering prior to April 19, 1984.

Preventive Action

By letter dated April 19, 1984, Niagara Mohawk instructed SWEC to prepare detailed weekly reports on compliance with (ANSI and OSHA) housekeeping requirements and submit the reports to NMPC Manager of Construction. The reports are delineated by area and building.

Additionally, SWEC personnel inspect areas/buildings and take action to correct any adverse conditions.

Also, SWEC FQC will perform a monthly inspection (IP N200SM01FA001) to verify that housekeeping requirements are met.

Schedule

Full compliance has been achieved.

Supplementary Information

This section responds in more detail to the concerns delineated in the cover letter of your inspection report 84-06.

Concern 1

Our inspections continue to find examples of work accepted by your quality organizations without the proper verification of applicable inspection attributes or identification of discrepant conditions. This concern was noted to you previously by our Construction Assessment Team (CAT) inspection 50-410/83-18 as violation F of Enclosure 2. Your response to Appendix A, item 3 of this report should include measures you intend to take to ensure that the corrective actions proposed in your letter, May 4, 1984, will prevent recurrence.

Response 1

At the time of the inspection 84-06, the commitments described in our May 4, 1984 letter were in the process of being implemented, but were not yet fully implemented.

We believe that the generic preventative actions stated in Attachment 2 of our May 4, 1984 letter will address proper verification of applicable inspection attributes and identification of discrepant conditions.

Additionally, NMPC QA is currently performing an assessment of the effectiveness of site contractors QA Programs. Our scheduled completion of this assessment is September 19, 1984. An ongoing effort to report on Quality Performance Indicators on a monthly basis is another method being used to measure the adequacy of the implementation of the QA Programs.

Finally, NMPC will take additional actions based on recommendations identified by the ongoing Independent Assessment Team which was initiated in response to the NRC order.

Concern 2

During this inspection, we have noted additional examples of unauthorized rework to previously inspected items. In your response to Appendix A, item 2, you should address your intended actions which will result in prevention of such rework and the invalidation of quality control inspection records.

Response 2

We have evaluated our rework controls and determined that improvements were necessary. The improvements include:

1. Revising and issuing Quality Standard (QS) 14.1-NM. The Q.S. has been strengthened to improve rework controls by:

- a. Any item requiring rework which has been final accepted by FQC requires a Rework Control Form to be completed, approved by the construction supervisor, and FQC concurrence prior to initiating rework.
- b. Subsequent to the rework, the Rework Control Form provides for inspection attributes and inspection results to be documented and for closure by FQC.
2. Eliminating the use of PLIR's (for rework) and replacing them with a new Rework Control Form, which will be controlled in accordance with Q.S. 14.1-NM.
3. Augmenting the training program to improve rework control and assure proper use of the rework control forms.

We will continue to evaluate the effectiveness of these measures through the Quality and Audit/Surveillance Program. Ineffective programs will be strengthened or otherwise improved to ensure adequate quality records of rework and rework control.