UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION II
101 MARIETTA STREET, N.W.
ATLANTA, GEORGIA 30323

NOV 01 1984

Report Nos.: 50-413/84-96

Licensee: Duke Power Company
422 South Church Street
Charlotte, NC 28242

Docket Nos.: 50-413 License Nos.: NPF-24

Facility Name: Catawba 1

Inspection Conducted: October 9 - 12, 1984

Inspector: G A Belisle 10/29/84
G. A. Belisle Date Signed

Accompanying Personnel: M. F. Runyan, Region II

Approved by: C M Upright 10/31/84
C. M. Upright, Section Chief Date Signed
Division of Reactor Safety

SUMMARY

Scope: This routine, unannounced inspection entailed 44 inspector-hours on site and at Duke corporate offices in the areas of licensee actions on previous enforcement matters, offsite support staff, and licensee actions on previously identified findings.

Results: Of the three areas inspected, no violations or deviations were identified.

REPORT DETAILS

1. Persons Contacted

*J. Hampton, Station Manager
*C. Hartzell, Compliance Engineer
M. McGuffee, Preventive Maintenance
*P. LeRoy, Licensing Engineer
*R. Wilson, Planning Engineer

Other licensee employees contacted included technicians and office personnel.

*Attended exit interview

2. Exit Interview

The inspection scope and findings were summarized on October 12, 1984, with those persons indicated in paragraph 1 above. New items were not identified during this inspection. The licensee acknowledged closing of previous items from NRC Reports 50-413/84-18 and 50-414/84-12.

3. Licensee Action on Previous Enforcement Actions (92702)

a. (Closed) Severity Level IV Violation 413/84-18-02: Failure to Provide Adequate Handling and Storage Procedures and Instructions

The licensee response dated June 8, 1984, was considered unacceptable to Region II. A subsequent response dated August 7, 1984, was considered acceptable by Region II. The inspectors interviewed warehouse personnel and were informed of the following actions:

Training had been conducted for warehouse personnel May 23, June 8, and August 17, 1984.

As of October 10, 1984, 21 personnel had received this training.

Seven personnel were tentatively scheduled to receive this training the week of October 22, 1984.

The training topics included a review of the following material:

Regulatory Guide 1.38, Quality Assurance Requirements for Packaging, Shipping, Receiving, Storage, and Handling of Items for Nuclear Power Plants.

ANSI N45.2.2-1972, Packaging, Shipping, Receiving, Storage, and Handling of Items for Nuclear Power Plants.

APM 2.4, Control of Material, Parts, and Components; Sections 2.4.7.2.2 and 2.4.7.2.3.

MHP-3.1, Storage Methods and Areas

The general training format was to review the training topics previously listed concerning storage methods and areas. Emphasis was to be placed on storage of intricate, sensitive, and fragile items as well as generic items. Specifically covered in the training were electronic components and long slender shafts.

The inspectors toured the QA warehouse and verified electronic components storage on shelves 03-06-04-01 through 07 and 03-06-05-01 through 07. Electronic components were stored in individual packages. These packages were placed on end in a vertical position. Other items in the warehouse appeared to be appropriately stored.

The inspectors concluded that the licensee had determined the full extent of the violation, taken action to correct current conditions, and developed corrective actions needed to preclude recurrence of similar problems. Corrective actions stated in the licensee response have been implemented.

b. (Closed) Severity Level IV Violation 413/84-18-03: Failure to Perform Preventive Maintenance as Required.

The licensee response dated June 8, 1984, was considered unacceptable to Region II. A subsequent response dated August 7, 1984, was considered acceptable to Region II. The inspector reviewed the preventive maintenance program (PM) evaluations for the following critical structures, systems, and components (CSSC):

BB	Containment Isolation Valves
EIB	BOP Process Instrumentation and Control System
EMF	Ventilation High Range Noble Gas Monitors Containment Atmosphere High Range Monitors
ERN	Class IE Diesel Protective Relay and Metering
EZA	Electrical Penetrations
FD	Diesel Generator Fuel Oil System Booster Pump Fuel Oil Storage Tanks Fuel Oil Day Tank

IRE	Reactor Trip Switchgear
KF	Cooling Pumps and Motors Heat Exchanger Strainers
NB	Holdup Tank Evaporator Feed (Demineralizer)
NF	Ice Condenser Refrigeration System Containment Isolation Valves Ice Baskets Ice Bed Doors
RF	Interior Fire Protection System Containment Isolation Valves
VF	Fuel Pool Ventilation System Exhaust Filters Exhaust Fans and Motors Electrical Controls
WG	Gaseous Waste Disposal System Waste Gas Compressor Waste Gas Decay Tanks Shutdown Waste Gas Decay Tanks Hydrogen Recombiners
WS	Spent Resin Storage Tank Spent Resin Sluice Filter Isolation Valves

The inspectors interviewed PM personnel to determine internal administrative controls for performing evaluations. The inspectors reviewed a computer index for those items evaluated by the PM staff requiring PM.

The inspectors concluded that the licensee had determined the full extent of the violation, taken action to correct current conditions, and developed corrective actions needed to preclude recurrence of similar problems. Corrective actions stated in the licensee response have been implemented.

4. Unresolved Items*

Unresolved items were not identified during this inspection.

*An Unresolved Item is a matter about which more information is required to determine whether it is acceptable or may involve a violation or deviation.

5. Offsite Support Staff (40703)

References : (a) 10 CFR 50, Appendix B, Quality Assurance Criteria for Nuclear Power Plants and Fuel Reprocessing Plants

(b) Regulatory Guide 1.33, Quality Assurance Program Requirements (Operations), Revision 2

(c) ANSI N18.7 - 1976, Quality Assurance for the Operational Phase of Nuclear Power Plants

(d) Regulatory Guide 1.146, Qualification of Quality Assurance Program Audit Personnel for Nuclear Power Plants

(e) ANSI N45.2.23 - 1978, Qualification of Quality Assurance Program Audit Personnel for Nuclear Power Plants

(f) Technical Specifications, Section 6, Administrative Controls

The inspectors visited the corporate office to determine whether the offsite support staff functions are performed by qualified personnel in accordance with licensee approved administrative controls, regulatory requirements, and industry guides and standards. The following criteria were used during this review to assess the adequacy of the offsite staff and, if fully implemented, will assure the following:

- Administrative controls are established to assign departmental responsibilities, authorities, and lines of communication in conformance with the requirements of 10 CFR 50, Appendix B, and the licensee's approved QA program.

- Managers, group leaders, and staff members understand their responsibilities and authorities.

- The above personnel are qualified for the related work.

- Quality assurance audits of offsite support staff activities are conducted satisfactorily and corrective actions for identified deficiencies are completed in a timely manner.

The inspectors interviewed the following Duke Power Company personnel:

Design Engineering
T. Wyke, Chief Engineer
B. Miller, Principal Engineer
L. Snow, Design Engineer II

Quality Assurance
- G. Grier, Corporate QA Manager
- J. Frye, Manager, Audit Division
- J. Effington, QA Supervisor
- G. Bell, QA Supervisor
- J. Barbour, Manager, Operations Division

Nuclear Production
- W. G. Hallman, Manager
- R. Weber, System Engineer, Nuclear Projects
- S. Addison, Associate Engineer

Nuclear Engineering Services
- K. Canady, Manager
- N. Rutherford, System Engineer, Licensing
- L. Parker, Technical Associate

Construction
- T. B. Bright, Engineering Manager
- R. W. Ballard, Construction Engineer
- R. V. Rumfelt, Construction Electrician

The above personnel were interviewed to determine the offsite support staff adequacy. These interviews identified the following:

All employees appeared to understand their responsibilities and authorities and could identify the documents which delineate this information.

In most cases, division and department managers had promulgated written office procedures to their staffs. In some cases, procedures were defined orally, but in all cases, inter-office communication appeared to be satisfactory.

All employees had received training. This training consisted of classroom instruction, simulator training, and reading assignments as well as on-the-job training. Although refresher training is not a corporate policy, there are indications that such a program may be started in the near future.

The majority of the technical staff are degreed engineers. A smaller, but significant, percentage are registered as professional engineers.

The offsite support staff appeared to be interfacing satisfactorily with the onsite staff. Offsite personnel routinely visit the sites to coordinate their work.

The various departments and divisions within the corporate office appeared to be interfacing satisfactorily.

The inspectors reviewed the following quality assurance audits to verify that routine offsite support staff audits were being conducted and that corrective actions were being completed within required time frames:

PS-84-2(PS), Production Support General Office Activities, conducted April 24 - May 16, 1984, issued June 15, 1984.

NP-84-13(GO), Nuclear Production Department General Office Activities, conducted July 23 - August 3, 1984, issued September 4, 1984.

DE-84-7(DE), Design Engineering Department General Office Activities, conducted June 18 - 25, 1984, issued July 23, 1984.

Discussions were held with quality assurance auditors concerning the subject audits and the audit program in general. Audit findings were significant in scope and depth, and corrective action for identified deficiencies was timely and well documented. A master audit schedule existed to ensure adequate coverage of all office departments.

During the review of audit NP-84-13(GO), the inspector identified that this audit was not issued within Technical Specification (TS) time frames. This constitutes a violation of TS, however, the late audit issuance was identified by the Joint Utility Management Audit (JUMA) team. This audit was being conducted during the inspection. The identification of this inability to issue an audit within TS required time frames by JUMA will be corrected by licensee management as required by JUMA. Further inspections by Region II will verify this corrective action.

Within this area, no violations or deviations were identified.

6. Licensee Action on Previously Identified Inspection Findings (92701)

(Closed) Inspector Followup Item 413/84-18-22: Lack of a Program to Control the Use of Aerosols.

The inspector reviewed Material Handling Procedure 3.1, Storage Methods and Areas, Revision 4. This procedure, Paragraph 4.1.5, specifically states, "Commercial type, commonly used aerosol products will not be used in QA Storage Warehouse for any reason." The inspectors walked throughout the QA Warehouse. Aerosols were not evident. The inspectors also noted that these procedural requirements were conspicuously posted on the warehouse door.