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U. S. NUCLEAR REGULATORY COMMISSION

OFFICE OF INSPECTION AND ENFORCEMENT

REGION I

IE Inspection Report No: 50-219/75-07 Docket No: 50-219

Licensee: Jersey Central Power and Light Company License No: DPR-16

Madison Avenue at Punch Bowl Road Priority: --

Morristown, New Jersey 07960 Category: C

Safeguards Group: --

Location: Oyster Creek, Forked River, New Jersey

Type of Licensee: 3WR (GE) 1930 MWt

Type of Inspection: Routine, Announced, QA Implementation

Dates of Inspection: March 10-14, 1975

Dates of Previous Inspection: February 7, 1975

Reporting Inspector: W. A. Kuhlman 10/28/75
W. A. Kuhlman, Reactor Inspector DATE

Accompanying Inspectors: D M Sternberg for 11/18/75
E. G. Greenman, Reactor Inspector DATE

R B Glasscock 10-28-75
R. B. Glasscock, Reactor Inspector DATE

J T Smith 10-29-75
J. T. Smith, Reactor Inspector DATE

Other Accompanying Personnel: E J Brunner 11/21/75
E. J. Brunner, Branch Chief DATE

D M Sternberg for 11-18-75
D. L. Caphton, Senior Reactor Inspector DATE

Reviewed By: E.C. McCabe, Jr. 11/21/75
E. C. McCabe, Jr., Senior Reactor Inspector DATE
Nuclear Support Section, Reactor Operations Branch

B/722

SUMMARY OF FINDINGS

I. Enforcement Action

A. Infractions

1. Contrary to Criterion VI, Appendix B, 10 CFR 50, required document control measures were not provided for as-built drawings and site issued documents, and as-built drawings were not distributed to the location where Generation Engineering personnel regularly perform decision making engineering work requiring use of as-built drawings. (Details, Section II, Paragraph 6c)

2. Contrary to Criterion V, Appendix B, 10 CFR 50, the 12 safety-related job orders inspected did not receive required QA Specialist processing. (Details, Section II, Paragraph 7b)

3. Contrary to Criterion XI, Appendix B, 10 CFR 50, required control over routine post-maintenance testing definition, review, and documentation requirements was not provided. (Details, Section II, Paragraph 7d)

4. Contrary to Criterion VI, Appendix B, 10 CFR 50:

   a. Eight of twenty-five surveillance procedures sampled did not receive required PORC review prior to their implementation. (Details, Section II, Paragraph 9c)

   b. An unapproved, draft procedure was used to obtain a radioactive offgas sample. (Details, Section II, Paragraph 13b)

5. Contrary to Criterion V, Appendix B, 10 CFR 50, procurement documents for chemicals had not received required QA review. (Details, Section II, Paragraph 10b(3))

6. Contrary to Criterion XV, Appendix B, 10 CFR 50, the Condensate Transfer System was returned to service with nonconformances unresolved. (Details, Section II, Paragraph 12a)

7. Contrary to Criterion V, Appendix B, 10 CFR 50, a temporary procedure change was not subsequently reviewed and approved as required. (Details, Section III, Paragraph 3d)

B. Deficiencies

1. Contrary to Criterion V, Appendix B, 10 CFR 50, specified procedures were not being used to train non-licensed personnel. (Details, Section I, Paragraph 3a)

2. Contrary to Criterion II, Appendix B, 10 CFR 50, certain persons performing testing following maintenance werenot certified as required. (Details, Section I, Paragraph 3c)

3. Contrary to Section 4, Appendix A, 10 CFR 55, written examinations of operators were not given when required. (Details, Section I, Paragraph 6c)

4. Contrary to Criterion V, Appendix B, 10 CFR 50, required definition of equipment and component safety classification had not been accomplished. (Details, Section II, Paragraph 4)

5. Contrary to Criterion II, Appendix B, 10 CFR 50, required segregation and handling of the 12 safety-related maintenance job orders inspected was not established. (Details, Section II, Paragraph 7c)

6. Contrary to Criterion VIII, Appendix B, 10 CFR 50, required identification and control was not maintained over safety-related material. (Details, Section II, Paragraph 7f)

7. Contrary to Criterion III, Appendix B, 10 CFR 50, design bases incorporation, design interface control, and design organization coordination has not been provided for modifications. (Details, Section II, Paragraph 8a, c, d)

8. Contrary to Criterion V, Appendix B, 10 CFR 50, log entries required by operating procedures were not made. (Details, Section III, Paragraph 3a)

II. Licensee Action on Previously Identified Enforcement Items

Not inspected.

III. Unusual Occurrences

None identified.

IV. Other Significant Findings

A. Current Findings

1. Plant Operations

The plant was operating at 1,866 MW(t)-655MW(e) during this inspection. Nominal stack gas and off-gas release rates were 25,900 uCi/sec and 463,000 uCi/sec respectively. The annual refueling outage was scheduled to begin on or about March 30, 1975.

2. Acceptable Areas

These are areas which were inspected on a sampling basis and findings did not involve an Item of Noncompliance, Deviation, or an Unresolved Item.

a. General Employee Training in the areas of radiological and non-radiological Health and Safety Training. (Details, Section I, Paragraphs 2a and 2e)

b. Replacement Training for Licensed Operators in all areas audited. (Details, Section I, Paragraphs 5a, 5b, 5c and 5d)

c. Licensed Operator Requalification Training in the areas of Completed Program Items and Licensed Operator Interviews. (Details, Section I, Paragraphs 6a and 6b)

d. Audits in all areas reviewed. (Details, Section II, Paragraphs 5a, 5b and 5c)

e. Document Control in the area of Plant Procedure Control. (Details, Section II, Paragraph 6a)

f. Surveillance Testing in the areas of personnel Interviews and Approved Procedure Review. (Details, Section II, Paragraphs 9d and 9e)

g. Procurement Control, Receiving Inspection and Storage in the areas of Personnel, Inspection of Procured Items, Nonconforming Items at Receipt, and Storage. (Details, Section II, Paragraphs 10a, 10c, 10d and 10e)

h. Chemistry Control in the area of Primary Water Samples. (Details, Section II, Paragraph 13a)

i. Records in the area of Retrievability. (Details, Section II, Paragraph 14a)

j. Housekeeping with respect to Current Conditions. (Details, Section II, Paragraph 15a)

k. Procedure Review-During and Subsequent to Inspection with respect to procedures 2008, 5001 and 6007. (Details, Section II, Paragraph 16a)

l. Shift composition. (Details, Section III, Paragraph 2a)

m. General Office Review Board qualifications and makeup. (Details, Section III, Paragraph 2b)

n. Shift Turnover. (Details, Section III, Paragraph 3)

3. Unresolved Items

These are items for which more information is required in order to determine whether the items are acceptable or Items of Noncompliance.

a. Lack of appropriate means of evaluating the effectiveness of some areas of General Employee Training. (Details, Section I, Paragraph 2b, 2c and 2f)

b. Lack of formal procedural requirements to reflect current licensee practices with regards to welder certification/ qualification when conditions of limited accessibility/ visibility are encountered. (Details, Section I, Paragraph 4a)

c. All Quality Assurance audit personnel have not completed the entire initial training curriculum. (Details, Section I, Paragraph 7a)

d. Lack of description of the methods/requirements with respect to maintaining the qualifications/certification of Quality Assurance Audit personnel. (Details, Section I, Paragraph 7b)

e. Completion of the revision of procedure 105 to furnish guidance for determining when step-by-step maintenance procedures are required. (Details, Section II, Paragraph 7e)

f. Completion of Housekeeping procedures incorporating requirements of ANSI N45.2.3. (Details, Section II, Paragraph 15b)

g. Definition of Standing Orders. (Details, Section III, Paragraph 3c)

h. Station Superintendent review and authorization of Master Surveillance Schedule. (Details, Section II, Paragraph 9b)

i. Completion of required procedures for Quality Assurance Manual. (Details, Section II, Paragraph 3a)

j. Conformance of record storage facilities to ANSI N45.2.9-1974. (Details, Section II, Paragraph 14b)

k. Procedural control over 10 CFR 50.59 safety evaluations. (Details, Section II, Paragraph 8e)

4. Licensee Identified Infractions

The following licensee identified Infractions were examined. No response is required for these items at this time.

a. Quality Assurance Training. (Details, Section I, Paragraph 2d)
b. Job Order Form Control. (Details, Section II, Paragraph 7g)
c. Portable Test and Measuring Equipment Calibration. (Details, Section II, Paragraph 11)

Management Interview

An exit management interview was conducted on-site at the completion of the inspection with the following licensee attendees.

Mr. J. T. Carroll, Jr., Station Superintendent
Mr. R. M. Dube, Site Quality Assurance Supervisor
Mr. I. R. Finfrock, Jr., Vice President - Generation
Mr. D. P. Gaines, Manager - Operational Quality Assurance
Mr. E. J. Growney, Technical Engineer
Mr. J. E. Menning, Staff Engineer
Mr. D. L. Reeves, Jr., Chief Engineer
Mr. D. A. Ross, Manager - Generating Stations - Nuclear
Mr. E. D. Scalsky, Radiation Protection Supervisor
Mr. R. F. Swift, Maintenance Engineer

The following summarizes the items discussed:

A. General Employee Training. (Details, Section I, Paragraph 2)

B. Non-Licensed Technician/Repair Personnel Training. (Details, Section I, Paragraph 3)

C. Welder Performance Qualification. (Details, Section I, Paragraph 4)

D. Replacement Training for Licensed Operators. (Details, Section I, Paragraph 5)

E. Licensed Operator Requalification Training. (Details, Section I, Paragraph 6)

F. Quality Assurance Personnel Training. (Details, Section I, Paragraph 7)

G. Selection and Qualification of Personnel. (Details, Section II, Paragraph 2)

H. Quality Assurance Manual Review. (Details, Section II, Paragraph 3)

I. Safety Systems Boundaries. (Details, Section II, Paragraph 4)

J. Audits. (Details, Section II, Paragraph 5)

K. Document Control. (Details, Section II, Paragraph 6)

L. Plant Maintenance/Preventative Maintenance. (Details, Section II, Paragraph 7)

M. Design Changes, Modifications, Tests and Experiments. (Details, Section II, Paragraph 8)

N. Surveillance Testing and In-Service Inspection. (Details, Section II, Paragraph 9)

O. Procurement Control, Receiving Inspection, and Storage. (Details, Section II, Paragraph 10)

P. Calibration. (Details, Section II, Paragraph 11)

Q. Control of Nonconformances. (Details, Section II, Paragraph 12)

R. Chemistry Control. (Details, Section II, Paragraph 13)

S. Records. (Details, Section II, Paragraph 14)

T. Housekeeping. (Details, Section II, Paragraph 15)

DETAILS

GENERAL SECTION

1. Persons Contacted

The following list of persons were those contacted during the course of the inspection conducted and documented as Section I, Section II and Section III of this report.

Jersey Central Power and Light Company

Mr. B. E. Ard, Control Room Operator "A"
Mr. B. A. Bader, Quality Assurance Engineer
Mr. R. Baran, Engineering Assistant
Mr. J. E. Behm, Quality Assurance Specialist
Mr. H. L. Callahan, Control Room Operator "A"
Mr. J. T. Carroll, Jr., Station Superintendent
Mr. B. J. Cooper, Shift Foreman
Mr. C. C. Dekker, Control Room Operator "A"
Mr. C. Drew, Welding Supervisor
Mr. R. M. Dube, Site Quality Assurance Supervisor
Mr. I. R. Finfrock, Jr., Vice President - Generation
Mr. S. H. Fuller, Quality Assurance Specialist
Mr. D. P. Gaines, Manager - Operational Quality Assurance
Mr. E. J. Growney, Technical Engineer
Mr. C. M. Heale, Chemical Technician
Mr. G. Hicks, Shift Foreman
Mr. T. L. Johnson, Instrument and Electrical Foreman-Nuclear
Mr. D. A. Kaulback, Radiation Protection Foreman
Mr. C. B. Konta, Chemical Foreman
Mr. D. W. MacFarlane, Control Room Operator "B"
Mr. J. P. Maloney, Operations Supervisor
Mr. J. E. Menning, Staff Engineer
Mr. J. R. Molnar, Senior Staff Assistant (Training Coordinator)
Mr. J. Moyer, Purchasing Staff
Mr. W. J. Muehlasen, Mechanical Maintenance "A" - Nuclear
Mr. W. J. Neumann, Chemical Technician
Mr. E. F. O'Connor, Supervisor - Generation Projects
Mr. J. R. Pelrine, Chemical Supervisor
Mr. E. W. Rayment, Chemical Technician
Mr. D. L. Reeves, Jr., Chief Engineer
Mr. E. I. Riggle, Maintenance Supervisor
Mr. E. H. Rodies, Jr., Engineering Assistant
Mr. E. Roessler, Instrument and Electrical Foreman - Nuclear
Mr. D. A. Ross, Manager - Generating Stations - Nuclear
Mr. E. D. Scalsky, Radiation Protection Supervisor
Mr. C. J. Silver, Control Room Operator "B"
Mr. J. E. Skorka, Manager - Generation Maintenance
Mr. R. F. Wenz, Control Room Operator "A"
Mr. J. R. Young, Shift Foreman

2. Definitions

When used in this report (50-219/75-07), the following definitions apply:

a. Operational Quality Assurance Plan (OQAP) - The collection of materials submitted to the Division of Reactor Licensing as a ninety-five page document identified as FSAR Amendment 71, including Revisions 1 and 2 thereto.

b. Operational Quality Assurance Manual - Four (4) volumes of materials, one of which contains item "a" above. The other three contain the implementing procedures.

c. Operational Quality Assurance Program - The activities controlled by or defined by items "a" and/or "b" above.

DETAILS

SECTION I - TRAINING

1. Persons Contacted and Definitions

See GENERAL SECTION

2. General Employee Training

The inspector reviewed the training provided for regular employees with respect to the requirements of 10 CFR 19, ANSI N18.1 - 1971, and 10 CFR 50, Appendix B, Criteria II, V and XVII. The following based upon discussion held with and documentation furnished by licensee personnel, summarizes the inspector's findings.

a. Radiological Health and Safety Training

The licensee's Employee Orientation Program requires that personnel receive training and written quizzes covering the following subjects:

(1) health protection problems associated with radiation,
(2) methods/techniques to limit/minimize exposure,
(3) dose/exposure limits delineated in 10 CFR 20 and the licensee's administrative limits,
(4) reports available pursuant to 10 CFR 19,
(5) responsibility to report conditions which could cause unnecessary exposure to radiation or violations of Commission regulations, and
(6) purpose and functions of protective devices and requirements for and use of protective clothing.

The inspector identified no inadequacies in this area of training.

b. Facility Contingency Procedure Training

Employees have received documented instructions, including the appropriate warning signals and actions to take, for both radiation emergency conditions and fires on site. (See also Detail 2f of this Section)

c. Facility Access Control and Security Training

The training in this area consisted of instructions in the following topics:

(1) designated security areas,
(2) vital areas,
(3) identification requirements,
(4) site access control,
(5) external door policy,
(6) parking controls,
(7) key control,
(8) searchs, and
(9) material access control.

The effectiveness of this training was not evaluated. (See Detail 2f of this Section)

d. Quality Assurance/Control Training

During their discussion with various plant personnel during the conduct of the inspection (see also Details, Section II, Paragraph 7a) the inspectors identified some individuals, necessary for proper implementation of the Quality Assurance Program, who were insufficiently knowledgeable in the requirements delineated in the implementing procedures of the Operational Quality Assurance Program.

This lack of proficiency is contrary to the requirements of 10 CFR 50, Appendix B, Criterion II and the licensee's Operational Quality Assurance Program.

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 licensee's Operational Quality Assurance Plan (page 23 of 95, Revision 0, dated 12/14/73) states in part: "The Manager - Operational Quality Assurance.....also ensures that quality assurance indoctrination is given to Generation Department Personnel.....whose job responsibility will affect quality."

The lack of sufficient program awareness was identified by the licensee during his internal audit program (QAL-75-74) and resulted in an inter-office memo from the Vice President, Generation to, among others, the Oyster Creek Station Superintendent, dated March 10, 1975.

As a result of that memo, the Oyster Creek site personnel had initiated a training program attended by sixty-four non-supervisory station personnel as of March 14, 1975. Where an inspector identified an individual who was not familiar with the program, a check with the licensee's documentation of training session attendance indicated that, in all cases checked, the person had not (as of March 14, 1975), attended the training session instituted in response to the memo. Training for those individuals who had not yet attended was scheduled.

Since this Infraction level Item of Noncompliance was identified and corrective action initiated prior to identification by the inspectors, no additional response is required for this item at this time. The effectiveness of the licensee's instituted actions will be evaluated during future IE:I inspections.

e. Health and Safety Training

Documentation indicated that Safety Meetings are scheduled monthly on a plant-wide basis. In addition, selected station personnel had received the further indoctrination listed below.

(1) First Aid Training had been given using the STANDARD MULTI-MEDIA course of instruction from the American National Red Cross.

(2) Fire fighting training had been given for members of the station Fire Brigade. The one day course, given by the Monmouth County Police and Fire Academy, consisted of theoretical as well as practical training.

The inspector identified no inadequacies with this area of training.

f. Effectiveness Evaluation

Currently only two (2) areas of General Employee Training (see Details, Section I, paragraphs 2a and 2e), have documented evaluations of the effectiveness of training as recommended in the licensee's committed training standard (ANSI N18.1 - 1971, Section 5.5). The licensee stated that appropriate means of evaluating the effectiveness of the training in the other areas of General Employee Training would be specified and included in appropriate instructions/ procedures. Until the licensee's proposed actions have been completed, this is an Unresolved Item.

3. Non-Licensed Technicians/Repair Personnel Training

This area of training was reviewed with respect to requirements of 10 CFR 50, Appendix B, Criteria II, V, and XVII; ANSI N18.1 - 1971; and ANSI N45.2.6 - 1973 as modified and endorsed by Regulatory Guide 1.58, and the OQAP. Summarized below are the results of that review based on documentation furnished by and discussion held with the licensee personnel.

a. Training Program

10 CFR 50, Appendix B, Criterion V requires in part that: "Activities affecting quality be prescribed by documented instructions and procedures....and shall be accomplished in accordance with these instructions, procedures..."

The Operation Quality Assurance Plan, Section V, states in part that, "The Oyster Creek Superintendent is responsible for ensuring that instructions and procedures....are....implemented."

Contrary to the above, training of Nuclear Generating Station personnel was not being conducted in accordance with procedure 102, Revision 0, dated July 18, 1974 - TRAINING OF NUCLEAR GENERATING STATION PERSONNEL which states as a requirement, in section 5.1, that "Oyster Creek site training is conducted in accordance with the detailed procedures specified in the Oyster Creek Training Manual."

This Deficiency level Item of Noncompliance was corrected by the licensee changing the procedure requirements to reflect current Oyster Creek Station training requirements/practices as documented in Detail 3b below. Since this action was completed prior to the completion of the inspection, no additional response is required at this time.

b. Current Training

Procedure 102, referenced in Detail 3a above, was modified to require training in accordance with the Job Qualification Review sheets which are prepared on each individual specifying the items for which training is to be provided.

While the sheets are prepared for each individual, the requirements are generic for a particular job classification. All classification sheets reviewed, required and documented the completion of the following training:

(1) coverage of technical objectives of the job,
(2) inclusion of applicable codes and standards indoctrination,
(3) indoctrination in applicable procedures,
(4) job related health physics training,
(5) demonstrated proficiency in the use of tools and equipment required for the job position,
(6) experience in the tests and inspection the individual is required to perform,
(7) familiarity with inspection and measuring equipment used in the position, and
(8) training in verification that equipment is in proper condition for use.

By documentation other than the Job Qualification Review sheets and by direct questioning of an inspector selected maintenance employee, the inspector also verified that the following training is also conducted;

(1) vendor taught schools (e.g., MSIV two day school, computer maintenance school),

(2) indoctrination in reasons and methods for procedure change and the requirements for procedure adherence.

c. ANSI N45.2.6 Implementation

The licensee states, in part, in his Operational Quality Assurance Plan Section II (page 24 of 95, Revision 1, dated 9/30/74) that he "shall utilize the guidance in .... ANSI N45.2.6 - 1973....."

As noted in Detail 3b above, the licensee currently satisfies some of the requirements of this standard. However, the licensee had not defined Levels of Capability for personnel who must meet the requirements of ANSI N45.2.6 by virtue of their job position. The licensee has not issued the required Certificates of Qualification for personnel performing the inspection, examination and testing function within the definitions of the Standard. This failure to prescribe and accomplish training as required by OQAP, Section II is a Deficiency level Item of Noncompliance with 10 CFR 50, Appendix B, Criterion V.

4. Welder Performance Qualification

The inspector reviewed the licensee's records with respect to the pertinent requirements delineated in Section IX of the ASME Boiler and Pressure vessel Code and Criteria II, V, IX and XVII of Appendix B to 10 CFR 50. The Oyster Creek Station uses welders and welding procedures supplied and certified by the Jersey Central Power and Light Company Generation Maintenance Department. In addition to the requirements listed above, the licensee's procedure 7006, Revision 0, dated 10/24/74 - GENERATION MAINTENANCE CONTROL OF SPECIAL PROCESSES was used as an inspection standard. The results are summarized below.

a. Documentation and Records

A performance qualification program is established by the referenced procedure and included the requirements for the following:

(1) a record of the procedures, including the essential variables, under which welders are examined and the results of the examinations;
(2) each qualified welder is assigned an identifying number (employee number) which is used to identify his work;

(3) the method whereby welding procedures are qualified was delineated and followed for items audited;
(4) retest requirements were delineated; and
(5) records to be used for the determination of the current status of the qualification of welders on various procedures.

The licensee stated that in cases of limited accessibility/visibility encountered in the past, additional testing of welders under simulated or actual welding conditions had been accomplished. The licensee's procedures, however, did not require such additional testing. The licensee stated that procedure 7006 would be modified to reflect the current practices and to formalize these practices as requirements. Until the licensee's proposed actions have been completed, this is an Unresolved Item.

5. Replacement Training for Licensed Operators

The inspector reviewed the training program to verify that: the curriculum covered the examination subjects listed in 10 CFR 55.21 and 55.22; the practical training records and other documentation were available to support an application in accordance with 10 CFR 55.10(a)(6); other aspects of the training met the requirements set forth in ANSI N18.1 - 1971. The following summarizes the results of that review.

a. Curriculum

During the training program, all license candidates receive training in both RO and SRO examination subjects including:

(1) principles of reactor operation;
(2) features of facility design;
(3) general operating characteristics;
(4) instruments and controls;
(5) safety and emergency systems;
(6) standard and emergency operating procedures;
(7) radiation safety and control;
(8) reactor theory;
(9) radioactive material handling, disposal and hazards;
(10) specific operating characteristics;
(11) fuel handling and core parameters; and
(12) administrative procedures, conditions and limitations.

b. On-the-Job Training

On-the-job training is obtained and documented both during normal operation of the site reactor and during transients, drills, and abnormal operating conditions at an offsite simulator.

c. Evaluation

Candidates are evaluated by written examinations and quizzes, oral examinations and walk-throughs, and by practical operations demonstrations.

d. Documentation

The documentation reviewed encompassed at least the following:

(1) details on the courses of instruction given;
(2) course attendance records;
(3) simulator training received; and
(4) records of startup and shutdown experience.

The inspector identified no inadequacies in the items selected for audit.

6. Licensed Operator Requalification Training

The NRC stated in a letter to the licensee dated November 13, 1974 that the revised Oyster Creek Nuclear Generating Station requalification program for licensed operators and senior operators submitted on November 6, 1974 met the requirements of 10 CFR 50.54(i-1) and 10 CFR 55, Appendix A. The licensee's referenced program was the basis used for the inspection of this area of training.

a. Completed Program Items

(1) Personnel have been assigned to administer the program.

(2) Lecture schedules are promulgated.

(3) Systems have been established by which management evaluates program participants.

(4) Reactivity control manipulations are being made as required by the program.

(5) Changes to systems, procedures, and Technical Specifications are being reviewed.

(6) Emergency and abnormal procedures are being reviewed as required.

(7) During the first cycle, all licensed personnel were required to either attend all lectures, or if absent, make up the lecture by reviewing lecture material and discussing the material with either on-shift supervisory personnel or the technical staff. All licensed operators had either attended the required lectures or participated in required makeup actions.

(8) The program requires at least 60 hours of lectures per year. The licensee's records indicated the required minimum had been exceeded.

(9) The program states that licensed personnel, whose job assignments are not directly related to plant operations will attempt to actively participate in control room operations an average of 48 hours per year. In those cases (2 out of 4 in this category) where personnel had not met this attempted participation, they had been scheduled for a simulator to fulfill the intent.

The program requires that license holders who score less than 80% in any given annual examination section will participate in lectures on that section. Grades for the first annual examination indicated that fourteen (14) of the twenty (20) license holders scored 80% or less in one or more sections; however, none scored less than 70% overall and the average grade was 86%. One lecture had been given covering a subject for which one or more licensed operators score less than 80% on the annual examination. All persons scoring less than 80% in this area had attended the lecture if it had been presented to their shift.

b. Licensed Operator Interviews

The inspector also verified that participation was in accordance and comensurate with the licensee records by direct interviews with eight (8) licensed operators selected by the inspectors. In addition to verification of the licensee's documentation, the following consensus opinions were expressed by those operators interviewed:

(1) the periodic quizzes were representative of the materials covered during the lecture;
(2) the annual examination was equal in depth and scope to the previously taken Commission administered examination; and
(3) the program, as currently implemented, was keeping them "abreast" of current plant experiences, procedure changes, and system problems.

The inspector identified no inadequacies with the items documented in Details 6a and 6b of this Section.

c. Failure to Meet Program Requirements

10 CFR 55, Appendix A, Section 4 states in part: "The requalification program shall include: a. Annual written examinations..."

The approved operator requalification program states in part:

(1) "The requalification program described herein has been implemented as of December 17, 1973. This date will be considered to be the starting date of each annual cycle."

(2) "An annual written evaluation examination will be given to all licensed operators and senior operators prior to the completion of each annual cycle."

10 CFR 50.54(i-1) states in part: "Notwithstanding the provisions of 50.59 the licensee shall not, except as specifically authorized by the Commission, make a change in an approved operator requalification program by which the scope, time alloted for the program or frequency in conducting different parts of the program is decreased."

None of the twenty (20) licensed operators received an annual examination on or before December 17, 1974.

Operators and senior operators were examined between January 10, 1975 and March 13, 1975. Since the last examination was given and graded prior to the completion of the inspection, no response is required for this particular Deficiency level Item of Noncompliance.

7. Quality Assurance Personnel Training

Training in this area was evaluated with respect to the requirements delineated in 10 CFR 50, Appendix B, Criteria II, V, XVII and XVIII; ANSI N45.2.6 - 1973 and Draft 3, Revision 4 of ANSI N45.2.12 with the results as summarized below.

a. Initial Qualification/Training

The licensee's procedure, 4002, Revision 1, dated 7/15/74 - QUALITY ASSURANCE PERSONNEL EDUCATION AND TRAINING describes current requirements for training in this area. The procedures establishes:

(1) defined Levels of Responsibility;
(2) basic indoctrination requirements; and
(3) provisions to issue Certificates of Qualification where appropriate.

The basic indoctrination section requires indoctrination in "regulatory requirements." While the program was started, the study of the eighteen (18) criteria of 10 CFR 50, Appendix B had not yet been completed. The licensee stated that audits are performed to the Quality Assurance procedures and not directly to Appendix B requirements. The licensee also stated that the required training in this area would be completed prior to November 15, 1975.

Until this training has been completed, this is an Unresolved Item.

b. Maintenance of Certification

Auditors are currently certified by means of a Certificate of Qualification which contained the seven (7) specific items

required by ANSI N45.2.6 - 1973, Section 2.2.4. The certificate indicates a required expiration date of two (2) years. Since all of the auditors have been recently certified, none of them have reached a point where recertification or recertification requirements are necessary. However, since the licensee's commitment to follow the guidance in ANSI N45.2.12 entails describing the methods/requirements for maintenance of certification and for recertification, this is an Unresolved Item until the requirements are included in the licensee's procedures. The licensee stated that these requirements would be specified and included in a procedure prior to July 4, 1976 or approximately 5 months prior to the requirements becoming mandatory.

DETAILS

SECTION II - Q/A PROGRAM IMPLEMENTATION

1. Persons Contacted and Definitions

   See General Section.

2. Selection and Qualification of Personnel

   This area was reviewed in a Special Inspection conducted on October 30, 1974 and documented in report 50-219/74-16. The selection and qualification of Quality Assurance personnel, not included in report 50-219/74-16, was reviewed during this inspection and is documented in Details, Section I, paragraph 7.

3. Quality Assurance Manual Review

   a. Lack of Procedures

      A review of the procedures constituting the Operational Quality Assurance Program was conducted during the periods from February 3-7 and 10-14, and March 3-7, 1975 at the IE:I Regional Office. Our review indicated that, contrary to both 10 CFR 50, Appendix B, Criterion II and Section II of the licensee's Operational Quality Assurance plan, facets of the Quality Assurance program had not been documented by written procedures; in that the following procedures, referenced in the licensees program, were not available.

	Number	Title
(1)	112	Oyster Creek Calibration of Maintenance Test and Inspection Tools, Gauges, and Instruments.
	(a)	Attachment 1 to procedure 112, Test Equipment List for Electrical, Mechanical and Instrument Departments..
	(b)	Attachment 2 to procedure 112, Calibration frequency card.
	(c)	Attachment 3 to procedure 112, Calibration record card.
	(d)	Attachment 4 to procedure 112, Test Equipment History card.
	(e)	Attachment 5 to procedure 112, Calibration Decal.
(2)	2006	Modification, Non-Routine Maintenance and Repair.

(3)	2007	Generation Department Preparation and Submittal of Documents to Regulatory Commissions.
(4)	2008	Inservice Inspections.
(5)	3011	Site Quality Assurance Document Control.
(6)	4003	Operational Quality Assurance Document Control.
(7)	5001	Nuclear Generation Station Organizations and Responsibilities.
(8)	5003	Nuclear Generating Stations Staff Document Control.
(9)	6003	Control of Design, Modification and Non-Routine Repair.
(10)	6007	Fabrication and Installation Control Plans.

Procedures 2006, 2008, 3011, 4003, 5001, 5003, 6003, 6007 and 112, less the attachments, were received prior to the completion of the inspection. Procedure 2007, and the attachments to Procedure 112 have not been received as of March 31, 1975; until further information is received on these, this will be classified as an Unresolved Item. (See also Details, Section II, Paragraph 16)

4. Safety Systems Boundaries

10 CFR 50, Appendix B, Criterion V, states in part: "Activities affecting quality shall be ... accomplished in accordance with these (prescribed) instructions, procedures, or drawings."

10 CFR 50, Appendix B, Criterion II states in part: "The applicant shall identify the structures, systems and components to be covered by the quality assurance program ...."

The Operational Quality Assurance Plan, (OQAP), Section III, states in part: "... The Manager - Generation Engineering is responsible for preparation of the ... System Boundary and Classification Book ...."

The OQAP, Revision 0, dated December 14, 1973, provides, in Section III, for a System Boundary and Classification Book for expanding the Quality Assurance Systems List (QASL) into categories of safety classes using Regulatory Guides 1.26 and 1.29 for guidance and specifying the basic codes, standards and regulatory requirements for each category. The OQAP, Appendix C, Revision 0, dated December 14, 1973, Preliminary List of Procedures Implementing the Quality Assurance Program, lists, as one of the procedures which should be ready and issued by April 1974, the System Boundary and Classification Book.

Contrary to the above, required definition of equipment and component safety classification has not been accomplished: in that the System Boundary and Classification Book was not provided as of March 12, 1975.

This Deficiency level Item of Noncompliance existed from December 1973 until at least March 1975. Discussion with Generation Engineering personnel indicated that, as of March 13, 1975, very little had been accomplished relative to completion of the "book." Although the licensee's internal audit no. 75-59 conducted on February 27, 1975 identified this Item of Noncompliance, existence for over 14 months of no identified progress toward completion of this required classification of safety-related equipment and components removes this item from the category of being a licensee identified noncompliance on which proper corrective action is being taken.

5. Audits

The inspector reviewed activities in this area with respect to the requirements of 10 CFR 50, Appendix B, Criteria V, XVI, XVII and XVIII; ANSI N45.2.12; and Oyster Creek procedures 4008, 4012 and 4013; as well as Section XVIII of the licensee's Operational Quality Assurance Plan. The following, based upon discussions held with and documentation furnished by licensee personnel, summarizes the inspector's findings.

a. Planning and Scheduling

The implementation of scheduled audits and audit requirements was inspected. The personnel designated as responsible for implementing each of the following were interviewed to verify their understanding in the areas of:

(1) approving audit procedures;
(2) determining the need for special training of audit personnel (see also Details, Section I, Paragraph 7);
(3) determining the independence of audit personnel; and
(4) assuring corrective actions are taken for deficiencies identified during internal audits.

b. Completed Audits

Two (2) recently completed audits, WELD ROD CONTROL dated March 6, 1975 and QA IMPLEMENTATION dated March 3, 1975, were reviewed to verify that:

(1) the individual audit plans identified the scope, requirements, activities to be audited, organization to be notified, applicable documents, the schedule and contained written procedures and checklists;
(2) the audit plans were approved as required by procedures;
(3) the audits were performed using procedures which describe items to be checked in sufficient detail to assure a comprehensive and complete audit;
(4) the audits were performed by trained personnel independent of the area being audited;
(5) a course of action was established in accordance with procedures to correct all adverse findings; and
(6) the audit results were document and reviewed by management in the area of audit and by Corporate level Management.

c. Overall Program Evaluation

Personnel designated as responsible in the Operational Quality Assurance Plan were interviewed to determine that Corporate Management has a plan for conducting an evaluation of the effectiveness of the overall Operational Quality Assurance Program.

The inspector had no further questions in the area of Audits.

6. Document Control

The inspector reviewed this area with respect to the requirements delineated in ANSI N18.7; 10 CFR 50, Appendix B, Criterion VI; Oyster Creek procedures 2004, 3011, 4003, 5003 and 7003; as well as Section VI of the licensee's Operational Quality Assurance Plan. The results, based on discussion with and documentation furnished by licensee personnel, are summarized below.

a. Plant Procedure Control

(1) Personnel responsible for the review and approval of procedures were questioned and indicated by their responses that they were cognizant of their responsibilities.

(2) A master list has been established to identify the current revision number of instructions and procedures.

(3) By direct questioning of a (reactor) shift foreman, the inspector verified that:

(a) the control room copy of the Operations Procedures Manual is complete and current;

(b) recalled procedures were removed from the control room copy of the Operations Procedures Manual.

The inspector had no further questions on this area at this time.

b. Operational Quality Assurance Manuals

Two (2) controlled copies of the Operation Quality Assurance Manual (numbers 16 and 18) contained copies of quality assurance/administrative procedures numbers 108, 110 and 112 while two (2) other controlled copies of the Operational Quality Assurance Manual (number 7 and 8) did not contain these procedures. A review of the licensee's control copy issuance records indicated that these three (3) procedures had not been issued for inclusion in the manuals.

These two (2) examples appeared to be isolated failures in the procedure distribution system. However, this item may be reviewed during future IE:I inspections to determine if substantive problems exist.

c. Engineering Drawing Availability

10 CFR 50, Appendix B, Criterion VI requires in part that: "Measures shall be established to control the issuance of documents, such as ... drawings ..." and that those "measures shall assure that documents ... are distributed to and used at the location where prescribed activities are performed."

Section V of the licensee's Operation Quality Assurance Plan (OQAP) states in part that: "The Manager - Generation Engineering is responsible for the issuance and approval of specifications, drawings .... These documents require those performing the work ... to have and follow appropriate instructions, drawings, and procedures. The Manager - Generation Engineering shall also establish a system for maintaining as-built drawings in a current status."

The OQAP, Revision 0 of December 14, 1973, Section VI states that a standard Generation Department procedure for document control includes basic generic controls to be incorporated by each manager, that the Generation Department document control procedure further requires measures to insure documents are available when required, and that the Oyster Creek Superintendent is responsible for the implementation of the document control system for documents received or prepared at the generating station for use in administering, operating, testing, maintaining and modifying nuclear safety-related structures, components, and systems.

Contrary to the above, document control was not provided: in that OQAP Appendix C listed Oyster Creek site Document Control Procedure or an equivalent control over as-built drawings and site issued documents was not provided as of March 12, 1975; and in that a set of as-built engineering drawings was not distributed to the licensee's Morristown Plaza Offices where Generation Engineering Department personnel are regularly engaged in decision making engineering work.

In addition, the system required by the licensee's Operational Quality Assurance Plan, as quoted above, was not established, contrary to both the requirement of his Plan and his commitment to IE:I to establish such a system on or about January 1, 1975 as documented in report 50-219/74-18, Management Interview section, item D.

Details, Section II, Paragraph 8b also documents drawing control inadequacy.

This is an Infraction level Item of Noncompliance.

7. Maintenance

The overall maintenance activity was evaluated to determine familiarity of personnel with the Operational Quality Assurance Program implementing procedures and to determine the status of the implementing procedures with respect to completeness and implementation.

a. Knowledge of Procedures

Through discussions with key supervisory personnel and the review of several maintenance items that were either completed or currently in progress, the inspector determined that:

(1) there was a general lack of understanding of the Operational Quality Assurance Program as it related to the maintenance activity;
(2) there was no demonstration of a conscious effort by either management or working personnel to read, understand and/or comply with the procedures implementing the Operational Quality Assurance Program; and
(3) there was an internal quality assurance department audit, documented in Audit Report 75-59 dated 2/27/75, which also indicated that personnel in the Maintenance Department were unfamiliar with the implementing procedures of the Operational Quality Assurance Program.

Specific examples to illustrate the above statements are included in Details, Section II, Paragraphs 7b, 7c, 7e, 7f and 12 of this report.

The licensee corrective actions to date, and the IE:I disposition of this item is documented in Details, Section I, Paragraph 2d of this report.

b. Quality Assurance Review of Job Orders

Instruction SQA-1-74-G-004, dated 10/31/74, states in part in paragraphs 3.2, 3.2.1 and 3.2.1.1 that: The QA Specialist will be responsible for the following .. review daily Job Orders at the start of each shift and discuss planned activities on QA related jobs .... Log QA related jobs in the inspection log including the name of the job or system, the present plans and nature of the work to be done."

The twelve (12) QA related Job Orders listed below, issued during February 1975, were reviewed by the inspector with respect to the quoted requirements of SQA-1-74-G-004.

Job Order # and Date	Date Work Done	Subject
(1) 8635 2/01/75	2/03/75	hydraulic snubber #846 on elv. 75' leaking.
(2) 8545 2/03/75	2/03/75	#2 Diesel Gen. cooling temp. oscillated between 158 & 184 ^{o}F
(3) 8575 2/28/75	3/03/75	Core Spray System #1 air line hanger elv. 51'
(4) 8567 2/08/75	2/08/75	"A" Rx Feedwater Pump flow control valve

(5) 8586	2/11/75	2/13/75	Emergency Service Water pump
(6) 8611	2/11/75	2/21/75	Drywell-Torus pressure recorder
(7) 8618	2/16/75	2/19/75	Area Radiation Monitor RO 14B-3
(8) 8626	2/17/75	2/19/75	Fuel Pool filter
(9) 8627	2/17/75	2/20/75	Reactor Manual Control System
(10) 8634	2/17/75	2/19/75	Fuel Pool filter
(11) 8648	2/17/75	2/28/75	#2 Core Spray System
(12) 8682	2/17/75	2/18/75	Control Rod Drive pump motor

The review of the above Job Orders indicated that none of the twelve (12) selected had been logged as required by the quoted section of SQA-1-74-G-004. In response to a direct question by the inspector, the QA specialist on duty during the afternoon (prior to shift change) on March 13, 1975 stated that review of the above job orders had not been performed as required by the quoted section of SQA-1-74-G-004.

In addition, the Quality Assurance Specialist interviewed stated that there was no positive system to assure that the requirements of SQA-1-74-G-004 would be implemented because the requirements of that instruction are not reflected in plant procedures.

10 CFR 50, Appendix B, Criterion V, states in part: "Activities affecting quality shall be prescribed by documented instructions, procedures or drawings ... and shall be accomplished in accordance with these instructions, procedures, or drawings..."

The Operational Quality Assurance Plan, Section V, states in part: The Oyster Creek Superintendent is responsible for ensuring that instructions and procedures associated with the administration, operation, .. maintenance, and operational testing of structures, components, and systems are prepared, reviewed, approved, and implemented in accordance with this Quality Assurance Plan.

Contrary to the above, the twelve (12) safety-related job orders reviewed were not logged as required, and there was no alternate system established to assure that the required QA review of daily job orders was accomplished. This Item of Noncompliance is an Infraction.

c. Identification of Safety-Related Maintenance

Criterion V, Appendix B, 10 CFR 50, states in part: Activities affecting quality shall be ... accomplished in accordance with these (prescribed) instructions, procedures, or drawings."

10 CFR 50, Appendix B, Criterion II, states in part: ... The quality assurance program shall provide control over activities affecting quality ... to an extent consistent with their importance to safety ...."

The Operational Quality Assurance Plan, Section II, states in part: This program is applied to the safety-related items of the Oyster Creek Nuclear Generating Station that prevent or mitigate the consequences of postulated accidents which could cause undue risk to the health and safety of the public ..."

Procedure 105, MAINTENANCE, REPAIR AND MODIFICATION CONTROL, Revision 0, dated October 15, 1974, paragraph 4.1 states in part: ... These items which fall under the cognizance of the QA Plan, as determined by inclusion in the QCSL tabulation, shall be segregated and handled in accordance with this procedure."

The procedure fails to assign responsibility for determining when an item is to be controlled in accordance with procedure 105. Job orders are used for both safety-related and nonsafety-related work and there are no requirements to indicate on the job order form if Quality Assurance controls apply, with the result being that a decision as to whether to apply safety-related item controls was not provided on job orders.

Most of the job orders completed in February 1975 were reviewed, including those listed in Details, Section II, Paragraph 7b, and none include any indication that they were under the control of the Quality Assurance Program.

The Maintenance Supervisor stated that consideration was being given to assigning responsibility for determination/categorization of items with respect to inclusion or noninclusion in the Quality Assurance Program and to a revision of the Job Order Form to provide an indication of status, either safety or nonsafety-related.

This lack of control over activities affecting quality, safety-related maintenance is a Deficiency level Item of Noncompliance.

d. Tests Following Routine Maintenance

10 CFR 50, Appendix B, Criterion XI, states in part: A test program shall be established to assure that all testing required to demonstrate that structures, systems and components will perform satisfactorily in service is identified and performed in accordance with written test procedures... Test results shall be documented and evaluated to assure that requirements have been satisfied."

The Operational Quality Assurance Plan, Section XI, states in part: "...The Oyster Creek Superintendent is responsible for the operation and maintenance test programs...is responsible for the performance of the required tests in a correct and timely manner utilizing written and approved procedures...is further responsible for requiring that test results, for which he is responsible, are documented, reviewed, and approved...."

Contrary to the above, in the case of routine maintenance which is not covered by step-by-step procedures:

(1) there is no mechanism for defining when and/or what tests are required;
(2) there is no assignment of a responsible individual to make the decision(s) required for (1) above;
(3) procedures do not include provisions to document the tests if conducted; and
(4) procedures do not indicate the individual(s) required to evaluate the test results to assure that requirements have been satisfied.

The inspector's review of the twelve (12) Job Orders listed in Details, Section II, Paragraph 7b indicated that some activities did include tests and/or checkouts following maintenance. However, questioning of Maintenance and Operations Department personnel in this area failed to demonstrate a uniform or acceptable understanding of responsibility for inclusion or performance of testing or checkout activities. In addition, the Operations Supervisor stated that the tests are not all documented.

This failure to prescribe and accomplish a safety-related test is an Infraction level Item of Noncompliance.

e. Requirements for Preparation of Maintenance Procedures

ANSI N18.7, whose guidance the licensee committed to follow (page 24 of 95, Revision 1, dated 9/30/74 in the Operational Quality Assurance Plan), states in part in paragraph 5.1.6.1;

"... skills normally possessed by qualified maintenance personnel may not require detailed step-by-step delineation in written procedures."

The MAINTENANCE, REPAIR AND MODIFICATION CONTROL procedure, 105, Revision 0, dated 10/15/74, states under section 5.1.3 that: All work activities performed shall be in accordance with written and approved procedures, instructions and drawings under the direction of the Maintenance Supervisor. Where procedures do not exist, they shall be prepared and submitted for appropriate reviews as outlined in Oyster Creek Procedure Control Procedure."

While the maintenance activities evaluated (Details, Section II, Paragraph 7b) appear to be in conformance with the requirements of ANSI N18.7, they are not in conformance with the licensee's procedure 105.

The licensee stated that procedure 105 would be revised to include guidance for determining when detailed step-by-step procedures are required to make the procedure conform to the guidance in ANSI N18.7. Until this action has been completed, this is an Unresolved Item.

f. Identification and Control of Materials

10 CFR 50, Appendix B, Criterion VIII states in part: Measures shall be established for the identification and control of materials, parts, and components, including partially fabricated assemblies. These measures shall assure that identification of the item is maintained by heat number, part number, serial number, or other appropriate means, either on the item or records traceable to the item, as required throughout fabrication, erection, installation, and use of the item."

The Operation Quality Assurance Plan, Section VIII, states in part: "... The Oyster Creek Superintendent is responsible for maintaining identification and control of materials, parts, or components received, stored, installed, and used at the plant

site. Procedures covering the identification and control of materials, parts and components are prepared by the plant staff...."

Procedure 3005, SITE MATERIAL IDENTIFICATION AND CONTROL, Revision 0, effective date of July 15, 1974 requires, in Section 5, that items be classified and tagged as "Released for Use" prior to their installation or use, and that the "Released for Use" tags be removed and returned to Quality Assurance for recording this fact on the Material Identification and Control Sheet and destruction of the tag.

Contrary to the above, identification and control was not maintained over two of seven safety-related job orders examined, in that "Released for Use" tags for Job Orders 8648, Core Spray System, and 8626, Fuel Pool Filter, were not on the equipment, not recorded on the Material Identification and Control Sheet, and not available to the inspector.

This is a Deficiency level Item of Noncompliance.

g. Job Order Form - Lack of Procedures/Procedural Controls

The Job Order Form, currently used to initiate and control work at the Oyster Creek Station is inadequate in that:

(1) there is no assignment of responsibility for completion of the Form;
(2) there is no definition of how the Form is to be used;
(3) there is no provision for identification of the procedure(s) to be used; and
(4) there is no provision for inclusion of test requirements. (see also Details, Section II, Paragraphs 7c and 7d)

This lack of procedures/procedural controls for the Job Order Form is contrary to the requirements of 10 CFR 50, Appendix B, Criterion V and the Operational Quality Assurance Plan, Section III, which states in part:

"... The Oyster Creek Superintendent is responsible for the preparation, review and approval of the plant control procedure. This procedure specifies the manner in which plan maintenance and repair is controlled by distinguishing between different types of maintenance and repair and specifying the applicable requirements for control of each, including the use of: approved

procedures, instructions and/or drawings during maintenance or repair work; maintenance and repair travelers which specify the work scope and provide for signatures which document that appropriate requirements have been established, reviewed, concurred with and approved; quality control checklists; etc...."

The licensee also identified this basic problem in Audit Report 75-59 dated 2/27/75 which states in part: "Procedure 105 lacks controls to follow a maintenance or r item; to assure that proper people are notified; that procedures are used; etc...."

Although the licensee identified this Item of Noncompliance, he has not yet (March 14, 1975) documented the action to correct the Item and provided a schedule for implementing that corrective action. No response to this item is presently required. Corrective action will be examined during a subsequent inspection.

8. Design Control and Modifications

Procedure 6003, MODIFICATIONS, NON-ROUTINE MAINTENANCE, AND REPAIRS, Revision 0, dated March 7, 1975, while not available for in-office review (see also Details, Section II, Paragraphs 3a and 16) was given to the inspector during the onsite inspection. The licensee stated that the procedure had not yet been implemented. Inspection of this activity consisted of an evaluation of procedure 6003 with respect to the Regulations, the Operational Quality Assurance Plan and the licensee's requirement (page 24 of 95, Revision 1, dated 9/30/74 in the Operational Quality Assurance Plan) to follow the guidance contained in ANSI N45.2.11. The results of that evaluation are summarized below.

a. Design Input Requirements

(1) 10 CFR 50, Appendix B, Criterion III requires in part that: "Measures shall be established to assure that applicable .. design bases, as defined in 50.2 and as specified in the license application, for those structures, systems, and components to which this appendix applies are correctly translated into specifications, drawings, procedures, and instructions...."

The Operational Quality Assurance Plan, Section III, Revision 0 dated December 14, 1973, states that design control is implemented by means of Generation Engineering Procedures which include design review requirements, internal and external interface control considerations, and appropriate design bases.

Contrary to the above, inclusion of design bases, control of design interfaces, and coordination among participating design organizations has not been provided for modifications: in that Procedure 6003, "Modifications, Non-Routine Maintenance, and Repair," Revision 0, dated March 7, 1975, had not been implemented as of March 12, 1975, more than 10 months after the April 1974 date given in the OQAP, Appendix C, for the completion of the QA implementing procedures; and in that Procedure 6003 does not provide for inclusion of the design bases or coordination among participating design organizations in design review requirements.

b. Drawing Preparation and Control

Measures for the preparation and control of drawings, in accordance with ANSI N45.2.11 paragraph 4.3, have not been established. (See Details, Section II, Paragraph 6c)

c. Design Verification

10 CFR 50, Appendix B, Criterion III requires in part that: "... These design control measures shall provide for verifying or checking the adequacy of design, such as by performance of design reviews, by use of alternate or simplified calculational methods, or by the performance of a suitable testing program...."

The Operational Quality Assurance Plan, Section III, states in part: "Design control is implemented by means of Generation Engineering Procedures which include: ...design verification. Design verification includes the use of formal design reviews, checks or tests as appropriate to ensure the adequacy of the design with regard to design considerations. Design reviews may be conducted by means of the same, an alternate or simplified calculation method or by the performance of a suitable testing program. A design review will be performed by an individual or group other than the individual who performed the original design, but who may be from the same organization.

Contrary to the above, measures are not established to provide for design verification. Procedure 6003 does indicate (paragraph 5.1.4.1.5) that design reviews will be performed "if deemed necessary," but it fails to include definitive requirements for design verification.

d. Design Interfaces

10 CFR 50, Appendix B, Criterion III, requires in part: ... Measures shall be established for the identification and control of design interfaces and for coordination among participating design organizations...."

The Operational Quality Assurance Plan, Section III, states in part: "...Design control is implemented by means of Generation Engineering Procedures which include: ...internal and external interface control considerations...."

Contrary to the above, procedure 6003 does not include provisions to control design interfaces and for coordination among participating design organizations.

The procedure also fails to include the additional guidance in this area contained in section 5 of the ANSI N45.2.11.

e. 10 CFR 50.59 Changes

10 CFR 50, Appendix B, Criterion V, requires in part that: "Activities affecting quality shall be prescribed by documented instructions, procedures or drawings ... and shall be accomplished in accordance with these instructions, procedures or drawings...."

The Operational Quality Assurance Plan, Section V, states in part that: ...Each manager is responsible for developing, reviewing, approving and implementing his group's procedures as required to implement this Operational Quality Assurance Plan. These procedures cover activities such as document control, training of personnel, responsibilities and duties of personnel, etc....."

There are currently no approved and implemented procedures which define the responsibility for making 10 CFR 50.59 safety evaluations or that define the controls to assure that reviews required by the Technical Specification (6.1.C.1.e.(4)). While procedure 6003 does discuss evaluation and "Committee"

reviews for modifications, no procedure clearly establishes the responsibility for making 10 CFR 50.59 safety evaluations for modifications, tests and experiments nor do any approved procedures provide for the processing of these items to assure that the Committee reviews required by the Technical Specifications (6.1.C.1.d.(2) & (4) and 6.1.C.1.e.(4)) are accomplished.

No specific example of failure to make a required 10 CFR 50.59 evaluation was identified. This item is unresolved pending further inspection.

f. Classification

Subparagraphs 8a, 8c and 8d, preceeding, constitute a Deficiency level Item of Noncompliance.

9. Surveillance Testing and In-Service Inspections

a. Program

The twenty-five (25) Surveillance Test Procedures, listed below, were reviewed to verify that personnel engaged in the surveillance program at Oyster Creek were fulfilling their assigned responsibilities.

(1) APRM Surveillance
(2) Automatic Depressurization System
(3) Standby Liquid Control System
(4) Low Reactor Water Level Indicating Switches
(5) Control Rod Drive System
(6) Isolation System
(7) Absorption Pool Relief Valve Actuation
(8) Torus to Drywell Vacuum Breakers
(9) Excess Flow Check Valves
(10) Gamma Ray Spectrometry
(11) Auxiliary Electric Power
(12) Radioactive Liquid Waste Sampling
(13) Station Battery
(14) Core Spray System
(15) Reactor Coolant System ISI
(16) Fire Protection System
(17) Local Linear Heat Generation
(18) Containment Cooling System
(19) Emergency Service Water System
(20) Continuous Leak Rate Monitor

(21) Reactor Coolant Sampling
(22) Reactor Coolant Isolation Valve
(23) Offgas Analysis
(24) Standby Gas Treatment System
(25) Linear Heat Generation Rate

The above tests were related to the Technical Specification Surveillance Test requirements, Section 4.0. The review indicated that, while the subject is addressed, other inadequacies were identified. (see Details, Section II, Paragraphs 9b and 9c below)

b. Surveillance Test Schedule

The Surveillance Test Schedule for 1975, a scheduling system for planned surveillance tests, was reviewed and compared against Technical Specification requirements. The Schedule was not all inclusive in that Daily and Refueling Outage surveillance items were included in separate documents. The review results, based upon a sampling audit, indicated that the Schedule was in accordance with Technical Specification requirements.

However, discussions with cognizant licensee personnel indicated that the Surveillance Test Schedule for 1975 had been issued for implementation without formal documented review. The inspector's review on a sampling basis with respect to frequency of conducting surveillance tests compared with Technical Specification requirements indicated no inadequacies. The subject of formalized review and authorization by the Station Superintendent is considered unresolved.

c. Administrative Controls

The following observations reflect administrative controls over surveillance test procedure approval currently in use at Oyster Creek:

(1) the cover page contains the title, date of issuance, effective date, sequence designation and revision notation;

(2) designated space is provided for authorization and approval/concurrence;

(3) space is provided for listing of effective pages, date and revision number.

Surveillance procedures are currently undergoing revision in content and format to conform to the above description. Generically, existing facility procedures had not been converted to the new format. The licensee had previously committed (report 50-219/74-07 dated May 21, 1974) to revise facility procedures to conform with guidance contained in ANSI N18.7.

The inspector determined that PORC had not reviewed eight (8) of twenty-five (25) surveillance test procedures reviewed (see Details, Section II, Paragraph 9a for titles) Since these Surveillance Test Procedures are safety-related, PORC review is required by Technical Specification 6.1.C.1.d.(1); and by 10 CFR 50, Appendix B, Criterion VI, and by the Operational Quality Assurance Plan in accordance with the portions thereof quoted in Details, Section II, Paragraph 9b above.

Corrective action was taken by the licensee prior to the conclusion of this inspection. PORC Meeting 17-75 minutes dated March 13, 1975 reflect procedure review and formal PORC approval. A response, however, to this specific item is required to address generic aspects of PORC review, to preclude recurrence and assure review of facility procedures. This Item of Noncompliance is an Infraction.

d. Interviews

Interviews with selected personnel performing surveillance testing indicated that the selected individuals understood their responsibilities. This understanding included a knowledge of the licensee's flowpath for handling completed surveillance items which consist of:

(1) review by the appropriate foreman;
(2) issuance of discrepancy report and work order if required; and

(3) reporting of items constituting Abnormal Occurrences to the Operations Supervisor followed by review by other members of station management if applicable.

The inspector identified no inadequacies with this area of review.

e. Approved Procedures Review

Three (3) approved Surveillance Test Procedures were reviewed to verify:

(1) requirements for assuring systems and equipment are returned to NORMAL following the testing or inspection;
(2) requirements for specific identification of temporary or permanently installed test or measuring equipment used to obtain performance data;
(3) requirements to assure the removal of any installed blocks, jumpers or bypasses;
(4) inclusion of the particular procedure on the master schedule;
(5) adherence to Technical Specification frequency requirements; and
(6) procedure approval in accordance with the licensee's established controls.

The procedures examined were:

(1) Core Spray System Test 614, Revision 2, approved 12/11/73;
(2) Auxiliary Power System Test 601, Revision 2, approved 7/19/73; and
(3) Fire Protection System Test 620, Revision 1, approved 10/19/72.

With respect to the six (6) items audited, no inadequacies were identified with the three (3) procedures selected for review.

10. Procurement Control, Receiving Inspection and Storage

The inspector reviewed the procurement control, receiving inspection and storage phase of the Quality Assurance Program with respect to the requirements of ANSI N45.2.13, Criteria IV and VI of 10 CFR 50, Appendix B, and Oyster Creek Procedures 110, 2001, 3003, 4007, 4009, 4010, 4014, 6004 and 6005.

The following based upon discussions held with and documentation furnished by licensee personnel, summarizes the inspector's findings:

a. Personnel

Key personnel responsible for the initiation, review, and approval of procurement documents were interviewed and indicated that they have ready access to the appropriate procedures and understand their individual responsibilities.

b. Procurement Document Control

(1) The following items were selected as samples for the review described in subparagraph (2), following:

(a) Reactor Safety Valve (P.O. N-82443)
(b) Instrument Manifold (P.O. 81402)
(c) Fuel Assembly Channel Clips (P.O. 88529)

(2) The procurement documents for items listed in subparagraph (1), preceeding, were reviewed to verify that the following requirements were met.

(a) Approvals were accomplished according to established controls.
(b) Items were purchased from vendors/suppliers who were "qualified" by the licensee, or there is a plan for inspection or test by the licensee to verify the quality of the item.
(c) Procurement documents identified the documentation to be prepared, maintained, and submitted to the purchaser for review and approval.
(d) Procurement documents identified the records which are to be retained, controlled, maintained and delivered to the purchaser prior to installation of the hardware.

The inspector had no additional questions on items documented in Details, Section II, Paragraphs 10a and 10b (1) and (2).

(3) 10 CFR 50, Appendix B, Criterion V requires in part: "Activities affecting quality shall be prescribed by documented instructions, procedures or drawings, of a

type appropriate to the circumstances and shall be accomplished in accordance with these instructions, procedures, or drawings...."

The Operational Quality Assurance Plan, Section IV, states in part: "Procurement documents prepared by or for the Generation Department shall be prepared, reviewed, approved, revised, and controlled in accordance with the Generation Department Procedure...."

The Generation Department Procedure, 2001 - ADMINISTRATION OF PROCUREMENT, Revision 1, effective date 10/4/74 requires, in Section 3.2.2 the: "Operational Quality Assurance review of and concurrence with procurement documents."

A review of the licensee's procurement documents indicated that purchase requisitions for chemicals and other supplies had been issued without the required review by Quality Assurance. Discussions with the licensee confirmed this lack of required review.

This failure to provide controls to assure required quality assurance review of procurement documents is an Infraction level Item of Noncompliance.

c. Inspection of Procured Items

(1) A receipt inspector, responsible for the receipt inspection of safety related items, was interviewed and demonstrated that he was familiar with the requirements of Oyster Creek procedure 110 - HANDLING AND STORAGE OF MATERIALS, PARTS AND COMPONENTS, Revision 0, effective dated February 14, 1975.

(2) A review of the receiving inspection records verified the following:

(a) Supplier records, as required by the purchase documents, are available and complete.
(b) Inspection at receipt is completed and signed off as required by procedures.
(c) Items can be traced to the procurement document and inspection records.
(d) Items released to storage or use are identified as to their acceptance status.

d. Nonconforming Items at Receipt

(1) One item was selected to confirm that it had been:

(a) Marked and segregated
(b) Physically located to prevent inadvertent use
(c) Identified as nonconforming to affect organizations.
(d) Documented as nonconforming.

(2) The item selected for purposes of verification in subparagraph (1), preceeding, was: P.O. N-80542, Two Replacement Valve Stems.

e. Storage

The following three safety related items, which require specia. protective environments, were selected to verify that they were being stored properly:

(1) Recirculating Pump Seals
(2) Stock Parts for Control Rod Drives
(3) Four Control Rods

The inspector had no further questions in the area of receiving inspection and storage as documented in Details, Section II, Paragraphs 10a, 10c, 10d and 10e.

11. Calibration

This area was reviewed with respect to the requirements of 10 CFR 50, Appendix B, Criteria V, XII and XVII; Sections V, XII and XVII of the Operational Quality Assurance Plan; and the licensee's implementing procedures with the results as summarized below.

a. Current Program Status

(1) Attachment 1 to procedure 112 had not been issued as of the completion (March 14, 1975) of this inspection. (see Details, Section II, paragraph 3 for enforcement action on this item). This attachment identifies the equipment to which the licensee's program applies.

(2) While IE:I and some plant personnel (see Details, Section II, paragraphs 3a(1) and 6a(4) had received copies of procedure 112 - OYSTER CREEK CALIBRATION OF MAINTENANCE TEST AND INSPECTION TOOLS, GAUGES, AND INSTRUMENTS without attachment 1, the procedure had not been issued officially to holders of the Quality Assurance Manual for implementation.

(3) Recently received new instruments had been calibrated as required by Criterion XII of the licensee's program.

(4) The licensee had certified an outside contractor to perform contract calibration of instruments but the contract had not been issued as of the completion of the inspection.

(5) The licensee had serialized most of the instruments which will eventually be controlled by the program.

(6) The required frequency of calibration and the required accuracy of the instruments had been specified for approximately ten (10%) percent of the on-site instruments which will be controlled by the program.

(7) As of completion of this inspection (March 14, 1975), the licensee does not have an implemented calibration program.

10 CFR 50, Appendix B, Criterion XII requires: "Measures shall 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."

The Operational Quality Assurance Plan, Section XII, requires in part: "The Oyster Creek Superintendent is responsible for the procedures and program required to assure control, calibration, and testing of measuring and test equipment at Oyster Creek Nuclear Generating Station...."

The lack of the necessary control, calibration and testing of equipment at Oyster Creek is a Noncompliance which was identified in the licensee's internal audit, conducted in March 1975 and documented in QAL 75-68. This item is a licensee identified infraction for which a response is not required. Adequacy and timeliness of corrective action will be examined during subsequent inspections.

12. Control of Nonconformances

a. Condensate Transfer System

The Condensate Transfer System was returned to service with three (3) nonconformance reports, which defined deviations from standards, still unresolved. These nonconformances and their status is summarized below.

(1) Nonconforming Report #74-052 dated October 25, 1974 states in part: "Piping joints were being welded using backing rings which is in violation of the Engineering Specifications for this project. No authorization has been given for the maximum allowable gap between backing ring and pipe inner wall."

Corrective action was completed by Engineering and a Corrective Action Report was forwarded to Quality Assurance in accordance with paragraph 5.1.6 of procedure 3008. Quality Assurance reviewed the Nonconformance Report and the Corrective Action Report in accordance with paragraph 5.1.14 of procedure 3008, and determined that the corrective action was unacceptable.

No further resolution had been made at the time (3/12/75) of this inspection.

(2) Nonconforming Report #74-053 dated 10/24/74 states in part: "...1. Weld #CH-0001-E was made although the procedure (Procedure #0005.1, Paragraph 2.2) states that welds CH-001-D and CH-0001-E are not to be made until piece #4 on JCP&L Drawing CH-0001 is protective coated which it is not. #2. There are no dimensions given in the procedures or drawing for piece #6 on JCP&L Drawing CH-0001. A field fit-up of this pipe section was made but not provided for in the procedure. #3. Piece #4 on JCP&L Drawing CH-0001 had to be cut to 17' vice 20' in order to fit the pipe in the lathe for beveling. This requires the welding of a 3' section to the 17' section. The additional joint and weld are not provided for in the procedure or in a written Engineering authorization."

At the time of this inspection (3/12/75) no corrective action had been documented on the three (3) items in this Nonconforming Report.

(3) Nonconforming Report #75-006 dated 3/8/75 states in part: "...This QASL system was placed in service prior to completion of the work specification and without QA release or approval. Generation Engineering was notified that the required hydrostatic test had not been performed because of the maintenance foreman's opinion that the specified test pressure was excessive. The project engineer stated that a study would have to be made to determine the acceptable test pressure. No conclusion, if any, on this matter has been forwarded to Q.A."

At the time of this inspection (3/12/75), no corrective action had been documented on this Nonconforming Report.

10 CFR 50, Appendix B, Criterion XV, requires in part: "Measures shall be established to control materials, parts, or components which do not conform to requirements in order to prevent their inadvertent use or installation."

The Operational Quality Assurance Plan, Section XV, states in part: "...The basic requirement for the identification, reporting, segregation, disposition, and management review of nonconformances are included in the Generation Engineering Department procedure 'Nonconformances and Corrective Action.' This Generation Department procedure requires that appropriate detailed procedures (e.g. audits, receiving inspection, nonconforming plant equipment, etc.) include instructions for controlling nonconformances...." Appendix A of the OQAP identifies the Condensate Transfer System as a system required to mitigate the consequences of postulated accidents.

Procedure 104, CONTROL OF NONCONFORMANCES AND CORRECTIVE ACTION, Revision 0, effective date 10/15/74 states in part, in section 5.1.4.3 that: "The Oyster Creek Superintendent is responsible for: ...prevent(ing) inadvertent installation or use of material, parts, or components which do not conform to applicable codes, standards, license commitments, or procurement specification at time of receipt...."

Failure to control nonconformances to prevent inadvertent use is a failure to implement the Operational Quality Assurance Program and is an Infraction level Item of Noncompliance.

13. Chemistry Control

a. Primary Water Samples

The inspector observed the actions and techniques employed by a Chemical Technician, including radiological safety precautions, from drawing of the sample through completion and documentation of the following tests performed on March 12, 1975:

(1) determination of pH (meter method);
(2) determination of cloride concentration (mercuric thiocyanate colorimetric method);
(3) determination of suspended solids; and
(4) determination of conductivity.

While no attempt was made to verify the accuracy of the results which were determined, the inspector identified no inadequacies in the performance of the analyses.

b. Air Ejector Off Gas Sample

The inspector observed the actions and techniques employed by the Chemical Technician who obtained the subject sample for routine analysis on March 12, 1975. While the Technician observed did not actually have a copy of a procedure, his actions were in accordance with the procedure furnished to the inspector. While the inspector observed no inadequacies in the operator's performance while obtaining the sample and related data, the inspector noted that the procedure was an unapproved draft.

10 CFR 50, Appendix B, Criterion VI requires in part that: "...measures shall assure that documents ... are reviewed for adequacy and approved for release by authorized personnel ...."

The Operational Quality Assurance Plan, Section V, states in part: "The Oyster Creek Superintendent is responsible for ensuring that instructions and procedures associated with the administration ... environmental monitoring ... inservice inspection, calibration, maintenance and operational testing of structures, components, and systems are prepared, reviewed, approved and implemented."

The Oyster Creek Technical Specifications, Articles 6.2.D and 6.2.E require PORC review and Station Superintendent approval of nuclear safety-related procedures prior to their implementation.

This lack of an approved procedure is an Infraction level Item of Noncompliance.

c. Status of Chemistry Procedures

While as noted above all activities affecting quality in the Chemistry Department are not prescribed in approved procedures, the licensee has undertaken to write and approve a large number of procedures in this area. According to the licensee, the following statistics were accurate as of March 13, 1975:

(1) total estimated number of procedures to be written 399 = 100%;
(2) total number of procedures written and approved 204 = 51%;
(3) total number of procedures written but unapproved 27 = 7%; and
(4) total number of procedures to be written 168 = 42%.

This Unresolved Item was previously identified in report 50-219/74-07 dated May 21, 1974 along with the licensee's commitment to revise facility procedures pursuant to the guidelines contained in ANSI N18.7. The item remains Unresolved and will be reviewed during subsequent IE:I inspections.

14. Records

This area was reviewed with respect to the requirements of 10 CFR 50, Appendix B, Criteria V and XVII and ANSI N45.2.9 - 1974; results of the review are summarized below.

a. Retrievability

Specific records, selected by the inspector, were requested to verify the licensee's ability to retrieve records as required by the inspection standards listed above. The records were:

(1) Reactor Log Sheets for the period from 2/6/75 through 3/10/75;
(2) the records of the evaluation of the Fast Flux Dosimeter (irradiation capsule) which was withdrawn in the Fall of 1971;
(3) the Main Steam Isolation Valve closure test for 2/8/75;
(4) the Cleanup System Demineralizer conductivity recorder chart removed 1/21/74;

(5) the June 1974 monthly Battery Discharge Test;
(6) the Diesel Generator 20% plus Load Test for 2/17 and 3/3/75;
(7) the baseline data/calculation on the heat removal capability of the Isolation Condenser (published June 1970; and
(8) the data associated with the Integrated Leak Rate Test performed in June of 1974.

All records requested were furnished by the licensee. The inspector identified no inadequacies with respect to retrievability of records.

b. ANSI N45.2.9-1974

Although three (3) document control/record control procedures (see Details, Section II, Paragraph 3a) were furnished to the inspectors prior to the completion of the inspection, the licensee's record control system was not in place at the time of the inspection. In addition, the scope of the three (3) issued procedures (3011, 4003, and 5003) is limited by the stated PURPOSE of the procedures which establishes the requirements and defines the responsibilities for document control systems within, respectively:

(1) 3011 - Site Quality Assurance;
(2) 4003 - Operational Quality Assurance; and
(3) 5003 - Nuclear Generating Stations Staff internal Document Control.

The licensee stated (OQAP page 74 of 95, Revision 0, dated 12/14/75) that the "enclosed list of procedures is tentative and may change..." and that the licensee did not intend to "...amend this Plan for procedure title or quantity changes." However, the scope of a procedure included in that index (Appendix C) as item IV B (3), OYSTER CREEK DOCUMENT CONTROL, was not available in the scope of the published procedures indicated above. At the Exit Management Interview the licensee indicated that issued procedures might be used to cover the scope of this procedure. In addition, while procedure 2005 - GENERATION DEPARTMENT DOCUMENT RETENTION SYSTEM, Revision 0, dated July 15, 1975 has been issued specifying which records are to be retained and for what periods, the system was not in effect, as verified by the inspector's and the licensee's audit findings, as of the time of the inspection (March 10-14, 1975).

In addition, the licensee's issued procedures do not include all of the seven (7) specific requirements for written storage procedures as listed in ANSI N45.2.9 - 1974, Section 5.3. In addition, the licensee does not have storage facilities, designated custodian(s), and the index meeting the specific requirements of ANSI N45.2.9 - 1974 to which the licensee, with noted exceptions, committed to follow (page 24 and 24a of 95) in Section II of his submitted OPERATIONAL QUALITY ASSURANCE PLAN. The licensee indicated that he is reviewing storage requirements, particularly the alternate of providing duplicate, separate storage. This item is unresolved.

During the exit interview, the inspector was given a copy of a memo indicating that the licensee would hold a meeting on March 25, 1975 to discuss the above listed problems and to implement record keeping systems prior to the scheduled (April 1975) refueling outage.

15. Housekeeping

The licensee's activities in this area were reviewed with respect to the requirements of 10 CFR 50, Appendix B, Criterion II and ANSI N45.2.3 - 1973 with the results summarized below.

a. Current Conditions

One or more tours of various sections of the licensee's facility were made by five of the six inspectors participating in this inspection. None of the inspectors noted any inadequacies with respect to unsafe working conditions or conditions adverse to quality which could be directly attributed to improper housekeeping. One area related to water standing, attributed to a cleanup recirculation pump inboard seal leak and plugged floor drain, was noted. This item was resolved prior to the conclusion of the inspection and discussed at the Exit Interview.

b. ANSI N45.2.3

The licensee has committed (page 24 of 95, Revision 1, dated 9/30/74) to follow the guidance in ANSI N45.2.3 - 1973 on housekeeping. Two (2) items were noted during this inspection:

(1) the licensee does not have housekeeping procedures which meet the requirements of the standard in Section 2.2; and
(2) the licensee has not defined/designated areas of the plant with respect to zones of cleanliness/housekeeping as required by Section 2.1 of the standard.

The licensee stated that procedures meeting the requirements would be prepared.

Until the licensees procedures are approved, issued and implemented, this is an Unresolved Item.

16. Procedure Review - During and Subsequent to Inspection

As noted in Details, Section II, Paragraph #3 of this report, several procedures were received during the course of the onsite inspection. The result of the reviews of these procedures follows.

a. Reviewed - No Comments

Procedures 2008, 5001 and 6007 (see Details, Section II, Paragraph 3 for titles) were reviewed. The inspector had no further questions.

b. Reviewed - Comments

(1) Procedures 3011, 4003 and 5003 were reviewed with the comments documented in Details, Section II, Paragraph 14b.

(2) Procedure 6003 was reviewed with the comments documented in Details, Section II, Paragraph 8.

DETAILS

SECTION III - ROUTINE OPERATIONS

1. Persons Contacted

See GENERAL SECTION

2. Organization and Administration

a. Onsite Organization - Shift Composition

No personnel changes were reported during this inspection. The inspector reviewed the Oyster Creek Operations Shift Alignment Schedule and five (5) Shift Operations Schedule against Technical Specification Figure 6.1.2 - Conduct of Operations. The inspector identified no inadequacies with respect to shift crew composition and requirements for control room and station coverage.

b. General Office Review Board (GORB)

The inspector reviewed the makeup of the offsite review committee and specifically against resumes for committee membership with regard to combined experience and technical specialties. The inspector identified no inadequacies with respect to the above.

Resumes had not been available for onsite review during a previous inspection.* This item is considered resolved.

3. Shift Turnover

The inspector observed routine operations and a shift relief and turnover. During the inspection Shift Foreman and Control Room Operator A and B classification actions were observed and reviewed with respect to the licensees requirements as delineated in Administrative Procedure No. 101, Revision 2 dated February 10, 1975. The following summarizes the results of the inspection:

a. Log Book Review

The Shift Foreman Log and Station Log Books were reviewed for the forty-eight (48) hour period preceeding the inspection.

*IE Inspection Report 50-219/75-04, dated February 27, 1975, Details 2.c.

The inspector identified no inadequacies with respect to this review for the referenced interval. Subsequently, comparison of log entry requirements as delinated by test procedures, indicated the following:

(1) Control Rod Drive System Test - No required log entry in the control room log as to test completion on January 27, 1975.

(2) Station Battery Discharge Test - No required log entry as to completion of discharge testing of the B Station Battery on December 18-20, 1974.

(3) Fuel Tank Inventory - No required log entry as to oil tank level as measured at the tank following each operation of the Diesel Generators as required for the interval January 6-February 3, 1975.

Lack of procedurally required entries was contrary to 10 CFR, Appendix B, Criterion V, Technical Specification 6.2.C and OQAP, Section V. This is a Deficiency level Item of Noncompliance.

b. Shift Turnover Review

Just prior to shift turnover, the individuals involved were questioned to determine their understanding as to what information and actions were required by Administrative Procedure 101, Revision 2, dated February 10, 1975. No inadequacies were identified by the inspector.

c. Standing Orders

The inspector reviewed topical subjects covered in current standing orders. Standing Order No. 18 involving calculation of local linear heat generation rate and average planar linear heat generation rate daily were not approved by PORC as required by Technical Specification 6.1.C.1.d.(1). Corrective action was taken by the licensee prior to completion of the inspection. Review of PORC minutes 17-75 dated March 13, 1975 indicated procedure 1001.10 - APLHGR, LLITGR and total peaking factor checks procedure change request had been reviewed and approved as required by PORC.

The status of Standing Orders remains an unresolved item pending delineation in facility procedures.

d. Temporary Changes to Procedures

The inspector verified by direct questioning, on a random basis, that licensee representatives were cognizant of Technical Specification requirements concerning temporary changes to procedures. No inadequacies were identified. Review of the Isolation System Test, covered under sampling of 25 procedures, indicated a temporary change/precaution had been made to Procedure No. 609, Revision 1, dated December 11, 1973, on January 24, 1974, related to Nitrogen pressure requirements. The temporary change had not been subsequently reviewed and approved as required by 10 CFR 50, Appendix B, Criterion VI, Technical Specification 6.2.F, and the OQAP, Section V.

This is an Infraction level Item of Noncompliance.

e. Alarms

The inspector verified by direct questioning that operators and shift foreman on duty were cognizant of the status of existing annunciated conditions, based on a review of seven (7) annunciators. A liquid process monitor was observed to be continuously alarmed apparently related to detector shine and background conditions. This item was resolved prior to completion of the inspection and was discussed at the exit interview.

November 14, 1975

Mr. Edward D. Scalsky
Oyster Creek Nuclear Generating Station
P.O. Box 388
Forked River, New Jersey 08731

Dear Mr. Scalsky:

This is to confirm that Lacey Township First Aid Squad agrees to transport patients arising from radiation accidents at Oyster Creek Nuclear Generating Station, Forked River, New Jersey.

William Neely

William Neely, Captain
Lacey Township First Aid Squad

B/723

RECEIVED VIA FACSIMILE 17 NOV 1975
0910 hrs.