

U.S. NUCLEAR REGULATORY COMMISSION

REGION III

Report No. 50-341/84-32(DRS)

Docket No. 50-341

License No. CPPR-87

Licensee: Detroit Edison Company
2000 Second Avenue
Detroit, MI 48224

Facility Name: Enrico Fermi Nuclear Power Plant, Unit 2

Inspection At: Enrico Fermi 2 Site, Monroe, Michigan

Inspection Conducted: August 1-3 and 6-10, 1984

Inspectors: *W. Kropp*
W. Kropp

22 August 1984
Date

M. Moser
M. Moser

22 AUGUST 1984
Date

F. Hawkins
Approved By: F. Hawkins, Chief
Quality Assurance Programs Section

8/22/84
Date

Inspection Summary

Inspection on August 1-3, and 6-10, 1984 (Report No. 50-341/84-32(DRS))

Areas Inspected: Routine, announced inspection by regional inspectors of licensee activities in the areas of auditing, receipt inspection, storage of items, and administration of the operational quality assurance program. The inspection involved a total of 102 inspector-hours onsite by two NRC inspectors.

Results: Of the four areas inspected, no items of noncompliance or deviations were identified in two areas; two items of noncompliance was identified in the remaining two areas (failure to implement prompt corrective action for a noncompliance identified during an NRC inspection - Paragraph 2.d.; failure to implement a trending program in accordance with procedures - Paragraph 2.e.).

DETAILS

1. Persons Contacted

Detroit Edison Company

- *W. H. Jens, Vice President, Nuclear Operations
- *R. S. Lenart, Superintendent, Nuclear Operations
- *L. P. Bregni, Engineer
- *O. Earle, Supervisor, Licensing
- *A. E. Wegele, Licensing
- *J. J. Sutka, General Supervisor, Materials
- *W. Miller, Supervisor, Operations QA
 - J. E. Bragg, QA Specialist
 - J. Buck, QA Engineer
 - M. Gavin, General Supervisor, Information System
 - G. M. Trahey, Director, Nuclear QA
 - S. E. Kremer, General Supervisor, Nuclear Operations

Other Personnel

- *R. D. Walker, Chief, Operations Branch, RIII-NRC
- *P. M. Byron, Senior Resident Inspector, RIII
- *M. E. Parker, Resident Inspector, RIII

*Denotes those attending the exit interview on August 10, 1984.

Other personnel were contacted as a matter of routine during the inspection.

2. Functional or Program Areas Inspected

The purpose of this inspection was to verify that the operational quality assurance program and implementing procedures were in compliance with 10 CFR 50, Appendix B, ANSI N18.7-1976 ("Administrative Control and Quality Assurance for the Operational Phase of Nuclear Power Plants") and other applicable codes and standards. The specific areas reviewed during this inspection included the audit program, receipt inspection, the storage of items, and the administrative controls of the QA/QC program. Based on the results noted in the following paragraphs, the licensee's operational quality assurance program and implementing procedures were not at a stage of development which allowed an evaluation to determine compliance with regulatory requirements. Therefore, this inspection was concluded without the entire operational quality assurance program being evaluated by the Region III inspectors.

a. Nuclear Operations Management Plan

The Nuclear Operations Management Plan (NOMP) addressed the QA program and other programs associated with the operation, maintenance, and modification of Fermi 2. The NOMP is divided into two parts. Part 1 consisted of statements of policy and directives endorsed by the licensee's management. These policies and directives

reflect commitments to meet the applicable regulatory requirements and provide direction for ensuring reliability of operation. Part 2 of the NOMP consisted of program requirements (Quality Assurance Program Requirements - QAPR) and program descriptions (Nuclear Operations Program Descriptions - NOP).

A review of the NOMP revealed that not all the QAPRs and NOPs have been issued, even though their implementing procedures have been issued. The QAPRs for fire protection and radwaste management and the NOPs for spare/repair parts and preventative maintenance are examples of programs not yet issued. The licensee stated that the NOPs do not address regulatory requirements and therefore are not required to be issued prior to fuel load. A change to the FSAR was being initiated to reflect this position.

A review of NOP-108, Revision 1 ("ASME Section XI Repair and Replacement Program") indicated that it contained program requirements for the repair and replacement of ASME items. Those requirements are not addressed in a QAPR. Prior to implementing a change to the FSAR which deletes the NOPs from the operational QA program, the licensee must ensure that specific requirements presently addressed in NOPs are adequately addressed in the QAPRs. This matter is considered open pending a review of the NOMP for completeness and the role of the NOPs in the operational QA program (341/84-32-01).

b. Management Assessment of Operational QA Program

The report (May, 1984) of a management assessment of the operational quality assurance program by an independent third party was reviewed by the inspectors. The independent third party reviewed the NOMP in detail to determine if the requirements of ANSI N18.7-1976 were addressed in the QA program. The report concluded that the NOMP only addressed approximately 60 to 70 percent of the requirements. The licensee is in the process of revising the QAPRs to address the requirements of ANSI N18.7-1976. This matter is considered an open item pending the licensee's issuance of revised QAPRs which include the requirement of ANSI N18.7-1976 (341/84-32-02).

c. Review of Program Documents

The inspectors reviewed the implementing procedures relative to the off-site review committee and storage activities to verify compliance with applicable codes and standards, the proof and review copy of the Technical Specifications, and FSAR Chapter 17.2. The review noted the following:

- (1) ANSI N18.7 and Nuclear Engineering procedure NE 1.4, Revision 2, "Nucler Safety Review Group" (NSRG), requires that the off-site review group (NSRG) review the audit program semiannually. Procedure NE 1.4 did not identify the basis of the review, how the results are documented, and the distribution of the results.

- (2) Technical Specifications, paragraph 6.8.2.9(b), requires that the reports of reviews of documents (i.e. safety evaluations, proposed changes to technical specifications, reportable events, etc.) be prepared, approved and forwarded to the Vice President Nuclear Operations within 14 days following completion of the review. Nuclear Engineering procedure NE-1.4 did not adequately address the transmittal of review reports to the Vice President Nuclear Operations.
- (3) Paragraph 8.8.1 of procedure NE-1.4 states that those individuals performing audits are responsible to the NSRG. The procedure for conducting audits, NQA 1801, did not address the audit teams responsibility to the NSRG.
- (4) FSAR, Section 17.2.15, states that the proposed corrective action for any nonconformance, which is considered a significant condition adverse to quality, will be reviewed by the NSRG. Procedures did not address this requirement.
- (5) ANSI N45.2.2-1972 ("Packaging, Shipping, Receiving, Storage and Handling of Items for Nuclear Power Plants"), Section 6.3, states that the procedures will address the following storage methods:
 - (a) ready access to stored items for inspection
 - (b) arrangement of items to prevent distortion
 - (c) all items and their containers shall be plainly marked so that they are easily identified without excessive handling, or unnecessary opening of crates and boxes
 - (d) waterproof covering shall be tied down to prevent moisture from entering laps to protect the coverings from wind damage.

Procedure 12.000.28, Revision 4 ("Material Handling and Storage"), did not address these storage methods.

- (6) Procedure 12.000.28 did not adequately address the periodic inspection of stored items for those attributes identified in ANSI N45.2.2-1972, Section 6.4.1 (i.e. protection coatings and preservatives, inert gas blanket pressure, physical damage, etc.).
- (7) Procedure 12.000.28 allowed deficiencies noted during inspections of the storage facilities to be identified in a letter to the General Supervisor - Materials. The operational QA program did not identify a letter as a mechanism for documenting and resolving deficiencies.
- (8) ANSI N45.2.2-1972 and QAPR-15 require a statement documenting the authority and technical justification for conditionally releasing nonconforming items for installation. Procedure 12.000.27, Revision 7 ("Materials Receiving, Inspection, and Status"), did not require documenting the technical justification for the conditional release of nonconforming items for installation.

Based on the above items, there is a lack of attention to detail during the review process of procedures. This matter is considered an open item pending a review by the licensee of implementing procedures to ensure proper interface with other procedures and compliance with regulatory requirements, NOMP, codes and standards (341/84-32-03).

d. Shelf Life Program

In September, 1983, NRC inspectors identified several items in Report No. 83-20 that did not have the shelf life clearly marked on the accept tag as required by Administrative Procedure No. 12.000.28 ("Material Handling and Storage"). The licensee's response to the noncompliance on December 19, 1983, stated that a program for further identification of items with a limited shelf life was underway and the program addressed items by material type and known shelf life data. A review of this program during this inspection revealed that the licensee had not yet completed the program for identifying items with a limited shelf life. The licensee has continued to issue material (i.e., gaskets, O-rings, etc.) since September, 1983, without determining if the shelf life had expired. This failure to take prompt corrective action on a previous NRC finding is considered to be an item of noncompliance with 10 CFR 50, Appendix B, Criterion XVI (341/84-32-04).

e. Trending

Procedure No. NQA 1602 ("Trending of Corrective Action"), Revision 0 was issued and became effective on June 25, 1984. However, discussions with the licensee revealed that the procedure had not been implemented. The trending procedure is applicable to the trending of nonconformances identified during the preoperational and startup phase. This failure to accomplish trending activities in accordance with procedure NQA 1602 is considered to be an item of noncompliance with 10 CFR 50, Appendix B, Criterion V (341/84-32-05).

3. Open Items

Open items are matters which have been discussed with the licensee, which will be reviewed further by the inspector, and which involve some action on the part of the NRC or licensee or both. Open items disclosed during the inspection are discussed in Paragraphs 2.a, 2.b and 2.c.

4. Exit Interview

The inspectors met with licensee representatives (denoted in Paragraph 1) on August 10, 1984 and summarized the purpose, scope and findings of the inspection.