



UNITED STATES  
NUCLEAR REGULATORY COMMISSION  
REGION II  
101 MARIETTA STREET, N.W.  
ATLANTA, GEORGIA 30323

Report No.: 50-416/86-18

Licensee: Mississippi Power and Light Company  
Jackson, MS 39205

Docket No.: 50-416

License No.: NPF-29

Facility Name: Grand Gulf

Inspection Conducted: June 9-13, 1986

Inspector: C. Smith

6-30-86  
Date Signed

Approved by: G. Belisle  
G. Belisle, Acting Section Chief  
Division of Reactor Safety

6/30/86  
Date Signed

SUMMARY

Scope: This routine, announced inspection was conducted at the Corporate Office in the areas of Offsite Support Staff and Offsite Review Committee.

Results: No violations or deviations were identified.

## REPORT DETAILS

## 1. Persons Contacted

## Licensee Employees

- \*C. Angle, Nuclear Plant Engineering - Principal Engineer
- \*L. Burgess, Program Quality Assurance (QA) Supervisor
- D. Butler, Safety and Licensing Specialist
- \*D. Canazaro, Acting Manager, QA Audits
- J. Cesare, Manager, Nuclear Licensing
- T. Cloninger, Vice President, Nuclear Engineering and Support  
(Vice Chairman, Safety Review Committee)
- \*L. Dale, Director, Nuclear Licensing and Safety
- W. Edge, Manager, Programs QA
- J. Fortenberry, Engineer, Nuclear Fuels Section
- \*J. Fowler, Secretary, Safety Review Committee
- \*H. Green, Advisor to Vice President, Nuclear Operations
- J. Harrington, Supervisor, Nuclear Services
- S. Hobbs, Manager, Nuclear Safety and Licensing
- G. Ingram, QA Supervisor
- \*O. Kingsley, Jr., Vice President, Nuclear Operations  
(Chairman, Safety Review Committee)
- W. Klinger, Acting Supervisor, Supplier Audits
- \*J. Lee, Supervisor, Nuclear Fuels Section
- Dr. L. McKay, Manager, Radiological and Environmental Services
- T. Reaves, Director, Nuclear Support
- \*C. Tyrone, Manager, Nuclear Services and Fuels

\*Attended exit interview

## 2. Exit Interview

The inspection scope and findings were summarized on June 13, 1986, with those persons indicated in paragraph 1 above. The inspector described the areas inspected and discussed in detail the inspection findings listed below. No dissenting comments were received from the licensee. The licensee did not identify as proprietary any of the materials provided to or reviewed by the inspector during this inspection.

Inspector Followup Item: Publication of NPD procedures and corrections to lower tier procedures, paragraph 5.

## 3. Licensee Action on Previous Enforcement Matters

This subject was not addressed in the inspection.

## 4. Unresolved Items

Unresolved items were not identified during the inspection.

5. Offsite Support Staff (40703)

- References:
- (a) 10 CFR 50.54(a)(1), Conditions of Licenses
  - (b) MP&L Operational QA Manual (MPL-TOP-1A) Revision 4, Amended
  - (c) 10 CFR 50, Appendix B, Quality Assurance Criteria for Nuclear Power Plants and Fuel Reprocessing Plants
  - (d) Regulatory Guide 1.33, Quality Assurance Program Requirements (Operations)
  - (e) ANSI N18.7-1976, Quality Assurance for the Operational Phase of Nuclear Power Plants
  - (f) Technical Specifications, Section 6, Administrative Controls

The inspector visited the corporate office to determine whether the offsite support staff functions were performed by qualified personnel in accordance with licensee approved administrative controls, regulatory requirements, industry guides and standards, and Technical Specifications (TS). The following criteria were used during this review to assess the adequacy of the offsite support staff:

- Administrative controls were established to assign departmental responsibilities, authorities, and lines of communication in conformance with the requirements of 10 CFR 50, Appendix B, and the licensee's approved QA program.
- Managers, group leaders, and staff members understood their responsibilities and authorities.
- The above personnel were qualified for their related work.
- QA audits of offsite support staff activities were conducted satisfactorily and corrective actions for identified deficiencies were completed in a timely manner.

The documents listed below were reviewed to determine if the previously listed criteria had been incorporated into the licensee's offsite support staff operation:

Nuclear Production Department (NPD) Policy Manual, Revision 0

Section 4.0 Management Principles and Philosophies  
 Section 5.0 NPD Organization and Corporate Support

### Nuclear Production Department Procedures Manual

- Section 1.1 NPD Procedures Manual, Safety Related, Revision No. 1
- Section 1.7 Performance Monitoring - Management Information Program, Revision No. 2
- Section 1.10 Professional Qualifications Review, Revision No. 1
- Section 1.11 Objectives and Goal Program, Revision No. 1

### Nuclear Support Administrative Procedures Manual

- Section 1.4 Nuclear Support Organization and Responsibilities, Revision 1
- Section 1.5 Deficiency Identification and Reporting, Revision 0
- Section 1.6 Training of Nuclear Support Staff Personnel, Revision 3
- Section 1.7 Screening for Evaluation of Deviations and Deficiencies, Revision 1
- Section 1.8 Design Change Initiation, Revision 0
- Section 1.12 Safety and Environmental Evaluations, Revision 2
- Section 2.1 Nuclear Services Section, Revision 1
- Section 3.1 Nuclear Fuels Section, Revision 1
- Section 4.1 Radiological and Environmental Services Section, Revision 1
- Section 5.1 Environmental Surveillance Program Organizational Structure and Responsibilities, Revision 3

### Nuclear Licensing and Safety Administrative Procedures Manual

- Section 1.4 Nuclear Licensing and Safety Organization and Responsibilities, Safety Related, Revision 1, Draft A
- Section 2.1 Nuclear Licensing Section, Revision 1
- Section 3.1 Nuclear Safety and Compliance Section, Revision 1

QAP 1.30 General Office QA Organization and Duties, Responsibilities, and Authority of General Office QARs, Revision 9

MP&L's Topical Report (MP&L-TOP-1A), Sections 1.0 and 2.0, describe the functions of the offsite support organizations participating in the nuclear QA program. The Nuclear Production Department (NPD) Policy Manual and the NPD Procedures Manual are upper-tier program documents that collectively implement requirements of the Topical Report. Guidance in the performance of activities common to all NPD organizations are delineated in the NPD Procedures Manual. Additionally, programmatic requirements and responsibilities related to monitoring and assessing overall plant performance in board functional areas directly related to plant safety and reliability are addressed in this program document. The inspector determined that numerous procedures contained in the NPD Procedures Manual have not yet been published. This issue is identified as an Inspector Followup Item and is discussed later in the report.

Pursuant to requirements delineated in upper-tier QA program documents, the inspector conducted interviews with licensee personnel from the following offsite support groups to ascertain the degree of conformance with QA program requirements:

Nuclear Services and Fuels

Radiological and Environmental Services

Nuclear Licensing

Nuclear Safety and Compliance

Audits QA

Programs QA

The inspector determined during the course of these interviews that each support organization had a QA program documented by written procedures which control activities defined in the Topical Report. In addition, each offsite support group's organizational structure, functional responsibilities, levels of authority, and lines of internal and external interfaces were documented in writing.

The inspector identified discrepancies in paragraph numbers referenced in lower-tier quality implementing program documents for commitments delineated in the NPD Policy and Organization Manual. These discrepancies were caused by replacing the NPD Policy and Organization Manual with the NPD Policy Manual and the NPD Procedures Manual. However, licensee personnel were fully familiar with QA program documents and identified those sections of the upper-tier program documents wherein commitments and their responsibilities were defined. The inspector determined that these editorial discrepancies were minor administrative errors and did not impair effective implementation of the QA program. Correction of these discrepancies requires completing the phase-out of the NPD Policy and Organization Manual and editorial corrections to the lower-tier quality implementing procedures. This issue is discussed in the last paragraph of this report.

Training was provided to licensee employees in the form of general employee training and required reading lists. Typical of this is the training program for Nuclear Support Staff Personnel documented in Nuclear Support Administrative Procedure No. 1.6. Members of this technical staff are degreed engineers who were knowledgeable of their functional responsibilities and ongoing technical issues concerning Grand Gulf Nuclear Station (GGNS). The inspector determined that design control responsibilities related to nuclear fuel and core design had been recently assigned to the Nuclear Fuels Section. At the exit interview, the inspector stated that additional management attention would be required regarding the training provided personnel within this group in light of the new responsibilities assigned to them. Specifically, the minimum training requirements delineated on Attachment III to Nuclear Support Administrative procedure

No.1.6 would have to be supplemented by training in requirements of ANSI N45.2.11-1974, 10 CFR 50.59 Safety Evaluations, and implementing procedures of the section.

Within this area, one Inspector Followup Item was identified. The licensee is presently replacing the NPD Policy and Organization Manual with the NPD Policy Manual and the NPD Procedures Manual. These two program documents collectively implement licensee commitments delineated in the QA program Topical Report. Additionally, support organizations, procedures, and section procedures reference commitments delineated in these upper-tier program documents. The inspector determined that numerous procedures to be contained in the NPD Procedures Manual have not yet been published. A review of the "NPD Status of Procedures in Review as of June 6, 1986" report was performed by the inspector. Pursuant to this review, until the licensee has completed publication of procedures delineated in this report and editorial discrepancies in lower-tier implementing procedures are corrected, this is identified as Inspector Followup Item 416/86-18-01.

6. Offsite Review Committee (40701)

- References:
- (a) 10 CFR 50.54(a)(1), Conditions of Licenses
  - (b) MP&L Operational QA Manual (MPL-TOP-1A), Revision 4 Amended
  - (c) 10 CFR 50, Appendix B, Quality Assurance Criteria for Nuclear Power Plants and Fuel Reprocessing Plants
  - (d) TS, Section 6.5.2, Safety Review Committee
  - (e) Regulatory Guide 1.33, Quality Assurance Program Requirements (Operations)
  - (f) ANSI N18.7-1976, Administrative Controls and Quality Assurance for the Operational Phase of Nuclear Power Plants

The inspector reviewed the licensee offsite review committee program required by references (a) through (f) to determine whether the program had been established in accordance with regulatory requirements, industry guides and standards, and TS. The following criteria were used during this review to assess the overall acceptability of the established program:

- The Safety Review Committee (SRC) membership and qualifications were as required by TS.
- The SRC held meetings at the required frequency with the required quorum.
- The SRC reviewed those items specified in TS.

- The SRC had cognizance of audits performed in the areas specified by TS.
- SRC meeting minutes were prepared and issued within the required timeframe.

The documents listed below were reviewed to determine if these criteria had been incorporated into the offsite review program:

Nuclear Production Department Policy Manual, Revision 0

Nuclear Production Department Procedure NO. 1.5, Safety Review Committee (SRC), Revision 3

MP&L Safety Review Committee Training/In-doctrination Manual, January 1986

Grand Gulf Nuclear Station SRC meeting minutes from January 13, 1984 (Meeting 84-1) to May 20, 1986 (Meeting 86-10)

The Charter for the GGNS SRC is contained in TS Section 6.5.2. The SRC is a standing committee composed of members who are MP&L management and supervisory personnel, a representative from Middle South Services, Inc., and consultants to MP&L. The structure of the SRC is in accordance with licensee commitments delineated in ANSI 18.7-1976, paragraph 4.3.2.

The inspector conducted interviews with the Chairman and Vice Chairman of the SRC and other SRC members to ascertain the conduct of operations of the SRC. The inspector determined that two SRC Standing Subcommittees have been established with review responsibilities for the following:

Subcommittee 1

Safety Evaluations performed under the requirements of 10 CFR 50.59

Plant Safety Review Committee (PSRC) meeting minutes and reports

Subcommittee 2

Corrective Action Requests (CARs) Closeout Notifications

Revisions to the QA Master Audit Plan

QA Audit Program Plan and Quarterly Audit Schedule and changes thereto

The subcommittees are staffed by personnel who are SRC full committee members. The subcommittees meet as frequently as required to discharge their responsibilities; a minimum schedule of once every six months has been established. Written reports of reviews conducted by the subcommittees are

prepared and presented to the SRC full committee for discussion and/or closure.

The inspector reviewed the SRC meeting minutes for the period January 3, 1984 to May 20, 1986 and verified that the scope of activities reviewed were consistent with the requirement of TS Section 6.5.2.7.

The meeting schedule of the SRC is delineated in TS Section 6.5.2.5 which requires the SRC to meet at least once per calendar quarter during initial year of unit operation and at least once per six months thereafter. Based on the review of the SRC meeting minutes, the inspector verified that the TS schedule for SRC full committee meetings were met. Full committee SRC meetings are presently conducted once every two months.

Discussions were conducted with corporate office QA personnel to ascertain the interface requirements with the SRC with regards to TS Section 6.5.2.8. The inspector verified that QA audit reports, QA audit schedules, and Corrective Action Requests Closeout Notifications were provided to the SRC. The following documents were reviewed in connection with this effort:

Memorandum to Mr. John Fowler, Secretary SRC, from S. M. Fieth, Director, QA, Subject: Last Quarter 1985 Scheduled/Completed Audits, Scheduled Audits for First Quarter 1986, and the 1986 Audit Program Plan, dated February 4, 1986

Memorandum to Mr. John Fowler, Secretary SRC, from S. M. Fieth, Director, QA, Subject: Completed Audits for First Quarter 1986 and Scheduled Audits for Second Quarter 1986, dated May 14, 1986

Corrective Action Requests/Audit Logs transmitted to SRC/PSFC/NPE-OAS from QA covering period from September 10, 1985, to June 11, 1986

Monthly Memorandum to Mr. J. G. Cesare, Secretary, SRC, from W. E. Edge, Manager, Programs QA, Subject: Monthly Transmittal of Audits for Review for period covering May 1, 1985, to July 1, 1985

Based on the scheduled audits for the second quarter of 1986 that was presented to the SRC, the inspector selectively determined that the following audits are scheduled to be performed for the next SRC meeting on July 16, 1986.

Audit #PROC-86/01  
 Audit Date: 6/2-13/86  
 Audit Subject: Internal Procurement Activities

Audit #MSRC-86-01  
 Audit Date: 5/27-6/9/86  
 Audit Subject: Safety Review Activities

Audit #BSGA-86/01



Audit Date: 6/17-20/86  
Audit Subject: Bechtel Power Corp. Gaithersburg, MD. Engineering  
Services

Audit #GASS-86/01  
Audit Date: 6/16/86  
Audit Subject: Gasser Associates, Olney, MD, Quality Services

Pursuant to the review of the implementation of TS Section 6.5.2.8, wherein audits are conducted under the cognizance of the SRC, it appears that a closed loop management control system for identification and correction of problems has been established by MP&L management.

The licensee conducted an assessment of SRC activities which is documented in Report No. OA-85/010 dated April 4, 1985. This report assessed SRC activities defined in TS Sections 6.5.2.7 and 6.5.2.8 against two NRC Inspection Reports of the performance appraisal of two operating plants. Twelve recommendations were generated as a result to enhance and strengthen some SRC activities. The inspector was informed that one program enhancement recommended was the requirement for SRC members to participate in the conduct of audits. It was the inspector's understanding that SRC members would participate as observers but not as members of the audit team. MP&L's management stated that the intent was to provide SRC members with some knowledge of the audit process.

Management's involvement in ensuring quality was further demonstrated by the structured and documented training program for SRC members. This training program had a required reading list and another requirement that SRC members be certified before participating in SRC activities.

At the exit interview, the inspector referred to MP&L's memorandum PMI-85/11382 from O. D. Kingsley, Chairman, SRC, Subject: SRC Meeting Format. This memorandum stated that in attempting to make the SRC meetings more meaningful, less reliance would be placed on the review of written materials and more on oral reports. The inspector cautioned against excessive use of oral reports that could result in the lack of objective evidence of activities affecting quality. Licensee management was receptive to this caution and affirmed that SRC activities would be capable of verification by examination of evidence.

Within this area, no violations or deviations were identified.