

## **POLICY ISSUE INFORMATION**

April 21, 2003

SECY-03-0062

FOR: The Commissioners

FROM: William D. Travers  
Executive Director for Operations

SUBJECT: REACTOR OVERSIGHT PROCESS SELF-ASSESSMENT FOR CALENDAR  
YEAR 2002

PURPOSE:

To present the results of the staff's annual self-assessment of the Reactor Oversight Process (ROP) for calendar year (CY) 2002.

SUMMARY:

The ROP self-assessment results indicate that the ROP has been successful in supporting the Nuclear Regulatory Commission's (NRC's) performance goals of maintaining safety, enhancing public confidence, making activities more effective, efficient, and realistic, and reducing unnecessary regulatory burden. The ROP was also effective in CY 2002 in meeting its program goals of being objective, risk-informed, understandable, and predictable. The staff continued to improve various aspects of the ROP as a result of feedback and lessons learned. Although the responses to the internal and external surveys were generally favorable, some stakeholders believe that the ROP was inadequate because it did not identify the vessel head degradation at Davis-Besse and that the significance determination process (SDP) has not been effective. In addition, the majority of the self-assessment metrics were met; however, nine metrics were not met, and the staff is aggressively pursuing improvements to address concerns in the noted areas.

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Although significant progress has been made in CY 2002, additional challenges remain. The staff intends to implement the recommendations of the Davis-Besse Lessons Learned Task Force (DBLLTF) and the SDP Task Group, as appropriate, and plans to continue to actively solicit inputs from the NRC's internal and external stakeholders in the interest of further improving the ROP. The staff will also continue to report to the Commission the results of its annual self-assessment as part of the Commission briefing following the Agency Action Review Meeting (AARM).

#### BACKGROUND:

On February 24, 2000, the staff issued SECY-00-0049, "Results of the Revised Reactor Oversight Process Pilot Program." The Staff Requirements Memorandum (SRM) for SECY-00-0049, issued on March 28, 2000, approved initial implementation of the ROP as recommended by the staff. The initial implementation of the ROP began on April 2, 2000. In a followup SRM issued on May 17, 2000, the Commission directed the staff to report on the implementation of the ROP results after the first year of implementation. Following completion of the first year of implementation, the staff assessed the efficacy of the process and documented the results in SECY-01-0114, "Results of the Initial Implementation of the New Reactor Oversight Process," issued on June 25, 2001. SECY-01-0114 also noted the staff's intention to continue to perform an annual self-assessment of the ROP. Accordingly, on April 3, 2002, the staff issued SECY-02-0062, "Calendar Year 2001 Reactor Oversight Process Self-Assessment," to present the results of the second annual ROP self-assessment. This paper provides the results of the third annual self-assessment of the ROP.

This self-assessment was performed in accordance with Inspection Manual Chapter (IMC) 0307, "Reactor Oversight Process Self-Assessment Program." The data for this self-assessment was obtained from many diverse sources to ensure that a comprehensive and robust assessment was performed. Data sources included the ROP self-assessment metrics described in IMC 0307, the ROP internal feedback process, concerns noted by the Advisory Committee on Reactor Safeguards (ACRS), comments from external stakeholders in response to a *Federal Register* notice (FRN), insights from internal stakeholders based on survey results, and feedback received from stakeholders at various meetings, workshops, and conferences. The staff also considered the direction and insight provided by the Commission through several SRMs.

#### DISCUSSION:

The staff conducted many activities during CY 2002 to assess the effectiveness and efficiency of the ROP. The staff actively solicited input from our internal and external stakeholders and assessed aspects of the ROP's effectiveness using the self-assessment metrics described in IMC 0307. The staff analyzed the input to gain insights regarding the effectiveness of the ROP in supporting the NRC's four performance goals as well as the regulatory principles of being predictable, understandable, objective, and risk-informed.

The staff continued to improve various aspects of the ROP in CY 2002 as a result of feedback from internal and external stakeholders and lessons learned. Based on the self-assessment metrics, stakeholder feedback, and other pertinent information, the ROP was generally effective

in monitoring operating nuclear power plant activities and focusing NRC resources on significant performance issues in CY 2002. Accordingly, plants appeared to be receiving the appropriate level of oversight commensurate with their performance. However, the staff will continue to make improvements to the ROP in CY 2003 based on lessons learned and stakeholder insights.

Although the staff considered the ROP to be effective this past year, the staff did not anticipate the aggressiveness of the corrosion process revealed by the Davis-Besse reactor vessel head condition and it therefore had not been emphasized in either the pre-ROP or the ROP inspection programs. As a result, a multi-disciplined task force was formed to review the NRC's regulatory process associated with the issues at Davis-Besse. The DBLLTF's report, issued on September 30, 2002, contained more than 50 recommendations, many associated with the ROP. These recommendations were then reviewed and prioritized by a team of senior NRC managers. Among the more significant ROP-related recommendations were:

- Enhance the barrier integrity performance indicators to more accurately monitor unidentified leakage
- Modify the inspection program to provide for better follow-up of longstanding issues
- Develop specific guidance to inspect boric acid control programs and vessel head penetration nozzles
- Enhance the guidance for managing plants that are outside the ROP Action Matrix and under the NRC's IMC 0350 process ("Oversight of Operating Reactor Facilities in an Extended Shutdown as a Result of Significant Performance Problems")

In response to these and other recommendations, four action plans were developed to address each of the high priority recommendations. These action plans were forwarded to the Commission by memorandum dated March 10, 2003. The status of the action items contained in the action plans will be communicated to the Commission semi-annually. Significant changes made to the ROP as a result of these reviews will also be highlighted in the next annual self-assessment.

Based on the self-assessment metric results, stakeholder feedback, and other lessons learned, the staff identified certain issues and actions in the key program areas of PIs, inspection, SDP, and assessment as discussed in the following paragraphs. In addition, the staff has included discussions and assessments of ROP communication activities, the ROP self-assessment program, industry performance trends, coordination of security and safeguards activities, ROP resource expenditures, and resident inspector demographics. The last section contains the overall conclusions of the ROP self-assessment. Several attachments are also included as noted in the pertinent sections of this paper to provide additional detail to support the staff's assessment and conclusions.

#### ROP Program Area Self-Assessments

Assessments were performed in each of the four key program areas of the ROP: PIs, inspection, SDP, and assessment. The staff used self-assessment metrics and other pertinent information to provide insights regarding the effectiveness of the ROP in supporting the NRC

performance goals of maintaining safety, enhancing public confidence, making regulatory activities more effective, efficient, and realistic, and reducing unnecessary regulatory burden. The self-assessment metrics also provide insights regarding the success of the ROP in fulfilling the regulatory principles of being predictable, understandable, objective, and risk-informed.

The staff continued to work closely with stakeholders to improve the PI Program in CY 2002. Most notably, the staff developed and began piloting replacements for the safety system unavailability indicators that are more risk-informed and plant-specific to improve the effectiveness of the indicators. The internal and external survey responses provided many insights into potential shortcomings and needed improvements to the PI program, including the perception that the indicators are lagging and have become ineffective at identifying significant performance problems. This negative perception resulted in one of the ROP PI self-assessment metrics not being met. In addition, the DBLLTF recommended the need to enhance the barrier integrity PIs to better detect unidentified leakage. The staff concluded that although the PI program continues to provide the NRC with an objective source of information regarding some important aspects of licensee performance, there are some concerns that appear to have resulted in a decrease in stakeholder confidence in the effectiveness of the PI Program. The staff will continue to work with both internal and external stakeholders to address these concerns.

The inspection program continued to make improvements during the third year of ROP implementation. For example, many issues identified in the past year relating to inspection report documentation requirements have been addressed with the revision to IMC 0612, "Power Reactor Inspection Reports." In addition, some revisions were made to the ROP inspection program in CY 2002, including adjustments to the resource estimates and level of effort to provide more inspection flexibility. The baseline inspection program was completed at all plants in CY 2002, though resource challenges were experienced and additional assistance from inspectors outside the regions was necessary in some cases. No major areas for change were identified from the annual review of the inspection procedures, the survey results, the metrics, or the feedback process, although the DBLLTF recommendations are expected to result in changes to the inspection program in CY 2003. The staff will continue to monitor the effectiveness of inspection program implementation and make revisions based on feedback from the regions and other stakeholders, including the Efficiency Focus Group as discussed in the ROP resources section of this paper. The staff will also address recommendations from the DBLLTF, including changes to the inspection program to provide for better follow-up for longstanding issues and the development of specific guidance to inspect boric acid control programs and vessel head penetration nozzles.

The staff also continued to make progress on improving the SDP. However, concerns were raised by internal and external stakeholders regarding the completeness and complexity of the Phase 2 SDP process for reactor safety findings. To address these concerns, the staff developed enhancements to the risk-informed SDP that were incorporated into the revision of IMC 0609, Appendix A, "Significance of Reactor Inspection Findings for At Power Situations." Four SDP self-assessment metrics did not meet the established goals, including SDP timeliness, the accuracy of reported information, the perceived consistency in significance of findings across cornerstones, and the staff's proficiency in using the SDP. Based on these and other concerns, the staff continued to implement the SDP Improvement Initiative and Task

Action Plan and make necessary modifications to improve the overall effectiveness and efficiency of the SDP.

In addition, the SDP Task Group (SDPTG) was formed to complete an independent and objective review of the SDP and to address recommendations from an Office of the Inspector General audit and a Differing Professional Opinion regarding the SDP. The SDPTG concluded that the SDP was successful in meeting the ROP objectives of providing a more objective, scrutable, and risk-informed process, though a number of recommendations were identified to improve the overall effectiveness of the process. Recommendations made by the task group that are not already addressed by the SDP Improvement Initiative are being evaluated and incorporated, as warranted. The staff also continued to develop additional SDPs and revise existing SDPs based on lessons learned.

Several program improvements were made to the assessment program during CY 2002 and are reflected in the latest revision of IMC 0305, "Operating Reactor Assessment Program." Major changes included adding criteria for exiting the multiple/repetitive degraded cornerstone column of the Action Matrix, clarifying guidance on the criteria and processing of old design issues, clarifying when inspection findings are counted in the assessment program, and incorporating lessons learned from the mid-cycle and end-of-cycle review meetings. All of the self-assessment metrics in the assessment area met their established criteria, and feedback from internal and external stakeholders was generally positive. However, some stakeholders indicated a level of concern with the ability of the NRC to detect declining performance in a timely manner, noting the staff's failure to detect the reactor vessel head degradation at Davis-Besse. This concern is further addressed in the staff's annual assessment of cross-cutting issues included as Attachment 6 to this paper. The staff will continue to evaluate the effectiveness of the assessment program based on feedback and lessons learned and make appropriate program adjustments.

Attachment 1 to this paper includes a more detailed discussion for each ROP program area regarding the actions taken in CY 2002 in response to previous commitments, the results of the self-assessment, and actions planned to address the issues that were identified. In addition, a consolidated listing and status of previous issues is provided in Attachment 2, and the annual ROP self-assessment metrics and analysis are included as Attachment 3.

#### ROP Communication Activities

The staff implemented the ROP Communication Plan in 2002 and has continued its focus on stakeholder involvement. The public outreach and stakeholder involvement in the decision-making process for the ROP during development and implementation were unprecedented. The staff continued to conduct public meetings and workshops with external stakeholders, to hold biweekly phone conferences and frequent meetings with internal stakeholders, and to work with the Advisory Committee on Reactor Safeguards (ACRS) on ROP-related issues. The staff also conducted both internal and external surveys this past year to solicit and analyze stakeholder feedback regarding the effectiveness of the ROP.

The ROP feedback process continued to provide a means for staff to identify concerns or issues and propose recommended improvements related to ROP policies, procedures, or guidance. Although feedback responsiveness and timeliness have improved, internal stakeholders have indicated that further enhancements to the ROP feedback process are

warranted. The staff also formed and executed the Efficiency Focus Group and the SDPTG consisting of an array of internal stakeholders to address specific issues as discussed in other sections of this paper.

The responses from both the internal and external surveys were diverse and provided many useful insights. Although several of the survey responses were positive, the staff is concerned that a number of the responses were critical, particularly with respect to the Davis-Besse reactor vessel head degradation and the complexity of the SDP. The staff is currently evaluating the need and feasibility for a public workshop in CY 2003 to address several of the common concerns noted by both the internal and external stakeholders. Attachment 5 to this paper provides the results of our internal ROP survey. The detailed comments from the external survey are consolidated into a summary document (ADAMS accession number ML030620007) and a discussion of this survey is included in Attachment 4 to this paper. Staff analysis of the specific responses is also included in the applicable portions of the program area discussions in this paper as well as in the ROP performance metric report in Attachment 3.

The staff met with the ACRS on three separate occasions over the past year to address specific ACRS concerns regarding the ROP. The discussions focused on a Commission SRM that directed the staff to work with the ACRS to resolve apparent conflicts and discrepancies between aspects of the ROP that are risk-informed and those that are performance-based. The staff also provided the staff's position to the ACRS on these issues in a December 19, 2002 letter. Most recently, the staff met with the ACRS on March 6, 2003. As a result of this briefing, the ACRS forwarded a letter to the Commission on March 13, 2003, concluding that there are still disagreements between the staff and the ACRS. The specific issues presented in the March 13 letter will serve as the basis for further discussion and potential revisions to the ROP. A more detailed discussion of the staff's interface with the ACRS is included in Attachment 4 to this paper.

The staff continued to make improvements to the ROP Web pages to ensure that they were useful tools for communicating accurate and timely ROP information to all stakeholders. The staff also began developing an electronic support system for inspectors in an effort to increase inspector efficiency. In summary, the staff continues to seek and implement improvements to the ROP based on feedback and insights from all stakeholders. For more detailed discussions and analysis of several ROP communication activities, refer to Attachment 4 to this paper.

#### ROP Self-Assessment Program Evaluation

The objectives and details of the ROP Self-Assessment Program are contained in IMC 0307. IMC 0307 was significantly revised on December 12, 2002, to improve the efficiency and effectiveness of the ROP Self-Assessment Program. Program improvements included (1) more clearly defining the annual review of the baseline inspection program, (2) delineating the roles and responsibilities of the inspectable area leads and program area leads, (3) integrating an annual review of the metrics and the associated data collection methods into the process, (4) developing customized audits to delve more deeply into those aspects of the ROP that demonstrate potential weakness or areas for further development, and (5) clarifying the purposes and content of the annual ROP self-assessment report and associated Commission paper. The specific ROP self-assessment metrics were also revised to minimize unnecessary burden on the staff for metric data collection. The revised metrics were added as Appendix A to the manual chapter. In addition, the new inspector profile metrics were added to Section VI

of Appendix A to provide the basis for future annual demographic reports to the Commission.

The 2002 annual report of self-assessment metrics is included as Attachment 3 to this paper. The majority of metrics met their established criteria, but some metrics in the PI and SDP program areas did not meet their criteria as previously noted. In addition, four of the nineteen overall program metrics were determined not to meet the established criteria. The metric established to measure whether there are any programmatic voids in the ROP was not met due to the programmatic deficiencies noted by the DBLLTF. Three additional metrics were not met due to negative perceptions by some of the public regarding the ROP's ability to maintain safety, whether the ROP is effective, efficient, and realistic, and whether the ROP results in unintended consequences. As noted earlier, in order to continue the public outreach effort and fully understand stakeholder concerns, the staff is evaluating the feasibility of conducting a public workshop in CY 2003.

#### Industry Performance Trends

The staff implemented the Industry Trends Program (ITP) in CY 2002, and is continuing to develop the program as a means to confirm that the nuclear industry is maintaining the safety of operating power plants and to increase public confidence in the efficacy of the NRC's processes. The NRC uses industry-level indicators to identify adverse trends, evaluate their significance, and take appropriate actions. One important output of this program is to report to Congress each year on the measure of "no statistically significant adverse industry trends in safety performance" as part of the NRC's Performance and Accountability Report. Based on the information currently available from the industry-level indicators originally developed by the former Office for Analysis and Evaluation of Operational Data (AEOD) and the Accident Sequence Precursor (ASP) Program implemented by the Office of Nuclear Regulatory Research, no statistically significant adverse trends have been identified through fiscal year (FY) 2002. While industry-level indicators (i.e. trends summed across all plants) continued to improve, significant performance problems have been identified at some plants such as Davis-Besse.

The staff is continuing to use the AEOD and ASP indicators while it develops additional indicators that are more risk-informed and better aligned with the cornerstones of safety in the ROP. These additional indicators are being developed and qualified in phases for use in the ITP and the annual report to Congress. In addition, the staff is developing risk-informed thresholds for the appropriate indicators, which will be used to establish a predictable agency response based on safety significance. The results of this program, along with any actions taken or planned, are reviewed annually during the AARM and reported to the Commission in a separate annual paper.

#### Coordination of Security and Safeguards Activities

On April 7, 2002, the NRC established the Office of Nuclear Security and Incident Response (NSIR) to consolidate and streamline selected NRC security, safeguards, and incident response responsibilities and resources. NSIR was formed, in part, as a result of the Commission's ongoing review of its safeguard physical security program in the aftermath of the terrorist attacks of September 11, 2001. The office's responsibilities include the safeguards and security policy and oversight for nuclear reactors and the development and oversight of safeguards and security inspection programs carried out by headquarters and regional offices.

Prior to the establishment of NSIR, these and other security responsibilities were performed by the Office of Nuclear Reactor Regulation (NRR) for its assigned facilities.

Although the security-related procedures and processes established under the ROP were written prior to the establishment of NSIR, they were implemented as appropriate throughout CY 2002 and into CY 2003. The original inspection effort and focus, PIs, SDP, and licensee performance assessment principles were maintained to minimize the potential impact on the regions and licensees caused by the security reorganization. Accordingly, the security-related aspects of the ROP underwent the same programmatic and administrative controls as the other cornerstones along with ongoing regulatory efforts in response to the changing threat environment. A resulting benefit was that both offices, NRR and NSIR, provided oversight of the physical protection cornerstone during the CY 2002 transition period. Therefore, both offices assisted in the verification that security- and safeguards-related inspection activities were consistent with ROP objectives and requirements as well as other program obligations.

Regarding the baseline security inspection, the staff determined that the ROP security inspection objectives and requirements were satisfactorily completed in CY 2002, as supplemented by temporary instruction (TI) 2515/148. A similar approach is currently planned for the CY 2003 security baseline inspection at all commercial power reactor sites. Additionally, the force-on-force exercises planned for CY 2003 will provide additional opportunities to gain insights into licensee protection, response, and mitigative strategies; these lessons learned will be used to refine the security baseline inspection as necessary.

For CY 2003 and beyond, NSIR will continue to administer the security inspection program, and NRR will continue to maintain the overall lead for the ROP. Both staffs have identified challenges and are working together to enhance the physical protection cornerstone to ensure the security and safeguards of reactor facilities. These staff activities will include program changes that may be impacted by possible changes to the design basis threat, insights learned from force-on-force exercises, and consideration of future rulemaking. Additionally, the staff will continue its efforts to improve the security-related processes, including the inspection procedures, PIs, and the SDP associated with the physical protection cornerstone.

#### ROP Resources

The total staff effort expended for the ROP in FY 2002 continued the downward trend seen during the first two years of implementation. A comparison of FY 2002 with FY 2001 shows a reduction of nearly 10 percent in the staff hours expended for the ROP. The reduction is evident in all elements of the ROP except for plant-specific/supplemental inspections and safety issues inspections. Most of the reductions occurred in baseline inspection activities. Although some of these reductions may reflect efficiency gains, a number of events during the CY 2002 inspection cycle diverted inspection resources and challenged the staff to complete the required baseline inspections. As discussed in more detail in Attachment 7, these challenges required regional staff to implement short-term coping strategies (e.g., minimum procedure samples and effort, reduced inspection preparation time, deferment of some biennial and triennial inspections, etc.) that resulted in a reduced baseline inspection effort down to the minimum acceptable levels. The potential long-term impact on plant safety of continuing some of these coping strategies could erode the staff's ability to obtain adequate indication of licensee performance and to identify risk-significant issues.

The increase in plant-specific/supplemental inspections is attributed primarily to a greater than anticipated inspection effort resulting from inspection findings and performance issues (e.g., at Indian Point 2 and Cooper Nuclear Station) and the effort required at Davis-Besse for the restart inspections in accordance with IMC 0350. The increase in safety issues inspections reflects the increased activity in this area in FY 2002 compared with FY 2001.

In an SRM dated February 12, 2003, the Commission requested that the staff inform the Commission when emergent or other issues significantly impede the staff's ability to carry out the NRC's mission, or when a region requires significant resources from another region or office. As noted above and discussed in more detail in Attachment 7, the staff was challenged in CY 2002 and it appears the staff will be challenged again in CY 2003 to complete the baseline inspection program due to a number of unanticipated and consequently unbudgeted issues. The staff is currently conducting a more detailed analysis of these resource challenges and is considering various options to provide appropriate short-term and long-term solutions and resources to the regions. In accordance with the SRM dated February 12, 2003, the staff will inform the Commission in the near future of our resolution of this issue.

A detailed discussion of ROP resource issues is provided in Attachment 7 to this paper. These issues include (1) proposed changes to the ROP resource model resulting from experience gained during the CY 2002 inspection cycle; (2) efforts by the ROP Efficiency Focus Group to identify ways in which to achieve efficiency gains in the ROP; (3) challenges confronted by the regions during the CY 2002 inspection cycle and the short-term coping strategies used to complete the CY 2002 baseline inspections; (4) the resulting impacts on the CY 2003 inspection cycle and options for possible long-term improvements to avoid future difficulties; (5) the impact of NSIR on resident and regional inspector resources; and (6) the impact on the ROP due to the "N+1 to N" change in the resident inspector staffing policy.

A number of program improvement activities are described in this paper. The resource requirements to develop and implement these program improvements are only a part of the overall ROP development and management effort. In FY 2003 through FY 2006, the staff expects to expend approximately 20 - 22 full-time equivalents (FTE) per year in NRR and approximately 6 FTE in the regional offices for all reactor performance assessment and reactor oversight process management activities. The resource requirements to develop and implement the program improvement activities as described in this paper have been included in the budget request for those years.

#### Resident Inspector Demographics

As the Commission requested in its SRM dated April 8, 1998, the staff developed metrics to monitor and trend resident inspector demographics. The staff last reported its analysis of resident inspector demographics in SECY-02-0062, "Calendar Year 2001 Reactor Oversight Process Self-Assessment." The 2002 demographics for the resident inspector program show a stable or improving trend in nearly all resident inspector (RI) and senior resident inspector (SRI) statistics. Program metrics such as "qualified resident time," "NRC time," and "relevant non-NRC experience" for 2002 are near or above their 1997 values.

Although a comparison of this year's data with previous years indicates an improving trend in the metrics, some challenges to the RI program were identified by the regions. One challenge was how to minimize the length in the resident inspector site coverage gap caused by RI

transfers. The impact on the inspection program caused by the gap in coverage cannot be reflected by the RI demographics data since the data only captures the experience of personnel in the program. The staff is reviewing various personnel staffing policy options to minimize the effect that unanticipated large inspector staff losses have on maintaining continuity of experience and expertise at each site. A detailed analysis of the 2002 resident inspector data is presented in Attachment 8.

### OVERALL SELF-ASSESSMENT CONCLUSIONS

This self-assessment shows the ROP has been successful in supporting the NRC's performance goals of maintaining safety, enhancing public confidence, making activities more effective, efficient, and realistic, and reducing unnecessary regulatory burden. The ROP was also effective in CY 2002 in meeting its program goals of being objective, risk-informed, understandable, and predictable. In addition, there were no statistically significant adverse trends identified in any industry-level performance indicators; however, the Davis-Besse reactor head erosion event is appropriately causing a focused look at NRC oversight efforts.

During this self-assessment period, the staff continued to improve various aspects of the ROP as a result of feedback and lessons learned. Although the responses to the internal and external surveys were generally favorable, some stakeholders believe that the ROP was inadequate because it did not identify the vessel head degradation at Davis-Besse and that the SDP has not been effective. In addition, the majority of the self-assessment metrics were met; however, four SDP metrics, one PI metric, and four overall metrics were not met. Accordingly, the staff is aggressively pursuing improvements to address concerns in each of these areas.

Although significant progress has been made in CY 2002, additional challenges remain. The staff expects to make continued improvements to the ROP via the ongoing self-assessment process, and the staff intends to implement the recommendations of the DBLLTF and the SDP Task Group, as appropriate. The staff also plans to continue to actively solicit input from the NRC's internal and external stakeholders in the interest of further improving the ROP, and is evaluating the need and feasibility for a public workshop in CY 2003. The staff will also continue to report to the Commission the results of its annual self-assessment as part of the Commission briefing following the AARM.

COORDINATION:

The Office of the General Counsel has reviewed this Commission paper and has no legal objections to its content.

The Office of the Chief Financial Officer has reviewed this Commission paper for resource implications and has no objections.

*/RA/*

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- Attachments:
1. ROP Program Area Assessments
  2. Status of Previous Issues
  3. Annual Report of Self-Assessment Metrics
  4. ROP Communication Activities
  5. Internal Stakeholder Survey Results
  6. Cross Cutting Issue Assessment
  7. ROP Resource Analysis
  8. Resident Inspector Demographics

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