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'86 APR -4 P3:02

April 2, 1986

DOCKET NUMBER 50-445/44602  
PRUD. & UTIL. FAC.

Vincent S. Noonan, Director  
PWR Project Directorate #5  
Division of PWR Licensing-A  
U.S. Nuclear Regulatory Commission  
Washington, D.C. 20555

Dear Mr. Noonan:

This letter is provided in response to your March 28, 1986, request to provide programmatic comments on Revision III of the Comanche Peak Response Team Program Plan. As you know, CASE is strongly opposed to the piecemeal process the agency is pursuing in resolving the safety questions about Comanche Peak, and is providing these comments only to put on the record our opposition to the review and approval process and the inadequacy of the program plan itself.

Revision III of the Comanche Peak Response Team (CPRT) Program Plan and the Issue specific Action Plans were submitted to the NRC on January 27, 1986. The objective of the plan is to insure that the Comanche Peak nuclear power plant receives an operating license. In order to receive a license the Nuclear Regulatory Commission (NRC) must find that there is reasonable assurance that the facility, as built, does not endanger the public health and safety.

It is the position of the Citizens Association for Sound Energy (CASE) that such a finding can only be made after (1) the completion of a 100% reinspection of the plant, (2) a complete design review analysis, and (3) the successful implementation of an acceptable corrective action program that includes a commitment to 10 CFR Part 50, Appendix B.

Background

After a major NRC inspection effort in 1984, the NRC staff concluded that there had been a systemwide breakdown in the quality assurance/quality control (QA/QC) program at Comanche Peak. The finding, first expressed by the staff in January 1985, resulted in both immediate and long--term responses from TUEC.

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By necessity TUEC's response was to determine the actual condition of the plant, and whether or not, based on the condition of the plant, there was reasonable assurance that the plant had been designed and constructed in a manner such that its operation would not affect public health and safety.

The means by which the Applicant was going to achieve that end was through the CPRT program plan. The plan was first submitted in October 1984 in response to early NRC findings of the Technical Review Team (TRT) inspection, and later expanded to respond to other NRC findings, conclusions, and concerns.

Because there has been little substantive public participation in the development and approval of the CPRT, CASE's involvement with the plan to date has been minimal. However, CASE's attempts to be part of the process are noteworthy. First, through numerous workers and former workers, CASE initially raised the majority of the external source issues which the NRC examined during the TRT inspection. Second, in January 1985, CASE recommended a program plan to adequately resolve the questions about the conditions at the plant. (See CASE's Motion to Establish an Evidentiary Standard, January 31, 1985, Appendix A.) Third, CASE has participated in virtually all of the public meetings regarding the proposals for and progress of the CPRT, and finally we have submitted several sets of written comments to the Staff about the program. Our comments have consistently raised a number of issues which have either been resolved in TUEC's favor, deferred by the NRC, or ignored. We raise these issues again in this letter because we believe the process for resolution of outstanding Comanche Peak issues is dangerously flawed.

For its part the NRC staff has taken shifting positions toward the process of resolving Comanche Peak issues. Initially the staff was going to issue all SSERs detailing the investigation of allegations, and a "super SSER" which would incorporate the staff's overall position on the meaning of all of the preliminary findings. This has not been done, and apparently the concept has been abandoned. There are still several hundred allegations not identified or incorporated in any SSER, and there has been no SSER issued about the overall Staff conclusions about the Comanche Peak plant.

After it became obvious that the Applicant had begun reinspection and rework activities, CASE was told that there would be a public meeting between CASE and its technical assistants (i.e., the allegeders) and the Staff to discuss the inadequacies or incompleteness of the CPRT Issue Specific Action Plans (ISAPs) to resolve the identified concerns. That meeting never took place, in part because the allegeders needed the checklists to determine the adequacy of the individual ISAPs. An alternative approach, the production of written comments, was then going to be employed by CASE after the allegeders (old and new) had studied the checklists and program plans in order to provide the NRC staff feedback on the adequacy of the CPRT.

Since the checklists have still not been provided, this never occurred either.

However, the public review process became essentially meaningless anyway because, even as the CPRT was being reviewed by the staff, TUEC embarked on its reinspection and corrective action program. No official notice was given to the staff, the Board, or the parties, and no commitment was given by TUEC about what course of action would be followed.

Throughout the past 15 months, the staff continuously told TUEC that the reinspection and rework being done at the site was "at its own risk." This unrealistic approach gave way to Staff concessions in the fall of 1985 when the Region IV staff began to conduct onsite inspections and audits of the CPRT work. During these audits and inspections, the staff found repeated violations of WRC requirements, and the applicant's commitment to the program plan. No enforcement action is being taken based on the CPRT violations.

Nonetheless it is the staff's current position to issue an SSER on the Program Plan's overall approach and methodology. This SSEK will exclude the inspection checklists and implementation failure of the CPRT to date, as well as ignore the lack of a QA program for the CPRT. (See letter from Vince S. Noonan to Billie Pirner Garde, March 28, 1986.)

#### Summary

CASE disagrees with the Staff's fictional approach to the program plan. Approving the scope and methodology of the CPRT, while ignoring TUEC's current inability to implement even a bad program, is tantamount to deregulating Comanche Peak. Such action is not permitted by federal regulations, and the Staff's conduct flaunts an arrogance toward public health and safety that CASE believes is unacceptable.

As a practical matter the approval of the scope and methodology of the plan carries with it approval of several basic programmatic deficiencies:

1. The program plan itself, and the reinspection work done to date, does not now comport with and has not been done to 10 CFR Part 50 Appendix B requirements.
2. The program plan is unable to reach conclusions about the total extent of the quality assurance/quality control breakdown or the condition of the as-built plant because of inadequate sampling plan and the use of homogeneous groupings.
3. There is no independence in the rework activities, and very little in the reinspection work.

4. There are no NRC "hold points" in the program which enables the NRC to insure that the reinspection work completed by the CPRT has appropriately identified all potential generic flaws and that the proposed rework incorporates findings on generic deficiencies and root causes.

5. The plan ignores agency regulatory policies and practices for similarly deficient construction projects.

6. There is no meaningful oversight or participation by the public or the Atomic Safety and Licensing Board.

Perhaps the most irresponsible aspect of the NRC's piecemeal approval strategy is that the agency has ignored the most damning information available on the CPRT -- the failure of TUEC to be able to implement even a bad program. In December 1985, TUEC confirmed at a public meeting that QC inspectors had not followed procedures regarding QC inspections and had succumbed to production pressures (see transcript of December 18-19, 1985, meeting, pp. 9-15). Also there have been repeated problems with the safety significance evaluations and the identification of deficiencies.

The NRC has identified through the Region IV audits numerous discrepancies between the program plan and the ongoing work. These implementation problems should have been identified by an internal QA program. However, the NRC has apparently accepted a CPRT without a QA/QC requirement.

The failure of TUEC or the Staff to produce the inspection and design review procedures and the attribute checklists has prevented CASE from doing an adequate assessment of the extent to which the programmatic flaws listed above impinge on the overall effectiveness of the CPRT.\*

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\* Contrary to the assertion in Mr. Noonan's March 28, 1986, letter, the fact is that the Staff has relied heavily and continues to rely on the checklists to do their work in preparation for hearing, while preventing CASE from doing the same. The Staff has repeatedly utilized the checklists for review of the CPRT and inspections and audits. See IER 85-17, 85-14, Appendix 12, which provides 15 pages of specific comments and questions on checklists, and all Region IV inspection reports which contain audits of the CPRT that rely upon the use of the CPRT checklists.

Additionally, the checklists are not de minimis, as the Staff tries to imply. In the August 9, 1985, letter to TUEC, the Staff noted, "the criteria for acceptability are based on inspection of hardware using a list of attributes which are considered to be vital to assurance of safety significance, ... these attributes are not generic, vary for a given item, and must include design considerations" (p. 34).

1. Noncompliance With Appendix B Requirements

10 CFR Part 50, Appendix B, establishes quality assurance requirements for the design, construction, and operation of safety-related structures at nuclear power plants. The requirements of Appendix B apply to "all activities affecting the safety-related functions of the structures, systems, and components; these activities include designing, purchasing, fabricating, handling, shipping, storing, clearing, erecting, installing, inspecting, testing, operating, maintaining, repairing, refueling, and modifying." (Emphasis added.)

Appendix B sets forth 18 criteria which provide detailed explanations of what is required by federal regulations during the design, construction, and operation of a nuclear plant. It specifically requires, for example, under Criterion XVI:

Measures shall be established to assure that conditions adverse to quality, such as failures, malfunctions, deficiencies, deviations, defective material and equipment, and nonconformances are promptly identified and corrected. In the case of significant conditions adverse to quality, the measures shall assure that the cause of the condition is determined and corrective action taken to preclude repetition. The identification of the significant condition adverse to quality, the cause of the condition, and the corrective action taken shall be documented and reported to appropriate levels of management.

Contrary to federal requirements the Comanche Peak Response Team (CPRT) Program Plan ("program plan") does not conform to Appendix B requirements for prompt identification of deficiencies and corrective action. Instead, the program plan establishes the process for the applicant to take a regulatory detour.

It is TUEC's position that the CPRT program plan does not provide the information "of record" about Comanche Peak. This concept is not explained in the program plan per se, but it is evident by a review of the process that the results of the initial preliminary reinspections are not going to be created, maintained, or relied upon as part of the inspection records of the various systems, components, or structures.

According to the CPRT Program Process, Rev. 3, p. 16, the scope of the actual work of the reinspection program, as outlined in the ISAPs/DSAPs "will be based on a preliminary assessment of the root cause and potential generic implications. . . . Accordingly, most of the ISAPs and DSAPs will utilize iterative or phased implementation approaches that include an initial phase that is exploratory in nature."



Since the reinspection work has already begun, and in some cases is already completed, it is apparent that the exploratory phase has been finished and preliminary assessments of the root cause and potential generic implications have already been identified. Yet none of the preliminary assessments have been disclosed, produced to the public or the NRC. Nor have they been completed using a Quality Control/Quality Assurance program for the CPRT, since such a program has not been developed. It is not clear from a reading of the program plan whether the results of the exploratory phase have ever been -- or will ever be -- documented.

This example is indicative of a program plan which does not include compliance with Appendix B requirements. That is, although the program plan asserts that it strives to meet regulatory requirements, it does not place the work under the requirements of Appendix B. This is a significant difference. Since the procedures for identification of deficiencies in Revision 0, 1, or 2 did not programmatically require the recording of deficiencies and the trending and/or analysis of such deficiencies, it is now impossible for CASE to rely upon the preliminary work done under the earlier revisions.

Yet the individual action plans rely precisely on such preliminary, non-recorded information.

The lack of a QA/QC program does not just apply to the identification and resolution of substantive deficiencies or deviations identified by CPRT inspectors. It goes to the program plan itself. All that currently exists for the CPRT is a management overview process. (See Appendix G.)

The Overview Quality Team (OQT) is the epitome of non-independence. It is composed of the same third-party personnel reporting to a TUEC Vice-President, also in charge of the Senior Review Team (SRT). The SRT has organizational responsibility for all the CPRT activities. It is impossible for it to also be organizationally independent of the CPRT to perform QA/QC activities on the program plan implementation.

The implementation of the plan to date has been abysmal, e.g., failure to detect production quotas, harassment of inspectors, numerous substantive flaws in the identification of deficiencies, and safety significance evaluations. These are significant problems, and the NRC's action in accepting a CPRT without a QA/QC program is foolish. The NRC Staff simply cannot, and will not, be able to perform a substitute audit function to a programmatic QA plan.

The NRC Staff has compounded the problem by not using Appendix B requirements to conduct the Staff's audit of the CPRT. The Staff inspection reports never find a violation of Appendix B requirements for work done within the scope of the CPRT, even though identified deviations are obviously violations of Appendix B.

For example, in 85-13/85-09 (Appendix A, Item A), the NRC Staff issued a notice of violation for violations of Criterion V, for failure to accurately record information required by procedures. In the same report, the NRC identified violations of ERC procedures by inspectors and found only a deviation of TUEC "commitments" to the NRC (p. 45, Item 5, Appendix E).

Similar examples abound in all recent inspection reports reviewed by CASE (IER 85-17; CHK 85-14; IER 85-14, 85-11; IER 85-13, 85-09; and IER 85-11, 85-06).

2. The program plan is unable to reach conclusions about the total extent of the quality assurance/quality control breakdown or the condition of the as-built plant because of an inadequate sampling plan and the use of homogeneous groupings.

The QA/QC deficiencies are further complicated by the fact that the program plan begins with the premise that the QA/QC program at the site did not break down in the first place, and therefore the CPRT program work will not replace the QA/QC program of record and will only sample hardware, records, documents, etc., to determine if the original program was acceptable. (Rev. 3, p. 10.) Since the premise of the program is confirmatory as opposed to remedial, it cannot and does not provide a comprehensive reinspection of the safety-related structures, systems, or components such that there will be reasonable assurance that all undetected deficiencies and deviations are identified and corrected.

The program plan incorporates and has reached near-completion by reliance on a random sampling plan, as yet unapproved by the staff, which is supposed to provide for an escalated sampling approach to enable conclusions to be drawn on the entire population based on a limited look at some attributes of a randomly selected portion of homogeneous populations.

The deficiencies in the sample inspection program are different for each ISAP because the ISAPs are all unique and have uniquely developed programs.

This plan, contained in Appendix G, calls for an evaluation of the safety significance of deviations prior to consideration of expansion of the sample size. This presumes, with no basis, that all other deficiencies or deviations not identified would be of similar safety significance. Such an assumption is not statistically sound. Then if problems are found, the expanded sample is limited to only similar characteristics.

The staff asserts that until the sampling plan is approved, the results drawn under it are not approved, but the program plan specifically permits reliance on previously performed work.

In any event, without more information on what the sampling plan actually entails for each ISAP, it is impossible for CASE to take any position other than that the plant requires a 100% reinspection of all accessible attributes.

3. Lack of independence of the CPRT, specifically in regard to rework and repair.

The NRC imposed on TUEC a requirement for inclusion of an "investigation of the role of the principal contract personnel (Brown and Root and Ebasco) in regard to Quality Assurance/Quality Control concerns," and asked them "to consider the prudence of continuing to rely on contractor personnel involved in ongoing work and recovery efforts when they are the same people directly responsible for the problems identified herein." (SSER #11, p. P-36.)

On both items the program plan is non-responsive. There is apparently no ongoing or concluded investigation of the principal QA/QC management personnel. To the contrary, without investigation, virtually all of the personnel formerly involved with site QA/QC decisions have been promoted or retained in management positions.

More significantly, TUEC has continued to rely on the substantive work done by the former site QA/QC personnel to resolve deficiencies identified by the reinspection personnel.

Since the program permits resolution by personnel directly involved with having caused the problem in the first place, it seems unlikely that the reform program can do more than confirm the original actions taken by the involved personnel.

For example, a significant number of CPRT-identified deficiencies are dispositioned by C. T. Brandt, former assistant quality assurance manager, now QE supervisor.

One example of the type of problem identified above is found in NCR No. E85-101540 SX (attached). The ERC inspector identified in an uncontrolled deviation report, pursuant to checklist item 5.2.C, that in 1983 inspector J. Miller had improperly signed off inspection reports while his certifications were expired. The deficiency was then identified on an NCR. The NCR was subsequently dispositioned by C. T. Brandt on November 13, 1985, based on a second inspection certification, allegedly signed by C. T. Brandt for R. G. Tolson on September 20, 1983. The NCR's disposition does not attach or explain the initial deviation which found the certification was not in place until 10/26/84. The inadequacy of the resolution is by itself insufficient, but it is even more so because the disposition is done by Brandt based on his own flawed work from two years previous.



In short, all evaluations and corrective action remain under the control of TUEC, and TUEC remains virtually the same organization with the same people and the same problems as before.

The lack of independence in the program plan has resulted in other problems. The CPRT program plan suffers from a confusing and unclear methodology being implemented by numerous separate organizations. This multiple level approach invites programmatic breakdowns and failures in implementation of even the best program plans. To illustrate, the program contains an independent design verification program (IDVP) using the vertical slice methodology of one safety system, a horizontal review of two other systems, a sampling program (employing both a random sample and a bias sample), a 100% review of the large bore piping, a design analysis review, and hundreds of response inspections to ISAPs and DSAPs. Each portion of the program plan is being accomplished according to a different set of criteria, and being directed by separate management teams. Those teams have changed personnel, procedures, reporting instructions, and objectives. The standards or attributes against which inspections are accomplished are ambiguous, open to interpretation, or unknown. The organization structure for the interface of the programmatic elements is either non-existent or appears to be unworkable.

In short, business at Comanche Peak is more complicated, more confused, and ultimately more unreliable.

4. The program plan does not require NRC hold points.

The NRC's approval of the CPRT is apparently based on blind trust. There is nothing in the history of the construction of Comanche Peak resembling regulatory compliance. Additionally, there is no QA/QC program to insure internal compliance with CPRT commitments, and there is no assurance that the site QA/QC program, run by the old QA/QC personnel, is institutionally capable of handling the results of a major reinspection effort. As stated before by CASE, this plan guarantees no reasonable assurance of anything except more controversy.

CASE has pleaded for "hold points" in the CPRT program to insure that reinspection and rework would be quality controlled and the incentive for time pressures removed. Since no hold points have been instituted, it is understandable that implementation problems and substantive evaluation errors have occurred.

5. The plan ignores agency regulatory policies and practices for similarly deficient construction projects.

At two other plants where the NRC reached similar conclusions about failed QA/QC programs, it was based on much

more limited breakdowns than is evident at Comanche Peak. (See, generally, inspection history on Midland and Zimmer.)

At these plants the NRC withdrew its "reasonable assurance" prescription, required a halt to all construction and inspection activities, and then ultimately approved reinspection and rework activities which would, upon successful completion, restore reasonable assurance.

At Comanche Peak there are two significant deviations in the CPRT from past "get well programs." These flaws, which are briefly highlighted below, provide two additional opportunities for TUEC to escape the realities of the as built condition of the plant. These flaws are the iterative reinspection and rework process and the in process inspection. Both processes were the basis of stop work orders and enforcement action at Zimmer and Midland, respectively.

Zimmer: At Zimmer, the Commission issued a Show Cause Order and an Order Immediately Suspending Construction after a reinspection program/Quality Confirmation Project confirmed numerous examples of construction deficiencies and noncompliance with the 18 quality assurance criteria which "could have been prevented or identified in a timely manner by the licensee and its contractors had there been a properly managed QA program" (Cincinnati Gas & Electric (Zimmer), CLI-82-33, 16 NRC 1489 (1982) and other QA/QC and construction deficiencies.

The Commission found that the NRC lacked "reasonable assurance" that the Zimmer plant was being constructed in conformance with the terms of its construction permit and 10 CFR Part 50, Appendix B, or that there was adequate management control over Zimmer to assure NRC requirements were being met.

The basis of the Commission's withdrawal of reasonable assurance was stated as (1) Zimmer was constructed without an adequate QA program to govern construction and monitor quality, resulting in a facility of indeterminate quality; (2) numerous deficiencies have been identified such that both reanalysis and rework will be required to bring the facility into conformance with the regulatory standards; and (3) rework of deficiencies has been undertaken prior to completion of other relevant reinspection tasks, resulting in the potential for additional reworking of the same item if further deficiencies are found.

The Comanche Peak CPRT is based on the very iterative process which the Commission specifically rejected in Zimmer.

Midland: At the Midland facility, the NRC staff confirmed repeated construction and QA deficiencies up through October 1982. The NRC Staff then required Consumers Power Company to verify the adequacy of virtually all previous construction activities and to verify the adequacy of future construction. This program, the Construction Completion Program (CCP), required 100% reinspection of accessible installations, NRC hold points,

retraining and recertification of all QC inspectors, development of the new quality control checklists, and an independent third party overview of the reinspection and reconstruction activities.

The need for this plan was based on a history of QA violations far less serious than Comanche Peak's own history of violations.

One of the most serious violations identified at the Midland project was the use of "in process" inspections. An in process inspection consisted of the failure of site QC inspectors to identify "as non-conformances all of the deficiencies they observed during their inspections." According to the inspection report, the failure to systematically record all observed deficiencies diminished management's ability to determine the root cause of non-conformances so as to prevent recurrence, and resulted in a failure to provide information to management for the in-depth analysis by trending so a determination could be made whether or not work affected by the non-conformances should be stopped. It also cited a lack of consistency in the dispositioning of deficiencies as a serious problem. Consumers Power Company (Midland), inspection report 82-22 (Feb. 8, 1983).

The in process inspection that was the basis for enforcement action at Midland is at the heart of the ongoing work activities at Comanche Peak, according to the information available to us about the CPRT work on the site.

6. The program plan does not provide for public participation.

Our requests for participation in the programmatic development have been effectively denied. We continue to object to a process which does not include those organizations and individuals whose only objective is to insure that Comanche Peak, if operated, does so safely.

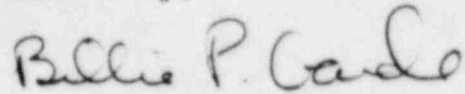
Attached as Appendix B to this letter are our previous specific comments. We incorporate them in their entirety into this letter. Except for a few issues, these comments have not been responded to by the Staff or the Applicant.

Conclusion

CASE believes that the Staff's actions at Comanche Peak are motivated by a single-minded determination to create a "licensable record," and not an intent to determine the truth about the as-built condition of the plant. Our belief is based on the Staff's actions at Comanche Peak in comparison to other similarly situated projects and the information blackout initiated in January 1985 by TUEC and perpetuated by the Staff.

The Staff's conduct of late on these matters has been extremely objectionable. CASE had hoped that the question of safety, not of licensability, would dominate the Comanche Peak efforts. This does not seem to be the case.

Sincerely,

A handwritten signature in cursive script that reads "Billie P. Garde".

Billie P. Garde

BPG/bp

THE PITTSBURGH  
GENERATING CO.

CONANCEE PEAK STEAM ELECTRIC STATION

NONCONFORMANCE REPORT (NCR)

8900/504

NO. 14.  
E85-101540 SX

Page 1 of 1

REPORTING PERSONNEL:

ITEM	STRUCTURE/SYSTEM	ITEM/COMPONENT	TAG/ID NUMBER	LOCATION OR ELEVATION	REQ NO.
1	NA	Inspection Report	E-63493	NA	NA

NONCONFORMING CONDITION Deviation Report #R-E-CDUT-042-DR-01

Per above D.R., Evidence of inspector certification to support above inspection report could not be found.

\*See attached Certification Sheet.

No Hold Tag Applied.

REFERENCE DOCUMENT: CP QP 2.1 REV 19 PARA NA

REPORTED BY: Lan Davis HQ 70 DATE: 10/28/85

BY LETTER/APPROVAL: *[Signature]* DATE: 10/28/85 HC  
 BY PHONE ADDRESS: *[Signature]* DEPARTMENT: *[Signature]* DRN HICKS

REPORTABLE UNDER (OCT 1980.55.4): YES NO REVISED BY:

BY THE REFERENCE TAG OR ONE ?

DISPOSITION: REPAIR REWORK USE AS IS OTHER

This is not a nonconforming condition as Jim Miller was certified when I.R. E-63493 was signed by him on 9-28-83. He was certified in QI-QP-11.3-44 on 9-16-83 and it was in effect until 9-16-84. See attached certification sheet.

*Charles Tommonal*  
11/7/85  
*C.T. James*  
11/12/85

ENG. LETTER/APPROVAL DATE:

BY LETTER APPROVAL DATE:

DISPOSITION VERIFICATION & CLOSURE: *C.T. James* 11/13/85

COMMENTS:

ACTION ADDRESS:



TEXAS UTILITIES GENERATING COMPANY  
QUALITY ASSURANCE DEPARTMENT  
INSPECTION CERTIFICATION

NAME JAMES MULLER DATE 9/16/83

LEVEL OF CERTIFICATION QC Technician Level I

ACTIVITY CERTIFIED TO PERFORM: Inspection of Field

Installation of FGE Barrier UNTIL: 9/16/84  
DATE

TUGCO PROCEDURE/INSTRUCTION NO.: QI GP-11.3-4d

TYPE OF EXAMINATION GIVEN:  ORAL  WRITTEN  PRACTICAL

RESULT OF EXAMINATION(S): Satisfactory

COMMENTS: Qualified by examination, OJT + 8 years  
related experience

RELATED EXPERIENCE: 8 YEARS

EDUCATION: 12 years - High School GRADUATION/DEGREE

FORMAL TRAINING: Satisfactory - 9/15/83 COMPLETED

OUT TRAINING: Satisfactory - 10 HOURS THIS ACTIVITY

EXAMINATION: Satisfactory - 100%

EVALUATED ON: 9-16-83 WITH CONSIDERATION OF RECORDS OF

EDUCATION, EXPERIENCE AND TRAINING, JOB PROFICIENCY AND DEMON-

STRATED SKILL BY: Bill Holms

PHYSICAL HEALTH: Satisfactory FOR ASSIGNED TASK OF

THIS PROCEDURE/ACTIVITY. RECOMMEND ASSIGNMENT AS LEVEL I

WITH RE-EVALUATION OF JOB PERFORMANCE AND PROFICIENCY ABOUT:

9/16/83 9/19/83

[Signature]  
SUPERVISOR  
9/16/83  
DATE

[Signature]  
APPROVAL  
9/20/83  
DATE

COMANCHE PEAK RESPONSE TEAM  
ERC DEVIATION REPORT (DR)

DR NUMBER R-E-CDUT-042-DR1	ORIGINATOR KR Rieley	DATE 7-5-85
IDENTIFICATION OF ITEM CONDUIT C13616039	J	UNIT <input checked="" type="checkbox"/> ONE <input type="checkbox"/> TWO <input type="checkbox"/> COMMON
SYSTEM AND LOCATION N/A		J MILLER TUGCO INSPECTOR 7-28-83 TUGCO INSPECTION DATE

REQUIREMENT (INCLUDE CHECKLIST ITEM NO.) 5.2.C VERIFY THAT THE SBM INSPECTION REPORTS, CONSTRUCTION TRAVELERS SIGNED BY THE ELECTRICAL INSPECTORS WERE DATED AFTER THEIR DATE OF CERTIFICATION AND PRIOR TO THEIR DATE OF EXPIRATION.

DEVIATION  
INSPECTOR J. MILLER SIGNED OFF <sup>SBM</sup> I.R. E-63493 ON 9-28-83.  
PER INSPECTOR'S QI-QP-11.3-44 QUALIFICATION FILE, CERTIFICATION WAS NOT UNTIL 10/26/83.

YES  NO  PENDING (INCLUDE JUSTIFICATION AS REQUIRED)

JM Rieley 9-12-85 N/A  
FIRST REVIEWER DATE ORIGINATOR DATE

VALID DR  YES  NO (INCLUDE JUSTIFICATION AS REQUIRED)

JM 10/26/85 N/A  
SECOND REVIEWER DATE ORIGINATOR DATE

TRIAL LAWYERS FOR PUBLIC JUSTICE, P.C.

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August 15, 1985

Mr. Darrell Eisenhut  
U.S. Nuclear Regulatory Commission  
Washington, D.C. 20555

Mr. Vince Noonan  
U.S. Nuclear Regulatory Commission  
Washington, D.C. 20555

Dear Sirs:

The Comanche Peak Response Team (CPRT) Program Plan and the Issue Specific Action Plans were submitted to the NRC on June 28, 1985. The objective of the plan is to insure that the Comanche Peak nuclear power plant receives an operating license. In order to receive a license the Nuclear Regulatory Commission must find that there is reasonable assurance that the facility, as built, does not endanger the public health and safety.

It is the position of the Citizens Association for Sound Energy (CASE) that such a finding can only be made after (1) the completion of a 100% reinspection of the plant, (2) a complete design review analysis, and (3) the successful implementation of an acceptable corrective action program.

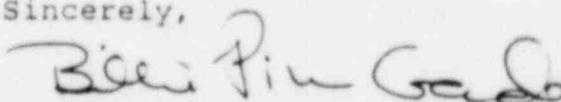
The CPRT Program Plan, even if successfully implemented, lacks significant programmatic controls, and is substantively deficient in a number of key areas. The process and substance deficiencies identified in the document submitted to date are described in this document. Since the CPRT itself is not complete (i.e. the QA/QC program for the plan has not yet been submitted, the inspection attributes are missing, the checklists for retraining are missing, etc.) these comments are not definitive. Further comments will be submitted after receipt and review of the other portions of the plan.

It should be noted that it is CASE's position that the plan itself should be litigated before the ASLB, and that additional hearings should be held on the adequacy of implementation of the reinspection effort, as well as the appropriateness of the proposed corrective action plan and the implementation of the corrective action program. It is also CASE's position that the ambiguity in the plan is so great that approval should not be granted prior to discovery on the program elements. It is our belief that the Applicant's commitments are not the actual program plan.

Finally, CASE objects to the proposition that the Staff's view of the questions raised in this letter (and the review of TUEC's response to Staff questions) will be committed to an SSER prior to a public meeting on the final proposed program plan. The efforts of the public and the whistleblowers to review TUEC's final program plan will be meaningless without providing for public review and comment on the CPRT.

We look forward to meeting with the Staff on these matters in the near future.

Sincerely,

A handwritten signature in cursive script that reads "Billie Pirner Garde".

Billie Pirner Garde

cc: Service List

PRELIMINARY REVIEW  
OF THE  
COMANCHE PEAK RESPONSE TEAM  
PROGRAM PLAN

(DOCKET 2)



PRELIMINARY CRITIQUE OF THE PROGRAMMATIC  
ASPECTS OF THE CPRT PROGRAM PLAN

This critique contains observations on the following aspects of the CPRT program plan:

1. Overall inadequacy of the proposed approach.
2. Programmatic deficiencies with the third party efforts proposed.
3. Programmatic deficiencies in the integration of the various overviews, reinspections, evaluations, and ongoing work activities.
4. Programmatic deficiencies in methodologies.
5. Programmatic deficiencies in scope, i.e. the depth and breadth of the review.
6. Programmatic deficiencies in the sampling techniques.
7. Programmatic deficiencies in the ISAP/DSAP approach to External Source Issues.
8. Missing elements of proposed program.
9. Comparison of CASE proposal and the CPRT.

In each of these categories there are both specific and general observations. These comments however are not definitive. There is no attempt to address the specific inadequacies of various ISAPs/DSAPs, nor is there any attempt to guess the inadequacy of the CPRT QA/QC program. Several charts have been attached as Exhibit 1 to this document to demonstrate the missing elements of the proposed program. (We have taken the liberty of modifying the charts contained in the program plan submitted by the Applicant for illustrative purposes.)

OVERALL INADEQUACY OF THE PROPOSED APPROACH

The most significant defect in the CPRT Program Plan is that it perpetrates the iterative process of design and construction failures. TUEC has chosen to "push ahead" with the reinspection and corrective action program, and only incorporate retrospectively any rework or reinspection requirements which result from the conduct of the CPRT.

According to the CPRT Program Process (Rev.2, p.15), the scope of the actual work of the reinspection program, as outlined in the ISAPs/DSAPs "will be based on a preliminary assessment of the root cause and potential generic implications of the identified deviations...Accordingly, most of the ISAPs and DSAPs will utilize iterative or phased implementation approaches that include an initial phase that is exploratory in nature."

Since the reinspection work has already begun it is apparent that the exploratory phase has been completed and preliminary assessments of the root cause and potential generic implications have already been identified. Yet none of the preliminary assessments have been disclosed, produced to the public or the NRC. Nor have they been completed using a Quality Control/Quality Assurance program for the CPRT, since such a program has not been developed. It is not clear from a reading of the program plan whether the results of the exploratory phase have ever been - or will ever be - documented.

TUEC's inability to successfully implement the iterative design and construction process has caused major regulatory, safety and financial problems. The choice of an iterative

approach to the reinspection and corrective action program is indicative of current management's inability or unwillingness to choose the prudent approach to getting the Comanche Peak project under control.

It is our view that the only way to successfully approach the reinspection, reanalysis, and corrective action project is to start with a clean slate. That is, to halt construction entirely until the CPRT program plan has received the full approval of the NRC Staff and the Licensing Board. Only then will it be prudent to begin the operation through a phased approach -- first reinspection, then rework.

The second major inadequacy of the program is that it is not comprehensive in scope, breadth or depth. As submitted, the program plan results will not be able to support the reasonable assurance objective sought by TUEC. Some details of the program inadequacies have been summarized in following sections.

Most importantly the CPRT proposes that concerns are resolved at the time that "TUGCO has defined actions" which "when implemented will correct identified deficiencies and preclude similar deficiencies." (Rev. 2, p. 5) The history of implementation failures at Comanche Peak provide no basis for the Staff or the public to be able to rely on the successful implementation of any corrective action. This is particularly true since it is TUGCO, not the independent third party, that is recommending the corrective action in the first place. This situation makes it even more crucial that NRC hold points be mandated for review of any correction or rework effort.

The third major inadequacy of the proposed program is that it is not controlled by third party personnel, but instead remains under the control and direction of TUEC. For example, TUEC controls all modifications of ongoing work in Unit II (Rev.2, p.4) and also the "future plant operations" (Rev 2, p.5). The lack of independence of the third-party teams to control their work eliminates their value, adding only confusion, not credibility.

Fourth, the management team remains a mystery. It is not sufficient for TUEC to have ostensibly removed the former QA/QC executives of the Comanche Peak project and replaced them with a team of borrowed professionals who march to the beat of an unknown drummer. The current management team is a completely diversified group of consultants, loaned employees, contract employees, advisors, and others. It remains unclear what has happened to the former executives, or why, and it is even murkier who is currently running the project - either the reinspection/corrective action program, or the remaining construction project. This confusion surrounding the management personnel is a critical weakness in the current proposal.

We believe that the reinspection program and any subsequent required corrective action must be done by truly independent third parties. They must have clearly defined reporting responsibilities to the NRC under 10 C.F.R., as well as the responsibility for drawing the conclusions about the scope of the problems. The remaining work to be done on Unit II should be handled by a new team of TUGCO and/or prime contractor personnel who have not had anything to do with previous construction problems.

The CPRT program plan also suffers from a confusing and unclear methodology being implemented by numerous separate organizations. This multiple level approach invites programmatic breakdowns and failures in implementation of even the best program plans. To illustrate, the program contains an independent design verification program (IDVP) using the vertical slice methodology of one safety system, a horizontal review of two other systems, a sampling program (employing both a random sample and a bias sample), a 100% review of the large bore piping, a design analysis review, and hundreds of response inspections to ISAPs and DSAPs. Each portion of the program plan is being accomplished according to a different set of criteria, a different company's quality control/quality assurance criteria, and being directed by separate management teams. The standards against which inspections are accomplished are ambiguous and open to interpretation. The organizational structure for the interface of the programmatic elements is either non-existent, or appears to be unworkable.

Other problems with sampling methodology, and major elements of the program which are still missing are described below.

Finally, a major fatal flaw of this program is its failure to produce the necessary level of detailed information to preclude misinterpretation. This is particularly important in this plan since there is a myriad of different personnel working on a plethora of reinspections, and the reinspection personnel are not the individuals drawing conclusions, or making recommendations about the findings.



Another result of having no comprehensive attribute checklist for reinspections is that there will be no meaningful way to assess whether adoption of a previous external inspection is appropriate.

Finally, the failure to produce detailed attribute checklists renders paperwork reviews by third-party overviews or the NRC virtually meaningless.

The NRC must at a minimum require the CPRT program (1) to be reorganized into a logical step-by-step process, (2) to be based on the reinspection of systems and components against detailed attribute checklists, (3) to establish NRC inspection hold points at critical junctures, (4) to require an independent overview of the required corrective action, and (5) to remove TUEC from the task of determining the consequences of generic/programmatic defects.

PROGRAMMATIC DEFICIENCIES WITH  
THE PROPOSED THIRD PARTY EFFORTS

- 1) None of the third parties are independent of TUEC, since all of the consultants are under the direction of the CPRT.
- 2) The third parties were selected solely by TUEC, disregarding the importance of the concurrence of the public, and the nomination and approval procedures for independent third parties used by the NRC since 1982. This after-the-fact assertion does nothing to restore the confidence of the public in the "fresh perspective."
- 3) The review team leaders, issue coordinators, and advisors are primarily responsible to, or are, in fact, TUGCO personnel who have been involved in the construction project for a long time.
- 4) The asserted qualifications, reputation, and integrity of the third-party consultants have not been tested through discovery or cross-examination, nor have the consultants answered questions from the public on their experience, competence, integrity, or the direction from the CPRT regarding the scope of their work.
- 5) The third-party consultants, individually and organizationally, are apparently not being considered a part of the normal regulatory process, and therefore not required to report all safety related information reportable under 10 C.F.R. 50.55(e) and 10 C.F.R. Part 21 to the NRC directly.
- 6) The third-party consultants can only recommend corrective action to TUEC/TUGCO, but they cannot control the implementation of the corrective action. It is not even clear whether the third party has the authority to insist on accomplishment of a particular corrective action as a caveat for any conclusions.
- 7) The SRT responsibilities, under the direction of a TUGCO Vice President, control the CPRT effort through selection of management personnel, approval of the action plans, review and approval of the "safety significant" determination, and root cause and generic implication assessment, and approval of corrective action.
- 8) The same TUGCO Senior Vice President, is also in charge of the issues raised through the SAFETEAM, and other project activities, i.e., there is no procedure for inclusion of new issues without approval of TUGCO management.

PROGRAMMATIC DEFICIENCIES IN THE INTEGRATION OF  
THE VARIOUS OVERVIEWS, REINSPECTIONS, AND EVALUATIONS

1) There is no status assessment of system commodities or defined baseline of items subject to the CPRT. Without such a document the completion date or progress made can not be quantified.

2) Interfaces between the ongoing project and the program reinspection plan are almost non-existent. (Interface between the design, construction, reinspection, and corrective action aspects of the project are critical for successful implementation of the program plan.)

3) The use of the Collective Evaluation Reports providing information at the end of the DSAP/ISAP process precludes consideration of critical information by all disciplines during the reinspection.

4) The circular approach to expanding issues is, as described on page 2 of revision 2, not detailed in a manner which provides confidence that the all generic implications and root causes will be extrapolated to other areas of the plant.

PROGRAMMATIC DEFICIENCIES IN METHODOLOGY

- 1) The methodology is not supported through references to established professional codes (ASME, ANSI, AWS, etc.).
- 2) The methodology is ambiguous about commitment to the FSAR, and provides no criteria upon which an exception will be sought.
- 3) Reporting procedures for third-party auditors exclude independent contact with the NRC.
- 4) Issues "closed out" by the external source for whatever reason are not considered for potential root cause or generic implications.
- 5) The program plan does not include all vendors, or separate construction activities and therefore presumes that work was accomplished in accordance with regulatory requirements. There is nothing to justify this position.
- 6) The hardware categories proposed in the self-initiated evaluation are not comprehensive. There is no explanation for how homogenous populations were selected. There is no explanation of how the selected populations will provide the foundation to reach the broad conclusions predicted by the CPRT.
- 7) There are no attribute checklists for inspections, or for inspectors to be retrained to.
- 8) There is no new retraining, recertification programs for TUEC or B&R QA/QC or craft personnel which insures that the identified failures in the training program implementation is not repeated.
- 9) The criteria for determination of defects is its "safety significance", not necessarily non-compliance with FSAR requirements.
- 10) There is no provision for assessing deficiencies in inaccessible hardware components.
- 11) There is no provision for logical consideration of potential programmatic generic defects, such as inadequate design review. All defects, deficiency reviews, etc. are going on simultaneously.

PROGRAMMATIC DEFICIENCY IN SCOPE, DEPTH AND BREADTH

1) The program plan does not provide the breadth of review necessary to reach any conclusions about the overall design and construction of the plant (i.e. insufficient number of systems proposed and a lack of attributes on the selected systems).

2) No basis has been provided to justify the selection of the civil/structural, electrical/mechanical, instrumentation systems proposed.

3) The external source issues have identified massive specific or programmatic deficiencies. The proposed program fails to accommodate the reported failures substituting instead the review of the smaller number of systems as a first cut.

4) The size of the sample of systems to be reviewed is inadequate to reach any meaningful conclusions about the systems or components which are called into question by external source issues.

5) The information provided on the large bore piping reanalysis is insufficient to determine whether the "major concerns about the system" are the only concerns which should be considered. (There are no submitted procedures, checklists, programmatic details about the program.)

6) The vertical slice approach for the mechanical components is supposed to extrapolate the IDVP results to other systems, but the slice is not comprehensive enough, it relies upon other inspection results to eliminate inspection attributes.

7) The IDVP plan should include the timely consideration and implication of the root cause of all IDVP issues on other components and systems.

8) There is no justification provided to exclude the Westinghouse-designed portions of the plant. Since the design QA breakdown apparently stems from implementation failures, all vendors must be subjected to the design review analysis to insure the adequacy of the design for CPSES.

9) The scope of the DAP was developed by eliminating inspection elements by reliance on the inspection by numerous other external sources, which themselves were separate from the current effort and conducted according to totally different procedures, and intended to discover different information.

10) There is no justification for the creation of arbitrary homogenous hardware groups to use as a base to extrapolate results of the DAP.



11) Expansion criteria for components are ambiguous and rely on no developed acceptability level.

#### PROGRAMMATIC DEFICIENCIES IN THE SAMPLING TECHNIQUES

1) The proposed sampling approach is generally based on the conduct of reinspection of both bias and random samples. The reinspection itself is done against unknown baseline criteria (i.e. sometimes the FSAR, sometimes "safety significance," sometimes an unknown attribute checklist) using a 95/5 sampling plan. The attributes are, as of yet, unidentified so there is no way to determine by reviewing the plan whether the reinspection will be of sufficiently detailed attributes to permit meaningful conclusions about the acceptability of any one component.

2) The bases for the CPRT decisions will be engineering evaluations of the safety significance of design, construction, or process deficiencies, not raw data. Therefore, only those defects which are judged to have any safety significance will ever be used as a basis to reach the threshold for expanding the sample size.

3) Exploratory evaluations which are not recorded are used to identify the specific sub-population rendering the sampling process biased from the beginning.

4) The sampling approach is not committed.

PROGRAMMATIC DEFICIENCIES IN THE APPROACH TO  
EXTERNAL SOURCE ISSUES AND SELF-INITIATED EFFORTS

- 1) The ISAP/DSAP approach ignores the critical need to assess the project as a whole, instead of on a piecemeal approach.
- 2) ISAPs are not prepared on any issues not yet identified by the NRC-TRT, including over 700 internal allegations in the SAFETEAM files.
- 3) ISAP development, done by the issue coordinators or field consultants, do not coincide with a standard set of requirements (i.e. some ISAPs use the FSAR as the acceptance criteria, some use regulatory guides, some use professional standards). Therefore it is not possible to draw conclusions about compliance with the originally prescribed standards.
- 4) ISAPs do not address the history of other problems related to the specific issue (i.e. each ISAP is self-contained, except for the end-of-line review).
- 5) Each ISAP has individual close-out criteria which do not qualify acceptability.
- 6) There is no inspection criteria or uniform attribute checklists which can be used by QA/QC personnel, auditors, or third-party reviewers to determine the adequacy of the ISAP.
- 7) The ISAPs/DSAPs do not include the results of the exploratory investigations which are used as a basis to develop the ISAP.

### MISSING ELEMENTS

The following elements are missing entirely from the program plan:

1. There is no accurate, up-to-date list of remaining work against a defined baseline of actual work necessary to complete Unit I and Unit II.
2. There are no work controls on on-going work, including ongoing reinspection work and any on-going corrective action work.
3. There are no NRC inspection and review hold points at critical reinspection points.
4. There are no inspections attribute checklists available for review and analysis to insure that the reinspection effort will be comprehensive.
5. There is no significant change in the organization and management personnel associated with the construction of the plant (as opposed to QA/QC).
6. There is no internal management analysis to determine the root cause of the implementation failures of the initial construction and inspection effort.
7. There is no verifiable central control over the multiple reinspection programs to insure that the interfaces necessary for successful implementation and communication exist at the facility.
8. There has been no significant reduction in the construction activity of Unit II to accommodate changes.
9. There is, to date, no quality control/quality assurance program for the reinspection program.
10. There is no acceptable protocol between the CPRT-SRT, TUEC, and other contractors.
11. There are no third-party controls over the implementation of the corrective action measures.
12. There is no contractual independence of the evaluators on the SRT from TUEC management.
13. There is no separation between the reinspection effort and the work completion effort.
14. There has been no review of the third-party organizations or individuals (either through the hearing or through a public meeting).

15. There is no program to consider the implications of harassment and intimidation on the work atmosphere.

16. There is no program for retraining and recertifying all inspectors to new inspection criteria.

17. There is no justification provided for the identification of the homogenous hardware groups which are to provide the basis for the conclusions of the self-initiated evaluation.

18. There is no adequate plan for implementation of oversight controls on the self-initiated evaluations, or the ISAP/DSAPs.

COMPARISON OF APPENDIX A (SUGGESTED CONSTRUCTION REVERIFICATION PROGRAM) TO THE CPRT PROGRAM PLAN

On February 4, 1985, CASE submitted a proposal for a comprehensive reinspection program as an attachment to their REQUEST FOR AN EVIDENTIARY STANDARD. The Board deferred final ruling on the proposal, suggesting that TUEC's proposal may be acceptable to CASE.

The key elements of CASE's proposal are listed on the left. The right-hand column denotes which recommendations are included in the CPRT Program Plan.

<u>CASE Proposal</u>	<u>CPRT Program Plan</u>
I. <u>Selection of 3rd Party:</u>	
a) Provide for Board selection of independent auditor to perform reinspection using following criteria: (1) independence; (2) competence; (3) integrity.	No
b) Selection after a public meeting about the nomination prior to staff approval.	No
c) Board approval of independent auditor.	No
II. <u>Overall Program Plan - Phase I:</u>	
a) Reorganize TUEC & B&R upper management.	Partial
b) Reorganize site and mid-level management.	Partial
c) Reorganize work force into teams.	No
d) Installation and status assessment of current work completion.	No

CASE Proposal

CPRT Program Plan

- |   |         |
|---|---------|
| e) Establish NRC "hold points" for review of work plans.                      | No      |
| f) Complete revision for all procedures.                                      | No      |
| g) Issue new procedures and inspection attribute checklists after NRC review. | No      |
| h) Review documentation and incorporate design changes into final design.     | No      |
| i) Re-qualification of equipment.   | No      |
| j) Review vendor QA programs.   | No      |
| k) Recertify and retrain personnel.   | No      |
| III. <u>Overall Program Plan - Phase II:</u>                                  |         |
| a) Reinspect hardware and report results.                                     | No      |
| b) Monthly meetings on implementation.  | No      |
| c) Develop corrective action plan, submit for review, and revise.             | Partial |
| d) Board approval of corrective action plan.                                  | No      |
| IV. <u>Overall Program Plan - Phase III</u>                                   |         |
| a) Resubmit design for NRC approval.  | Partial |
| b) Work Authorization Procedure for items requiring repair.                   | No      |
| c) Work completion accomplished.  | _____   |
| d) Monthly meetings to review progress.                                       | No      |



CASE Proposal

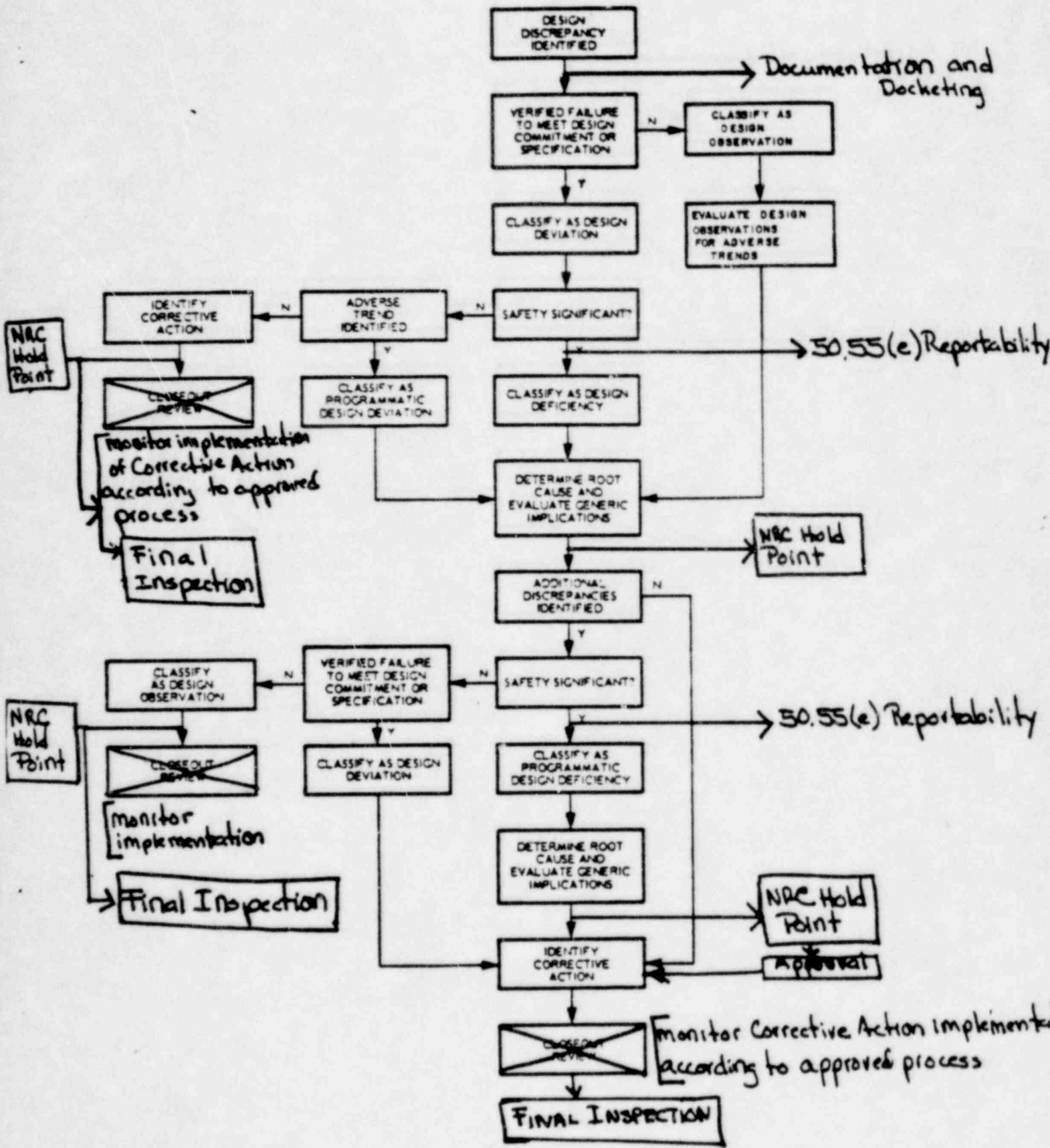
CPRT Program Plan

V. Cooperative Participation by Parties  
and Board:

- |  |         |
|--|---------|
| a) Board approval of CPRT.                             | Partial |
| b) Continuous documentation oversight by<br>3rd party. | No      |
| c) Monthly public meetings.                            | No      |
| d) Mandatory compliance with approved<br>methodology.  | No      |

Decision logic used in the evaluation of identified design discrepancies

ATTACHMENT 1



Decision logic used in the evaluation of identified construction discrepancies

ATTACHMENT 2

