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100 Chestnut Street Tower II

December 13, 1984

TO: AL IGONTONIS RP

249-9563

From: Ralph Shell - TVA

858-2477

Waiting DATE
of Report
with

U.S. Nuclear Regulatory Commission
Region II
Attn: Mr. James P. O'Reilly, Regional Administrator
101 Marietta Street, SW, Suite 2900
Atlanta, Georgia 30333

Dear Mr. O'Reilly:

SEQUOYA NUCLEAR PLANT UNITS 1 AND 2 - NRC-OIE REGION II INSPECTION REPORT
58-27/83-31 AND 58-28/83-31

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The subject OIE inspection report dated November 14, 1984 from
J. A. Giesinski to H. G. Harris cited TVA with two Severity Level IV
Violations and one Deviation. Enclosure 1 provides the response to the
items of violation in the subject inspection report. Enclosure 2 provides
the response to the deviation item.

The delay in submittal of this response was discussed with Steve Vance of
your staff in a telephone conversation on December 17, 1984.

If you have any questions, please get in touch with E. H. Hall at
FTS 858-2683.

To the best of my knowledge, I declare the statements contained herein are
complete and true.

Very truly yours,

TRUSSARDI VALLEY AUTHORITY

J. A. Dowse
Nuclear Engineer

Enclosures
as (Enclosures):

Mr. Richard C. DeYoung, Director
Office of Inspection and Enforcement
U.S. Nuclear Regulatory Commission
Washington, D.C. 20545

Records Center
Institute of Nuclear Power Operations
1900 Circle 75 Parkway, Suite 1500
Atlanta, Georgia 30339

as (Enclosures):

REC FR ARS, 1520 CRT2-C
E. L. Abernethy, Sequoyah
J. W. Anderson, 255 SPB-E
E. A. Bellin, 179 NPB-M
E. H. Calver, 2498 IEB-E
E. J. Ford, Sequoyah-NRC

8502060114 850117
PDR ADOCK 05000327
G PDR

J. W. Hutton, 7760 CRT2-C
E. J. Mullin, 1350 CHSS-C (2)
J. A. Ruelster, W10C126 C-E
E. S. Sanger, RT1233 C-E
F. A. Szurpanski, 228 461B-C

COORDINATED: SM/Boogers

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ENCLOSURE 1

RESPONSE TO NOTICE OF VIOLATION
IN J. A. OLSHINSKI'S LETTER TO H. G. PARRIS
DATED NOVEMBER 14, 1984
NRC-OIE INSPECTION REPORT NUMBER
50-327/84-31 AND 50-328/84-31

Items 327, 328/84-31-04

Technical Specification Section 5.8.1.f requires written procedures to be established, implemented and maintained for the fire protection program implementation. FSAR Section 9.5.1.4 states that fixed water fire suppression systems are periodically tested in accordance with the applicable National Fire Protection Association (NFPA) Code requirements to ensure operability and are inspected at regular intervals to ensure that all equipment is in good operating condition. NFPA Section 6012 (1973 edition) states that fire protection system strainers are to be thoroughly inspected after each operation or flow test and cleaned if necessary with routine inspection and cleaning performed annually, and more frequent if necessary, based on experience.

Contrary to the above, the strainers in the supply piping to the fire protection automatic water spray and sprinkler systems are not included in a periodic maintenance inspection and cleaning program.

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

1. Admission or Denial of the Alleged Violation

TVA admits the violation as stated.

2. Reason for the Violation if Admitted

The omission of a periodic maintenance inspection and cleaning program for strainers in the supply piping to fire protection automatic water spray and sprinkler systems was caused by an oversight of the requirement during the initial preparation of fire protection procedures. Reviews subsequent to the initial preparation of the program by TVA, BEC, and other outside groups did not identify the deficiency.

3. Corrective Steps Which Have Been Taken and Results Achieved

An interim program was initiated and completed in November 1984. This program called for the inspection and cleaning of six (6) strainer assemblies, some of which have been in operation for approximately seven (7) years. An assembly is considered to consist of two (2) basket strainers, and strainer housing and its flashback pockets. Those inspected were 1) the four (4) headers entering unit 2 Reactor Building, 2) the header for train "B" ABGTS charcoal filter housing, and 3) the header for unit 2 containment purge charcoal filter housing. All assemblies were in good condition and the total quantity of foreign material removed from all the strainers was approximately 78 grams. The material was uniformly dispersed between the six (6) assemblies and there was no noticeable reduction of waterflow capabilities of these strainers.

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4. Corrective Steps Which Will Be Taken to Avoid Further Violations

Sequoyah is in the process of implementing an inspection, maintenance, and test program for the high pressure fire protection system strainers located in the flow paths between the fire pumps and the flow control valves for various sprinkler and water spray systems supplying safety-related areas. The performance of this program will be on an annual basis with the following exceptions:

- A. Those strainers installed immediately upstream of the flow control valves supplying the Reactor Building water fire suppression systems will be inspected every 18 months, or during each refueling outage, unless inspected during the previous six (6) months.
- B. Where strainers are provided with either differential pressure switches, or gauges, allowing determination of the differential pressure across the strainers, the differential pressure will be determined once every six (6) months (subject to the note described in both unit 1 and unit 2 Technical Specifications Surveillance Requirement 4.7.11.6) in conjunction with waterflow through the strainer sufficient to provide a reliable indication of restriction. If excessive differential pressure is indicated, based upon the manufacturer's recommendations, the strainers will be internally inspected and cleaned as necessary.

A detailed review has been made of the requirements of the FSAR and NFPA Code, and, based on this and the findings of the inspections made above, disassembly for inspection and cleaning of the strainers following each actuation of the flow control valve is not necessary, and would be an undue burden and expense. Therefore, only the inspections stated above will be done on a routine basis.

5. Date When Full Compliance Will Be Achieved

The inspection program stated above will be implemented by April 1, 1985. Initial inspection of the strainers for the unit 1 Reactor Building systems will be completed before startup, following the unit 1 cycle 3 refueling.

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Technical Specification Section 6.8.1.a requires written procedures to be established, implemented and maintained covering the applicable procedures listed in Appendix A of Regulatory Guide 1.33. Regulatory Guide 1.33 Appendix A requires radiation protection procedures. Sequoyah's Radiation Control Instruction RCI-14 Section V.A, states that respirator protection is required for conditions involving airborne contamination and that workers must have a current whole body count, respiratory fit and training and a current medical review.

Contrary to the above, a number of fire brigade members who may be required to respond to airborne contamination areas in the event of a fire, are not respiratory qualified due to the lack of respirator fit and training or out of date medical review or whole body count.

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

1. Admission or Denial of the Alleged Violation

TVA admits the violation occurred.

2. Reason for the Violation if Admitted

The Radiological Hygiene Program at Sequoyah Nuclear Plant (SNP) requires that any employee who plans on entering a bioassay area is required to have successfully completed respirator training, a respirator fit, and to receive a whole body count annually. To maintain respirator qualification, an employee must receive a medical reevaluation on an annual basis. These requirements are not unique to fire brigade members.

Fire brigade members are required to receive a medical examination on an annual basis, which is different than, and goes above and beyond, the medical reevaluation for respirator fit. PHYSI-13, which governs qualifications for fire brigade members, allows for a 25-percent extension to the annual medical examination requirement. Those individuals noted by the NRC Inspector were within the 25-percent extension allowed.

However, a noncompliance did occur in that two individuals noted by the inspector had entered a bioassay area without current whole body counts as required by RCI-11, "Bioassay Program." The supervisors of these individuals were notified by Health Physics before the expiration of the annual whole body count due date, but failed to ensure that the individuals' work assignments did not require access to a bioassay area after their annual dates expired.

3. Corrective Steps Which Have Been Taken and Results Achieved

The individuals involved have updated their health physics requirements and are now in compliance with the Radiological Hygiene Program. The section supervisor for the individuals involved is aware of the

requirement to inform personnel about health physics requirements, and has assigned a person in his section to ensure that those needing health physics updates are informed approximately two months before expiration date. This is being accomplished by issuance of a memorandum to that individual, requesting acknowledgment under return signature that he or she is cognizant of their upcoming health physics requirement expiration date.

4. Corrective Steps to Avoid Further Violations

The procedure for addressing fire brigade qualification criteria will be revised to delete the 25-percent extension on fire brigade medical examinations. Since fire brigade personnel normally have their annual medical examination and respirator medical reevaluation done simultaneously, this should preclude any confusion in meeting both health physics and fire brigade medical criteria. The revision to PERSI-13 will be completed by January 15, 1985.

5. Date When Full Compliance Will Be Achieved

As of December 10, 1984, all personnel involved were in full compliance with both health physics and fire brigade criteria.

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ENCLOSURE 2

**RESPONSE TO NOTICE OF VIOLATION
IN J. A. OLSEHNSKI'S LETTER TO H. G. PARETS
DATED NOVEMBER 14, 1984
NRC-OIE INSPECTION REPORT NUMBER
50-327/84-31 AND 50-328/84-31**

Deviation Items 327, 328/84-31-C2

FSAR Section 6.2.4.2.2 states that the safeguard position of automatic containment isolation valves is indicated by status lights in the main control room.

Contrary to the above, the containment isolation valves for the fire protection piping, which penetrates the containment are not provided with status lights in the control room.

Corrective Action

There are only two high pressure fire protection containment isolation valves; namely, 26-240 and 26-243, as noted in the FSAR Section 6.2.4.2.2 Table 6.2.4-1. As stated in TVA's response to Regulatory Guide 1.97, these valves will have remote position indication installed in the main control room.

Valves 26-241, 242, and 245 are secondary containment isolation valves providing isolation for lines which penetrate the shield building into the annulus. These valves are ASME Section III, Category A or B, active valves, and, as such, are stroked-tested on a quarterly basis or after maintenance and/or repair work by performance of Surveillance Instruction (SI)-166.1 or SI-166.6. This surveillance also verifies the operability of the valve position indication lights on the local control panel. SI-167 verifies that the valves are in their correct position once every 31 days in accordance with technical specification surveillance requirement S.R.4.7.11.1.B.

Action to Avoid Further Violation and Dates Action Will be Complete

The actions planned per Regulatory Guide 1.97 will satisfy the requirement for remote position indication in the main control room, and should be completed within the time frames outlined in TVA's commitment to this Regulatory Guide. Further, the FSAR will be revised to clarify the wording in Section 6.2.4.2.2, in the next annual FSAR update scheduled to be submitted to the NRC in April 1985.

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