#### Omaha Public Power District 1623 Harney Ornaha, Nebraska 68102-2247 402/536-4000

March 31, 1989 LIC 89-260

U.S. Nuclear Regulatory Commission Attn: Document Control Desk Mail Station P1-137 Washington, DC 20555

References: 1. Docket No. 50-285 2. Letter from NRC (L. J. Callan) to OPPD (K. J. Morris) Dated January 31, 1989

Gentlemen:

SUBJECT: Response to Notice of Violation - Inspection Report 50-285/88-46

Omaha Public Power District (OPPD) received the subject inspection report. The report identified two violations. Please find attached OPPD's response to these items in accordance with 10 CFR Part 2.201. A one month extension was requested from the senior resident inspector to provide adequate corrective actions for violation A. The inspection report also requested a discussion on how OPPD verified that components installed in the Instrument Air (IA) system during system modification met the existing cleanliness condition of the IA system. This is discussed on page four.

If you have any questions concerning this matter, please contact us.

Sincerely,

N Harry Hotes

K. J. Morris Division Manager Nuclear Operations

KJM/sa

Attachments

c: LeBoeuf, Lamb, Leiby & MacRae R. D. Martin, NRC Regional Administrator P. D. Milano, NRC Project Manager P. H. Harrell, NRC Senior Resident Inspector

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#### Attachment 1

### RESPONSE TO NOTICE OF VIOLATION

During an NRC inspection conducted on November 20 through December 31, 1988, two violations of NRC requirements were identified. The violations involved the failure to follow procedures and the failure to properly post radiation areas. In accordance with the "General Statement of Policy and Procedure for NRC Enforcement Actions," 10 CFR Part 2, Appendix C (1988), the violations and our responses are discussed below.

### A. Failure to Follow Procedures

Criterion V of Appendix B to 10 CFR Part 50 and the licensee's approved quality assurance program require that activities affecting quality shall be prescribed by documented instructions, and shall be accomplished in accordance with these instructions.

During this inspection period, two examples were identified where the licensee failed to follow the appropriate procedure for performing safety related activities. The details of each example are provided.

1. Paragraph 8.3.7 of Procedure SO-M-30, "System Cleanliness," states that system openings shall be covered when maintenance or modification is not actively in progress in the vicinity of the opening.

Contrary to the above, the licensee failed to cover system openings in that openings in a valve and piping to be used for installation in the containment penetration assembly for instrument air were not covered when a modification was not actively in progress in the vicinity of the valve and piping.

- 2. Procedure SO-G-22, "Receiving, Shipping, Stores Control and Storage of Critical Element and Radioactive Material Packaging, Fire Protection Material, and Limited CQE," provides the requirements for maintaining temporary CQE (safety-related) storage areas. The specific requirements of Procedure SO-G-22 that the licensee failed to comply with are discussed below.
  - a. Section 9.2 states, in part, that component protection must be assured.

Contrary to the above, the licensee failed to ensure component protection in that piping and tubing stored in temporary CQE Storage Area 33 was not capped on each end.

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> b. Section 9.4 states that a temporary CQE storage area shall be a roped off area out of heavy traffic areas. In addition, Section 9.5 states, in part, that a sign shall be posted in a highly visible manner on the rope barrier specifying "TEMPORARY CQE STORAGE AREA."

Contrary to the above, the licensee failed to properly rope off and post temporary CQE Storage Area 26 in that the rope was found laying on the floor and the temporary CQE storage area sign was found face down on the floor.

c. Section 9.7 states, in part, that the requester (designated individual) shall maintain proper housekeeping in the storage areas.

Contrary to the above, the licensee failed to maintain proper housekeeping in temporary CQE Storage Area 17 in that the area contained trash and debris.

d. Section 9.12 states, in part, that a "QA MATERIAL CONFORMANCE TAG" (i.e., green tag, shall be affixed to the material).

Contrary to the above, the licensee did not affix a green tag to the materials stored in temporary CQE Storage Areas 31 and 41 in that piping and angle iron were noted in Area 41 without a green tag attached to them, and bottles of ammonium hydroxide were stored in Area 31 without a green tag attached to them.

This is a Severity Level IV violation. (Supplement I) (285/8846-02)

### OPPD Response

1. Admission or Denial of the Alleged Violation

OPPD admits that the violation occurred as stated. The specific examples identified in Section A.2 of this violation were immediately corrected when identified. The item in A.1 is addressed in paragraph 3 of this response.

2. Reason for the Violation if Admitted

The reasons for this violation were failure to properly implement procedure SO-M-30, "System Cleanliness" and SO-G-22 "Receiving, Shipping, Stores Control and Storage of Critical Element and Radioactive Material Packaging, Fire Protection Material, and Limited CQE." This failure was due to a lack of personnel familiarization with the requirements in these procedures and inadequate procedures provided to personnel to perform their job function. The procedure and personnel deficiencies identified included:

- a. Allocation of too many CQE storage areas in the station
- b. Lack of area maintenance accountability (housekeeping)
- c. Area access controls not enforced and personnel not held accountable

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### 3. Corrective Steps That Have Been taken and the Results Achieved

A Plant Review Committee (PRC) subcommittee reviewed the violation and the continuing problem of temporary CQE storage area control. This review resulted in a number of corrective steps to be taken which are discussed in item 4.

Quality Assurance/Quality Control (QA/QC) will make daily in poections of CQE storage areas to ensure the areas are maintained per OPro current procedures. This inspection activity will continue until June 15, 1989, when full compliance will be acheived by implementation of the recommendations made by the PRC subcommittee.

The Production Engineering Division construction support and craft personnel have been given refresher training in Standing Order M-30, "System Cleanliness," to ensure that the required personnel are knowledgable of this procedure and of the requirement to cover all openings to the system and component when the equipment is left unattended.

Additional information was requested on how OPPD verified that the components installed, valves and pipe, during this modification met the existing cleanliness condition of the Instrument Air (IA) system. The valves in question were being prepared prior to fit-up and welding. Prior to welding, QC inspected the components as part of a fit-up inspection, required by QDP-20, "Conduct of QC Inspections," which includes a visual inspection of internal surfaces. The inspection criteria required QC to inspect for rust, oil, and other debris. QC verified this on the Weld Design Data Form, (FC-1044) prior to craft welding. In addition, the valves were flushed in accordance with PRC approved cleaning procedures. No parts were changed on the valves or pipe. The pipe was provided with end caps meeting cleanliness requirements. Further, the installation procedure for this modification required an additional check for cleanliness by QC after the work was completed on the pipe. The above actions were sufficient to verify that the components installed during this modification met the existing procedural requirements for cleanliness.

# 4. Corrective Steps That Will Be Taken to Avoid Further Violations

- a. The requirements for cages and roped off areas that are described in SO-G-22 are under review. The changes recommended based on this review will be completed by April 30, 1989.
- b. Standing Order G-22 will be revised to address designated areas, access control, qualifications and certification of personnel. This procedure will be issued by April 30, 1989.
- c. Training and certification of Maintenance, Quality Assurance, Quality Control, Construction and Warehouse personnel in the proper storage and handling of CQE materials will be completed by June 15, 1989.

## 5. Date When Full Compliance will be Achieved

OPPD will be in full compliance on June 15, 1989 after the above action items have been completed.

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### B. Failure to Properly Post Radiation Areas

Technical Specification 5.11 requires procedures for personnel radiation protection to be prepared consistent with the requirements of 10 CFR Part 20. These procedures shall be approved, maintained, and adhered to for all operations involving personnel radiation exposure. Paragraph 20.203(a)(2) of 10 CFR Part 20 requires radiation areas to be conspicuously posted.

Procedure VII-9-25, "Radiation Hot Spot Verification/Update," of the Radiation Protection Manual implements the requirements of 10 CFR Part 20. Paragraph 5.4 of Procedure VII-9-25 states that all free-hanging hot spot tags (used to designate points of intense radiation levels) shall be identifiable from either side.

Contrary to the above, on December 2 and 6, 1988, the licensee failed to install hot spot tags that could be identified from either side in that six hot spot tags installed in the auxiliary building could only be identified from one side.

This is a perity Level IV violation. (Supplement I) (285/8846-03)

### **OPPD** Response

1. Admission or Denial of the Alleged Violation

OPPD admits the violation as stated.

2. Reason for the Violation if Admitted

The reason for the violation was the failure of Radiation Protection Supervisors to follow procedure HP-25 and insufficient training on the procedure change which required two-sided hot spot tags.

## 3. Corrective Steps That Have Been Taken and the Results Achieved

The following corrective steps have been taken:

- a. Hot spot postings in the Auxiliary Building have been inspected and corrected where necessary by providing two-sided tags.
- U. The contents of HP-25 have been reviewed with Radiation Protection Supervisors to ensure proper understanding of the procedure.
- c. Training on HP-25 has been completed for field health physics personnel.
- d. Spare hot spot tags have been modified to ensure the tags are two sided.

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- e. New hot spot tags that are printed on both sides have been purchased.
- 4. Corrective Steps That Will be Taken to Avoid Further Violations

The corrective actions described above will ensure future compliance.

5. Date When Full Compliance Will be Achieved

OPPD is in full compliance.