

DMB

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May 15, 1986

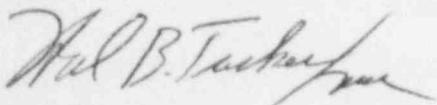
Dr. J. Nelson Grace, Regional Administrator
U. S. Nuclear Regulatory Commission
Region II
101 Marietta Street, NW, Suite 2900
Atlanta, Georgia 30323

Subject: RII:PSK/PKV
Catawba Nuclear Station
50-413/85-55 & 50-414/85-68

Dear Dr. Grace:

Please find attached a response to Violation No. 413/85-55-04, Violation No. 413/85-55-06, and Deviation No. 413/85-55-03, 414/85-68-03, as identified in the subject Inspection Report.

Very truly yours,



Hal B. Tucker

LTP:slb

Attachment

cc: NRC Resident Inspector
Catawba Nuclear Station

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PDR ADOCK 05000413
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CATAWBA NUCLEAR STATION
RESPONSE TO NRC VIOLATION
50-413/85-55-04

VIOLATION:

Technical Specifications 6.8.1 requires written procedures shall be established, implemented, and maintained covering the applicable procedures recommended in Appendix A to Regulatory Guide 1.33, Revision 2.

- (a) Periodic Test (PT)/1/A/4350/02B, Diesel Generator "1B" Operability Test, requires in step 12.42 verification that the fuel oil transfer valve IFD-62 (D/G Eng. Fuel Oil Day Tank 1B Fill) has maintained level >70 inches.

Contrary to the above, on December 23, 1985 and January 6, 1986, step 12.42 was erroneously signed off as being completed; however, at these times, IFD-62 was inoperable. These procedures along with a procedure dated December 19, 1985, were all signed off by management as having met all acceptance criteria based on an alternate method to maintain level although IFD-62 was not functioning properly.

- (b) Administrative Policy Manual (APM), Chapter 4.2, Administrative Instructions for Permanent Station Procedures, Section 4.2.7.a requires that a procedure completion package contain all required enclosures.

Contrary to the above, Section 4.2.7.a was not implemented in that, 33 completed periodic test packages associated with Unit 1 diesel generator operation occurring between December 2, 1985 and January 20, 1986, did not contain all of the enclosures.

- (c) Operations Management Procedure (OMP) 2-28, Revision 6, Diesel Generator Logbook, Section 8.14 requires a Test Failure/Invalid Test Description Sheet for each "valid failure", "invalid failure", and "invalid test" with checks in the appropriate box on the sheet and full explanation. This section also requires the shift supervisor to review and sign-off on the completed sheet.

Contrary to the above, Section 8.14 was not implemented in that, of 30 data sheets associated with this procedure for "1B" diesel generator for start attempts 356 through 386, two data sheets were not filled out. One of these data sheets, although not filled out, was still signed-off by the shift supervisor.

RESPONSE:

- (1) Duke Power Company admits the violation.
- (2) The reasons for the violation are as follows:
 - (A) A misunderstanding existed concerning the use of a "procedure discrepancy" versus a "procedure change".

- (B) Procedural requirements were unclear as to whether both the ES alignment checklist and its independent verification checklist (which are contained in a separate operating procedure [OP]) must be attached to the completed PT.
 - (C) A procedural inadequacy existed in that the D/G Test Failure/Invalid Test Description Sheet did not provide adequate guidance to assure that a sufficient and consistent level of detail was recorded.
- (3) The following corrective steps have been taken:
- (A) Operations Management Procedure 1-4, Use of Procedures, has been clarified to prevent the use of a procedure discrepancy sheet as a means of satisfying acceptance criteria. This revised OMP 1-4 will require a procedure change.
 - (B) Periodic Tests PT/1(2)/A/4350/02A(B), Diesel Generator 1(2) A(B) Operability Test, and PT/1(2)/A/4350/02C, Available Power Source Operability Check, have been changed to clarify the requirement to attach both the ES alignment checklist and the independent verification checklist to the completed PT.
 - (C) Operations Management Procedure 2-28, Diesel Generator Logbook, has been changed to require more detailed information in a consistent manner on the Test Failure/Invalid Test Description Sheet. This added information will enhance the quality of the review performed by the on-shift supervisor. Additionally, an engineering review will be performed for each Invalid Test, Invalid Failure and Valid Failure to assure that the test results have been properly classified.
- (4) Duke Power Company feels that the corrective actions described above should be adequate to avoid further violations. However, to augment this, increased management attention will continue to be directed towards emergency diesel generator operation and associated activities.
- (5) Duke Power is now in compliance.

CATAWBA NUCLEAR STATION
RESPONSE TO NRC VIOLATION
50-413/85-55-06

10 CFR 50, Appendix B, Criterion XVI and Topical Report Quality Assurance Program (DUKE -1-A) Section 17.2.16 require measures 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 and that the measures shall assure that the cause of the condition is determined and corrective action taken to preclude repetition.

Contrary to the above, measures did not assure that the cause of the condition was determined and corrective action taken to preclude repetition in that a failure to perform hourly fire watches as required occurred on October 8, 1985 (See LER 85-58). Corrective action was taken to preclude reoccurrence of this problem. Subsequent to this corrective action, failures to perform hourly fire watches occurred again on November 7, 1985 (LER 85-64), December 17 and 26, 1985. These subsequent failures indicate that the corrective action taken as a result of the failure on October 8 was inadequate to preclude repetition.

RESPONSE:

(1) Duke Power Company admits the violation.

(2) The reasons for the violation are as follows for each occurrence:

10/8/85 (LER 85-58)

- Security Officers were not properly reassigned/rotated during routine change-offs.
- The Fire Detection Response (FDR) Officer who was assigned to perform fire watches left the verification forms to be picked up by the oncoming Security Force Member (SFM).
- The oncoming SFM was not relieved from the previous assignment on time.

11/7/85 (LER 85-64)

- Reassignment was not made due to miscommunication between the Team Sergeant and the Central Alarm Station (CAS) Operator.

12/17/85 (LER 85-70)

- The FDR was unable to enter Diesel Generator Room 1B due to a security computer malfunction which would not allow routine operation of the Controlled Access Doors (CADs).

12/26/85 (LER 85-72)

- The FDR was unable to enter Diesel Generator 1B and the Auxiliary Feedwater Pump Room due to an access control system malfunction which he did not report to the Fire Protection Console (FPC) Officer until it was too late to meet fire watch time requirements.

(3) The following Corrective Steps have been taken for each occurrence:

- LER 85-58 - The incident was discussed with the SFMs involved.
 - A memorandum was sent to all SFMs emphasizing the importance of maintaining hourly fire watches in the required time limit.
 - The security personnel team assignment sheet was modified and incorporated into the appropriate security procedure.

- LER 85-64 - The FDR Security Procedure was revised to require the assigned officer to maintain fire watches until relieved by another SFM.
 - A memorandum was sent to SFMs outlining the need for proper communication.

- LER 85-70 - Personnel from Duke Power Company's Central Processor Unit (CPU) group investigated the problem. The location of fuses necessary to defeat door locks, in the event future incidents of this nature occur was made available to the security force.
 - A dedicated plant telephone has been installed at the FPC station.

- LER 85-72 - Revised the Security procedure requiring the FDR to notify the FPC Operator immediately when problems occur which may cause the FDR to be late on fire watch time requirements.
 - No further similar incidents subsequent to the completion of the prescribed corrective actions.

(4) The corrective steps identified in item 3 (above) have been taken to avoid further violations.

(5) Full compliance was achieved on February 1, 1986.

CATAWBA NUCLEAR STATION
RESPONSE TO NRC DEVIATION
50-413/85-55-03 & 50-414/85-68-03

DEVIATION:

The licensee informed the NRC in FSAR, Rev. 13, paragraph 7.4.7.1, that the instrumentation and controls required for hot shutdown outside the control room in the auxiliary building on the auxiliary shutdown panels were listed on Tables 7.4.7-1, 7.4.7-2, and 7.4.7-3.

Contrary to the above, all instrumentation and controls listed in Tables 7.4.7-1, 7.4.7-2, and 7.4.7-3 were not installed on the auxiliary shutdown panels.

RESPONSE:

In revision 14 of the FSAR, the tables were corrected to accurately show the installed instrumentation and controls.

The correcting of the tables will avoid further deviations.

Revision 14 of the FSAR was submitted to the NRC on January 31, 1986.