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Item	Facility	Type	Sub	Document Number / Title	Sheet	Revision	Doc Date	Copy #	Media	Copies
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*Memorandum*

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**NO-01-0152**  
**June 15, 2001**

**TO:** Quality Assurance Program Topical Report - Controlled Copy Owners  
*Dorothy Bruce*  
**FROM:** Dorothy Bruce, QAP Coordinator  
Oversight - Operate the Asset, Ext. 3185

**SUBJECT: Quality Assurance Program (QAP) Topical Report - Millstone Power Station  
Revision 22, Change 7 (Document No. MP-02-OST-BAP01)**

Enclosed please find Quality Assurance Program (QAP) Topical Report - Millstone Power Station, Revision 22, Change 7. The change modifies the QAP to address regulatory changes regarding 10CFR50.59. The change modifies language in QAP Section 3 and throughout QAP Appendix F to meet modifications to 10CFR50.59, "Changes, Tests, and Experiments", as described in the final rule documented in the Federal Register, Volume 64, Number 191, issued October 4, 1999. Specifically, "unreviewed safety question" is replaced with "..(requires) a license amendment" and "safety evaluation" is replaced with "50.59 evaluation". In addition, the Federal Register references "the facility and procedures", therefore Appendix F, Page 5, (NSAB responsibility "a.") is modified to read "the facility and procedures" in accordance with regulatory guidance.

The effective date of Revision 22, Change 7, is **June 15, 2001**. Please replace the entire contents of QAP Section 3.0 and Appendix F of the QAP with the enclosed sections. If you have any questions, contact D. Bruce at X3185.

Attachments: Summary of changes incorporated as part of Revision 22, Change 7

Enclosure:  
Quality Assurance Program Topical Report - Millstone Power Station, Revision 22, Chg.7

DSB/dsb

**Summary of Changes to QAP Rev. 22 Incorporated as Change 07**

<b><u>Section</u></b>	<b><u>Summary Description of Changes</u></b>	<b><u>Reference</u></b>
Section 3.0	Modifies language in QAP Section 3.2.2 meet amendment to 10CFR50.59, "Changes, Tests, and Experiments", Specifically, "unreviewed safety question" is replaced with "..requires a license amendment" and "safety evaluation" is replaced with "50.59 evaluation".	<b>Request 01-04</b>
Appendix F	Modifies language in Appendix F to meet amendment to 10CFR50.59, "Changes, Tests, and Experiments". "Unreviewed safety question" is replaced with "..(requires) a license amendment" and "safety evaluation" is replaced with "50.59 evaluation". In addition, Appendix F, Page 5, (NSAB responsibility "a.") is modified to read "the facility and procedures" in accordance with regulatory guidance.	<b>Request 01-04</b>

## 3.0 DESIGN CONTROL

### 3.1 GENERAL REQUIREMENTS

This QAP provides measures to assure that the applicable design requirements, such as design bases, regulatory requirements, codes, technical standards and quality standards, are identified in design documents which are reviewed, approved and controlled in accordance with procedures. Such measures include review for suitability of application of materials, equipment, parts and processes that are essential to the functions of quality structures, systems, and components. Changes to, and deviations from specified requirements are identified, documented and controlled.

Manage the Asset is responsible for controlling design work, administering design control activities (including design interface) and design modifications for quality structures, systems, and components.

The responsibility for administration of the design control program for the Millstone Power Station nuclear power plants rests with Manage the Asset. The division of responsibilities and jurisdictional boundaries for design control program implementation are set forth in licensee procedures. Although other organizations may be delegated the task of establishing and executing the design control program or any part thereof, Manage the Asset shall retain overall responsibility for the program. The applicable requirements of this QAP shall be imposed on other organizations delegated the task of establishing or executing the design control program in accordance with QAP 4.0, "Procurement Document Control" and QAP 7.0, "Control of Purchased Material, Equipment and Services".

The interface controls, both internal and external, for organizations performing design work for quality structures, systems, and components are identified and implemented in accordance with procedures. This identification includes those organizations providing criteria, designs, specifications and technical direction.

Measures are applied to verify the adequacy of design. The extent of design verification is specified and documented by the responsible organization. The individuals performing design verification should not (1) have immediate supervisory responsibility for the individual performing the design, (2) have specified a singular design approach, (3) have ruled out certain design considerations, or (4) have established the design inputs for the particular design aspect being verified. The independent design verification should not dilute or replace the responsibility of the supervisors for the quality of work performed under their supervision. Where changes to previously verified designs have been made, design verifications are required for the change, including evaluation of the effects of those changes on the overall design. Design verification may be accomplished by testing. Tests to demonstrate adequacy under adverse design conditions shall comply with the requirements of QAP 11.0, "Test Control." Design errors and deficiencies which adversely affect quality structures, systems, and components in

the design process are documented and appropriate corrective action is taken. These design errors and deficiencies are documented in accordance with design change procedures or as defined in QAP 15.0, "Nonconforming Material, Parts, Components, or Services" and/or QAP 16.0, "Corrective Action".

## 3.2 IMPLEMENTATION

Manage the Asset is responsible for the design, design review, engineering approval of design changes, design evaluation and design control for the units. Although some portion of the design process may be delegated to other organizations, Manage the Asset has the responsibility for overall design and final engineering decisions and design control of quality structures, systems, and components.

Oversight performs audits, surveillances, and inspections, as appropriate, to verify that licensee processes are effectively complying with this QAP and procedural requirements for design control. Additionally, audits, surveillances and inspections are performed, as appropriate, to verify that vendors are effectively complying with their quality assurance program requirements for design control.

### 3.2.1 DESIGN PROCESS

Design control measures are applied to design analyses, such as, reactor physics, stress, thermal, hydraulic, nuclear radiation, accident and seismic analyses; compatibility of materials; accessibility for in-service inspection, maintenance, and repair; and delineation of acceptance criteria for inspections and test. Measures established to control design documents are described in QAP 6.0, "Document Control".

Program procedures and instructions define the method of implementing design control measures. These measures require that applicable design requirements, such as, design bases, regulatory requirements, codes and standards, are translated into specifications, drawings, procedures or instructions. Procedures and instructions further require that appropriate quality standards are specified and included in design documents. Materials, equipment, parts and processes, including standard "off the shelf" commercial or previously approved items essential to quality functions are selected and reviewed for suitability of application. The basis for selection may include industry standards, material and prototype hardware testing programs, and design review.

Procedures assure that a documented check is performed to verify the accuracy and completeness of design drawings and specifications before release for procurement, fabrication or construction. Design drawings receive a documented check to verify dimensional accuracy.

Design drawings and specifications issued for design changes are reviewed for completeness and accuracy before release to operations, in accordance with design control procedures.

Procedures describe the provisions to assure that design drawings and specifications are prepared, reviewed and approved in accordance with licensee requirements and that the documents contain the necessary quality assurance requirements, such as inspections and test requirements, acceptance requirements, and the extent of documenting inspection and test results.

### 3.2.2 DESIGN CHANGE CONTROL

Procedures and instructions governing design change control during modifications to the Station nuclear plants, the control of discrepant or deficient design conditions, and the reporting of unsatisfactory performance provide for the identification of the need for design changes and a documented method to control these changes. Design and specification changes are subject to design control measures commensurate with those applied during the original design as amended by changes.

An independent review and approval of design changes is performed by the organization that conducted the original design reviews, unless such review is performed by the licensee or another qualified organization delegated by the licensee to perform this function.

Proposed design change modifications are submitted to the appropriate Manage the Asset management for processing and review. This review includes the appropriate on-site review committee(s) as required by applicable procedures. If the change involves a quality structure, system or component, the change shall be reviewed by qualified engineering personnel for technical adequacy. Reviews of the **10CFR50.59** evaluations associated with proposed design changes are performed by the Nuclear Safety Assessment Board (NSAB). The sequence of the NSAB review depends upon the determination of whether an **a license amendment** (for Unit 1, also an unreviewed decommissioning question), is involved (i.e., in accordance with ANSI N18.7, if a proposed change in the facility **requires a license amendment** then the NSAB review is conducted prior to submittal of the proposed change to the NRC for review and the issuance of a license amendment for its implementation).

The combination of these independent reviews by the on-site review committee(s) and NSAB is performed to assure that:

- a. the adequacy of the proposed change is substantiated;

- b. **changes that require a license amendment** are properly identified and handled per 10CFR50.59; (for Unit 1, unreviewed decommissioning questions are properly identified and handled per 10CFR50.82);
- c. nuclear safety requirements have been addressed.

Errors and deficiencies in design, including the design process, that could adversely affect quality structures, systems, and components are documented and corrective action is taken in accordance with QAP 15.0, "Nonconforming Materials, Parts, Components, or Services" and/or QAP 16.0, "Corrective Action".

Notification of design changes are transmitted to responsible plant personnel prior to implementation and as part of the design change package close out. Procedures describe this notification which assures that personnel are made aware of design change modifications which may affect the performance of their duties.

### 3.2.3 DESIGN INTERFACE CONTROL

Procedures and instructions identify design interface controls and the resolution of design interface questions during modifications to the station nuclear power plants.

### 3.2.4 INDEPENDENT DESIGN VERIFICATION

Original designs and design modifications are reviewed for adequacy and the sign-off performed by a person other than the originator of the design. The originator's supervisor may perform this independent review only if the supervisor: (1) did not specify a singular design approach, (2) did not establish the design inputs or rule out certain design considerations, (3) is the only individual in the organization competent to perform the review. Where the supervisor performs the design review, the next level of management shall fulfill the supervisor's responsibilities. Design verification is documented in accordance with procedures or instructions. Simplified calculations or computer programs may be utilized as alternate means of design verification. When design verification is performed by testing, the tests are performed using procedures, which specify the authority and responsibility of design verification personnel. Responsibility for design adequacy and evaluation is retained by Manage the Asset.

Design verification (if other than by qualification testing) is normally completed prior to release for procurement, fabrication, and construction, or release to another organization for use in other design activities. For those cases where design verification cannot be completed prior to

release for procurement, fabrication, and construction, procedures assure that design verification is completed prior to the point when the installation is declared operational.

Procedures describe the requirements which assure the following when testing is considered as an alternate method of design verification:

- a. Specifications or procedures provide criteria that specify when verification should be by test.
- b. Prototype, component or feature testing is performed as early as possible prior to installation of plant equipment, or prior to the point when the installation is declared operational.
- c. Verification by test performed under conditions that simulate the most adverse conditions as determined by analysis.

Particular emphasis is placed on assuring that designs are in conformance with applicable codes, and on selecting the proper design verification or checking method. Procedures and instructions provide the requirements and necessary controls for design verification. These controls include a review to assure that design characteristics can be controlled, verification that there is adequate accessibility for inspection or test, and that inspection and test acceptance criteria are incorporated. Documentation of reviews is provided.

Procedures include requirements which identify the responsibility of design verifiers, the areas and features to be verified, and the extent of the documentation.

Procedures assure that procedural control is established for design documents that reflect the commitments of the nuclear unit FSAR/DSAR. These procedural controls vary for design documents which receive formal design verification by several disciplines or organizations, and those which can be reviewed by a single individual. The specific design documents and specialized reviews are determined and used as required by the design changes and modifications.

Procedures are established to assure that verified computer programs are certified for a specific use.

The licensee is responsible for assuring that the design documents generated by vendors for the Station nuclear power plants are technically correct, approved, and maintained.

APPENDIX F  
QUALITY ASSURANCE PROGRAM (QAP)  
TOPICAL REPORT - MILLSTONE POWER STATION

ADMINISTRATIVE CONTROLS<sup>1</sup>

NOTE:

1. "Technical Specification" numbers refer to the unit specific Technical Specifications as identified.

INDEPENDENT SAFETY ENGINEERING GROUP (ISEG)

Function

The ISEG shall include, as part of its function, examination of unit operating characteristics, NRC issuances, industry advisories, Licensee Event Reports, and other sources of unit design and operating experience information, including units of similar design, which may indicate areas for improving unit safety. The ISEG shall make detailed recommendations for revised procedures, equipment modifications, maintenance activities, operations activities, or other means of improving unit safety to appropriate station/corporation management.

The ISEG shall report organizationally to a director (or higher) who is not in the direct chain of command of power production. The ISEG is directly involved in meeting the requirements of NUREG-0737 for item I.B.1.2 for Millstone Units 2 and 3. The ISEG is independent of SORC and NSAB.

Composition

The ISEG shall be composed of at least five full-time personnel located on site to perform the functions described above for Millstone Units 2 and 3. Each person shall have either:

- (1) A bachelor's degree in engineering or related science and at least 2 years of professional level experience in his field, at least 1 year of which experience shall be in the nuclear field, or,
- (2) At least 10 years of professional level experience in his field, at least 5 years of which experience shall be in the nuclear field.

A minimum of 50% of these personnel shall have the qualifications specified in (1) above.

Responsibilities

The ISEG shall be responsible for maintaining surveillance of unit activities to provide independent verification\* that these activities are performed correctly and that human errors are reduced as much as practical.

## Records

Records of activities performed by the ISEG shall be prepared and maintained, and quarterly reports of completed evaluations will be made to the SVP/CNO - Dominion Nuclear Connecticut, Inc. and the Vice President and Senior Nuclear Executive - Millstone .

\*Not responsible for sign-off function

## REVIEW AND AUDIT

### Site Operations Review Committee (SORC)

#### Function

The SORC shall function to advise the Master Process Owner - Operate the Asset on all matters related to nuclear safety for Millstone Power Station. The Master Process Owner - Operate the Asset shall advise the SVP/CNO - Dominion Nuclear Connecticut, Inc. and Vice President and Senior Nuclear Executive - Millstone on all matters related to nuclear safety requiring higher level of responsibility and authority.

#### Composition

The SORC shall be composed of a minimum of eleven members. Members shall collectively have experience and expertise in the following areas:

- Plant Operations
- Engineering
- Reactor Engineering
- Maintenance
- Instrumentation and Controls
- Radiation Protection
- Chemistry
- Work Planning
- Quality Assurance

Each SORC member shall meet the following minimum qualifications:

- 1) Have an academic degree in an engineering or physical science field, and have a minimum of five years technical experience in their respective field of expertise,
- or
- 2) Hold a management position, and have a minimum of five years technical experience in their respective field of expertise.

The members of SORC shall be appointed in writing by the Master Process Owner - Operate the Asset. The SORC Chairperson and two Vice Chairpersons shall be drawn from the members and shall be appointed in writing by the Master Process Owner - Operate the Asset.

## Alternates:

Alternate members shall be appointed in writing by the SORC Chairperson to serve on a temporary basis. Each alternate shall meet the minimum qualifications described above for SORC members, and shall have the same area of expertise as the member being replaced.

## Meeting Frequency

The SORC shall meet at least once per calendar month and as convened by the SORC Chairperson.

## Quorum

A quorum of the SORC shall consist of the Chairperson or Vice Chairperson and five members or designated alternates. However, no more than two alternates may vote at any one time.

For any SORC decision affecting site-wide issues, the Chairperson shall ensure appropriate representation.

## Responsibilities

The SORC shall be responsible for:

- a. Review of 1) all procedures required by Unit 2/3 Technical Specification 6.8 or Unit 1 Technical Specification 5.5 and changes thereto, 2) all programs required by Unit 2/3 Technical Specification 6.8 or Unit 1 Technical Specification 5.6 and changes thereto, 3) any other proposed procedures, programs, or changes thereto as determined by the SVP/CNO - Dominion Nuclear Connecticut, Inc., Vice President and Senior Nuclear Executive - Millstone , or Master Process Owner - Operate the Asset to affect site nuclear safety. Programs and procedures required by Unit 2/3 Technical Specification 6.8 or Unit 1 Technical Specification 5.5 and 5.6 that are designated for review and approval by the Station Qualified Reviewer Program do not require SORC review.
- b. Review of all proposed changes to Technical Specifications.
- c. Review of all proposed tests and experiments that affect nuclear safety.
- d. Review of all proposed changes or modifications to systems or equipment that affect nuclear safety.
- e. Render determinations in writing or meeting minutes if any item considered under (a) through (d) above, as appropriate and as provided by 10CFR50.59 or 10CFR50.92, **requires a license amendment or** requires a significant hazards consideration determination.
- f. Performance of special reviews and investigations and reports as requested by the Chairperson of the Nuclear Safety Assessment Board.
- g. Review of the fire protection program and implementing procedures.

- h. Investigations of all violations of Technical Specifications, including the preparation and forwarding of reports covering evaluation and recommendations to prevent recurrence, to the Master Process Owner - Operate the Asset, SVP/CNO - Dominion Nuclear Connecticut, Inc., Vice President and Senior Nuclear Executive - Millstone , and to the Chairperson of the Nuclear Safety Assessment Board;
- i. Review of all Millstone Power Station REPORTABLE EVENTS;
- j. Review of facility operations to detect potential safety hazards;
- k. Review of Unit 3 Turbine Overspeed Protection Maintenance and Testing Program and revisions thereto.

#### Authority

The SORC shall:

- a. Recommend to the Master Process Owner - Operate the Asset written approval or disapproval in meeting minutes of items considered under Responsibilities (a) through (k) above. The Master Process Owner - Operate the Asset will report to the Vice President and Senior Nuclear Executive - Millstone and the SVP/CNO - Dominion Nuclear Connecticut, Inc., any issues that require higher level of authority.
- b. Provide immediate written notification or meeting minutes to the Vice President and Senior Nuclear Executive - Millstone , the SVP/CNO - Dominion Nuclear Connecticut, Inc. and the Chairperson of the Nuclear Safety Assessment Board of disagreement between the SORC and the Master Process Owner - Operate the Asset; however, the Vice President and Senior Nuclear Executive - Millstone shall have responsibility for resolution of such disagreements pursuant to Unit 2/3 Technical Specification 6.1.1 and Unit 1 Technical Specification 5.1.1.

#### Records

The SORC shall maintain written minutes of each meeting and copies shall be provided to the Master Process Owner - Operate the Asset, the Vice President and Senior Nuclear Executive - Millstone and Chairperson of the Nuclear Safety Assessment Board. Minutes regarding investigations of violations of Tech Specs and disagreements addressed by SORC shall also be provided to the SVP/CNO - Dominion Nuclear Connecticut, Inc.

#### Nuclear Safety Assessment Board (NSAB)

##### Function

The minimum qualifications of NSAB members are as follows:

- a. The Chairperson and NSAB members shall have:
  - 1. An academic degree in an engineering or physical science field, or hold a senior management position, and
  - 2. A minimum of five years technical experience in their respective field of expertise.

- b. The NSAB shall have experience in and shall function to provide independent oversight review and audit of designated activities in the areas of:
  1. Nuclear power plant operations;
  2. Nuclear engineering;
  3. Chemistry and radiochemistry;
  4. Metallurgy;
  5. Instrumentation and control;
  6. Radiological safety;
  7. Mechanical and electrical engineering; and
  8. Quality assurance practices.

The NSAB serves to advise the Vice President and Senior Nuclear Executive - Millstone on matters related to nuclear safety and notify the SVP/CNO - Dominion Nuclear Connecticut, Inc. and Vice President and Senior Nuclear Executive - Millstone within 24 hours of a safety significant disagreement between the NSAB and the organization or function being reviewed.

#### Composition

The Vice President and Senior Nuclear Executive - Millstone shall appoint, in writing, a minimum of seven members to the NSAB and shall designate from this membership, in writing, a Chairperson and a Vice Chairperson. The membership shall function to provide independent review and audit in the areas listed in Function (b) above.

#### Alternates

All alternate members shall be appointed, in writing, by Vice President and Senior Nuclear Executive - Millstone; however, no more than two alternates shall participate as members in NSAB activities at any one time.

#### Meeting Frequency

The NSAB shall meet at least once per calendar quarter.

#### Quorum

The quorum of the NSAB shall consist of a majority of NSAB members including the Chairperson or Vice Chairperson. No more than a minority of the quorum shall have line responsibility for operation of a Dominion Nuclear Connecticut, Inc. nuclear unit. No more than two alternates shall be appointed as members at any meeting in fulfillment of the quorum requirements.

## Review Responsibilities

The NSAB shall be responsible for the review of:

- a. The evaluations for changes to **the facility and** procedures, and tests or experiments completed under the provisions of 10 CFR 50.59, to verify that such actions did not **require a license amendment** as defined in 10 CFR 50.59;
- b. Proposed changes to **the facility or** procedures **that require a license amendment** as defined in 10 CFR 50.59;
- c. Proposed tests or experiments that **require a license amendment** as defined in 10 CFR 50.59;
- d. Proposed changes to Technical Specifications and the Operating License;
- e. Violations of applicable codes, regulations, orders, license requirements, or internal procedures having nuclear safety significance;
- f. All Licensee Event Reports required by 10 CFR 50.73;
- g. Indications of significant unanticipated deficiencies in any aspect of design or operation of structures, systems, or components that could affect nuclear safety;
- h. Significant accidental, unplanned, or uncontrolled radioactive releases, including corrective actions to prevent recurrence;
- i. Significant operating abnormalities or deviations from normal and expected performance of equipment that could affect nuclear safety;
- j. The performance of the corrective action program; and
- k. Audits and audit plans.

Reports or records of these reviews shall be forwarded to the Vice President and Senior Nuclear Executive - Millstone within 30 days following completion of the review.

## Audit Program Responsibilities

The NSAB audit program shall be the responsibility of Oversight. NSAB audits shall be performed at least once per 24 months in accordance with administrative procedures and shall encompass:

- a. The conformance of unit operation to provisions contained within the Technical Specifications and applicable license conditions;
- b. The training and qualifications of the unit staff;
- c. The implementation of all programs required by Units 2/3 Technical Specification 6.8 and Unit 1 Technical Specification 5.6;

- d. The Fire Protection Program and implementing procedures.
- e. The fire protection equipment and program implementation utilizing either a qualified offsite license fire protection engineer or an outside independent fire protection consultant.
- f. Actions taken to correct deficiencies occurring in equipment, structures, systems, components, or method of operation that affect nuclear safety; and
- g. Other activities and documents as requested by the Vice President and Senior Nuclear Executive - Millstone or SVP/CNO - Dominion Nuclear Connecticut, Inc.

#### Records

Written records of reviews and audits shall be maintained. As a minimum these records shall include:

- a. Results of the activities conducted under the provisions of this NSAB Section;
- b. Deleted
- c. Deleted

#### Station Qualified Reviewer Program

##### Function

The designated manager, designated officer, or Vice President and Senior Nuclear Executive - Millstone may establish a Station Qualified Reviewer Program whereby required reviews of designated procedures or classes of procedures required by SORC, Responsibilities item (a) are performed by Station Qualified Reviewers and approved by designated managers [Responsible Individual(s) for the procedure(s)]. These reviews are in lieu of reviews by the SORC. However, procedures which require a 10 CFR 50.59 evaluation must be reviewed by the SORC.

##### Responsibilities

The Station Qualified Reviewer Program shall:

- a. Provide for the review of designated procedures, programs, and changes thereto by a Qualified Reviewer(s) other than the individual who prepared the procedure, program, or change.
- b. Provide for cross-disciplinary review of procedures, programs, and changes thereto when organizations other than the preparing organization are affected by the procedure, program, or change.
- c. Ensure cross-disciplinary reviews are performed by a Qualified Reviewer(s) in affected disciplines, or by other persons designated by cognizant Process Owner or Master Process Owner as having specific expertise required to assess a particular procedure, program, or change. Cross-disciplinary reviewers may function as a committee.

- d. Provide for a screening of designated procedures, programs and changes thereto to determine if an evaluation should be performed in accordance with the provisions of 10 CFR 50.59. This screening will be performed by personnel trained and qualified in performing 10 CFR 50.59 evaluations.
- e. Provide for written recommendation by the Qualified Reviewer(s) to the responsible manager for approval or disapproval of procedures and programs considered SORC, Responsibilities item (a), and that the procedure or program was screened by a qualified individual and found not to require a 10 CFR 50.59 evaluation.

If the responsible manager determines that a new program, procedure, or change thereto requires a 10 CFR 50.59 evaluation, that manager will ensure the required evaluation is performed to determine if the new procedure, program, or change **requires a license amendment**. The new procedure, program, or change will then be forwarded with the 10 CFR 50.59 evaluation to SORC for review.

Personnel recommended to be Station Qualified Reviewers shall be designated in writing by the designated Master Process Owner, Process Owner, Vice President and Senior Nuclear Executive - Millstone , or Vice President – Nuclear Operations/Millstone for each procedure, program, or class of procedure or program within the scope of the Station Qualified Reviewer Program.

Temporary procedure changes shall be made in accordance with Unit 2/3 Technical Specification 6.8.3 and Unit 1 Technical Specification 5.5.5 with the exception that changes to procedures for which reviews are assigned to Qualified Reviewers will be reviewed and approved as described in Responsibilities (a) through (e) above.

#### Records

The review of procedures and programs performed under the Station Qualified Reviewer Program shall be documented in accordance with administrative procedures.

#### Training and Qualification

The training and qualification requirements of personnel designated as a Qualified Reviewer in accordance with the Station Qualified Reviewer Program shall be in accordance with administrative procedures. Qualified reviewers shall have:

- a. A Bachelors degree in engineering, related science, or technical discipline, and two years of nuclear power plant experience;

OR

- b. Six years of nuclear power plant experience;

OR

- c. An equivalent combination of education and experience as approved by a Process Owner or Master Process Owner.

SAFETY LIMIT VIOLATION - Units 2 and 3

The SVP/CNO - Dominion Nuclear Connecticut, Inc., Vice President and Senior Nuclear Executive - Millstone and the Chairperson of the NSAB shall be notified within 24 hours in the event a Safety Limit is violated.

The Safety Limit Violation Report shall be submitted to the Commission, the Chairperson of the NSAB, SVP/CNO - Dominion Nuclear Connecticut, Inc. and the Vice President and Senior Nuclear Executive - Millstone, within 14 days of the violations.

#### RECORD RETENTION - Unit 1 and 2

(1) The following records shall be retained for at least five years:

- a. Records and logs of facility operation covering time interval at each power level.
- b. Records and logs of principal maintenance activities, inspections, repair and replacement of principal items of equipment related to nuclear safety.
- c. All REPORTABLE EVENTS.
- d. Records of surveillance activities, inspections, and calibrations required by these technical specifications.
- e. Records of reactor tests and experiments.
- f. Records of changes made to operating procedures.
- g. Records of radioactive shipments.
- h. Records of sealed source leak tests and results.
- i. Records of annual physical inventory of all sealed source material of record.

(2) The following records shall be retained for the duration of the facility operating license:

- a. Records and drawing changes reflecting facility design modifications made to systems and equipment described in the Final Safety Analysis Report.
- b. Records of new and irradiated fuel inventory, fuel transfers, and assembly burnup histories.
- c. Records of facility radiation and contamination surveys.
- d. Records of radiation exposure for all individuals entering radiation control areas.
- e. Records of gaseous and liquid radioactive material released to the environs.
- f. Records of transients or operational cycles for those facility components designed for a limited number of transients or cycles.
- g. Records of training and qualification for current members of the plant staff.

- h. Records of inservice inspections performed pursuant to the Technical Specifications.
- i. Records of quality assurance activities required by the QA Manual.
- j. Records of reviews performed for changes made to procedures or equipment or reviews of tests and experiments pursuant to 10 CFR Part 50.59.
- k. Records of meetings of the NSAB and the SORC.
- l. Records of Environmental Qualification which are covered under the provisions of Technical Specification 6.13.
- m. Records of reviews performed for changes made to the Radiological Effluent Monitoring and Offsite Dose Calculation Manual (REMDCM) and the Process Control Program.

**RECORD RETENTION - Unit 3 Only**

- (1) In addition to the applicable record retention requirements of Title 10, Code of Federal Regulations, the following records shall be retained for at least the minimum period indicated.
- (2) The following records shall be retained for at least five years:
  - a. Records and logs of unit operation covering time interval at each power level;
  - b. Records and logs of principal maintenance activities, inspections, repair and replacement of principal items of equipment related to nuclear safety;
  - c. All REPORTABLE EVENTS;
  - d. Records of surveillance activities, inspections, and calibrations required by Technical Specifications;
  - e. Records of changes made to the procedures required by Technical Specification 6.8.1;
  - f. Records of radioactive shipments;
  - g. Records of sealed source and fission detector leak tests and results; and
  - h. Records of annual physical inventory of all sealed source material of record.
- (3) The following records shall be retained for the duration of the unit Operating License:
  - a. Records and drawing changes reflecting unit design modifications made to systems and equipment described in the Final Safety Analysis Report;
  - b. Records of new and irradiated fuel inventory, fuel transfers, and assembly burnup histories;
  - c. Records of radiation exposure for all individuals entering radiation control areas;

- d. Records of gaseous and liquid radioactive material released to the environs;
- e. Records of transient or operational cycles for those unit components identified in Technical Specification Table 5.7-1.
- f. Records of reactor tests and experiments;
- g. Records of training and qualification for current members of the unit staff;
- h. Records of inservice inspections performed pursuant to the Technical Specifications;
- i. Records of quality assurance activities required by the Quality Assurance Topical Report not listed in (2) a. through (2) h. above;
- j. Records of reviews performed for changes made to procedures or equipment or reviews of tests and experiments pursuant to 10 CFR Part 50.59;
- k. Records of meetings of the NSAB and the SORC;
- l. Records of the service lives of all hydraulic and mechanical snubbers required by Technical Specification 3.7.10 including the date at which the service life commences and associated installation and maintenance records;
- m. Records of secondary water sampling and water quality; and
- n. Records of analyses required by the Radiological Environmental Monitoring Program that would permit evaluation of the accuracy of the analysis at a later date. This should include procedures effective at specified times and QA records showing that these procedures were followed.
- o. Records of reviews performed for changes made to the Radiological Effluent Monitoring and Offsite Dose Calculation Manual (REMDCM) and the Process Control Program.

<sup>1</sup> Relocation of Technical Specification Administrative Controls Related to Quality Assurance in Response to AL 95-06.