

LICENSEE EVENT REPORT (LER)

FACILITY NAME (1) Catawba Nuclear Station, Unit 1	DOCKET NUMBER (2) 0   5   0   0   0   4   1   1   3	PAGE (3) 1 OF 0   4
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TITLE (4)  
Mode Changes Made With Inoperable Equipment Due to Mishandling Work Request

EVENT DATE (5)			LER NUMBER (6)			REPORT DATE (7)			OTHER FACILITIES INVOLVED (8)					
MONTH	DAY	YEAR	YEAR	SEQUENTIAL NUMBER	REVISION NUMBER	MONTH	DAY	YEAR	FACILITY NAMES			DOCKET NUMBER(S)		
1	1	1985	85	066	0	0	1	21985	N/A			0   5   0   0   0		
												0   5   0   0   0		

OPERATING MODE (9) 1	THIS REPORT IS SUBMITTED PURSUANT TO THE REQUIREMENTS OF 10 CFR §: (Check one or more of the following) (11)																					
POWER LEVEL (10) 0   6   2	20.402(b)	20.405(a)(1)(i)	20.405(a)(1)(ii)	20.405(a)(1)(iii)	20.405(a)(1)(iv)	20.405(a)(1)(v)	20.408(e)	50.36(e)(1)	50.36(e)(2)	50.73(a)(2)(i)	50.73(a)(2)(ii)	50.73(a)(2)(iii)	50.73(a)(2)(iv)	50.73(a)(2)(v)	50.73(a)(2)(vi)	50.73(a)(2)(vii)	50.73(a)(2)(viii)(A)	50.73(a)(2)(viii)(B)	50.73(a)(2)(ix)	73.71(b)	73.71(e)	<input checked="" type="checkbox"/> OTHER (Specify in Abstract below and in Text, NRC Form 366A) 50.72(b)(1)(i)

LICENSEE CONTACT FOR THIS LER (12)										TELEPHONE NUMBER					
NAME Roger W. Quелlette, Associate Engineer - Licensing										AREA CODE 710 #			378 1-17 1513 0		

COMPLETE ONE LINE FOR EACH COMPONENT FAILURE DESCRIBED IN THIS REPORT (13)

CAUSE	SYSTEM	COMPONENT	MANUFACTURER	REPORTABLE TO NPRDS	CAUSE	SYSTEM	COMPONENT	MANUFACTURER	REPORTABLE TO NPRDS

SUPPLEMENTAL REPORT EXPECTED (14)										EXPECTED SUBMISSION DATE (15)		
<input type="checkbox"/> YES (If yes, complete EXPECTED SUBMISSION DATE) <input checked="" type="checkbox"/> NO												

ABSTRACT (Limit to 1400 spaces, i.e., approximately fifteen single-space typewritten lines) (16)

On November 19, 1985, at 0915 hours, personnel discovered that Train B of the Hydrogen Skimmer (VX) System (EIIS:BB) was inoperable due to a problem with an electrically operated damper between upper and lower containment. The problem was traced back to a work request that had been written on November 5, 1985, to repair the damper during a unit outage. The VX System was not required to be operable during the outage and the work request was not processed. The unit entered a mode on November 13, 1985, at 0913 hours in which the VX System was required to be operable. This resulted in a violation of Technical Specifications. Unit 1 was at 62% power at the time this event was discovered. When the damper was determined to be inoperable, personnel were dispatched immediately, and a reduction in unit power was begun.

This incident is classified as a Management Deficiency because of a breakdown in administrative controls when the work request was overlooked.

This event is reportable pursuant to 10 CFR 50.73, Section (a)(2)(i)(B) and 10 CFR 50.72, Section (b)(1)(i)(A).

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LICENSEE EVENT REPORT (LER) TEXT CONTINUATION

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TEXT (If more space is required, use additional NRC Form 366A's) (17)

The purpose of the Containment Air Return and Hydrogen Skimmer (VX) System (EIIS:BB) is to assure adequate mixing of the containment atmosphere to prevent excessive hydrogen buildup from occurring in isolated pockets and dead spaces. The VX System is not used to provide normal ventilation.

The VX System consists of two redundant, independent and separately located 100% capacity fans. Associated with each fan are three bypass dampers, one control damper, and one backdraft damper. The control damper is used for the control of the air flow between upper and lower containment, and the backdraft damper is used to prevent backflow from lower containment to upper containment through the air return fans.

The system operates automatically when an Engineered Safeguards System (EIIS:JE) signal (SP) is received and two permissives, a limit switch assuring that the isolation damper is open and containment pressure is greater than or equal to 0.25 psid, relative to the outside atmosphere, are met.

DESCRIPTION OF INCIDENT

On November 5, 1985, it was discovered that the control damper 1ARF-D-4, Train B of the VX System would not open electrically. A Work Request was written to investigate the reason the damper would not open and to make the necessary repairs. The unit was in an outage at this time. Since VX was not required to be operable in the existing mode, Cold Shutdown (Mode 5), the work request was not stamped as a Technical Specification item nor was it logged in the Technical Specification Action Item Logbook (TSAIL). It was, however, noted on the work request that it would need to be worked prior to the unit entering Mode 4, Hot Shutdown. An out of service (OOS) sticker was placed on the control board, referencing the work request.

On November 13, 1985, unit startup was begun, Mode 4 was entered at 0913 hours, and power was increased beginning on November 17.

The work request had gone to Planning on November 5, and the responsible Planner noticed the "required for Mode 4" note on the work request and called shift personnel to inquire about the need for the request. He was instructed to route the work request to the Unit Scheduling Engineer for evaluation.

On November 19, a Shift Technical Advisor (STA) began investigating a 1.47 Bypass Panel Indication associated with the VX System. The STA reviewed the VX controls on 1MC4, which was located outside the Control Room horseshoe area, and found that an OOS sticker had been

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placed and that the work request had been originated. The OOS sticker had a note indicating that there were no indicating lights on the controls. The STA began investigating the problem and realized that the work request should have been worked prior to the unit entering Mode 4. He called the responsible Planner to inquire as to why the work had not been performed. The Planner was not in, but another Planner found the work request on the Planner's desk with no comments attached. The Scheduling Engineer did not remember reviewing the work request, and no record of reviewed work requests were kept.

At approximately 1500 hours, Operations personnel began reviewing drawing information to determine if the damper would fail to the Technical Specification required safe position. At approximately 1515 hours, the determination was made that the damper would not have opened on an SP signal if required.

At 1610 hours on November 19, the work request was upgraded and logged into the Technical Specification Action Item Log. Also at this time, Operations began to reduce power as required by Technical Specification 3.4.5.6. The work request was completed at 1700 hours on November 19, and the item was cleared from the Technical Specification Action Item Log. Technicians found that a blown fuse was the reason the damper would not open electrically.

CONCLUSION

When a work request is written by the Operations group for a Technical Specification item required for the existing mode of operation, it is stamped with a red TECH SPEC ITEM stamp and logged in to the Technical Specification Action Item Log. This keys personnel to complete the work in a specified time frame. The work request was not stamped as a TECH SPEC ITEM when written because VX was not required to be operable in the existing mode. If the work request had been stamped as a TECH SPEC ITEM, required for Mode 4, before it was sent to Planning it would have been flagged appropriately to be included on the outage worklist. For this reason this incident is classified as a Management Deficiency, because of a breakdown in Administrative Controls. Two previous examples exist in which mode changes were made with required equipment inoperable, due to outstanding work requests (see LER's 413/84-15 and 413/85-02).

Maintenance Management Procedure 1.0 specifies the use of Priority 5 for outage related work. There are several types of Priority 5's, among these is Priority 5F. This priority is described as "emergency work which must be completed to prevent extension of the

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outage". If this work request had been prioritized as 5F, it would have been routed to the Unit Scheduling Engineer and included on this outage's worklist. Personnel have not become accustomed to this priority due to the limited number of outages that the station has experienced to date, and also the recent evolvement of the Integrated Scheduling Group.

CORRECTIVE ACTION

Immediate

- (1) Work was initiated to investigate and repair the cause of the VX damper not functioning.
- (2) Operations began decreasing power at 10% per hour as required by Technical Specifications.

Subsequent

Review of the 1.47 Bypass Panel has been included in Operations Mode Checklists.

Planned

- (1) TECH SPEC ITEM stamps will be given to each group which initiates work requests in order to identify work required to be operable by Technical Specifications in any mode.
- (2) Discussions will be held on the need for Control Room personnel and supervision to perform a more thorough review of HVAC panels at shift turnover.
- (3) Correspondence will be provided to all station groups about the proper use of Priority 5 Work Requests, including the selection of identifiers.

SAFETY ANALYSIS

Damper 1ARF-D-4 being inoperable, rendered B Train of Containment Air Return System inoperable from November 13, at 0913 hours until 1700 hours on November 19. The unit was in Modes 4 through 1 during this period. Since A Train of the Containment Air Return System was operable throughout this event and is sized for 100% of the needed capacity, an adequate return of air from upper to lower containment would have been available had a LOCA type condition occurred.

The health and safety of the public were not affected by this incident.

DUKE POWER COMPANY

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CHARLOTTE, N.C. 28242

HAL B. TUCKER  
VICE PRESIDENT  
NUCLEAR PRODUCTION

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December 19, 1985

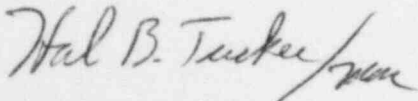
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U. S. Nuclear Regulatory Commission  
Washington, D. C. 20555

Subject: Catawba Nuclear Station, Unit 1  
Docket No. 50-413

Gentlemen:

Pursuant to 10 CFR 50.73 Section (a) (1) and (d), attached is Licensee Event Report 413/85-66 concerning mode changes made with inoperable equipment due to the mishandling of a work request. This event was considered to be of no significance with respect to the health and safety of the public.

Very truly yours,



Hal B. Tucker

RWO:slb

Attachment

cc: Dr. J. Nelson Grace, Regional Administrator  
U. S. Nuclear Regulatory Commission  
Region II  
101 Marietta Street, NW, Suite 2900  
Atlanta, Georgia 30323

American Nuclear Insurers  
c/o Dottie Sherman, ANI Library  
The Exchange, Suite 245  
270 Farmington Avenue  
Farmington, CT 06032

M&M Nuclear Consultants  
1221 Avenue of the Americas  
New York, New York 10020

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NRC Resident Inspector  
Catawba Nuclear Station