

Docket No. 50-346

License No. NPF-3

Serial No. 1-459

August 17, 1984



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Nuclear  
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Mr. C. E. Norelius, Director  
Division of Reactor Projects  
United States Nuclear Regulatory Commission  
Region III  
799 Roosevelt Road  
Glen Ellyn, Illinois 60137

Dear Mr. Norelius:

Toledo Edison acknowledges receipt of your July 11, 1984 letter (Log No. 1-992) and enclosures; Appendix A, Notice of Violation; and Inspection Report No. 50-346/84-09 (DRS).

Following an examination of the items of concern, Toledo Edison herein offers information regarding these items:

1. Violation: 10 CFR 50, Appendix B, Criterion V, as implemented by Toledo Edison Quality Assurance Program as described in Section 17.2.5, including a commitment to ANSI N18.7-1972, requires that activities affecting quality be prescribed by documented instructions and procedures. Section 5.1.5 of ANSI 18.7-1972, and Section 1.C.6 of NUREG-0737, require independent verification of tagging activities relative to removal from and return to service of plant equipment.

Contrary to the above, no procedure or requirement existed for independent verification of tagging plant equipment out of service.

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

Response: (1) Corrective action taken and results achieved.

A February 11, 1982 letter (Log No. 902), from Nuclear Reactor Regulation (NRR) concluded that Toledo Edison had met the requirements of NUREG-0737, Item 1.C.6 for guidance on procedures for verifying correct performance of operating activities.

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Since initial operation of Davis-Besse, Toledo Edison has used maintenance personnel for independent verification for placement of tags for removal of equipment from service. The extent of verification has been governed by Administrative Procedure AD 1803, "Safety Tagging". It is our understanding that our method of independent verification as practiced in the procedure does not satisfy the Region III interpretation of independent verification for all circumstances.

- (2) Corrective action to be taken to avoid further noncompliance.

A modification will be made to Administrative Procedure AD 1803, "Safety Tagging", which will incorporate independent verifications for removal and return to service of plant equipment by knowledgeable Operations Department personnel for systems affecting plant safety. This modification to the procedure will specify the applicable systems.

- (3) Date when full compliance will be achieved.

Procedure modifications to AD 1803, "Safety Tagging", will be implemented by September 3, 1984.

2. Violation: Technical Specification, Sections 6.5.1.6.d and 6.5.1.7.a, require the Station Review Board to review all proposed changes or modifications to plant systems or equipment that affect nuclear safety and recommend written approval or disapproval of changes or modifications to the Station Superintendent.

Contrary to the above, temporary modifications associated with nonconformance reports NCR-232-81, (Limitorque Valve Modification), NCR 392-81 (Service Water Valve Modification), and NCR 83-01 (Auxiliary Feedwater Pump Steam Line Modification) were not reviewed by the Station Review Board and a recommendation concerning the modification's acceptability was not made to the Station Superintendent.

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

Response: (1) Corrective action taken and results achieved.

The Station Review Board (SRB) reviewed the item of noncompliance in a meeting which included the Quality Assurance Director and the Facility Engineering

General Supervisor. Per Section 8.1, Step 4 of ANSI N45.2.11-1974, "Quality Assurance Requirements for Design of Nuclear Power Plants", the disposition of a nonconforming item can possibly result in a design change, and therefore, the finding as stated is correct. By Administrative Procedure AD 1845.00, "Changes, Tests, and Experiments", Section 2.3, only dispositions for repairs which do not affect the fundamental design of the affected part are excluded from the Facility Change Request (FCR) administrative controls. The FCR process involves the SRB reviews necessary to satisfy the requirements of Technical Specification, Section 6.5.1.6.d. However, in order to assure the acceptability of the disposition of Non-conformance Reports (NCR's), and satisfy the requirements of Technical Specification, Section 6.5.1.7.a, SRB will review NCR's which are not dispositioned as rework, or reject. Other permitted dispositions may involve facility modifications, and as such, contain safety evaluations supporting the disposition. The SRB meeting discussions also confirmed that Supplier Deviation Reports (SDR's) must be similarly reviewed. It is recognized that these reviews will constitute a considerable increase in the SRB workload and, therefore, will be accomplished by subcommittee activities, the results of which will be presented to the SRB.

- (2) Corrective action taken to avoid further noncompliance.

The SRB Charter is being revised to include in Subcommittee Instructions the requirements to review dispositioned nonconformances (NCR's and SDR's), which are dispositioned use-as-is, use-as-is temporarily, or repair.

- (3) Date when full compliance will be achieved.

Full compliance will be achieved by September 14, 1984.

3. Violation: 10 CFR 50, Appendix B, Criterion XVII, as implemented by the Toledo Edison Operating QA Program and the FSAR Section 17.2, require that the applicant shall provide record storage consistent with applicable regulatory requirements. The Toledo Edison QA Program commits to ANSI N45.2.9-1974 and Regulatory Guide 1.88, Revision 2, October, 1976, with an exception specifying a two hour fire protection rating for record storage facilities.

Contrary to the above, records of audits, auditor and QC inspector qualification/certification and calibrations were not provided the required protection.

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

Response: Toledo Edison takes exception to this finding. ANSI N45.29-1974 contains the following definition of Quality Assurance Records.

"Quality Assurance Records - Those records which furnish documentary evidence of the quality of items and of activities affecting quality. For the purposes of this standard a document is considered a Quality Assurance Record when the document has been completed."

The Toledo Edison Nuclear Quality Assurance Manual and Chapter 17.2 of the Updated Safety Analysis Report further defines a completed Quality Assurance Record as follows:

"Quality Assurance Records - A document is considered completed when all applicable information has been recorded and the record has been reviewed and approved by the applicable individuals."

Furthermore, the scope of ANSI N45.2.9-1974 states:

"It (this standard) is not intended to cover the preparation of the records, nor to include working documents not yet designated as Quality Assurance Records."

The audit records stored in the Davis-Besse Administration Building (DBAB) are working records in which there are open audit findings. These documents are periodically updated to reflect actions taken to resolve the audit findings. Therefore, Toledo Edison considers these audit documents as working documents and subsequently not within the scope of the ANSI N45.2.9.

Auditor qualification/certification records stored in the DBAB and Quality Control Inspector qualification/certification records stored in the QC trailer are for those individuals presently on the QA/QC staff. As required by ANSI N45.2.6 and ANSI N45.2.2.23, these documents are periodically updated to renew and evaluate the individual's certification. Therefore,



Toledo Edison considers these documents to also be working documents and subsequently not within the scope of ANSI N45.2.9.

Calibration records for test and measuring equipment are maintained in individual folders for each piece of equipment under the calibration program. These folders provide an equipment history file for each piece of equipment and are periodically updated as calibration occurs. Therefore, Toledo Edison considers these documents to be working documents and not within the scope of ANSI N45.2.9. Furthermore, even if under ANSI N45.2.9, these documents would only need to be maintained until recalibrated. Therefore, if the calibration record were destroyed, the performance of a new calibration and the generation of the calibration record would meet the record retention requirements of ANSI N45.2.9.

Based upon the above response, Toledo Edison is in compliance with 10 CFR 50, Appendix B, Criterion XVII, and requests that your office retract this item of noncompliance.

4. Violation: 10 CFR 50, Appendix B, Criterion XVI, as implemented by the Toledo Edison's Operational Quality Assurance Program, requires that measures be established to assure that conditions adverse to quality are promptly identified and corrected.

Contrary to the above, five open Nonconformance Reports were noted with temporary fixes or dispositions for short term use. These temporary conditions had existed for a period of one to five years. Additionally, two Corrective Action Requests, written in 1982 with 1983 scheduled completion dates, were still open at the time of this inspection.

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

Response: (1) Corrective action taken and the results achieved.

Two of the four Nonconformance Reports (NCRs) referenced in the Inspection Report have been closed. The work necessary to close the remaining two NCRs is scheduled to be performed during the next Refueling Outage. Toledo Edison is reviewing the outstanding NCRs to determine those NCRs requiring an outage to correct, those which may be worked during non-outage conditions and those which the requested work has been

completed but NCR closeout is awaiting related paperwork closeouts.

The two Correction Action Requests (CARs) referenced in the Inspection Report remain open. The completion of the corrective action associated with those CARs is presently scheduled for September 30, 1984. The Corrective Action completion dates for these CARs have extended beyond their original completion date as the action necessary to complete the Corrective Action was significantly greater than originally anticipated.

- (2) Corrective Action to be taken to avoid further noncompliance.

The tracking of NCRs has been added to the Davis-Besse Maintenance Management System (DBMMS). A recent enhancement has been added to the DBMMS which readily allows the identification and sorting of those NCRs requiring an outage to complete. This information will in turn enable the NCRs to be scheduled for completion during appropriate outage conditions. In addition, Toledo Edison is making a conscientious effort to reduce the number of open NCRs. As compared to the same period in 1983, Toledo Edison has reduced the number of open NCRs by approximately 20 percent. It should be further noted that Toledo Edison also utilizes the Nonconformance Report system to document nonconformances on Non-Nuclear Safety Related Equipment.

Like NCRs, Toledo Edison will continue to apply a conscientious effort to resolve open CARs to ensure that appropriate corrective measures are taken to thoroughly resolve the issue in a timely manner.

- (3) Date when full compliance will be achieved.

The NCRs referenced by this Inspection Report will be closed at the completion of the 1984 Refueling Outage. The CARs referenced by the Inspection Report will be closed upon acceptance of their corrective action by Toledo Edison Quality Assurance.

5. Violation: 10 CFR 50, Appendix B, Criterion XII, as implemented by the Toledo Edison Operational Quality Assurance Program, requires that measures be established to assure that tools, gages, instruments and other measuring and testing devices used in activities affecting quality are properly controlled, calibrated and adjusted at specified periods to maintain accuracy within necessary limits.

Contrary to the above, test and measuring equipment available for use by the Quality Control Department was not controlled and calibrated as required.

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

Response: (1) Corrective action taken and the results achieved.

In response to the specific findings described in the Inspection Report, Toledo Edison has taken the following actions.

1. Quality Control Instruction 3120 has been revised to include the requirement that the instrument used on an inspection or test be identified on the appropriate data sheet.
2. Calibration labels which indicate the calibration due date have been affixed in instruments QCT-5 and QCT-6.
3. Instrument QC-3 has been calibrated and the appropriate calibration label affixed.
4. Action cards as required by Quality Control Instruction 3120 have been completed for instruments QCT-5 and QCT-6.
5. Quality Control has verified that calibration records for all measurement and test equipment utilized by Quality Control personnel are available. All measurement and test equipment not available for use by Quality Control personnel have been removed from the Quality Control Measurement and Test equipment storage area.

(2) Corrective action to be taken to avoid further noncompliance.

All measuring and test equipment available for use by Quality Control personnel has been reviewed to ensure that proper calibration labels are affixed, action cards tracking calibration due date are in place, and that calibration records are available. All deficiencies noted have been corrected. In addition, the deficiencies addressed in the NRC Inspection Report have been reviewed with the Quality Control personnel.

(3) Date when full compliance will be achieved.

Full compliance has been achieved.

6. Violation: Davis-Besse Nuclear Power Station Technical Specification for Reactor Coolant System Chemistry, Section 3.4.7, requires that the reactor coolant system chemistry shall be maintained within the steady state limit for chlorides of 0.15 ppm.

Contrary to the above, the chloride concentration in the reactor coolant system exceeded the limit to a maximum of 0.26 ppm, for a total of 22 hours. The underlying cause was determined to be the premature breakdown of recently installed resin in the purification demineralizers as a result of the following:

- a. Purchase of the resin was uncontrolled as a non-Q item with no receipt inspection or testing, allowing an unacceptable type of resin to be installed in the demineralizers.
- b. Failure to follow procedure LI 4782 which specified the resin chemical and physical requirements.

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

Response: (1) Corrective action taken and results achieved.

The resin in purification demineralizer 1-1 was replaced with Rohm & Haas resin IRN-150LC. Additionally, to ensure the purchase of the proper resin, personnel selecting resin have been instructed by the Chemist & Health Physicist to ensure it meets the criteria given in Procedure LI 4782.00, Laboratories Instrument and Reagent Calibration.

(2) Corrective action taken to avoid further noncompliance.

The Reactor Coolant System (RCS) purification demineralizer resin will be purchased, receipt inspected, and stored in accordance with the Toledo Edison Nuclear Quality Assurance Manual.

(3) Date when full compliance will be achieved.

The RCS chloride concentration was within the limit of 0.15 ppm on December 11, 1983. Full compliance has been achieved since further purchase of the RCS purification demineralizer resins will fall under the guidelines of the Toledo Edison Nuclear Quality Assurance Program.



7. Violation: 10 CFR 50, Appendix B, Criterion II states in part, "The program shall provide for indoctrination and training of personnel performing activities affecting quality as necessary to assure that suitable proficiency is achieved and maintained."

The Davis-Besse Updated Safety Analysis Report (USAR) in Section 13.2.1 states that the training program is described and administered by the AD 1828 series of procedures. Section 13.2.2.2 of the USAR includes commitments that Chemistry and Health Physics (C&HP) personnel are properly trained and maintain proficiency in their required job skills through continued training. Section 13.2.2.3 of the USAR includes commitments that maintenance personnel are properly trained to perform their jobs and that they remain proficient in the required job skills.

Administrative Procedure AD 1828.00 (Personnel Training Program) requires initial training and continuing training for C&HP personnel per AD 1828.12 and for all maintenance personnel per AD 1828.11.

Contrary to the above, the Master Training Schedule for 1984 did not identify that any initial or continuing training had been scheduled in 1984 for C&HP personnel or for Electrical Maintenance personnel.

This is a Severity Level V violation (Supplement 1).

- Response: (1) Corrective action taken and results achieved.

The 1984 Master Training Schedule (April 18, 1984), was in error in that it did not identify training for C&HP and Electrical Maintenance personnel required by Administrative Procedure AD 1828.00. This schedule was updated on July 31, 1984 to include all training that had been previously conducted for C&HP and Electrical Maintenance personnel during 1984, as well as training scheduled for completion during the remainder of 1984.

A Training Needs Analysis for both C&HP and Electrical Maintenance personnel was completed on July 31, 1984. The results of this analysis will be used to improve both initial and continuing training programs.

- (2) Corrective action to be taken to avoid further noncompliance.

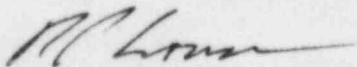
The Training System Development (TSD) Action Plan currently being implemented by the Training Department, is designed to achieve and maintain INPO accreditation of Davis-Besse training programs. The TSD process will be used to further modify and improve the existing C&HP and Electrical Maintenance training programs. As a result of the training needs analysis, a comprehensive training program is being outlined for C&HP personnel together with a two phased program designed for Electrical Maintenance personnel. The first phase will meet immediate training needs and the second phase will provide a comprehensive training program.

A previously identified Training Department procedure will be developed to provide administrative controls for the development and approval of the Master Training Schedule. The 1985 Master Training Schedule will be developed and revised using this procedure.

- (3) Date when full compliance will be achieved.

The Training Department procedure to provide administrative control for the development and approval of the Master Training Schedule will be issued by September 30, 1984. Accreditation of the Davis-Besse training programs will be accomplished on the schedule provided to INPO.

Very truly yours,



RPC:SGW:nlf  
cc: DB-1 NRC Resident Inspector