

# **NRC INSPECTION MANUAL**

CIPB

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MANUAL CHAPTER 0613

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POWER REACTOR CONSTRUCTION INSPECTION REPORTS

|         |   |    |
|---------|---|----|
| 0613-01 | PURPOSE .....   | 1  |
| 0613-02 | OBJECTIVES .....  | 1  |
| 0613-03 | APPLICABILITY .....   | 1  |
| 0613-04 | DEFINITIONS .....   | 2  |
| 0613-05 | RESPONSIBILITIES AND AUTHORITIES .....  | 2  |
| 0613-06 | CONSTRUCTION INSPECTION PROGRAM INFORMATION MANAGEMENT<br>SYSTEM.....   | 3  |
| 0613-07 | SCREENING INSPECTION RESULTS.....   | 3  |
| 0613-08 | DOUCMENTING FINDINGS USING THE FOUR PART FORMAT.....  | 4  |
| 0613-09 | DOCUMENTING TRADITIONAL ENFORCEMENT VIOLATIONS USING THE<br>FOUR-PART FORMAT.....                                 | 8  |
| 0613-10 | DOCUMENTING TRADITIONAL ENFORCEMENT VIOLATIONS AND<br>ASSOCIATED FINDINGS USING A COMBINED FOUR-PART FORMAT ..... | 10 |
| 0613-11 | VIOLATIONS WITHOUT PERFORMANCE DEFICIENCIES.....  | 11 |
| 0613-12 | UNRESOLVED ITEMS .....  | 12 |
| 0613-13 | CLOSURE OF CONSTRUCTION DEFICIENCY REPORTS PURSUANT TO<br>10 CFR 50.55(e) (CDRs) .....                            | 13 |
| 0613-14 | CLOSURE OF CITED VIOLATIONS.....  | 14 |
| 0613-15 | LICENSEE-IDENTIFIED VIOLATIONS .....  | 14 |
| 0613-16 | MINOR ISSUES AND MINOR VIOLATIONS .....   | 15 |
| 0613-17 | OTHER GUIDANCE .....  | 16 |
| 0613-18 | COMPILING AN INSPECTION REPORT .....  | 18 |
| 0613-19 | ISSUING INSPECTION REPORTS .....  | 29 |

EXHIBITS

Exhibit 1: Standard Reactor Inspection Report Outline ..... E1  
Exhibit 2: Construction Inspection Report Documentation Matrix..... E2

APPENDICES

Appendix A: Acronyms Used in Inspection Manual Chapter 0613..... A1  
Appendix B: Issue Screening ..... B1  
Appendix C: Documentation Guidance for Supplemental Inspections ..... C1  
Appendix D: Documentation Guidance “Quality Assurance Program Implementation During  
Construction and Pre-Construction Activities,” Inspection Procedure 35007 ..... D1  
Appendix E: Examples of Minor Construction Issues ..... E1  
Appendix F: Construction Cross-Cutting Areas and Aspects ..... F1

Attachment:

Revision History for IMC 0613..... Att1

## 0613-01 PURPOSE

The purpose of this Inspection Manual Chapter (IMC) is to provide guidance for screening and documenting findings identified during inspections of construction-related activities, including pre-construction activities, at all commercial nuclear power plants except for Watts Bar Unit 2.

## 0613-02 OBJECTIVES

02.01 To provide guidance for inspection issue screening and direction for documenting power reactor construction inspection results.

02.02 To ensure inspection reports clearly communicate significant inspection results in a consistent manner to licensees, NRC staff, and the public.

02.03 To document the basis for significance determination and enforcement action.

02.04 To provide inspection results as input to IMC 2505, "Periodic Assessment of Construction Inspection Program Results."

## 0613-03 APPLICABILITY

This IMC applies to pre-construction and construction inspections at all commercial nuclear reactors with the exception of Watts Bar Unit 2, which is covered by IMC 2517, "Watts Bar Unit 2 Construction Inspection Program." For this IMC, the term licensee also refers to applicants who have applied for a license to construct and/or operate a commercial nuclear power plant. It is NRC policy to hold licensees, certificate holders, and applicants responsible for the acts of their employees, contractors, or vendors and their employees, and the NRC may cite the licensee, certificate holder, or applicant for violations committed by its employees, contractors, or vendors and their employees. Therefore, the screening and documenting guidance in this IMC applies to acts of licensee employees, contractors and their employees for which the NRC determines that the licensee, certificate holder, and/or applicants are responsible. When screening and documenting inspection results, the terms "applicant" and "pre-construction activity" should be substituted for "licensee" and "construction" throughout this manual chapter, where applicable, to denote inspection activities prior to the issuance of a license. At the time the Commission makes an affirmative 10 CFR Part 52.103(g) finding, oversight of the plant will transition to the Reactor Oversight Process (ROP), and IMC 0612, "Power Reactor Inspection Reports," will apply for screening and documenting inspection results.

This IMC does not apply to documenting and screening inspection findings that are associated with offsite vendor inspections. Documentation and finding guidance for vendor findings is provided in IMC 2507, "Construction Inspection Program: Vendor Inspections," IMC 0617, "Vendor And Quality Assurance Implementation Inspection Reports," and IMC 2502, "Construction Inspection Program: Pre-Combined License (Pre-COL) Phase." Regulatory issues involving vendor performance that are identified during inspections of a licensee or its agent should be forwarded via a Technical Assistance Request (TAR) to [the Office of New Reactors, Division of Construction Inspection and Operational Programs \(DCIP\)](#).

## 0613-04 DEFINITIONS

Applicable definitions are found in Inspection Manual Chapter 2506, "Construction Reactor Oversight Process General Guidance and Basis Document."

## 0613-05 RESPONSIBILITIES AND AUTHORITIES

### 05.01 General Responsibilities.

- a. NRC inspection results associated with new reactor construction shall be screened and documented in accordance with the guidance provided in this IMC.
- b. The results of each inspection of a reactor facility under construction shall be documented in a report consisting of a cover letter, a cover page, a summary, inspection details, and supplemental information.
- c. NRC inspection results associated with vendor inspections and quality assurance inspections led by NRC Headquarters related to new reactor construction shall follow the guidance provided in IMCs 0617, 2502 and 2507.

### 05.02 Inspectors.

- a. All NRC power reactor construction inspectors are required to prepare inspection reports in accordance with the guidance provided in this manual chapter, as applicable.
- b. Inspectors have the primary responsibility for ensuring that inspection results are properly characterized, accurately reported, and that referenced material is correctly documented.
- c. Inspectors are responsible for ensuring that the content of the inspection report does not conflict with the information presented at the exit meeting.

### 05.03 Deputy Regional Administrator for Construction.

- a. The Deputy Regional Administrator for Construction shall determine the appropriate level of management responsible to review and approve power reactor construction inspection reports.

### 05.04 Regional Branch Chiefs and Division Directors.

- a. A manager familiar with NRC requirements in the inspected area shall review each inspection report to ensure that the report follows the format given in this chapter.
- b. The management reviewer shall ensure that inspection findings are consistent with NRC policies and technical requirements, and ensure that violations are addressed in accordance with the Enforcement Policy, the Enforcement Manual, and

applicable Enforcement Guidance Memoranda (EGM).

- c. The management reviewer shall ensure that significance determinations made in the inspection report are in accordance with Appendix B, 'Issue Screening,' of this IMC and IMC 2519, "Construction Significance Determination Process."
- d. The applicable division director or designated branch chief is responsible for the content, tone, overall regulatory focus, and timeliness of regional inspection reports.

05.05 Division of Construction Inspection and Operational Programs (DCIP), Office of New Reactors (NRO).

- a. DCIP is responsible for providing interpretations of the information contained in this manual chapter, for answering questions related to the guidance, and for providing guidance for situations not covered in this manual chapter.
- b. The NRO branch responsible for inspection program development will process feedback and comments associated with this manual chapter.

0613-06 CONSTRUCTION INSPECTION PROGRAM INFORMATION MANAGEMENT SYSTEM

To support the construction inspection program (CIP), a computer based application called the Construction Inspection Program Information Management System (CIPIMS) has been developed. CIPIMS is a management tool used to plan, document, organize, and track information collected during inspections.

Report numbers for all inspections will be assigned as the planned inspections are entered into the Inspection Planning (IP) module of the Reactor Programs System (RPS). Instructions for entering data into RPS are contained in IMC-0306, "Information Technology Support for the Reactor Oversight Process."

Inspectors will enter inspection results into CIPIMS under a specific docket number and inspection report number that are associated with the facility being inspected and the inspection report period. Further information on the use of CIPIMS is available in the "Construction Inspection Program Information Management System (CIPIMS) User's Guide." Sample inspection report cover letters and a sample inspection report are located on the NRO Construction Inspection Program Web site.

0613-07 SCREENING INSPECTION RESULTS

The screening of inspection results is addressed in Appendix B, "Issue Screening," of this IMC.

## 0613-08 DOCUMENTING FINDINGS USING THE FOUR PART FORMAT

This section provides instructions for documenting findings that are not associated with violations that receive traditional enforcement.

These findings are documented using the four-part format. A separate four-part write-up should be provided for each performance deficiency that is identified. The four-part format is organized as follows:

- Introduction
- Description
- Analysis
- Enforcement

### 08.01 Introduction.

The introduction should be one or two sentences that provide a brief discussion of the finding. This section does not need to stand alone because the description that follows will provide the supporting details.

The introduction must include:

- a. The performance deficiency
- b. The significance color
- c. The type of finding (ITAAC Finding or Construction Finding)
- d. The identification credit (self-revealing, NRC-identified, or licensee-identified)
- e. For violations, the requirement violated and whether it is being cited (VIO) or noncited (NCV)

### 08.02 Description.

The description must describe the circumstances associated with the finding, and/or violation, or unresolved item and include the supporting factual information that will be used to support the justification used in the analysis and enforcement section determinations. Additionally, if the finding or violation was determined to be NRC-identified because the inspector identified a previously unknown weakness in the licensee's classification, evaluation, or corrective actions, the description should provide evidence that the licensee had identified the issue and had failed to properly classify, evaluate and/or correct the problem. The description must include sufficient detail to enable a knowledgeable reader to understand the actual or potential safety, security, or regulatory consequence/importance of the finding and/or violation. Most findings based on relatively simple circumstances can be described in less than one page and should rarely exceed two pages. Findings based on more complex circumstances may merit more discussion.

### 08.03 Analysis.

The analysis must contain **sufficient** detail to allow a knowledgeable reader to reconstruct the decision logic used to arrive at the final conclusion.

- a. The first part must include the following:
  1. A concise restatement of the performance deficiency. Identify the requirement or standard that was not met and how the licensee failed to meet it.
  2. The applicable more than minor screening question found in IMC 0613, Appendix E, "Examples of Minor Construction Issues," and the reason why that question was answered yes for this finding.
  3. For ITAAC findings, a clear nexus of the performance deficiency to the ITAAC acceptance criteria must be documented. Include a description of why the ITAAC acceptance criteria cannot be met unless the performance deficiency is corrected.
- b. The second part must describe the logic used to determine the significance of the finding. Include appropriate references to IMC 2519 and the issue date.

If the significance has been determined, then characterize the finding as described below. However, for those findings with pending significance (i.e., the **Significance and Enforcement Review Panel (SERP)** has not determined the significance characterization), state that the finding could not be determined to be of very low safety significance (Green) and is pending a significance determination, and then characterize the finding as described in items 1(a), 2(a), 2(b), and 2(d) below. After completion of the significance characterization, complete the characterization of the finding by documenting the remaining items below in a subsequent inspection report or cover letter.

1. For all **Significance Determination Process (SDP)** results describe:
  - (a) The affected cornerstone
  - (b) The SDP Appendix used in the determination (for AP1000 plants, IMC 2519, Appendix A applies).
  - (c) The assumptions used in the determination, as applicable (these assumptions may be referenced and described in the report attachment).
  - (d) A description of the path on the **SDP** flow diagram or the **SDP** matrix coordinates used to arrive at the conclusion, as applicable.
  - (e) The resulting color.



2. Additionally, for all pending or preliminary significance characterizations discuss the following:
  - (a) Why the finding does not present an immediate safety or security concern, if applicable.
  - (b) The compensatory measures in place while licensee long-term corrective measures are being implemented, if applicable.
  - (c) For findings with preliminary significance, include the risk characterization or other basis as determined by the SERP.
  - (d) State that the significance is “To Be Determined (TBD).” Emphasize that the safety characterization is not yet finalized. Do not make direct statements regarding safety significance in the inspection report when the agency has not yet reached a conclusion.
- c. The third part of the analysis section for a finding should include the basis for assigning or not assigning the cross-cutting aspect, per IMC 0613 Appendix B. Specifically:
  1. For each finding to which a cross-cutting aspect is assigned:
    - (a) For those licensee-identified findings with pending or preliminary significance, state that the assigned cross-cutting aspect is conditional on the final significance determination being White, Yellow, or Red.
    - (b) Identify which cross-cutting aspect described in IMC 0613, Appendix F best corresponds to the apparent cause or most significant causal factor of the performance deficiency. The cross-cutting aspect is not a restatement of the performance deficiency. It should describe the licensee’s behaviors which caused the performance deficiency to occur.
    - (c) Explain how the cross-cutting aspect caused the performance deficiency to occur.
    - (d) If assigning a cross-cutting aspect to a finding that occurred outside of the nominal three-year period for “present performance,” explain why the identified apparent cause or most significant causal factor represents present licensee performance.
    - (e) Provide the alpha-numeric identifier associated with the selected cross-cutting aspect listed in IMC 0613 Appendix F.
  2. If the finding does not have a cross-cutting aspect, then the analysis section must include a statement briefly describing the reason for not assigning a cross-cutting aspect.

#### 08.04 Enforcement.

The enforcement part must describe any applicable enforcement action associated with the finding. Findings that involve violations of regulatory requirements are documented in accordance with the Enforcement Policy and the guidance provided below.

In addition, 10 CFR Part 50, Appendix B, "Quality Assurance Criteria for Nuclear Power Plants and Fuel Reprocessing Plants," Criterion XVI violations for failure to 'preclude repetition' can only be written for significant conditions adverse to quality (SCAQ). For such violations, the inspection report details must clearly address:

- The basis for determining the previous condition was a SCAQ as defined in the licensee's corrective action program,
- The relationship between the previous SCAQ and the current one, and
- The corrective actions from the previous SCAQ that failed to prevent recurrence.

Document the enforcement attributes of the finding and/or violation as described below:

- a. For a finding without an associated violation, the enforcement section must include a statement similar to: "This finding does not involve enforcement action because no regulatory requirement violation was identified"; and one of the following statements:
  1. If the finding is Green, "Because this finding does not involve a violation and is of very low safety or security significance, it is identified as a FIN [Tracking Number], Title."; or
  2. If the finding has pending or preliminary significance, "Because this finding does not involve a violation and because the significance determination of this finding is not complete (to be determined), it is identified as a FIN (TBD) [Tracking Number], Title."
- b. The enforcement section must include the following for violations which do not receive enforcement discretion (except as noted below):
  1. What requirement was violated and how it was violated (this requires a "contrary to" statement consistent with guidance in the Enforcement Manual, using language that is parallel to that of the requirement).
  2. When the violation occurred and how long it existed (Use bracketing dates or date and duration. **State if the dates are estimates or if the condition still exists at time of exit.**)
  3. Any actual or potential safety consequence.

4. Immediate corrective actions taken to restore compliance. If the planned corrective action is still being evaluated, a sentence stating why continued non-compliance does not present an immediate safety, security or quality concern. If a VIO is being used to disposition a violation normally dispositioned as an NCV (e.g., Green finding), additionally describe the circumstances in accordance with Section 2.3.2 of the Enforcement Policy.
5. A reference to the licensee's corrective action document number.
6. Specific enforcement actions.
7. Tracking number and title resulting from the violation. (e.g., NCV or VIO [Tracking Number], Title).
8. A statement similar to
  - (a) For NCVs "This violation is being treated as an NCV, consistent with section 2.3.2 of the Enforcement Policy. The violation was entered into the licensee' corrective action program as [####] to ensure actions are taken to correct the condition. (NCV 052000XXX/201X0XX; 052000XXX/201X0XX, [title]," and
  - (b) For VIOs, "This is a violation of [requirement]. A Notice of Violation is attached." Also, for VIOs, see the Enforcement Manual for guidance on developing the notice and cover letter.

0613-09 DOCUMENTING TRADITIONAL ENFORCEMENT VIOLATIONS USING THE FOUR-PART FORMAT

This section provides instructions for documenting traditional enforcement violations without an associated finding.

Violations for which enforcement discretion has been granted will normally be documented using the four-part format under the applicable inspectable area. However, when discretion is granted in accordance with an Enforcement Guidance Memorandum, the Enforcement Guidance Memorandum should be consulted for additional guidance which could direct deviation from the four-part format.

09.01 Introduction.

The introduction should be one or two sentences that provide a brief discussion of the violation. This section does not need to stand alone because the description that follows will provide the supporting details. The introduction must include:

- a. The Severity Level

- b. The identification credit (self-revealing, NRC-identified, or licensee-identified)
- c. The requirement violated and whether it is being cited (VIO) or non-cited (NCV)

09.02 Description.

Refer to Section 08.02 for specific guidance.

09.03 Analysis.

The level of detail must allow a knowledgeable reader to reconstruct the decision logic used to arrive at the final conclusion.

- a. The first part of the analysis section must include the following:
  - 1. The requirement violated
  - 2. The applicable traditional enforcement attribute (i.e. willfulness, impacting regulatory process, or actual consequence)
- b. The second part of the analysis section must describe the logic used to determine the Severity Level of the violation and, if applicable, the civil penalty. Include reference to Enforcement Policy examples, as applicable.
- c. The third part of the analysis section must indicate that cross-cutting aspects are not assigned to traditional enforcement violations.

09.04 Enforcement.

Refer to Section 08.04b for specific guidance. Also note that conclusions about the willfulness of a violation are agency decisions and are normally not made until after the Office of Investigations has completed an investigation. A premature or inaccurate discussion of the willfulness of a violation in an inspection report could result in later conflict based on additional input and review. Do not speculate or draw conclusions about the intent behind a violation. Inspection reports that include potentially willful violations or that contain material that may be related to an ongoing investigation must be reviewed by the Office of Investigations and the Office of Enforcement prior to issuance.

For a violation in which enforcement discretion is applied, work with the Office of Enforcement, through the Regional Enforcement Coordinator, to develop appropriate wording for the Enforcement Section. See the Enforcement Manual for standard paragraphs to be included.

0612-10 DOCUMENTING TRADITIONAL ENFORCEMENT VIOLATIONS AND ASSOCIATED FINDINGS USING A COMBINED FOUR-PART FORMAT

This section provides instructions for documenting traditional enforcement violations with an associated finding in a combined four-part write-up. The combined write-up should be used to document findings and traditional enforcement violations associated with a common performance deficiency when both are to be dispositioned in the same report. Note that a separate four part write-up is required for each performance deficiency that is identified.

10.01 Introduction.

The introduction should be one or two sentences that provide a brief discussion of the associated finding and traditional enforcement violation. This section does not need to stand alone because the description that follows will provide the supporting details. The introduction must include:

- a. The performance deficiency
- b. The significance color of the finding
- c. The Severity Level of the violation
- d. The identification credit (self-revealing, NRC-identified, or licensee-identified)
- e. The requirement violated and whether or not it is being cited (VIO) or noncited (NCV)

10.02 Description.

Refer to Section 08.02 for specific guidance.

10.03 Analysis.

The analysis section will discuss screening of both the finding and traditional enforcement violation. The level of detail must allow a knowledgeable reader to reconstruct the decision logic used to arrive at the final conclusions.

- a. The first part of the analysis will include:
  1. The basis for the finding. Refer to Section 08.03a for specific guidance.
  2. The basis for the traditional enforcement violation. Refer to Section 09.03a for specific guidance. A restatement of the requirement violated is not required if included in the basis for the finding.

3. Discussion of why the issue was screened through both the traditional enforcement and cROP processes. A statement similar to the following can be used: “This violation is associated with a finding that has been evaluated by the construction SDP and communicated with an SDP color reflective of the [safety or security] impact of the deficient licensee performance. The SDP, however, does not specifically consider [willfulness, the regulatory process impact, or actual consequences]. Thus, although related to a common regulatory concern, it is necessary to address the violation and finding using different processes to correctly reflect both the regulatory importance of the violation and the [safety or security] significance of the associated finding.”
- b. The second part of the analysis will include:
    1. The logic used to determine the significance of the finding. Refer to Section 08.03b for specific guidance.
    2. The logic used to determine the Severity Level of the violation. Refer to Section 09.03b for specific guidance.
  - c. The third part of the analysis will include the basis for assigning or not assigning a cross-cutting aspect to **the** finding. Refer to Section 08.03c for specific guidance.

#### 10.04 Enforcement.

Describe any applicable enforcement action. Refer to Section 08.04b for specific guidance.

#### 0613-11 VIOLATIONS WITHOUT PERFORMANCE DEFICIENCIES

Violations **without** a performance deficiency are dispositioned using traditional enforcement and may warrant enforcement discretion.

Work with the Office of Enforcement, through the Regional Enforcement Coordinator and the NRO Enforcement Coordinator, to determine the appropriate action. Also, see Chapter 5 of the Enforcement Manual for additional guidance. Consider the following two-part format for such violations:

The first part should describe:

- The issue of concern,
- Why there was no performance deficiency, and
- The apparent safety or security significance. A detailed SDP analysis is not required.

Assuming **that** the agency exercises enforcement discretion, the second part should describe the requirement violated, the licensee's corrective action document number(s), the decision logic, considerations, and conclusions supporting the determination as described in the Enforcement Manual.

Violations without performance deficiencies are not normally assigned a cROP tracking number, **nor is** a CIPIMS entry normally required. If this type of violation is material to the acceptance criteria of an ITAAC, then a cROP tracking number and CIPIMS entry are required. These violations are not documented in the Summary. The cover letter shall contain the required language used for exercising enforcement discretion. See Section 0613-18.01, "Cover Letter," for additional guidance.

## 0613-12 UNRESOLVED ITEMS

### 12.01 Opening.

An inspector should open an unresolved item when an issue of concern is identified but more information is required to determine one or more of the following:

- If there is a performance deficiency
- If the performance deficiency is More-than-Minor
- If the issue of concern constitutes a violation

An unresolved item cannot be opened for an issue of concern that is known to be of minor significance. An unresolved item cannot be used as a placeholder while the significance of a finding is being determined or to track completion of licensee's actions associated with a finding or an inspection question. The action of documenting an unresolved item is a commitment of future resources.

The unresolved item should be documented using the introduction and description parts discussed in Section 0613-08, "The Four-Part Format." Because unresolved items are not findings, the analysis and enforcement parts are not required. The introduction part should clearly state that an unresolved item was identified. The description part should describe the issue with sufficient detail to allow another inspector to complete the inspection effort, if necessary. The report must clearly identify the specific licensee or NRC actions needed to resolve the issue. Include a tracking number for the unresolved item in accordance with Section 0613-18, "Compiling an Inspection Report."

Do not document unresolved items in the summary section or in the inspection report cover letter.

### 12.02 Follow-up and Closure.

Unresolved items shall be closed as soon as practical. The level of detail devoted to closing unresolved items depends on the nature and significance of the additional information

identified. Documentation of the closure of an unresolved item must include a summary of the topic and the inspector's follow-up actions, evaluation of the adequacy of any licensee actions, and determination of whether a violation or finding has occurred. Sufficient detail must be provided to justify closing the item.

If closure of an unresolved item is significantly delayed due to licensee delays in providing complete information, NRC management should consider engaging licensee management in order to fully inform them of the delays and of the NRC's position regarding the issue. If delays continue, NRC management should consider engaging licensee management at progressively higher levels until the issue is resolved. Unresolved items should not be left open to characterize significance of the finding if it is clear that a violation has occurred.

If resolution of an unresolved item was based on an interpretation of the issue during interactions between inspector(s) and NRO technical staff(s), concisely document the details of these interactions as the basis for the regulatory decision (e.g., Technical Assistance Request resolution). Additionally, branch chiefs of inspector(s) and technical staff(s) who were involved in these discussions should concur on the inspection report.

If a finding is identified, follow the guidance of Section 0613-08, "The Four-Part Format." The finding and/or associated violation should be documented in an inspectable area section, likely under the procedure in which the original unresolved item was documented.

If no findings or violations were identified, document the resolution in Section 4OA5 of the report.

#### 0613-13 CLOSURE OF CONSTRUCTION DEFICIENCY REPORTS PURSUANT TO 10 CFR 50.55(e) (CDRs)

Document reviews and closures of CDRs, including revisions to CDRs, in the inspection report under Section 4OA3, "Event Follow-up." If inspection documentation in another section of the report provides a description of the event in the CDR, then that section of the report should be referenced under Section 4OA3 with a very brief description.

In general, CDR reviews should have a brief description of the event and reference the docketed CDR. If a CDR review is already documented in a separate NRC correspondence, then close the CDR with a brief statement in an inspection report referencing the separate correspondence. In addition, document closure of the CDR as follows:

- a. No Violations, No NRC-Identified or Self-Revealed Findings, and No Licensee-Identified Findings with pending or preliminary significance. Include a statement similar to "The Construction Deficiency Report was reviewed. No findings or violations of NRC requirements were identified."
- b. Minor Violations. Use guidance in Section 0613-16, "Minor Issues and Minor Violations."
- c. Licensee-identified NCVs. The safety significance and enforcement should be discussed per Section 0613-15, "Licensee-Identified Violations," and not in the CDR closeout section. A statement, such as "The enforcement aspects of this finding are



discussed in Section 40A7,” should be included in the CDR closeout section.

- d. NRC-Identified or Self-Revealed Findings, Licensee-Identified Findings with pending or preliminary significance, or Traditional Enforcement Violations which are not Licensee-Identified NCVs. Use Section 0613-08, “Documenting Findings Using the Four-Part Format,” 0613-09, “Documenting Traditional Enforcement Violations Using The Four-Part Format”, or 0613-10, “Documenting Traditional Enforcement Violations and Findings Using a Combined Four-Part Format” if not previously documented.

#### 0613-14 CLOSURE OF CITED VIOLATIONS

After receipt of the licensee’s response to a Notice of Violation and completion of any necessary inspections, document the closure of cited violations in Section 40A5, as applicable. The level of detail required to document closure of cited violations depends on the extent of corrective actions conducted by the licensee. In general, the write-up must summarize the inspector’s follow-up actions to evaluate the adequacy of any licensee actions and provide enough detail to justify closing the violation.

#### 0613-15 LICENSEE-IDENTIFIED VIOLATIONS

NRC policy requires that all non-compliances identified to or by NRC staff be dispositioned in accordance with the Enforcement Policy, regardless of who identified them.

NOTE: “Identified to” in this context means something that is entered into the NRC document control system such as through a verbal or written report required by regulations, or through a voluntary report or request such as through a letter (submittal) to the NRC. “Identified to” does not mean selected as a sample during an NRC inspection, resident inspector daily review of corrective action documents, or the passing of verbal information on a topic to an inspector.

The entry of licensee-identified violations into the NRC document control system through detailed discussion in an inspection report, other than those identified to the NRC, should only be accomplished for greater than green findings, or where there is a specific need. The documenting of green or Severity Level IV licensee-identified violations using criteria other than as described above should be avoided. Non-compliances are identified through inspection when they are selected as an issue of concern and screened through IMC 0613 Appendix B to determine the presence of a violation within the scope of an inspection sample. Particular attention should be given to screening identified non-compliances captured in docketed communications such as those associated with required reporting (e.g., 10 CFR 50.55(e)) and voluntary reports submitted at the licensee’s discretion.

Licensee-identified violations previously documented on the docket (such as through event reporting or 10 CFR 50.55(e) reports), including those receiving traditional enforcement which meet the requirements for an NCV in accordance with Section 2.3.2 of the Enforcement Policy, should receive minimal documentation in Section 40A7 of the inspection report. These noncited, licensee-identified violations associated with Green findings of very low safety/security significance, or which are Severity Level IV, are not considered during assessment of licensee

performance in order to prevent discouraging an aggressive problem identification process. All other non-minor violations not receiving enforcement discretion must be documented in accordance with Section 0612-08, "Documenting Findings Using the Four-Part Format," 0612-09, "Documenting Traditional Enforcement Violations Using The Four-Part Format", or 0612-10, "Documenting Traditional Enforcement Violations and Findings Using a Combined Four-Part Format."

Section 4OA7 must include an introductory statement similar to:

"The following violations of very low safety significance (Green) or Severity Level IV were identified by the licensee and are violations of NRC requirements which meet the criteria of the NRC Enforcement Policy, for being dispositioned as a Noncited Violation."

For each licensee-identified violation documented in Section 4OA7:

- a. Describe what requirement was violated and how it was violated (this requires a "contrary to" statement consistent with guidance in the Enforcement Manual).
- b. Provide a reference to the licensee's corrective action document number.
- c. For violations of very low safety or security significance (Green), briefly describe why the finding is Green.
- d. For a traditional enforcement violation, identify why traditional enforcement is applicable and briefly describe the Severity Level categorization in accordance with the Enforcement Policy examples.
- e. Licensee-identified violations (LIVs) that are material to the acceptance criteria of an ITAAC must be assigned a sequential tracking number in accordance with IMC 0306 and will remain open until corrective actions have been implemented so that the ITAAC acceptance criteria are no longer affected.

## 0613-16 MINOR ISSUES AND MINOR VIOLATIONS

Minor performance deficiencies, observations, and minor violations are not routinely documented in inspection reports. However, they may be documented when specifically allowed by an inspection procedure or temporary instruction, or when it becomes necessary to capture a required inspection activity or conclusion for the record, such as part of closing out a CDR or an unresolved item.

When a minor performance deficiency or violation is documented, sufficient detail must be provided to allow an informed, independent reader to understand the basis for the minor determination.

For each minor performance deficiency or minor violation documented:

- a. Briefly describe the minor performance deficiency or minor traditional enforcement violation
- b. State the reason why the performance deficiency or traditional enforcement violation is minor in accordance with IMC 0613 Appendix E More-than-Minor screening questions or the Enforcement Policy, as applicable
- c. For violations, state that the licensee has taken actions to restore compliance and include a statement similar to the following: “This failure to comply with [requirement] constitutes a minor violation that is not subject to enforcement action in accordance with the NRC’s Enforcement Policy.”

## 0613-17 OTHER GUIDANCE

### 17.01 Treatment of Third Party Reviews.

Detailed NRC reviews of Institute of Nuclear Power Operations (INPO) evaluations, accreditation reports, findings, recommendations, and corrective actions, or other third party reviews with similar information are not referenced in NRC inspection reports, tracking tools, or other agency documents unless the issue is of such significance that no other reasonable alternative is acceptable. INPO findings, recommendations and associated licensee corrective actions are not normally tracked by the NRC. If a finding warrants tracking, it should be independently evaluated, documented, and tracked as an NRC finding in Section 4OA5. INPO findings, recommendations, corrective actions, and construction or operating experience which are placed in the licensee’s corrective action program, can be considered appropriate for inspection. Additionally, when documenting review of these issues, inspection reports should not refer to any proprietary INPO reports or documents, INPO reference numbers, or identify specific sites when referencing construction or operating experience. If it is necessary to document review of an INPO document (i.e., an evaluation referring to the INPO document was an inspection sample or justification for a cross-cutting aspect), then state the reference number of the reviewed item (e.g., condition report or evaluation number) and provide general words for the title, if applicable (e.g., “Condition Report No. 235235 concerning industry information on pumps.”) If documenting review of an INPO evaluation or accreditation report, in accordance with Executive Director of Operations Policy 220, include, in section 4OA5, a short statement that the review was completed. Do not include a recounting or listing of INPO findings or reference a final INPO rating when documenting an INPO evaluation or accreditation report review. Discuss the specifics of any significant differences between NRC and INPO perceptions with regional management.

### 17.02 Non-Routine Inspections.

Document in Section 4OA4 activities related to Supplemental Inspections. Document in Section 4OA5 other non-routine inspection activities not addressed in this manual chapter. In some cases, factual observations may be documented. If it is necessary to document a minor issue or minor violation, follow the guidance in Section 0613-16, “Minor Issues and Minor Violations.”

### 17.03 Documenting Backfit Items.

When a backfit is identified, it is necessary to track the completion of the licensee's actions to correct the identified condition. Document this tracking in Section 4OA5 and classify the backfit item as a violation. When inputting into CIPIMS, enter the following:

“This issue is a compliance backfit. By definition, the licensee was put on notice that they are in violation. This item was created to ensure appropriate NRC inspection of the licensee's corrective actions required to ensure compliance - similar to follow-up of an NOV. The inspection report issued this concern as a violation.”

### 17.04 Treatment of Sensitive Unclassified Non-Safeguards Information (SUNSI) in Non-Security Related Reports.

SUNSI shall not be made publicly available and shall be segregated from other portions of the report which are to be made publicly available. This can typically be accomplished by creating and referencing a separate report enclosure which can be profiled in Agencywide Documents Access and Management System (ADAMS) as “Non-Publicly Available.” The documents containing SUNSI shall be marked in accordance with Management Directive 12.6, ‘NRC Sensitive Unclassified Information Security Program.’ Security inspection reports shall not be used to document inspection activities or findings that fall outside of the security cornerstone unless otherwise directed. The NRC policy for handling, marking, and protecting SUNSI is publicly available on the NRC Public Web site at <http://www.nrc.gov/reading-rm/doc-collections/commission/comm-secy/2005/2005-0054comscy-attachment2.pdf>. Additional staff guidance for handling of SUNSI is published on the NRC internal WEB site at <http://www.internal.nrc.gov/sunsi/>.

17.05 Amending Inspection Reports. When it becomes necessary to correct an issued report, the previously issued report should generally be revised and reissued in its entirety under the same inspection report number. The revised report would receive a new and unique ADAMS accession number and should include an appropriate cover letter explaining why the report is being reissued. Changes which affect the Construction Action Matrix or a Substantive Cross-Cutting Issue should be coordinated with the Construction Inspection Program Branch (CIPB). After the report is revised, the responsible branch should update the CIPIMS database as appropriate and contact the CIPB lead for IMC 2505 to initiate any required public web page updates. Note that a revised inspection report must not be used to document new inspection findings or inspection activities which occurred after the initial report was issued. Also, note that depending on the nature of the correction, it may be more appropriate to discuss the change in a future report, rather than to go back and reissue a complete report.

17.06 Plain Language. Inspectors will use plain language in reports. For additional guidance, inspectors should refer to NUREG-1379, “NRC Editorial Style Guide,” and the Agency’s plain writing website (<http://www.nrc.gov/public-involve/open/plain-writing.html>).

## 0613-18 COMPILING AN INSPECTION REPORT

Each inspection report will have a cover letter, cover page, summary, report details, and attachments with supplemental information as described in this section. A table of contents and summary of construction status may be provided as discussed below. A standard inspection report outline is shown in Exhibit 1, "Standard Reactor Construction Inspection Report Outline," of this IMC. The following additional guidance applies:

- Limit the use of acronyms as much as possible to enhance readability.
- Construction supplemental inspection results must also reflect the additional guidance provided in Appendix C, "Guidance for Supplemental Inspection Reports," of this IMC.
- IP 35007, "Quality Assurance Program Implementation during Construction and Pre-Construction Activities," results have varying thresholds for documentation and must reflect the guidance provided in Appendix D, "Guidance for Documenting Inspection Procedure 35007 Corrective Action Program Inspections," of this IMC.
- Escalated enforcement actions and cited violations must reflect the guidance found in the Enforcement Manual, Appendix B, "Standard Formats for Enforcement Packages."
- Issues which are subject to enforcement discretion must reflect the guidance found in the Enforcement Manual.

### 18.01 Cover Letter.

Write a cover letter to transmit the overall inspection results and convey the inspection findings to the licensee. Inspection reports are sent from the applicable NRC official (e.g., branch chief, division director, deputy regional administrator) to the designated licensee executive. See Exhibit 2, "Construction Inspection Report Documentation Matrix", of this IMC for what should and should not be documented in the inspection report cover letter.

Guidance and cover letter formats for transmitting enforcement actions vary. Guidance and sample cover letters for enforcement-related correspondence are found in the Enforcement Manual, Appendix B, "Standard Formats for Enforcement Packages."

Cover letter content varies somewhat depending on whether or not the inspection identified findings. In general, however, every cover letter has the same basic structure as follows:

- a. Date. The NRC seal and address are at the top of the first page and are followed by the date on which the report cover letter is signed and the report issued.
- b. Enforcement Action. If the report contains findings assigned an enforcement action (EA) number, then the EA number should be placed in the upper left-hand corner above the principal addressee's name.

- c. Addressee. The name and title of the principal addressee are placed at least four lines below the letterhead, followed by the licensee's name and address.
- d. Subject Line. The subject line of the letter shall state the plant name and inspection subject (e.g., "Construction Site Units 3 and 4 - NRC Integrated Inspection Report") followed by the report number. The information presented in the subject line must be in the following sequence: plant name, type of inspection, report number. Use the official plant name and docket number.

The words "NOTICE OF VIOLATION" ("EXERCISE OF ENFORCEMENT DISCRETION" or "NOTICE OF DEVIATION," etc.) must be included if an enforcement action accompanies the inspection report.

- e. Salutation. Ensure the salutation follows the subject line.
- f. Introductory Paragraphs. The first two paragraphs of the cover letter should give a brief introduction, including the type of report (e.g., integrated inspection report) and pertinent dates (i.e., date of interim and/or final exit meeting(s) with licensee, date NRC was informed of licensee readiness for supplemental inspections, date decision was made that a reactive inspection would be conducted in response to events).
- g. Body. The body of the letter shall discuss the most important topics first. The following identifies how different types of findings should be reflected in the cover letter to an inspection report.

| All Cover Letters                      |  |
|--|--|
| If Report Contains:                    | Then:  |
| No Findings                            | Insert a separate paragraph stating:<br>"No findings were identified during this inspection."  |
| Green non licensee identified findings | State the number of findings. Include a statement similar to:<br>"[Number] NRC-identified and [number] self-revealing findings of very low significance (Green) were identified during the inspection."<br><br>Since security inspection reports are not publicly available, only security inspection report cover letters should contain a brief description of assigned cross cutting aspects. |

| All Cover Letters   |   |
|---|---|
| If Report Contains:   | Then:   |
| Violations not associated with a finding (e.g., enforcement discretion) | Discuss in accordance with the guidance described in the Enforcement Policy and Enforcement Manual.   |
| Findings with assigned cross-cutting aspects                            | Include a statement similar to:<br>“If you disagree with a cross-cutting aspect assignment in this report, you should provide a response within 30 days of the date of this inspection report, with the basis for your disagreement to ...” |

| Non Security Cover Letters   |   |
|--|---|
| If Report Contains   | Then  |
| Severity Level IV violations or violations associated with Green findings being dispositioned as NCVs or in VIOs | Document in accordance with the guidance in Appendix B, Form 2 of the Enforcement Manual.   |
| Finding with pending or preliminary significance   | Briefly discuss the finding(s), in the order of significance if more than one finding. The cover letter should clearly state why the finding has pending or preliminary significance and if the licensee has entered the finding into its corrective action program actions that are being taken to address it. |
| Apparent violations that are either pending or preliminary findings, or Severity Level III or above              | Briefly discuss the violation(s)/finding(s), in the order of significance/Severity Level. Discuss in accordance with the guidance in the Enforcement Manual. The appropriate wording for findings that are also violations of requirements can be found in the Enforcement Manual.                              |

| Security Cover Letters  |   |
|---|---|
| If Report Contains:   | Then  |
| Findings with assigned cross-cutting aspects  | Include a brief description of all assigned cross-cutting aspects without describing inspection finding details.  |
| Severity Level IV violations or violations associated with Green findings are being dispositioned as NCVs or VIOs | Document in accordance with the guidance in Appendix B, Form 2 and 2(S) of the Enforcement Manual as appropriate. |

|   |   |
|---|---|
| Findings with pending or preliminary significance   | State one or more pending or preliminary findings of significance have been identified or that one or more violations are being considered for escalated enforcement.   |
| Apparent violations that are either pending or preliminarily findings, or Severity Level III or above | For pending or preliminary findings or apparent violations do not: <ul style="list-style-type: none"> <li>• Describe or provide specific details</li> <li>• State the number of findings or violations</li> <li>• Identify the actual significance (i.e., color) or Severity Level</li> </ul> |

- h. Closing. The final paragraph consists of standard legal language that varies depending on whether enforcement action is involved. The signature of the appropriate NRC official is followed by the docket number(s), license number(s), enclosures, and distribution list.
- i. Security Inspection Reports. The cover letters for security inspection reports are similar in format to other inspection report cover letters, but will not include details or descriptions of any inspection findings. The cover letters must state the number of Green findings identified and a brief description of cross-cutting aspects, if applicable. However, the letters will not state the number of greater than Green findings (if any were identified), only that findings with greater-than-Green significance have been identified and a brief description of cross-cutting aspects, if applicable.



- j. Notice of Violation (NOV). If an NOV is being issued with the report, develop an NOV attachment using the guidance in the Enforcement Manual.

#### 18.02 Cover Page.

The report cover page gives a succinct summary of information about the inspection. It contains: the docket number(s), license number(s), report number, licensee name, facility name, facility location (city and state), dates of the inspection, names and titles of participating inspectors (and may include names of those inspectors who have achieved basic inspector certification but are not yet fully qualified), and name and title of the approving NRC manager. The inspection report number is to be identified in the following form as required by IMC 0306, "Information Technology Support for the Reactor Oversight Process":

Docket No. /Year [sequential number of the report in that year]  
(e.g., 05200001/20XX0XX)

#### 18.03 Table of Contents.

If a report is considered complicated or of significant length, then develop a table of contents. A table of contents is optional.

#### 18.04 Summary.

The summary should be an informative but concise overview of the significant inspection findings contained in the details of the report. It will also be used for entries into ADAMS and CIPIMS.

- a. The first paragraph of the summary section is used to describe the inspection report in ADAMS (the title value field in ADAMS is currently limited to 254 characters). The paragraph must include the following, in order:
  - 1. The inspection report number (See IMC 0306 for format);
  - 2. The dates of the inspection;
  - 3. The name of the site; and
  - 4. The titles of only the inspection procedures or attachments in which findings were identified (e.g., foundations and buildings, structural concrete, quality assurance program implementation during construction and pre-construction activities).

If no findings were identified, the general inspection area or title of the inspection report should be listed (e.g., integrated report).

For non-routine inspections, the same format should be followed to identify the report number, unit names, and dates of inspection. These are followed by the title of the inspection and a list of findings.

- b. Summary Paragraph. The summary paragraph identifies who conducted the inspection (i.e., resident and/or specialist inspectors), the inspection period, and the number and types of findings and/or violations.

End the summary with a statement similar to: “The significance of most findings is indicated by their color (i.e., greater than Green, or Green, White, Yellow, Red) which is determined using IMC 2519, “Construction Significance Determination Process”. Cross-cutting aspects are determined using IMC 0613, Appendix F, “Construction Cross-Cutting **Areas** and Aspects.” All violations of NRC requirements are dispositioned in accordance with the NRC’s Enforcement Policy and the temporary enforcement guidance outlined in enforcement guidance memorandum (EGM) 11-006. The Nuclear Regulatory Commission’s (NRC’s) program for overseeing the safe construction of commercial nuclear power reactors is described in IMC 2506, “Construction Reactor Oversight Process General Guidance and Basis Document.”

Inspectors may omit portions of this statement as deemed appropriate to the circumstances discussed in the report.

- c. List of Findings and Violations. Write a two paragraph summary for each issue that is designated a finding, violation, or an apparent violation.

Do not document the following in the summary: licensee-identified NCVs, licensee-identified Green findings, minor violations, and unresolved items.

1. First Paragraph

This paragraph should include a summary of the information in the introduction, description and enforcement parts of the report write-up for the finding. Include the following:

- (a) Begin the summary for each finding or violation with the significance color and/or Severity Level. Use TBD for those findings or violations where the final significance or Severity Level has not yet been determined.
- (b) Describe the performance deficiency and identify the specific requirement that was violated including any enforcement action, as applicable. Identify if the finding or violation is self-revealing, NRC-identified, or licensee-identified.
- (c) For violations, briefly describe the immediate corrective actions completed to restore compliance and/or alleviate any immediate safety or security concerns, those corrective actions planned or under

evaluation by the licensee, and a statement that the condition has been placed into the licensee's corrective action program, as applicable.

### Second Paragraph

This paragraph should include the information from, and is very similar to, the analysis part of the report write-up for the finding. Include the following:

- (a) Briefly summarize the finding's significance from the analysis section. Briefly describe why the finding is More-than-Minor, provide effect on the cornerstone, and state why the finding is not greater than Green (if applicable).
  - (b) If a cross-cutting aspect was assigned to the finding, restate the cross-cutting aspect, why it was assigned, discussion of present licensee performance (as applicable), and the alphanumeric identifier. If the finding does not have a cross-cutting aspect, include statement briefly describing the reason for not assigning a cross-cutting aspect.
  - (c) Each summary must end with a reference to the section of the report in which the finding is discussed.
2. Group the finding summaries by cornerstones in the order specified in Exhibit 1 of this IMC. Findings or violations not associated with a cornerstone should be listed at the end under "Other Findings."
  3. If licensee-identified violations are documented in Section 4OA7 of the report, include a **statement** similar to the following as the last paragraph of the summary:  
  
"Violations of very low safety or security significance, or Severity Level IV **violations** that were identified by the licensee, have been reviewed by the NRC. Corrective actions taken or planned by the licensee have been entered into the licensee's corrective action program. These violations and corrective action tracking numbers are listed in Section 4OA7 of this report."
  4. If no findings or violations were identified for assessment, include a statement similar to "No findings were identified" after the summary paragraph.

### 18.05 Construction Status.

If appropriate, write a Summary of Construction Status section. If used, briefly describe pertinent milestones, such as the completion of work associated with a specific ITAAC or the installation of major plant components. This summary is not needed for specialist inspections since plant construction status may not be relevant to **these** inspections.

## 18.06 Report Details.

- a. Arrange the report details in accordance with the standard report outline shown in Exhibit 1 of this IMC. Each outline topic (inspectable area) does not have to be covered in each report. When an inspection is performed in a particular area, the resulting details are placed in the corresponding section of the report.

In those cases where a standard format is not readily applied, the most important subject should be identified first, followed by a discussion of major topics identified in descending order of significance.

Exceptions to the standard format include:

- Supplemental Inspection (SI) reports;
- Augmented Inspection Team (AIT) reports;
- Special Inspection Team (SIT) reports, and;
- Other cases where the specifically directed focus of the inspection does not easily fit into the standardized report outline.

Findings, violations, and unresolved items are documented under the inspectable area in which the issue was discovered. Additionally Section 4OA5 of the inspection report should be used to document the following:

- A finding or traditional enforcement violation which is unrelated to a specific inspectable area
- A violation without an associated performance deficiency which does not involve willfulness, actual safety consequences, or impeding the regulatory process
- A change to a previously assigned cross-cutting aspect discussed in a previously issued inspection report. The change and its basis should be incorporated into the quarterly integrated inspection report and the original CIPIMS entry should be revised to reflect the appropriate change.

- b. Format of Each Inspectable Area. Some inspection procedures may include additional requirements pertaining to documentation (e.g., IP 35007). Each inspectable area must include an Inspection Scope and Findings section as described below:

1. Inspection Scope Section. For each inspectable area, describe the inspection scope. Do not repeat any portion of the Scope in the Findings section. The scope should:

- (a) Identify how the inspection was conducted (i.e., the methods of inspection.) Methods can include a walk-down, an in-office review,

observation of a test from the control room, or discussion with specific personnel;

- (b) Identify what was inspected. Include sufficient detail on which and how many samples were completed. If more than six documents were reviewed, then list the items in an attachment and reference the attachment in the Scope section;
- (c) Identify the inspection objectives and the criteria that were used to determine whether the licensee is in compliance.
- (d) Include inspection dates to clarify inspection scope context if it helps with understanding the scope. For example, inspection dates may be helpful when discussing event follow-up.

If a substantive portion of the inspection activity was conducted at a location other than the plant, (e.g., an in-office review), then identify where the inspection took place.

- 2. Findings Section. Document each finding and/or violation as appropriate in accordance with Section 0613-08, "Documenting Findings Using The Four-Part Format," 0613-09, "Documenting Traditional Enforcement Violations Using The Four-Part Format," and/or 0612-10, "Documenting Traditional Enforcement Violations And Associated Findings Using A Combined Four-Part Format." Document each unresolved item in accordance with Section 0613-12, "Unresolved Items." Present the findings and/or violations within each report section in order of importance. If no findings or violations require documentation within an inspectable area, then include a statement similar to "No findings were identified" in the Findings section of the report.

Observations not directly related to a finding or unresolved items may be documented if allowed by an appendix to this chapter or by the specific inspection procedure or temporary instruction.

Unless otherwise specified in this IMC, all findings (FINs), violations (VIOs), non-cited violations (NCVs), apparent violations (AV), licensee-identified violations (LIVs) that are material to the acceptance criteria of an ITAAC, and unresolved items (URIs), must be assigned a sequential tracking number in accordance with IMC 0306. A brief title for the issue will be listed after the assigned tracking number and will be entered into CIPIMS.

- c. Graphics/Visual aids. Use of graphics (drawings, diagrams, photographs, or photocopies) is permissible if their inclusion will simplify describing a complex condition that would otherwise require substantially more text. However, including graphics may complicate report processing and result in excessive file sizes.

Photographs of plant areas or equipment or photocopies of technical or vendor manual pages must be handled in accordance with IMC 0620. All graphics must adhere to the following guidelines:

1. All graphics shall be in a jpeg format and sized (height, width, and resolution) so as not to significantly increase overall file size.
2. Keep each graphic to a reasonable size (e.g.: <1/2 page), or put in attachment.
3. **Center the graphic on the page and left/right indent it from the text.**
4. Each graphic shall have a unique identifier (Figure/Diagram/Photograph X) with a descriptive title (e.g.: Breaker Trip Latch Alignment).

#### 18.07 Exit Meeting Summary.

Write a brief summary of the exit meeting in Section 4OA6. This information will also be described in the first paragraph of the cover letter. The summary must identify the most senior licensee manager who attended the meeting and must include the following information:

- a. Proprietary Information. At the exit meeting, the inspectors will verify whether the licensee considers any materials provided to or reviewed by the inspectors to be proprietary. If the licensee did not identify any material as proprietary, use a statement similar to:

“The inspectors verified that no proprietary information was retained by the inspectors or documented in this report.”

If there is a compelling need for the report to include proprietary material, refer to IMC 0620 for further **guidance**.

NOTE: When an inspection is likely to involve proprietary information (i.e., given the technical area or other considerations of inspection scope), handling of proprietary information should be discussed at the entrance meeting.

- b. Subsequent Contacts or Changes in NRC Position. If the NRC's position on an inspection finding changes after the exit meeting, conduct an additional exit meeting to discuss that change with the licensee. Also, document the additional exit meeting in the inspection report.
- c. Do not characterize a licensee's exit meeting response. If the licensee disagrees with an inspection finding, this position may be characterized by the licensee in its formal response to the inspection report, if applicable. Additionally, do not attempt to characterize or interpret any oral statements the licensee makes, at the exit meeting or at any other time during the inspection, as a commitment.

## 18.08 Report Attachments.

The attachments discussed below are included at the end of the inspection report, if applicable. The attachments may be combined into a single attachment entitled "Supplementary Information."

- a. List of Items Opened, Closed, Discussed, and Updated. The report shall include a quick reference list of items opened, closed, and updated, including the item type, the tracking number for the item, and the item title (used in CIPIMS headers describing the item). Open items that were discussed (but not closed) should also be included in this list, along with a reference to the sections in the report in which the items are discussed. NCVs will normally be opened and closed in the initiating inspection report. However, any item related to an ITAAC finding (NCV, VIO, LIV, etc) will remain open until the item is resolved and no longer impacts the ITAAC acceptance criteria. The resolution of the item shall be documented in the report that closes the item.
- b. Key Points of Contact. List, by name (first initial and last name) and title, those individuals who furnished relevant information or were key points of contact during the inspection (except in cases where there is a need to protect the identity of an individual). The list should not be exhaustive but should identify those individuals who provided information related to developing and understanding findings. The list includes the most senior licensee manager present at the exit meeting and NRC technical personnel who were involved in the inspection if they are not listed as inspectors on the cover page.
- c. List of Documents Reviewed. A list of the documents and records reviewed during an inspection must be publicly available for publicly available inspection reports. The list need not include those reviewed documents and records already identified in the body of the report nor those which, upon review, were determined not to support the inspection scope and determinations.

The level of detail for listed documents must be sufficient to allow the NRC to retrieve the document from the licensee in the foreseeable future. Therefore, a unique identifier, which may include the tracking number, title, revision and/or date, must be provided for each document referenced.

If it is necessary to document review of an INPO document (i.e., an evaluation referring to the INPO document was an inspection sample or justification for a cross-cutting aspect), then state the reference number of the item reviewed (e.g., condition report or evaluation number) and provide general words for the title. For example, "Condition Report No. 235235 concerning industry information on pumps."

- d. List of Acronyms. Acronyms should be spelled out when first used in inspection report text (e.g., Construction Reactor Oversight Process (cROP)). Optionally, a list of acronyms can be included in the inspection report or referenced. When referenced, the list of acronyms should be made publicly available for publicly available inspection reports.

## 0613-19 ISSUING INSPECTION REPORTS

### 19.01 Report Timeliness.

- a. Most inspection reports, including Special Inspections, should be issued no later than 45 calendar days after inspection completion.
- b. Timeliness goals should be accelerated as necessary for inspection reports covering potential escalated enforcement actions and as specified in Management Directive 8.3, "NRC Incident Investigation Program," for reactive inspections; (e.g., 30 days for Augmented Inspection Team Reports).

NOTE: For integrated inspection reports (e.g., resident inspector quarterly report), the inspection completion is normally defined as the last day covered by the inspection report. For all other inspection reports (e.g., team inspections), the inspection completion is normally defined as the day of the final exit meeting.

### 19.02 Release and Disclosure of Inspection Reports.

- a. General Public Disclosure and Exemptions. Except for report enclosures containing exempt information (see IMC 0620), all non-security cornerstone inspection reports will be disclosed routinely to the public.
- b. Security Cornerstone Inspection Reports. Inspection reports for the security cornerstone will not be made publicly available. Security-related inspection reports will be sent to the respective State Liaison Officers and State Homeland Security Advisors, when they have been appointed, authorized, communicated a desire to receive the report, and have the resources to control the safeguards information. These reports will be controlled and marked as safeguards information (SGI) or official use only information (SUNSI) based on the level of information contained in them. The cover letters to the reports will be made publicly available.

The cover letters will be marked for the highest level of controlled information contained in the inspection report: official use only (SUNSI) or SGI. The marking requirements for safeguards information are in Management Directive 12.6, "NRC Sensitive Unclassified Information Security Program," and the requirements for marking security-related official use only documents are on the Web at: <http://www.internal.nrc.gov/sunsi/>, "Sensitive Unclassified Non-Safeguards Information (SUNSI)."

- c. Release of Investigation-Related Information. When an inspector accompanies an investigator on an investigation, the inspector must not release either the investigation report or his or her individual input to the investigation report. This information is exempt from disclosure by 10 CFR 9.17, "Agency records exempt from public disclosure," and must not be circulated outside the NRC without specific approval of the Chairman (refer to OI Policy Statement 23). The latest revisions of the following



exhibits and appendices may be accessed from the NRC Public Inspection Manual Chapters Web Page, located at: <http://www.nrc.gov/reading-rm/doc-collections/insp-manual/manual-chapter/index.html>.

The latest revisions of NRC Public Inspection Procedures are also available at the NRC Public Inspection Procedures Web Page, located at: <http://www.nrc.gov/reading-rm/doc-collections/insp-manual/inspection-procedure/>

END

#### EXHIBITS

- Exhibit 1: Standard Reactor Inspection Report Outline
- Exhibit 2: Construction Inspection Report Documentation Matrix

#### APPENDICES

- Appendix A: Acronyms Used in Inspection Manual Chapter 0613
- Appendix B: Issue Screening
- Appendix C: Documentation Guidance for Supplemental Inspections
- Appendix D: Documentation Guidance "Quality Assurance Program Implementation During Construction and Pre-Construction Activities," Inspection Procedure 35007
- Appendix E: Examples of Minor Construction Issues
- Appendix F: Construction Cross-Cutting **Areas** and Aspects

#### ATTACHMENT

- Attachment: Revision History for IMC 0613

EXHIBIT 1  
STANDARD REACTOR CONSTRUCTION INSPECTION REPORT OUTLINE

- Cover Letter (IMC 0613 Section 18.01)
- Notice of Violation (as applicable; IMC 0613 Section 18.01)
- Cover Page (IMC 0613 Section 18.02)
- Table of Contents (optional) (IMC 0613 Section 18.03)
- Summary (IMC 0613 Section 18.04)
- Summary of Construction Status (IMC 0613 Section 18.05)
- Report Details: (IMC 0613 Section 18.06)
- Exit Meeting Summary (IMC 0613 Section 18.07) – Included in Section 4OA6
- Report Attachments (IMC 0613 Section 18.08)

The report details will be organized into 4 sections consisting of 3 strategic performance areas and one for other inspection results. Each section will contain sub-sections in which inspection results will be documented. Each inspection will be numbered sequentially starting from “01” (e.g. the first “ITAAC-Related Work Inspections” inspection documented in the report will be Section 1A01.)

1. CONSTRUCTION REACTOR SAFETY

| Sub-section number | Title   |
|--------------------|---|
| C01, C02, etc      | Pre-COL Inspections, title each subsection per the IP used. |
| A01, A02, etc      | Unit #/ITAAC #/3 digit #/ Family #                          |
| P01, P02, etc      | Program Inspections, title each subsection per the IP used. |

2. SAFEGUARDS PROGRAMS

| Subsection number | Title   |
|-------------------|---|
| P01, P02, etc     | Program Inspections, title each subsection per the IP used. |

3. OPERATIONAL READINESS

| Subsection number | Title   |
|-------------------|---|
| P01, P02, etc     | Program Inspections, title each subsection per the IP used. |

#### 4. OTHER ACTIVITIES (OA)

| Subsection number | Title                                  |
|-------------------|--|
| OA1               | Reserved                               |
| OA2               | Reserved                               |
| OA3               | Follow-up of Licensee Reports and VIOs |
| OA4               | Supplemental Inspections               |
| OA5               | Other Activities (Note 1)              |
| OA6               | Meetings, Including Exit               |
| OA7               | Licensee-Identified Violations         |

NOTE 1. Temporary instructions (TIs) and reviews conducted of Institute of Nuclear Power Operations (INPO) and third party evaluations are examples of what should be included in Section 4OA5.

END

EXHIBIT 2  
CONSTRUCTION INSPECTION REPORT DOCUMENTATION MATRIX

**NOTE: The following chart indicates how minor issues, Findings and Violations are documented and tracked. See detailed instructions related to type codes in the main body of the procedure.**

|  | Mentioned in Cover Letter  | Summary                | Inspection Finding Detail        | Entered into CIPIMs Database | Published on Public Web site |
|--|----------------------------|------------------------|----------------------------------|------------------------------|------------------------------|
| Minor Issues, observations   | No                         | No                     | No, unless closure of URI/CDR/TI | No                           | No                           |
| Issues/findings where additional information is needed to determine if it is more than minor, or if it is a finding or a violation (URI) | No                         | No                     | Yes                              | Yes                          | No                           |
| Issues where additional inspection may be required (Backfit)   | No                         | No                     | Yes, Listed in Section 4OA5.     | No                           | No                           |
| Licensee-identified Violations and Non-Cited Violations  | Referred to only.          | Refer to Section 4OA7. | Yes, Listed in Section 4OA7.     | Yes                          | No                           |
| NRC-identified and self-revealed Green findings and VIOs/NCVs  | Referred to by count only. | Yes                    | Yes                              | Yes                          | Yes                          |
| Findings and violations whose significance is not yet determined through the SDP but known to be at least Green (AV, FIN)                | Yes                        | Yes                    | Yes                              | Yes                          | Yes                          |
| *Preliminary (White or Yellow or Red). Finding (AV)  | Yes                        | Yes                    | Yes                              | Yes                          | Yes                          |
| *Final (White or Yellow or Red) (FIN) or (VIO)   | Yes                        | Yes, as appropriate    | Yes, as appropriate              | Yes                          | Yes                          |
| Cited Violations   | Yes                        | Yes                    | Yes                              | Yes                          | Yes                          |

\* See IMC 2519 "Construction Significance Determination Process" for guidance

END

APPENDIX A  
Acronyms Used in IMC 0613

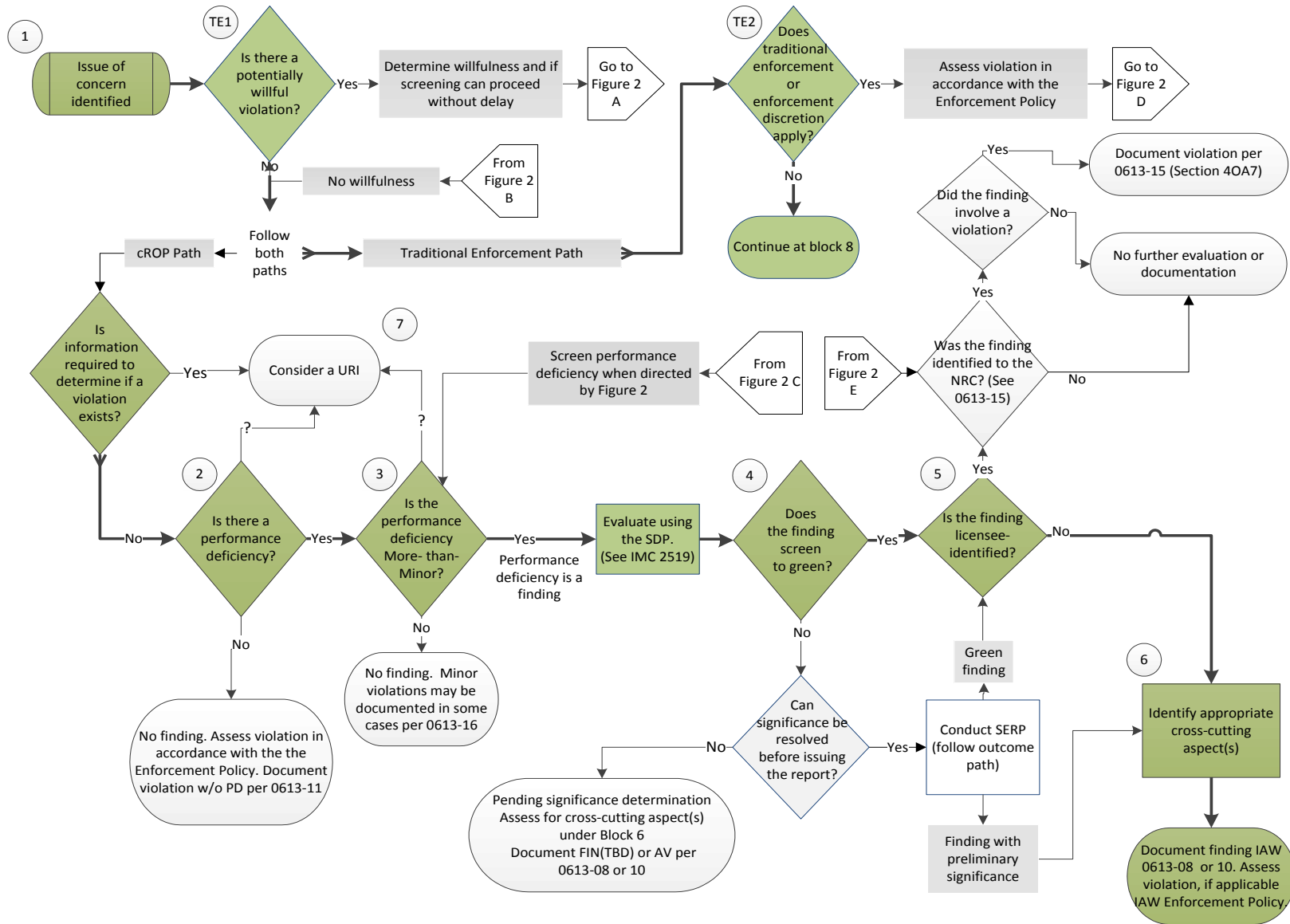
|        |   |
|--------|---|
| ADAMS  | Agency-wide Documents Access and Management System            |
| AIT    | Augmented Inspection Team                                     |
| ARB    | Allegation Review Board                                       |
| AV     | Apparent Violation  |
| CAM    | Construction Action Matrix                                    |
| CAP    | Corrective Action Program                                     |
| CAQ    | Condition Adverse to Quality                                  |
| CCA    | Cross-Cutting Aspect  |
| CIPB   | Construction Inspection Program Branch (of NRO DCIP)          |
| CDR    | Construction Deficiency Report                                |
| CFR    | Code of Federal Regulations                                   |
| CIP    | Construction Inspection Program                               |
| CIPIMS | Construction Inspection Program Information Management System |
| CSI    | Construction Supplemental Inspection                          |
| COL    | Combined License  |
| COLA   | Combined License Application                                  |
| cROP   | Construction Reactor Oversight Process                        |
| cSCCI  | Construction Substantive Cross-Cutting issue                  |
| DCIP   | Division of Construction Inspection & Operational Programs    |
| EA     | Enforcement Action  |
| ECR    | Engineering Change Request                                    |
| EGM    | Enforcement Guidance Memorandum                               |
| ESP    | Early Site Permit   |
| FIN    | Finding   |
| IMC    | Inspection Manual Chapter                                     |
| INPO   | Institute of Nuclear Power Operations                         |
| IOC    | Issue of Concern  |
| IP     | Inspection Procedure  |
| ITAAC  | Inspections, Tests, Analyses, and Acceptance Criteria         |
| LER    | Licensee Event Report   |
| LWA    | Limited Work Authorization                                    |
| M&TE   | Measuring and Test Equipment                                  |
| NCV    | Non-Cited Violation   |
| NEI    | Nuclear Energy Institute                                      |
| NOV    | Notice of Violation   |
| NRC    | Nuclear Regulatory Commission                                 |
| NRO    | Office of New Reactors  |
| NRR    | Office of Nuclear Reactor Regulation                          |
| OE     | Office of Enforcement   |
| OI     | Office of Investigations                                      |
| PD     | Performance Deficiency  |
| PDF    | Portable Document Format                                      |
| PI&R   | Problem Identification and Resolution                         |
| QA     | Quality Assurance   |

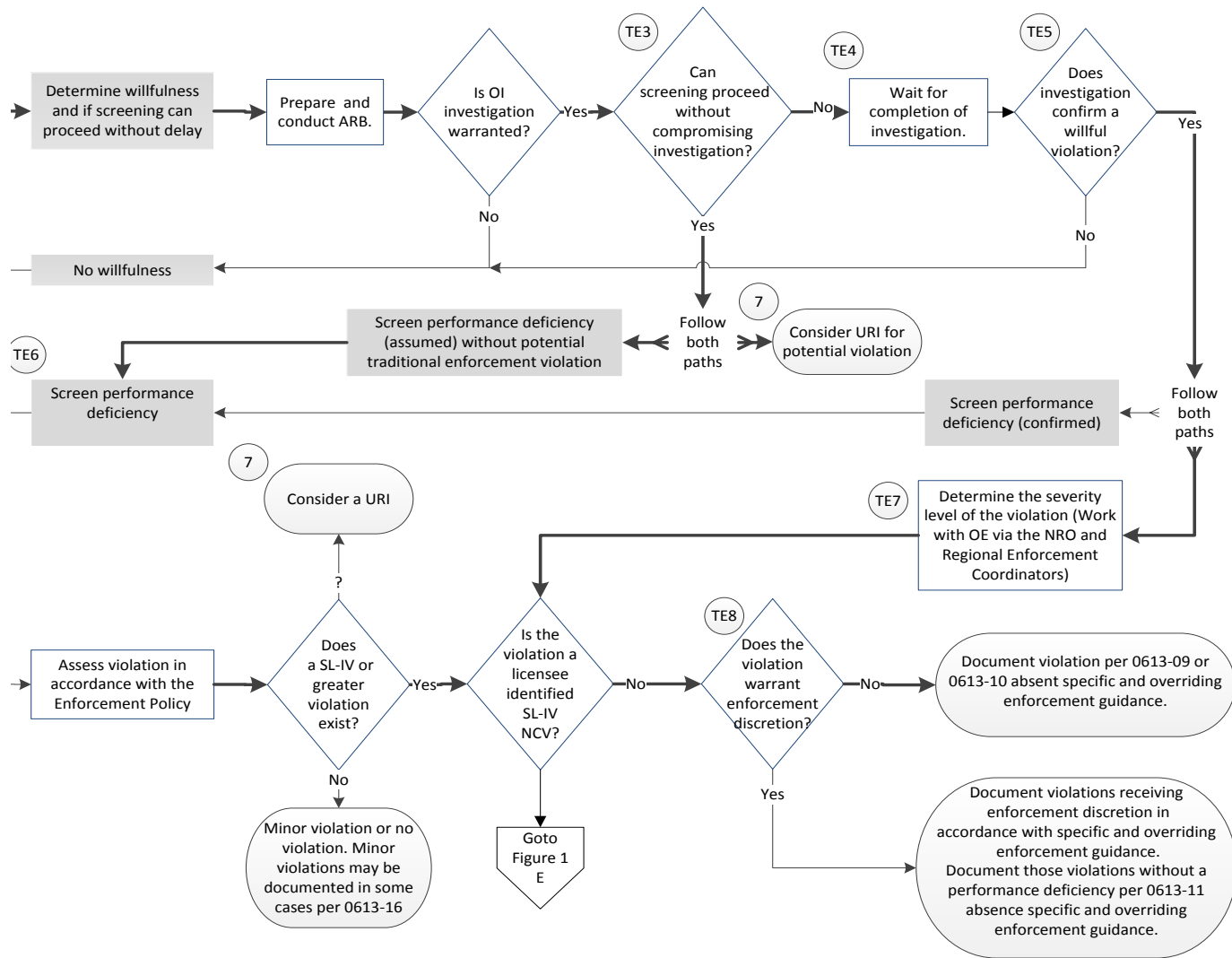
|       |   |
|-------|---|
| ROP   | Regulatory Oversight Process                      |
| RPS   | Reactor Program System                            |
| SCAQ  | Significant Condition Adverse to Quality          |
| SCWE  | Safety Conscious Work Environment                 |
| SDP   | Significance Determination Process                |
| SERP  | Significance and Enforcement Review Panel         |
| SIT   | Special Inspection Team                           |
| SSC   | Structure, System or Component                    |
| SUNSI | Sensitive Unclassified Non-Safeguards Information |
| TBD   | To Be Determined                                  |
| TE    | Traditional Enforcement                           |
| TI    | Temporary Instruction                             |
| URI   | Unresolved Item                                   |

END

# Appendix B

## Issue Screening Figure 1:







## Additional Guidance to Clarify Figures

Inspectors will not use the cROP screening process to screen traditional enforcement violations, but will use that process to screen their underlying performance deficiencies. Inspectors will separate traditional enforcement violations from their underlying performance deficiencies and screen those violations using the examples and guidance in the Enforcement Manual and Enforcement Policy.

When dispositioning performance deficiencies associated with traditional enforcement violations, the traditional enforcement aspect is not considered part of the cROP performance deficiency.

Figure 1, "Issue Screening"

|         |                             |
|---------|-----------------------------|
| Block 1 | Issue of concern identified |
|---------|-----------------------------|

An issue of concern is a well-defined observation or collection of observations that may have a bearing on safety or security which may warrant further inspection, screening, evaluation, or regulatory action.

For issues of concern with multiple examples, each example should be screened separately.

On a rare occasion, an inspector may identify an issue of concern that is neither a regulatory requirement nor an accepted licensee standard which may need to be considered under the backfit process due to its perceived impact on safety or security. Inspectors identifying such an issue of concern should raise the concern to management and refer to Management Directive 8.4, "Management of Facility-specific Backfitting and Information Collection."

|           |                                   |
|-----------|-----------------------------------|
| Block TE1 | Is the issue potentially willful? |
|-----------|-----------------------------------|

Although inspectors screen issues of concern for indications of potentially willful violations, the determination of willfulness is a legal decision that can only be made by the Office of the General Council (OGC) using facts developed during an investigation conducted by the Office of Investigations (OI), normally at the recommendation of the Allegation Review Board (ARB).

See the Enforcement Policy, Enforcement Manual, and Allegation Manual for additional insights involving willfulness. See 10 CFR 50.5 for regulations addressing deliberate misconduct.

|           |   |
|-----------|---|
| Block TE2 | Does traditional enforcement or enforcement discretion apply? |
|-----------|---|

If any of the following questions can be answered 'yes', the inspector will compare the violation with examples in the Enforcement Policy to determine if the violation rises to SL-IV or above and thus constitutes a non-minor traditional enforcement violation.

1. Was there a violation that impacted the regulatory process? Examples:

- Failure to provide complete and accurate information
- Failure to receive prior NRC approval for changes in licensed activities
- Failure to notify the NRC of changes in licensed activities

- 
- Failure to perform 10 CFR 52.98 analyses
  - Reporting failure, etc.

2. Was there a violation that contributed to actual safety consequences (this should be rare in a construction environment)? Examples:

- Actual onsite or offsite releases of radiation exceeding regulatory limits
- Onsite or offsite radiation exposures exceeding regulatory limits
- Accidental criticalities
- Loss of control of radiological material exceeding regulatory limits for public dose
- Radiological emergencies

3. Is there a SL-IV or greater violation with no associated performance deficiency?

Circumstances may arise where enforcement discretion should be considered or exercised to either escalate or mitigate enforcement sanctions or otherwise refrain from taking enforcement action for a particular violation. The Enforcement Policy and Enforcement Manual describe situations where this may apply. Specific circumstances may include:

- Specific cases for which temporary Enforcement Guidance Memoranda prescribes enforcement discretion
- Non-minor violations absent a performance deficiency
- Violations identified during extended work stoppages
- Violations involving old design issues
- Violations identified because of previous enforcement action
- Violations involving certain discrimination issues

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|         |                                    |
|---------|------------------------------------|
| Block 2 | Is there a performance deficiency? |
|---------|------------------------------------|

The issue of concern is a performance deficiency if the answer to both of the following questions is “yes”:

- Was the issue of concern the result of the licensee’s failure to meet a requirement or standard? (A standard includes a self-imposed standard such as a voluntary initiative or a standard required by regulation)
- Was the cause of the issue of concern reasonably within the licensee’s ability to foresee and correct and should the issue of concern have been prevented?

When evaluating the licensee’s failure to meet a requirement or standard, inspectors should consider the licensee’s intent:

- By definition, the licensee intends to meet regulatory requirements, including license conditions.
- The inspector can generally conclude the licensee intends to meet standards established in current licensing basis documents.

- 
- Failure to meet an industry standard constitutes a performance deficiency only if the licensee intended to meet that standard. Inspectors may reasonably conclude that standards implemented via licensee procedures or as Nuclear Energy Institute (NEI) initiatives committed to by the industry are standards that the licensee intended to meet.
  - The inspector should focus on whether the licensee met regulatory requirements in an acceptable manner rather than whether the licensee met the requirements in a manner specifically approved in a generic communication.

When evaluating the licensee's ability to foresee and correct the issue of concern, the inspectors should consider whether or not the issue involved work-in-progress. Issues involved with work-in-progress are not considered within the licensee's ability to foresee and correct. Consider the following:

- Determine if the construction activity had been released for use. This does not imply that "actual" work on an SSC had to have been performed for an issue to be within the licensee's ability to foresee and correct. For example, if a design drawing had been released for use (i.e., the licensee had reviewed and approved the drawing), and it contained errors, the issue is not considered work-in-progress.
- Determine if the construction activity had been reviewed by at least one level of licensee quality assurance, quality control, or other designated/authorized personnel. This does not imply that the licensee must have "signed-off" the construction activity as complete. If the licensee had performed a quality control acceptance inspection, check, or review, which would reasonably be expected to identify and correct the issue, then the specific construction activity is normally not considered work-in-progress.

Notes:

- (1) The performance deficiency is the proximate cause of the degraded condition and is not the degraded condition. To determine this cause, inspectors need not complete a rigorous root-cause evaluation, but instead may complete an evaluation based on reasonable inspector assessment and judgment.
- (2) Inspectors should not define a performance deficiency at a fundamental level, such as defining a performance deficiency as a management weakness or as a cross-cutting area.
- (3) Enforcement Manual Section 2.13.8 discusses grouping closely related violations into an enforcement "problem". Considering this guidance, inspectors or SERP members may define or redefine a performance deficiency at the problem level and thereby create a relationship between one performance deficiency and many violations.
- (4) It is NRC policy to hold licensees, certificate holders, and applicants responsible for the acts of their employees, contractors, or vendors and their employees, and the NRC may cite the licensee, certificate holder, or applicant for violations committed by its employees, contractors, or vendors and their employees. Therefore, a performance deficiency

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committed by a contractor, vendor, and their employees while conducting work on behalf of the licensee can be assigned to the licensee.

**Block 3 | Is the performance deficiency more than minor?**

cROP Minor Screen – cROP minor screening is conducted for all PDs and only for PDs. A PD that is more-than-minor is, by definition, a finding. Follow the guidance in IMC 0613, Appendix E to determine if a PD is more-than-minor.

**Block 4 | Does the finding screen to Green?**

Inspectors will screen all findings to determine the type of finding (construction finding or ITAAC finding) and the finding's significance (color) using the guidance in IMC 2519. Any finding which cannot be determined to be Green will require a Significance and Enforcement Review Panel (SERP).

**Block 5 | Is the finding licensee-identified?**

In determining whether a finding is licensee-identified, NRC-identified, or self-revealing, a measure of subjectivity is anticipated and accepted. To make these determinations, inspectors and regional staff should consider not only the definitions of these terms, but also past experience, related precedents, and the over-arching regulatory message that the determination could send.

**Block 6 | Identify appropriate cross-cutting aspect(s)**

To identify an appropriate cross-cutting aspect for a finding, the inspector will:

- Review applicable causal information related to the finding to identify the cause(s) of the performance deficiency. (To identify causes, inspectors need not perform independent causal evaluations beyond what would be appropriate for the complexity of the issue. For the most-complex issues, inspectors may need to complete informal apparent-cause evaluations.)
- Among those causes, identify the performance characteristic that is either the primary cause of the performance deficiency or the most-significant contributor to it.
- Select the cross-cutting aspect listed in Appendix F that best reflects the performance characteristic that is the most significant contributor to the finding (i.e., determine which cross-cutting aspect provides the most meaningful insight into why the finding occurred.) A cross-cutting aspect is a finding characteristic which relates to the reason why the performance deficiency occurred. The cross-cutting aspect is not a finding.

Note that typically, the staff will assign no more than one cross-cutting aspect to a finding. On rare occasions, when the regional staff considers that a unique or complex inspection finding warrants more than one cross-cutting aspect, before associating more than one cross-cutting aspect to any finding, the regional office will contact the Construction Inspection Branch Chief

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(NRO/DCIP/CIPB) for concurrence. This note also applies to a finding with multiple examples.

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**Block 7 | Consider a URI**

Inspectors should open a unresolved item (URI) when an inspection must exit pending receipt of additional information required to determine one of the following:

- If there is a performance deficiency
- If the performance deficiency is More-than-Minor
- If the issue of concern constitutes a violation

Note: Inspectors may not use a URI to obtain more information to determine the significance of a finding. If the issue can be no more than minor by worst case projection then a URI should not be used.

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**Figure 2, “Issue Screening (Traditional Enforcement)”**

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**Block TE3 | Can cROP screening proceed without compromising investigation?**

Each issue of concern warranting a willfulness investigation triggers a process to determine whether disposition of the underlying cROP performance deficiency may proceed without compromising the OI investigation.

Generally, to preclude the possibility of compromising an ongoing willfulness investigation, inspectors should suspend cROP disposition activities that require licensee interaction until the investigation is complete. However, because SDP insights developed during issue dispositioning are integral to dispositioning most traditional-enforcement violations, inspectors should disposition cROP performance deficiencies in a timely manner. So, to balance these competing considerations, whenever cROP disposition activities could possibly compromise an ongoing investigation, the Directors (or their designees) of the OI Field Office, DCIP, the associated Regional Division of Construction Projects or Inspection, and OE should reach a consensus decision on whether cROP dispositioning should be suspended or may proceed during the investigation. The parties involved in this decision should ensure that their specific concerns are considered in order to achieve the two desired agency outcomes – a valid and defensible cROP finding and a valid and defensible violation within the enforcement program.

If the decision is to suspend cROP dispositioning, then as soon as the investigation is sufficiently complete or whenever new information arises that might otherwise warrant reevaluating that decision, the parties involved in the decision should revisit the decision, and change it if change is warranted.

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**Block TE4 | Wait for completion of investigation**

This block requires enhanced coordination to preclude the possibility of compromising an ongoing investigation by proceeding, prematurely, with cROP disposition activities while simultaneously assuring that cROP disposition activities are not delayed longer than necessary.

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|-----------|---|
| Block TE5 | Does investigation confirm a willful violation? |
|-----------|---|

In accordance with the Enforcement Policy and Enforcement Manual, OI, upon concluding its investigation will issue a conclusion about willfulness based on the facts collected/developed during investigation. Using the facts/conclusion above, OGC will make a final determination about willfulness.

|           |  |
|-----------|--|
| Block TE6 | Screen performance deficiency (Figure 1 Block 3) |
|-----------|--|

The absence of a finding may influence but does not preclude the potential to confirm a willful violation, though it may influence the determination of its severity level and/or civil penalty. Similarly, the presence of a finding does not preclude the potential to confirm no willful violation. However, if a willful violation is determined to exist, it may influence the determination of its severity level and/or civil penalty.

|           |                             |
|-----------|-----------------------------|
| Block TE7 | Confirmed willful violation |
|-----------|-----------------------------|

To disposition violations involving confirmed willfulness, inspectors shall coordinate with the Office of Enforcement through the Regional Enforcement Coordinator. Additional guidance is contained in the Enforcement Policy and Enforcement Manual.

A violation may be considered more significant than the underlying noncompliance if it involves willfulness. When determining the severity level of a willful violation, the NRC, in addition to considering the willful aspects, considers the (1) actual safety consequences, (2) potential safety consequences, and (3) potential for impacting the NRC's ability to perform its regulatory function. A notice of violation is normally required for a willful violation. However, a non-cited violation may still be appropriate. Refer to the Enforcement Policy for additional guidance.

The approval of the Director, Office of Enforcement, with consultation with the Deputy Executive Director as warranted, is required for dispositioning willful violations as non-cited violations.

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|           |  |
|-----------|--|
| Block TE8 | Does the violation warrant enforcement discretion? |
|-----------|--|

For violations involving enforcement discretion, inspectors shall coordinate their actions with the NRO and Regional Enforcement Coordinators. Additional guidance is contained in the Enforcement Policy and Enforcement Manual.

Some enforcement discretion decisions are made on a case-by-case basis in consultation with the Office of Enforcement, while others may be instituted under a temporary Enforcement Guidance Memorandum.

|         |                |
|---------|----------------|
| Block 7 | Consider a URI |
|---------|----------------|

See Block 7 for Figure 1

CORNERSTONE OBJECTIVES AND ATTRIBUTES TABLES

| <b>Cornerstone</b> |   | <b>CONSTRUCTION REACTOR SAFETY – Design/Engineering</b> |
|--------------------|---|---|
| <b>Objective</b>   | To ensure that licensees’ programs and processes are adequately developed and implemented for design and engineering controls.                                  |   |
| <b>Attributes</b>  | <b>Areas to Measure</b>   |   |
| Process Control    | ITAAC; Civil/Structural; Mechanical; Electrical; Welding; Maintenance and Storage Of SSCs; Applicable Criteria From Appendix B; Reports Required By Regulations |   |
| Material Control   |   |   |
| Procedure Quality  |   |   |

| <b>Cornerstone</b> |   | <b>CONSTRUCTION REACTOR SAFETY – Procurement/Fabrication</b> |
|--------------------|---|--|
| <b>Objective</b>   | To ensure that licensees’ programs and processes are adequately developed and implemented for procurement and fabrication activities.   |  |
| <b>Attributes</b>  | <b>Areas to Measure</b>   |  |
| Process Control    | ITAAC; Commercial Grade Dedication; Receipt Inspection; Licensee’s Evaluation Of Suppliers; Applicable Criteria From Appendix B; Maintenance and Storage Of SSCs; and Reports Required By Regulations |  |
| Material Control   |   |  |
| Procedure Quality  |   |  |

| <b>Cornerstone</b> |  | <b>CONSTRUCTION REACTOR SAFETY - Construction / Installation</b> |
|--------------------|--|--|
| <b>Objective</b>   | To ensure that licensee’s programs and processes are adequately developed and implemented to ensure the construction and installation of facilities and structures, systems, and components are in accordance with the design. |  |
| <b>Attributes</b>  | <b>Areas to Measure</b>  |  |
| Process Control    | ITAAC; Civil/Structural; Mechanical; Electrical; Welding; Maintenance and Storage Of SSCs; Applicable Criteria From Appendix B; Reports Required By Regulations  |  |
| Material Control   |  |  |
| Procedure Quality  |  |  |



| <b>Cornerstone</b> |  | <b>CONSTRUCTION REACTOR SAFETY – Inspection/Testing</b> |
|--------------------|--|---|
| <b>Objective</b>   | To ensure that licensees' programs and processes are adequately developed and implemented to inspect and test programs, facilities, and structures, systems, and components. |   |
| <b>Attributes</b>  | <b>Areas to Measure</b>  |   |
| Process Control    | ITAAC; ITAAC Closure; ITAAC Maintenance; Non-ITAAC Testing; Preoperational Testing; Applicable Criteria From Appendix B  |   |
| Material Control   |  |   |
| Procedure Quality  |  |   |

| <b>Cornerstone</b>         |   | <b>OPERATIONAL READINESS – Operational Programs</b> |
|----------------------------|---|---|
| <b>Objective</b>           | To ensure that licensees' adequately develop and implement the operational programs required by a license condition or regulation.  |   |
| <b>Attributes</b>          | <b>Areas to Measure</b>   |   |
| Program Effectiveness      | Emergency Preparedness; Radiation Protection; Process And Effluent Monitoring; Fire Protection; Preservice Inspection; Preservice Testing; Inservice Inspection; Inservice Testing; Environmental Qualification; Reactor Vessel Material Surveillance; Containment Leak Rate Testing; Maintenance Rule; Motor-Operated Valves; Quality Assurance (Operations); Operational Readiness. |   |
| Training and Qualification | Reactor Operator Training; Reactor Operator Requalification; Non-Licensed Plant Staff Training.   |   |

| <b>Cornerstone SAFEGUARDS PROGRAMS – Security Programs For Construction Inspection and Operations</b> |  |
|---|--|
| <b>Objective</b>  | To provide assurance that (1) construction activities are not adversely impacted due to fitness-for-duty issues; and (2) the licensee’s security programs use a defense-in-depth approach and can protect against the design basis threat of radiological sabotage from internal and external threats. |
| <b>Attributes</b>   | <b>Areas to Measure</b>  |
| Access Authorization  | Operational Program: Personnel Screening; Behavior Observations; Fitness for Duty<br>Construction Program: Fitness for Duty  |
| Access Control  | Operational Program: Search; Identification  |
| Physical Protection   | Operational Program: Protected Areas and Vital Areas (Barriers, Alarms, Assessment)  |
| Contingency Response  | Operational Program: Protective Strategy Evaluation, Target Set Review   |
| Material Control & Accounting   | Operational Program: Records, Reports; Procedures; Inventories   |
| Cyber Security  | Operational Program: Protection of Systems & Networks; Cyber Security Program; Plan & Procedures   |
| Protection of Safeguards Information  | Operational and Construction Programs: Access to SGI; Designation and Storage; Processing, Reproducing and Transmitting; Removal and Destruction   |

END

Appendix C  
GUIDANCE FOR SUPPLEMENTAL INSPECTION REPORTS

One of the objectives of Inspection Procedure (IP) 90001/90002 is to provide an assessment of the licensee's analysis and corrective actions associated with the issue(s) that prompted the supplemental inspection. The guidance contained in Inspection Manual Chapter (IMC) 0613 applies equally to the baseline and supplemental portions of the reactor construction inspection program; however, given the nature of supplemental inspections, the type of documentation for supplemental inspections will be different than for baseline inspections. A supplemental inspection report will document the Nuclear Regulatory Commission's independent assessment of each inspection requirement and pertinent qualitative observations of the licensee's efforts to identify and address the root cause of the issue prompting the supplemental inspection. A separate inspection report will usually be generated for each supplemental inspection. All violations and findings must conform to the format guidance provided in IMC 0613. The independent review of the extent of condition and extent of cause called for in IP 90002 should be documented in addition to the other inspection requirements contained in IP 90002. Specific documentation requirements and report format for inspections conducted in accordance with IP 90003 will be provided by the team leader.

Listed below are some general principles that apply to documenting the results of the supplemental inspections performed in accordance with IP 90001/90002. These principles supplement the guidance contained elsewhere in IMC 0613.

1. The cover letter of the supplemental inspection report should conform to the guidance given for baseline inspection reports, but it should also contain a brief description of the inspection staff's overall conclusion regarding the effectiveness of the licensee's evaluation and corrective actions associated with the issue(s) that prompted the inspection.
2. A summary of issues for the supplemental inspection report should contain the inspection staff's overall assessment of the issue(s). The summary will include any specific findings associated with the licensee's evaluation and findings that emerged during the inspection.
3. The supplemental inspection report should contain a description of the inspection scope. This section should describe the purpose and objectives of the inspection and the issue(s) that prompted the inspection. This summary can be taken from a previous inspection report for an inspection-related issue. This section can also include a description of the licensee's preparation efforts for the inspection.
4. The supplemental inspection report should contain an assessment for each of the areas listed below, as applicable. For each area, state the inspection requirements prescribed in section 9000X-02, "Inspection Requirements," of IP 90001/90002. Provide a synopsis

of the licensee's assessment related to the inspection requirement, the inspection staff's assessment of the licensee's evaluation, and any additional actions taken by the inspector to assess the validity of the licensee's evaluation.

- a. Problem Identification
  - b. Root Cause, Extent-of-Condition, and Extent-of-Cause Evaluation
  - c. Corrective Actions
  - d. Independent Assessment of Extent-of-Condition and Extent-of-Cause (only for IP 90002 inspection reports)
  - e. Safety Culture Consideration (only for IP 90002 inspection reports)
5. For all supplemental inspections conducted in accordance with IP 90001/90002, an assessment of the licensee's evaluation and corrective actions associated with the issue(s) should be documented. Negative conclusions regarding aspects of the licensee's evaluation and corrective actions should be supported by examples of performance deficiencies (i.e., observations or findings). Other conclusions should be supported by a brief statement describing their bases.
  6. The supplemental inspection report should contain an exit meeting summary, a list of persons contacted, licensee documents reviewed during the inspection, and acronyms used in the inspection report.
  7. The recommended signature authority for supplemental inspection reports is as follows:
    - a. For an inspection performed in accordance with IP 90001/90002 that resulted in no findings, green findings, or severity level IV violations, the responsible branch chief will sign out the report.
    - b. For an inspection performed in accordance with IP 90001/90002 that resulted in greater than green findings or greater than severity level IV violations, the responsible division director will sign out the report.
    - c. For an inspection performed in accordance with IP 90003, the deputy regional administrator for construction will sign out the report.
  8. Inspectors should record supplemental inspection results in CIPIMS.

END

APPENDIX D  
Guidance for Documenting Inspection Procedure 35007  
Corrective Action Program Inspections

One of the objectives of Inspection Procedure 35007 is to provide an assessment of the effectiveness of the licensee's corrective action programs (CAP). Consequently, the type of documentation for this inspection should be different than for other baseline inspections and may include more qualitative observations. Listed below are some general principles that apply to documenting the results of IP 35007. These principles supplement the guidance contained elsewhere in Inspection Manual Chapter (IMC) 0613.

1. The cover letter for routine CAP inspection reports should conform to the guidance given for other baseline inspections, but it should also contain a brief description of the team's overall conclusion regarding the effectiveness of the licensee's CAP.
2. The summary of issues for this report should contain the team's overall assessment of the licensee's CAP, on the basis of both the annual team inspection and routine baseline inspections. This overall assessment should also be placed in CIPIMS as an observation.
3. The inspection report should contain an assessment for each of the inspection requirements as follows.

a. Assessment of the Corrective Action Program Effectiveness

Inspection Scope - Identify the documents that were reviewed and, if applicable, the other activities that were completed to verify that:

- The licensee is identifying problems at the proper threshold and entering them into the corrective action system;
- The licensee is adequately prioritizing and evaluating issues, include pertinent reference numbers (for example, NCR #s, violations #s, etc.); and
- Corrective actions are effective at preventing recurrence and timely.

Include samples taken from the previous 12 months of routine baseline inspection reports. Also include assessments and audits of the corrective action program that were completed within the previous 12 months.

Assessment - Effectiveness of Problem Identification Document a general conclusion regarding the licensee's effectiveness in problem identification. Include the bases for the general conclusion. Discuss issues and relevant observations regarding problem identification, and properly disposition any related findings.

Assessment - Effectiveness of Prioritization and Evaluation of Issues Document a general conclusion regarding the licensee's effectiveness in problem evaluation, and include the bases for that conclusion. Discuss issues relative to:

- The effectiveness of the licensee's process for prioritizing issues
- Technical adequacy and depth of evaluations (including root cause analysis where appropriate)
- Adequate consideration of reportability requirements

Assessment - Effectiveness of Corrective Actions. Document a general conclusion regarding the licensee's ability to develop and implement effective corrective actions. Discuss issues and relevant observations regarding corrective actions, including, for significant conditions adverse to quality, issues associated with the effectiveness of corrective actions to prevent recurrence. In addition, the assessment of licensee trending is addressed under this header (see IP 35007, A16.04.01, a.12).

b. Assessment Use of Construction Experience

Inspection Scope - Identify the documents that were reviewed and, if applicable, the other activities that were completed to verify that the licensee appropriately used construction experience information.

Assessment - Document a general conclusion regarding the licensee's use of construction experience information. Include the bases for the general conclusion.

c. Assessment of the Self-Assessments and Audits

Inspection Scope - Identify the documents that were reviewed and, if applicable, the other activities that were completed to verify that the licensee conducted self- and independent assessments of their activities and practices, as appropriate to assess performance and identify areas for improvement.

Assessment - Document a general conclusion regarding the licensee's self-assessments and audits. Include in the conclusion if issues identified by those self-assessments were addressed. Incorporate into the discussion the bases for the general conclusion

d. Assessment of Safety Conscious Work Environment

Inspection Scope - Identify the documents that were reviewed and, if applicable, the other activities that were completed to assess whether issues exist that may represent challenges to the free flow of information, and to determine whether underlying factors exist that would produce a reluctance to raise nuclear safety concerns.

Assessment - Document a general conclusion regarding the existence of issues that may represent challenges to the free flow of information, and of underlying factors that could produce a reluctance to raise nuclear safety concerns. Include the bases for the general conclusion.

4. Negative conclusions regarding aspects of the CAP should be supported by examples of violations. Other conclusions should be supported by a brief statement of the basis for the conclusion, including the scope of material reviewed.

END

## APPENDIX E

### Examples of Minor Construction Issues

The purpose of this appendix is to provide **guidance** to the Nuclear Regulatory Commission (NRC) staff regarding the threshold for minor and more-than-minor performance deficiencies. The information contained in this section provides clarification and examples that may help the inspector determine if a performance deficiency is more than minor.

Minor performance deficiencies and violations are below the significance of that associated with green SDP findings and are not the subject of formal enforcement action or documentation. Failures to implement requirements that have insignificant safety or regulatory impact or findings that have no more than minimal risk should normally be categorized as minor.

NRC Enforcement Manual, Section 2.10, "Minor Violations," states that issues that represent isolated (i.e., "isolated" in that based on a reasonable effort, the staff determines that the issue is not recurring nor is it indicative of a programmatic issue such as inadequate supervision, resources, etc.) failures to implement a requirement and have insignificant safety or regulatory impact should normally be categorized as minor violations.

If possible, the inspector should determine if the issue represented an isolated failure to implement a requirement that had an insignificant safety or regulatory impact. For an issue to be considered isolated, it should not be indicative of a programmatic deficiency. If the inspector did not sample enough to make this determination, the issue should not be considered isolated. The determination that an issue is isolated should imply that the licensee had established adequate measures to control the construction activity. Recurring issues that are NOT indicative of a programmatic deficiency, and have an insignificant safety or regulatory impact, should be considered minor.

When determining whether identified issues can be considered minor, NRC inspectors should determine if the performance deficiency is similar to an example question in Appendix E. If there are no similar examples, the inspector should ask the following questions. If the answer to any one of the following questions is "YES," the performance deficiency is more-than-minor. If the answer to all of the questions is "NO," the performance deficiency should be considered minor.

1. Does the performance deficiency represent a substantive non-conservative error in a specification, computer program, design report, drawing, calculation, or other design document that defines the technical requirements for structure, system, or component (SSC)?
2. Does the performance deficiency represent a substantive failure to establish or implement an adequate program, process, procedure, or quality oversight function?
3. Does the performance deficiency represent an adverse condition that rendered the quality of a SSC, unacceptable or indeterminate, and requires substantive corrective action?



4. Does the performance deficiency represent an irretrievable loss or inadequate documentation of a quality assurance record; or a record-keeping issue that could preclude the licensee from demonstrating the adequacy of quality or from properly evaluating safety-significant activities?
5. Is the performance deficiency associated with one of the cornerstone attributes listed at the end of Appendix B of this Manual Chapter and did the performance deficiency adversely affect the associated cornerstone objective?

When asking the above questions, inspectors should consider the following guidance. Issues that could render the quality of a SSC or activity unacceptable would generally be considered more than minor. Issues that are material to the acceptance criteria of an ITAAC (i.e., ITAAC findings) are considered more than minor. If the issue could render the quality of a SSC or activity indeterminate, the inspector should consider (within reason) whether the issue will require the licensee to perform substantive efforts to determine the suitability of the SSC. Inspectors should consider substantive efforts as “involving matters of major or practical importance.” Examples of substantive efforts may include, but not limited to, a detailed engineering analysis, re-design, significant repair, or other significant corrective actions to establish the suitability of an item or activity. An issue that *could* adversely affect a SSC’s ability to perform its intended safety function, or could impair the accomplishment of another SSC’s safety function, should generally be considered more-than-minor. Also, issues that represent a reduction in safety margin compared to the latest safety analysis approved by the NRC should also be considered more-than-minor.

*["Could" does NOT imply that the issue would absolutely adversely affect the SSC. It implies a probability that the ability of the SSC to perform its intended safety function may be adversely affected if the proper conditions existed.]*

The non-existence of a detailed engineering justification does not necessarily imply that the issue is minor, in that the inspector should consider that the lack of a more detailed evaluation may indicate that the licensee failed to adequately consider the scope of the issue or fully understand the technical and quality requirements. In some cases, re-design may appear to be a simple corrective action, and minor on the surface; however, the staff should verify that all interactions and interfaces have been considered and that sufficient design margin is available.

Depending on the particular circumstances, issues related to the “Failure to establish an adequate process, program, procedure, or quality oversight function that could render the quality of the construction activity unacceptable or indeterminate,” should be considered more-than-minor. These issues are more significant, in that the licensee will depend on these processes, programs, procedures, and quality oversight functions to establish the basis that the SSC is constructed in accordance with the approved design (i.e., the SSC will perform its intended safety function.)

While licensees must correct minor performance deficiencies, minor performance deficiencies do not normally warrant documentation in inspection reports or inspection records and do not warrant formal enforcement actions. If a licensee does not disposition a minor performance deficiency in accordance with its CAP, then the inspectors should screen this as a new construction issue.

## CONSTRUCTION ISSUE EXAMPLES

All examples in this appendix assume (unless otherwise stated) that the construction activity had been released for use. This does not imply that “actual” work on an SSC had to have been performed for an issue to be more-than-minor. For example, if a design drawing had been released for use (i.e., the licensee had reviewed and approved the drawing), and it contained significant errors, the issue may be more-than-minor even if no SSCs had been constructed with the incorrect drawing.

All examples in this appendix assume that the licensee had an opportunity to identify and correct the performance deficiency (i.e., the construction activity had been reviewed by at least one level of licensee quality assurance, quality control, or other designated / authorized personnel.)

This does not imply that the licensee must have “signed-off” the construction activity as complete. If the licensee had performed a quality control acceptance inspection, check, or review, which would reasonably be expected to identify and correct the issue, then the specific construction activity may not be a “work-in-progress.” As used in the examples, the terms “licensee” and “applicant” are interchangeable.

As used in the examples, the term “Inspector” relates to the NRC inspector (unless otherwise stated.)

In all examples, it is assumed that the licensee documents and corrects the performance deficiency, even if the issue is determined to be minor. If the licensee fails to correct a minor issue, that would be screened as a different issue.

The referenced quality assurance (QA) Criterion may be the 10 CFR 50, Appendix B criterion, the corresponding ASME NQA-1, or other equivalent QA criteria which were approved by the NRC staff as part of the license.

The following table provides a reference to the different types of performance deficiencies covered by the examples.

**TABLE 1:  
ISSUES RELATED TO SPECIFIC QA CRITERIA**

| Category  | 10 CFR Part 50, Appendix B Criteria |  | Example                               |
|---|-------------------------------------|--|---------------------------------------|
| Management Controls                             | 1                                   | Organization   | None                                  |
|   | 2                                   | QA Program   | None                                  |
|   | 18                                  | Audits   | 8                                     |
| Design Control                                  | 3                                   | Design Control   | 1; 2; 3; 9; 13; 24                    |
| Procurement                                     | 4                                   | Procurement Document Control                                   | 25; 27                                |
|   | 7                                   | Control of Purchased Material, Equipment and Services          | 8                                     |
| Work Controlling Documents and Records          | 5                                   | Instructions, Procedures and Drawings                          | 2; 3; 4; 6; 7; 13; 14; 15; 16; 21; 22 |
|   | 6                                   | Document Control   | 14; 15                                |
|   | 17                                  | QA Records   | 4; 10; 20; 21; 22                     |
| Materials and Equipment                         | 8                                   | Identification and Control of Materials, Parts, and Components | 17                                    |
|   | 12                                  | Control of Measuring and Test Equipment                        | 10                                    |
|   | 13                                  | Handling, Storage and Shipping                                 | 16; 18                                |
|   | 14                                  | Inspection, Test and Operating Status                          | None                                  |
| Special Processes, Inspection, and Test Control | 9                                   | Control of Special Processes                                   | 6                                     |
|   | 10                                  | Inspection   | 5; 11; 12; 21; 22                     |
|   | 11                                  | Test Control   | None                                  |
| Nonconformance and Corrective Action            | 15                                  | Nonconforming Materials, Parts or Components                   | 19                                    |
|   | 16                                  | Corrective Action  | 23                                    |

### EXAMPLE 1

PD: The inspectors identified that the as-built SSC did not meet the applicable design or construction specification.

Minor because: The as-built SSC was acceptable without the support of a detailed engineering justification, or amendment to the licensing basis document (i.e., the issue was insignificant.)

Or the as-built SSC did not conform to the specification, but was made acceptable with minor re-work (e.g., minor adjustment or minor grinding) or completion of originally prescribed processing.

Or the as-built structure was more conservative than the as-designed.

Not minor if: The use of the alternate design required a substantive justification by the licensee to ensure that the as-built structure did not adversely affect the SSC's ability to perform its intended safety function.

Or the use of the alternate design resulted in the licensee having to meet other technical requirements, which were not part of the original design. For example, the use of the as-built structure would require additional inspections, tests, re-work, maintenance, etc., to ensure that the SSC would perform its intended safety function.

Or the as-built SSC required substantial rework, repair, or additional examination.

### EXAMPLE 2

PD: The inspectors identified that the licensee's design specification does not conform to the design basis (i.e., the licensee failed to adequately translate the approved design to appropriate drawings, instruction, procedures, etc.).

Minor because: The design error resulted in a more conservative analysis than what was required by the governing technical requirements.

Or the design error was insignificant, in that the ability of the as-designed SSC to perform its intended safety function was not challenged.

Not minor if: The design error resulted in a less conservative analysis that could have adversely affected the SSC's ability to perform its intended safety function.

### EXAMPLE 3

PD: The inspectors identified that a drawing (design output document) failed to adequately translate the design basis requirements for a safety significant SSC. The SSC had not been constructed, but the drawing had been released for use.

Minor because: The design error was insignificant, in that SSC could perform its intended safety function.

Not minor if: The design error could have adversely affected the SSC's ability to perform its intended safety function.

### EXAMPLE 4

PD: The inspectors identified that the licensee failed to maintain quality-related records in accordance with QA program requirements.

Minor because: No records were irretrievably lost.

Not minor if: Actual records were lost or damaged to an extent that precluded the licensee from demonstrating the adequacy or quality of a safety significant SSC.

### EXAMPLE 5

PD: The inspectors identified that a licensee's QC inspector was not qualified in accordance with the QA program requirements.

Minor because: The QC inspector's unqualified status was a result of an administrative issue.

Or the QC inspector had not performed any inspection in the area of qualification in question.

Not minor if: The QC inspector performed an inspection that they were not qualified for.

### EXAMPLE 6

PD: The inspectors identified that the licensee was welding with a different size and classification of electrode than that allowed by the welding procedure specification.

Minor because: According to the ASME code, a change in the electrode size or type is a nonessential variable; therefore, the welding procedure specification does not need to be re-qualified.

Not minor if: If the issue is related to a change in an essential variable, and the welding procedure specification was required to be re-qualified.

#### EXAMPLE 7

PD: The inspectors identified that a licensee's procedure was not adequate.  
Minor because: The issue was insignificant, in that the procedure was inadequate from an administrative or other minor deficiency that did not leave any quality process or construction activity indeterminate or unacceptable.  
Not minor if: The procedure was required to be qualified by performance demonstration or technical evaluation.

Or, the procedure didn't adequately implement technical or quality requirements leaving a quality process or construction activity unacceptable or indeterminate.

#### EXAMPLE 8

PD: The inspectors identified that the licensee failed to conduct a required periodic surveillance of their supplier.

Minor because: The licensee had established adequate measures to control purchased items and services, and the licensee had completed an initial audit of the supplier.

Not minor if: The licensee received unacceptable material and the audit could have identified the deficiency of the vendor's program.

Or the initial audit was not performed.

#### EXAMPLE 9

PD: A design change was made to a SSC, but the change was not controlled by measures commensurate with those applied to the original design.

Minor because: The design change did not contain a technical error(s) that rendered the quality of the SSC unacceptable or indeterminate, and was isolated.

Not minor if: The design change contained a significant error(s) that could affect the ability of the SSC to perform its intended safety function.

EXAMPLE 10

PD: Inspectors identified that the calibration records for measuring and test equipment (M&TE) being used were out of date or in error.

Minor because: The error would have been discovered during prescribed testing or calibration and the error would have been evaluated and corrected upon identification.

Or when tested, the M&TE was found to be within calibration limits.

Not minor if: The error would not have been discovered during routine tests or calibration.

Or the material that the M&TE was used for could not be re-inspected or repaired.

Or M&TE traceability to materials/tests performed prior to error discovery was not maintained.

EXAMPLE 11

PD: For a completed quality inspection, the inspectors identified that the licensee failed to verify that the acceptance limit was met.

Minor because: The acceptance limit was more conservative than the governing regulatory requirement, which was met.

Or had insignificant consequences.

Not minor if: Failing to meet the acceptance limit could have rendered the SSC unacceptable or indeterminate and caused substantive corrective actions.

EXAMPLE 12

PD: During visual examination of a weld, the inspectors identified that the licensee's QC inspector failed to verify that he had the minimum required light intensity.

Minor because: Although the QC inspector did not measure the light intensity, the ambient lighting was more than the minimum, and a visual indication could have been seen by the inspector.

Not minor if: Using appropriate lighting, it was found that the weld was unacceptable.

Or the welds were not accessible for re-inspection.

### EXAMPLE 13

- PD: Inspectors identified that the licensee failed to post an Engineering Change Request (ECR) to the affected drawing(s).
- Minor because: The licensee did not perform any construction work to the affected drawing.
- Or the licensee continued construction work to the affected drawing, but the change did not directly affect the work performed.
- Not minor if: Work was completed without implementing the design change and not implementing the design change could adversely affect the function of the SSC.

### EXAMPLE 14

- PD: NRC inspectors identified that a licensee procedure had undergone major revision and contained reference to another site procedure which had been cancelled prior to the date of the revision.
- Minor because: The issue was insignificant, in that the cancelled procedure was not required to provide information that was material to the successful completion of the specific work activity (i.e., the issue was administrative.)
- Not minor if: The issue was significant, in that the revised procedure relied on a cancelled procedure to provide information that was important to the successful completion of a work activity that affected a SSC (e.g., acceptance criteria for an inspection, guidance for technical evaluation of data, qualification criteria, etc.)

### EXAMPLE 15

- PD: During inspection of construction activities, the NRC inspectors found a superseded copy of the installation work procedure beside some tools staged at the job site.
- Minor because: Work activities had not been conducted with the outdated procedure.
- Or work activities had been completed with the outdated procedure, but the difference between the outdated procedure and current revision did not render the quality of the construction activity unacceptable or indeterminate.
- Not minor if: The outdated procedure was used and the differences were significant.



#### EXAMPLE 16

- PD: Licensee procedures require that all safety-related structural steel be stored off the ground to prevent corrosion. The inspectors identified structural steel that was lying directly on the ground.
- Minor because: The steel had not been damaged and there was no active corrosion that would require a detailed engineering evaluation, re-design or repair to establish the adequacy of the structural steel to perform its intended safety function.
- Not minor if: The structural steel was damaged such that a detailed engineering evaluation, re-design, or repair was necessary to establish the adequacy of the structural steel to perform its intended safety function.

#### EXAMPLE 17

- PD: The inspectors identified that items were missing tags which were required by a licensee QA procedure.
- Minor because: The tags were an administrative control, in that the items did not rely on the tags to maintain material traceability or nonconforming segregation as required by a regulatory requirement.
- Not minor if: Items were installed without identification tags/markings and traceability and/or segregation requirements could not be established or verified.

#### EXAMPLE 18

- PD: Inspectors identified that the environmental storage conditions of SSCs did not meet the licensee's QA program requirements.
- Minor because: Actual storage conditions had an insignificant impact on the SSC.
- Not minor if: Inadequate environmental storage conditions adversely affected stored items requiring significant correction actions such as a detailed engineering analysis, re-design, reject, or repair to establish the adequacy of the SSCs.

#### EXAMPLE 19

- PD: The inspectors identified that the licensee failed to initiate a nonconformance report for a licensee-identified deficiency discovered during an inspection of an item.
- Minor because: The licensee maintained another process for documentation (identification) of the nonconformance and the deficiency was corrected with the completion of originally prescribed processing or was acceptable "as-is" without a detailed engineering justification.

Not minor if: The licensee failed to document and evaluate the nonconformance and the nonconformance could impact a critical characteristic associated with the functionality of the item.

#### EXAMPLE 20

PD: The inspectors identified a technical error on an inspection record for a code required examination.

Minor because: The technical error was insignificant.

Not minor if: The error was significant and had been accepted.

#### EXAMPLE 21

PD: The inspectors identified that the licensee had bypassed a QC hold point in a procedure.

Minor because: The QC inspection can be performed out of sequence and is considered to be isolated by the inspector.

Not minor if: The QC inspection cannot be performed out of sequence without affecting quality.

Or the QC inspection attribute cannot be verified at a later point in the construction process.

#### EXAMPLE 22

PD: The inspectors identified that the licensee had not performed a procedurally required QC inspection. For example, a welder completes the fit up tack weld without having QC perform the cleanliness inspection.

Minor because: There is reasonable assurance that near term subsequent QC inspection steps would have identified the missing inspection.

Not minor if: The subsequent QC inspection step(s) is signed off as acceptable without identifying the previous missed step(s).

Or it is not reasonable that subsequent QC inspections would have identified the missed QC inspection.

EXAMPLE 23

PD: The inspectors identified that the licensee did not complete a procedural step as written in the corrective action program procedure. Minor because: The step was not required by Appendix B Criterion XVI or the licensee's QA program.

Not minor if: The step is required by Appendix B Criterion XVI or the licensee's QA program.

EXAMPLE 24

PD: The inspectors identified anomalies in the Software Requirement Specification which were inconsistent with system requirements.

Minor because: The anomaly(s) as implemented would have no impact on the design and performance of the safety system as described in licensing documents.

Or the anomaly(s) in the specification was more conservative than the system requirements.

Not minor if: The anomaly(s) could negatively affect the design and performance of the safety system as described in licensing documents.

Or the anomaly(s) is indicative of a larger quality problem.

EXAMPLE 25

PD: The inspectors identified that procurement documents did not adequately specify material, design, testing, or code requirements for a SSC.

Minor because: The omission of the requirement would not impact the function of the SSC.

Not Minor if: The omitted requirement could have adversely affected the function of the SSC.

EXAMPLE 26

PD: The inspectors identified that the licensee failed to perform a Part 21 or 50.55(e) evaluation of a deviation or failure to comply.

Minor because: Failure to conduct an evaluation is isolated and doesn't involve a failure to report as required.

Not minor if: Failure to conduct an evaluation is not isolated (multiple failures to conduct Part 21 or 50.55(e) evaluations); .

Or, the licensee failed to provide a report, including an interim report, for a reportable event.

Or, the failure involves the lack of staff training in multiple groups regarding Part 21 or 50.55(e) requirements to conduct an evaluation of a deviation or a failure to comply.

Or, the licensee provided a report for a reportable event that contained incomplete or incorrect information that was material to the deviation or failure to comply.

EXAMPLE 27

PD: The inspectors identified that the licensee failed to reference Part 21 or 50.55(e) requirements in a procurement contract.

Minor because: Work had not been performed under the contract.

Not minor if: Work had been performed under the contract without implementing the requirements of Part 21 or 50.55(e).

END

## APPENDIX F Construction Cross-Cutting Areas and Aspects

As part of the construction reactor oversight process (cROP), performance is monitored in three broad strategic performance areas: construction reactor safety; safeguards programs; and operational readiness. Within the strategic performance areas are the six cROP cornerstones of safety: design/engineering; procurement/fabrication; construction/installation; inspection/testing; operational programs; and security programs for construction inspection and operations.

In addition to the six cornerstones of safety, three areas of licensee performance are considered as "cross-cutting" and potentially impacting more than one cornerstone. These cross-cutting areas are named Human Performance (H), Problem Identification and Resolution (P), and Safety Conscious Work Environment (S). Within each cross-cutting area are aspects of performance related to that cross-cutting area. Cross-cutting areas and aspects are listed below. When an inspector determines that a cross-cutting aspect applies to a finding, the alpha-numeric identifier associated with the selected cross-cutting aspect listed below shall be included in the inspection report (e.g., Human Performance, Resources would be identified as H.1.)

NUREG - 2165, "Safety Culture Common Language," describes the essential traits of a healthy nuclear safety culture. NUREG - 2165 is based on the common language that was agreed to during a January 2013 public workshop and was documented in the enclosure to the meeting summary (ADAMS Accession No. ML13031A343). The cross-cutting aspects listed below are defined consistent with the attributes in the common language document.

The NRC assigns cross-cutting aspects to inspection findings in accordance with this IMC. Inspectors are required to evaluate each finding to determine if the principal cause of the finding can be associated with one of the cross-cutting aspects. When the principal cause of a finding is similar to a cross-cutting aspect, that cross-cutting aspect should be assigned to the finding. In deciding which aspect is most appropriate to assign to a finding, inspectors may refer to the attribute examples provided in NUREG 2165 and/or the meeting summary. Inspectors are not expected to document a cross-cutting aspect for each and every inspection finding. Most, but not all, findings should be assigned a cross-cutting aspect.

The NRC reviews cross-cutting aspects for cross-cutting themes and potential substantive cross-cutting issues in accordance with IMC 2505, "Periodic Assessment of Construction Inspection Program Results," to provide licensees the opportunity to address performance issues before they result in more significant safety concerns. Although the presence of CCAs or the assignment of a substantive cross-cutting issue may be indicative of a potentially degraded safety culture, the NRC draws conclusions about safety culture based on the results of licensee and NRC safety culture assessments conducted by qualified staff, not based on the presence of CCAs or substantive cross-cutting issues.

The "Supplemental Cross-Cutting Aspects" listed below are not applied to inspection findings under the construction baseline inspection program. However, these aspects are indicators of a healthy safety culture and should be considered for safety culture assessments performed or

reviewed during supplemental inspections. While they are important characteristics of safety culture, some attributes from NUREG 2165 are not included as cross-cutting aspects and are considered to be outside the scope of the construction inspection program.

Exhibit 1 provides a cross-reference from the common language attributes to new cross-cutting aspects. Exhibit 2 provides a cross-reference from the original cross-cutting aspects to the new cross-cutting aspects resulting from the common language initiative. The common language attributes are subsets of the following traits of a healthy nuclear safety culture:

- Leadership Safety Values and Actions (LA)
- Problem Identification and Resolution (PI)
- Personal Accountability (PA)
- Work Processes (WP)
- Continuous Learning (CL)
- Environment for Raising Concerns (RC)
- Effective Safety Communication (CO)
- Respectful Work Environment (WE)\*
- Questioning Attitude (QA)
- Decision Making (DM)

\* The Respectful Work Environment (WE) trait is not being used for cROP applications.

The common language attributes' abbreviation is listed at the end of the cross-cutting aspect description below.

**Cross-Cutting Areas and Aspects:**

**Human Performance (H)**

|            |  |
|------------|--|
| <b>H.1</b> | <b>Resources:</b> Leaders ensure that personnel, equipment, procedures, and other resources are available and adequate to support nuclear safety (LA.1).   |
| <b>H.2</b> | <b>Field Presence:</b> Leaders are commonly seen in the work areas of the plant observing, coaching, and reinforcing standards and expectations. Deviations from standards and expectations are corrected promptly. Senior managers ensure supervisory and management oversight of work activities, including contractors and supplemental personnel (LA.2). |

|             |   |
|-------------|---|
| <b>H.3</b>  | <b>Change Management:</b> Leaders use a systematic process for evaluating and implementing change so that nuclear safety remains the overriding priority (LA.5).  |
| <b>H.4</b>  | <b>Teamwork:</b> Individuals and work groups communicate and coordinate their activities within and across organizational boundaries to ensure nuclear safety is maintained (PA.3).   |
| <b>H.5</b>  | <b>Work Management:</b> The organization implements a process of planning, controlling, and executing work activities such that nuclear safety is the overriding priority. The work process includes the identification and management of risk commensurate to the work and the need for coordination with different groups or job activities (WP.1). * |
| <b>H.6</b>  | <b>Design Margins:</b> The organization maintains equipment within design margins. Margins are carefully guarded and changed only through a systematic and rigorous process. Special attention is placed on maintaining ITAAC, especially those associated with fission product barriers, defense-in-depth, and safety-related equipment (WP.2).        |
| <b>H.7</b>  | <b>Documentation:</b> The organization creates and maintains complete, accurate and, up-to-date documentation (WP.3).   |
| <b>H.8</b>  | <b>Procedure Adherence:</b> Individuals follow processes, procedures, and work instructions (WP.4).   |
| <b>H.9</b>  | <b>Training:</b> The organization provides training and ensures knowledge transfer to maintain a knowledgeable, technically competent workforce and instill nuclear safety values (CL.4).   |
| <b>H.10</b> | <b>Bases for Decisions:</b> Leaders ensure that the bases for organizational decisions are communicated in a timely manner (CO.2).  |
| <b>H.11</b> | <b>Challenge the Unknown:</b> Individuals stop when faced with uncertain conditions. Risks are evaluated and managed before proceeding (QA.2).  |
| <b>H.12</b> | <b>Avoid Complacency:</b> Individuals recognize and plan for the possibility of mistakes, latent issues, and inherent risk, even while expecting successful outcomes. Individuals implement appropriate error reduction tools (QA.4). **  |
| <b>H.13</b> | <b>Consistent Process:</b> Individuals use a consistent, systematic approach to make decisions. Risk insights are incorporated as appropriate (DM.1).   |
| <b>H.14</b> | <b>Conservative Bias:</b> Individuals use decision making-practices that emphasize prudent choices over those that are simply allowable. A proposed action is determined to be safe in order to proceed, rather than unsafe in order to stop (DM.2).  |

\* Adds language from WP.1 example 1 to clarify that this aspect fully retains what was previously included in A.3(a) and A.3(b).

\*\* Incorporates language from QA.4 example 5 to clarify that H.12 is the appropriate designation for issues involving a failure to use human error reduction techniques that were previously included under A.4(b).

### **Problem Identification and Resolution (P)**

|            |   |
|------------|---|
| <b>P.1</b> | <b>Identification:</b> The organization implements a corrective action program with a low threshold for identifying issues. Individuals identify issues completely, accurately, and in a timely manner in accordance with the program (PI.1). |
| <b>P.2</b> | <b>Evaluation:</b> The organization thoroughly evaluates issues to ensure that resolutions address causes and extent of conditions commensurate with their safety significance (PI.2).  |
| <b>P.3</b> | <b>Resolution:</b> The organization takes effective corrective actions to address issues in a timely manner commensurate with their safety significance (PI.3).   |
| <b>P.4</b> | <b>Trending:</b> The organization periodically analyzes information from the corrective action program and other assessments in the aggregate to identify programmatic and common cause issues (PI.4).  |
| <b>P.5</b> | <b>Operating and Construction Experience:</b> The organization systematically and effectively collects, evaluates, and implements relevant internal and external operating and construction experience in a timely manner (CL.1).             |
| <b>P.6</b> | <b>Self-Assessment:</b> The organization routinely conducts self-critical and objective assessments of its programs and practices (CL.2).   |

### **Safety Conscious Work Environment (S)**

|            |   |
|------------|---|
| <b>S.1</b> | <b>SCWE Policy:</b> The organization effectively implements a policy that supports individuals' rights and responsibilities to raise safety concerns, and does not tolerate harassment, intimidation, retaliation, or discrimination for doing so (RC.1).                                 |
| <b>S.2</b> | <b>Alternate Process for Raising Concerns:</b> The organization effectively implements a process for raising and resolving concerns that is independent of line management influence. Safety issues may be raised in confidence and are resolved in a timely and effective manner (RC.2). |
| <b>S.3</b> | <b>Free Flow of Information:</b> Individuals communicate openly and candidly, both up, down, and across the organization and with oversight, audit, and regulatory organizations (CO.3).  |

### **Supplemental Cross-Cutting Aspects (X)**

The supplemental cross-cutting aspects are to be considered only when performing or reviewing safety culture assessments during the conduct of the supplemental inspections.



|             |   |
|-------------|---|
| <b>X.1</b>  | <b>Incentives, Sanctions, and Rewards:</b> Leaders ensure incentives, sanctions, and rewards are aligned with nuclear safety policies and reinforce behaviors and outcomes that reflect safety as the overriding priority (LA.3). |
| <b>X.2</b>  | <b>Strategic Commitment to Safety:</b> Leaders ensure plant priorities are aligned to reflect nuclear safety as the overriding priority (LA.4).   |
| <b>X.3</b>  | <b>Roles, Responsibilities, and Authorities:</b> Leaders clearly define roles, responsibilities, and authorities to ensure nuclear safety (LA.6).   |
| <b>X.4</b>  | <b>Constant Examination:</b> Leaders ensure that nuclear safety is constantly scrutinized through a variety of monitoring techniques, including assessments of nuclear safety culture (LA.7).                                     |
| <b>X.5</b>  | <b>Leader Behaviors:</b> Leaders exhibit behaviors that set the standard for safety (LA.8).   |
| <b>X.6</b>  | <b>Standards:</b> Individuals understand the importance of adherence to nuclear standards. All levels of the organization exercise accountability for shortfalls in meeting standards (PA.1).                                     |
| <b>X.7</b>  | <b>Job Ownership:</b> Individuals understand and demonstrate personal responsibility for the behaviors and work practices that support nuclear safety (PA.2).   |
| <b>X.8</b>  | <b>Benchmarking:</b> The organization learns from other organizations to continuously improve knowledge, skills, and safety performance (CL.3).   |
| <b>X.9</b>  | <b>Work Process Communications:</b> Individuals incorporate safety communications in work activities (CO.1).  |
| <b>X.10</b> | <b>Expectations:</b> Leaders frequently communicate and reinforce the expectation that nuclear safety is the organization's overriding priority (CO.4).   |
| <b>X.11</b> | <b>Challenge Assumptions:</b> Individuals challenge assumptions and offer opposing views when they think something is not correct (QA.3).   |
| <b>X.12</b> | <b>Accountability for Decisions:</b> Single-point accountability is maintained for nuclear safety decisions (DM.3).   |

Exhibit 1 – Cross-reference from Common Language Attributes to New Cross-Cutting Aspects

| <b>Common Language Attribute*</b> | <b>New Cross-Cutting Aspect</b> |
|-----------------------------------|---------------------------------|
| LA.1                              | H.1                             |
| LA.2                              | H.2                             |
| LA.3                              | X.1                             |
| LA.4                              | X.2                             |
| LA.5                              | H.3                             |
| LA.6                              | X.3                             |
| LA.7                              | X.4                             |
| LA.8                              | X.5                             |
| PI.1                              | P.1                             |
| PI.2                              | P.2                             |
| PI.3                              | P.3                             |
| PI.4                              | P.4                             |
| PA.1                              | X.6                             |
| PA.2                              | X.7                             |
| PA.3                              | H.4                             |
| WP.1                              | H.5                             |
| WP.2                              | H.6                             |
| WP.3                              | H.7                             |
| WP.4                              | H.8                             |
| CL.1                              | P.5                             |
| CL.2                              | P.6                             |
| CL.3                              | X.8                             |
| CL.4                              | H.9                             |
| RC.1                              | S.1                             |
| RC.2                              | S.2                             |
| CO.1                              | X.9                             |
| CO.2                              | H.10                            |
| CO.3                              | S.3                             |
| CO.4                              | X.10                            |
| QA.2                              | H.11                            |
| QA.3                              | X.11                            |
| QA.4                              | H.12                            |
| DM.1                              | H.13                            |
| DM.2                              | H.14                            |
| DM.3                              | X.12                            |

\* Attributes WE.1, WE.2, WE.3, WE.4, and QA.1 are not being used for cROP applications

Exhibit 2 – Cross Reference from Original Cross-Cutting Aspects to New Cross-Cutting Aspects

| <b>Old Aspect</b> | <b>New Aspect</b> |
|-------------------|-------------------|
| A.1(a)            | H.3 or H.13*      |
| A.1(b)            | H.14              |
| A.1(c)            | H.10              |
| A.2(a)            | H.1 or H.9*       |
| A.2(b)            | H.7               |
| A.2.(c)           | H.1               |
| A.3(a)            | H.5               |
| A.3(b)            | H.4 or H.5*       |
| A.4(a)            | H.11 or H.12*     |
| A.4(b)            | H.8               |
| A.4(c)            | H.2               |
| A.5(a)            | P.1               |
| A.5(b)            | P.4               |
| A.5(c)            | P.2               |
| A.5(d)            | P.3               |
| A.5(e)            | S.2               |
| A.6(a)            | P.5               |
| A.6(b)            | P.5               |
| A.7(a)            | P.6               |
| A.7(b)            | P.6               |
| A.7(c)            | P.3               |
| A.8(a)            | X.1               |
| A.8(b)            | X.10              |
| A.8(c)            | X.6               |
| B.1(a)            | S.1 or S.3*       |
| B.1(b)            | S.2               |
| B.2(a)            | S.1               |
| B.2(b)            | S.1               |
| B.2(c)            | S.1               |

\* If reassigning an old cross-cutting aspect that has two potential new cross-cutting aspect designations, chose the new cross-cutting aspect that most accurately represents the principal cause of the finding.

END

Attachment 1: Revision History for IMC 0613

| Commitment Tracking Number | Accession Number<br>Issue Date<br>Change Notice | Description of Change   | Description of Training Required and Completion Date | Comment and Feedback Resolution<br>Accession Number |
|----------------------------|---|---|--|---|
| N/A                        | ML112991558<br>12/21/2011<br>CN 11-042          | Issued to support cROP Pilot  | N/A  |   |
| N/A                        | ML12292A062<br>12/19/12<br>CN 12-029            | Complete rewrite of IMC 0613 and to incorporate feedback received through IMC/IP change process   | N/A  | ML12292A064   |
| N/A                        | ML13150A150<br>07/15/13<br>CN 13-015            | Complete rewrite of IMC 0613 to support full implementation of cROP enforcement and assessment programs   | N/A  | ML13168A539   |
|                            | ML14268A728<br>09/23/14<br>CN 14-021            | Complete rewrite of Appendix F to incorporate new cross-cutting aspects as part of the common safety culture language initiative. Also changed wording in the body of the IMC to be consistent with the new Appendix F, and corrected typographical errors. |  |   |