Nuclear Operating Company
South Texas Project Electric Generating Station P.O. Box 289 Wadsworth, Texas 77483

July 7, 2003
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File No.: G09.19
10CFR50.54(a)
STI: 31618141

U. S. Nuclear Regulatory Commission
Attention: Document Control Desk
Washington, DC 20555-0001

South Texas Project
Units 1 and 2
Docket Nos. STN 50-498 and STN 50-499
Submittal of Operations Quality Assurance Plan Change QA-055

In accordance with 10CFR50.54, South Texas Project Nuclear Operating Company submits the attached change, QA-55, to revision 15 of the Operations Quality Assurance Plan. The change is an incorporation of the alternative method of performing Independent Reviews by the use of Organizational Units. This change discontinues the use of a Standing Committee to perform this function. The use of either of these methods for the performance of this function is allowed in American National Standard N18.7-1976/ANS-3.2, Section 4.3. The STP Nuclear Operating Company is committed to this standard in our Operations Quality Assurance Plan.

This change therefore does not represent a reduction in commitment and does not require approval prior to implementation in accordance with the provisions of 10CFR50.54(a)(3).

If there are any questions regarding this matter, please contact Mr. M. A. McBurnett at (361) 972-7206 or me at (361) 972-8434.

J. J. Sheppard
President and Chief
Executive Officer

mkj
Attachment: QA-055

Q 004

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ALL CHANGES ARE IN BOLD TYPE

CHAPTER	LOCATION	ACTION	TEXT
TOC	CH 1.0	INSERT	**QA-055**
TOC	CH 2.0	INSERT	**QA-055**
TOC	CH 15.0	INSERT	**QA-055**
TOC	CH 16.0	INSERT	**QA-055**
TOC	CH 19.0	INSERT	**QA-055**
CH 1.0	5.1.2	DELETE	**steam generator replacement**
	5.1.3 (1st Para.)	DELETE	**steam generator replacement project engineering & fabrication**
	5.1.3 (3rd Para.)	DELETE	**corrective action, licensing, and and also and administration of the Nuclear Safety Review Board (NSRB)**
	5.1.3 (3rd Para.)	INSERT	**including organizational unit independent reviews.**
	5.1.3.1	DELETE	**The NSRB Administrator is responsible for the administrative activities related to the NSRB functions. The NSRB functionally reports directly to and advises the President and Chief Executive Officer.**

ALL CHANGES ARE IN BOLD TYPE

CH 1.0	5.1.3.1	INSERT	**The senior management of the Quality & Licensing function is responsible for independent oversight activities, including audits, independent assessments, evaluations, surveillances, performance monitoring, inspections, independent oversight of NDE examinations, and administration of organizational unit independent review activities.**
	5.1.3.3	RENUMBER	**5.1.3.2**
	5.1.3.4	RENUMBER	**5.1.3.3**
	5.1.3.5	RENUMBER	**5.1.3.4**
	5.1.3.4 (new)	DELETE	**Risk Management**
	5.1.3.4 (new)	INSERT	**Probabilistic Risk Assessment**
CH 2.0	5.10.2	DELETE	**Nuclear Safety Review Board**
	5.10.2	INSERT	**Senior Management Team**
CH 15.0	5.2.3.1	DELETE	**Nuclear Safety Review Board**
	5.2.3.1	INSERT	**Senior Management Team**

ALL CHANGES ARE IN BOLD TYPE

CH 15.0	5.2.3.2	DELETE	**Nuclear Safety Review Board**
	5.2.3.2	INSERT	**Senior Management Team**
	5.4.1.2	DELETE	**The Nuclear Safety Review Board shall define the scope of the assessment and determine the schedule.**
	5.4.1.2	INSERT	**The Senior Management Team shall review the scope and schedule of the assessment.**
	5.4.1.3	INSERT	**and the Senior Management Team.**
CH 16.0	6.6	DELETE	**Nuclear Safety Review Board**
	6.6	INSERT	**Senior Management Team**
CH 19.0	5.1.6.13	DELETE	**Nuclear Safety Review Board (NSRB)**
	5.1.6.13	INSERT	**Senior Management Team (SMT).**
	5.1.6.14	DELETE	**NSRB**
	5.1.6.14	INSERT	**SMT**
	5.1.9	DELETE	**Nuclear Safety Review Board**
	5.1.9	INSERT	**SMT**

ALL CHANGES ARE IN BOLD TYPE

CH 19.0	5.1.10	DELETE	**Nuclear Safety Review Board**
	5.1.10	INSERT	**appropriate organizational unit**
	5.2	DELETE	**The Nuclear Safety Review Board (NSRB)**
	5.2	INSERT	**Appropriate organizational units shall function to provide independent review of designated activities as required by ANSI N18.7-1976/ANS-3.2, Sections 4.3, 4.3.1, 4.3.3, and 4.3.4.**
	5.2.1	DELETE	**The NSRB shall function to provide independent review and audit of designated activities in the areas of:**
	5.2.1	INSERT	**Staff personnel required to perform independent reviews shall collectively have the experience and competence to review operational activities in the following areas:**

ALL CHANGES ARE IN BOLD TYPE

CH 19.0	after 5.2.1.13	INSERT	**Note: If sufficient expertise is not available from within the STPNOC for the areas noted above, appropriate expertise shall be brought to bear in the independent reviews through the use of outside consultants.**
	5.2.2	DELETE	NSRB and **5.2.8 and 5.2.9**
	5.2.2	INSERT	SMT and **functionally** and **5.2.3 and 5.2.4**
	5.2.3 (OLD)	DELETE	**The NSRB shall be composed of at least five members appointed in writing by the President and Chief Executive Officer selected from senior managers reporting to at least the vice president level in the STPEGS Management Organization. Additional members shall be appointed in writing by the President and Chief Executive Officer so the NSRB collectively has the capability to review technical matters listed in section 5.2.1. The NSRB Chairman shall be appointed in writing from among these members by the President and Chief Executive Officer.**

ALL CHANGES ARE IN BOLD TYPE

CH 19.0	5.2.4 (OLD)	DELETE	**All alternate members shall be appointed in writing by the President and Chief Executive Officer to serve on a temporary basis; however, no more than two alternates shall participate as voting members in NSRB activities at any one time.**
	5.2.5 (OLD)	DELETE	**Consultants shall be utilized as determined by the NSRB Chairman to provide expert advice to the NSRB.**
	5.2.6 (OLD)	DELETE	**The NSRB shall meet at least once per calendar quarter during the initial year of unit operation following fuel loading and at least once per 6 months thereafter.**

ALL CHANGES ARE IN BOLD TYPE

CH 19.0	5.2.7 (OLD)	DELETE	**The quorum of the NSRB necessary for the performance of the NSRB review and audit functions of this chapter shall consist of the Chairman or his designated alternate and at least a majority of NSRB members including alternates. No more than a minority of the quorum shall have line responsibility for operation of the unit.**
	5.2.8 through 5.2.8.9 (OLD)	RENUMBER	**5.2.3** through **5.2.3.9**
	5.2.3 (NEW)	DELETE	**The NSRB**
		INSERT	**Appropriate organizational units**
	5.2.9 through 5.2.9.11	RENUMBER	**5.2.4 through 5.2.4.11**
	5.2.4 (NEW)	DELETE	**performed under the cognizance of the NSRB**
		INSERT	**Reports of and reviewed by the SMT**
	5.2.4.11 (NEW)	DELETE	**NSRB**
		INSERT	**SMT**
	5.2.10	RENUMBER	**5.2.5**

ALL CHANGES ARE IN BOLD TYPE

CH 19.0	5.2.5 (NEW)	DELETE	**NSRB**
		INSERT	**organizational unit independent review**
	5.2.10.1	RENUMBER	**5.2.5.1**
	5.2.5.1 (NEW)	DELETE	**Minutes of each NSRB meeting shall be prepared, approved, and forwarded to the President and Chief Executive Officer within 14 days following each meeting.**
	5.2.5.1 (NEW)	INSERT	**Reports of organizational unit independent reviews encompassed by sections 5.2.3 and 5.2.4 shall be prepared, approved, and forwarded to the President and Chief Executive Officer and the SMT.**
	5.2.10.2	DELETE	**Reports of reviews encompassed by section 5.2.8 shall be prepared, approved, and forwarded to the President and Chief Executive Officer within 14 days following completion of the review.**

Chapter Number	Title Chapter	Effective Revision	Effective Date	Change Notice No.
	Definitions	9	2-1-02	
1.0	Organization	11	2-1-02	QA-053, 055
2.0	Program Description	13	2-1-02	QA-055
3.0	Conduct of Plant Operations	7	2-1-98	
4.0	Qualification, Training, and Certification of Personnel	6	2-1-98	
5.0	Maintenance, Installation of Modifications, and Related Activities	5	2-1-98	
6.0	Design and Modification Control	8	2-1-02	
7.0	Procurement	9	2-1-02	
8.0	Control and Issuance of Documents	6	2-1-98	
9.0	Control of Material	6	2-1-98	
10.0	Inspection	9	2-1-02	
11.0	Test Control	7	2-1-00	
12.0	Instrument and Calibration Control	6	2-1-98	
13.0	Control Of Conditions Adverse to Quality	10	2-1-02	
14.0	Records Control	7	2-1-02	
15.0	Quality Oversight Activities	8	2-1-00	QA-055

Chapter Number	Title Chapter	Effective Revision	Effective Date	Change Notice No.
16.0	Independent Technical Review	7	2-01-00	QA-055
17.0	ASME Code Section XI - Repairs and Replacements	6	2-01-00	
18.0	ASME Code Section XI - Inservice Inspection and Testing	7	2-01-00	
19.0	Administrative Controls	0	5-15-03	QA-054, 055

1.0 PURPOSE

1.1 The purpose of this chapter is to describe the organizational structure as related to quality assurance and to establish the responsibilities of organizations for the South Texas Project Electric Generating Station (STP).

2.0 SCOPE

2.1 STP Nuclear Operating Company (STPNOC), as licensee, has the Quality responsibility for design, engineering, procurement, fabrication, modification, maintenance, repair, in-service inspection, refueling, testing, and operation of the STP.

3.0 DEFINITIONS

3.1 None

4.0 REFERENCES

4.1 None

5.0 RESPONSIBILITIES

5.1 The STPNOC is comprised of Generation, Financial Support, Engineering & Technical Services, Station Support, and Safety and Quality Concerns Program. The senior management of these groups report to the President and Chief Executive Officer. QA-053

5.1.1 The President and Chief Executive Officer has overall responsibility for the implementation of the Operations Quality Assurance Program and approving the Operations Quality Assurance Plan (OQAP) and revisions thereto.

5.1.2 The Vice President, Generation is responsible for implementing quality program requirements applicable to staffing STP with qualified personnel and acquiring and coordinating the assistance of internal and external organizations for the following functions including: plant general management, operating experience, production support, projects, and generation support. The senior management of these functions report to the Vice President, Generation. QA-053, 055

5.1.2.1 The Plant General Manager has prime responsibility for the safe operations of the units. The plant staff, under the direction of the Plant General Manager, develop detailed procedures and instructions for testing, operation, modification, and maintenance of the STP.

5.1.3 The Vice President, Engineering & Technical Services (E&TS) is responsible for implementing quality program requirements applicable to the following functions: engineering, quality & licensing, probabilistic risk assessment, and training functions. The senior management of these functions report to the Vice President, E&TS. QA-053, 055

The Vice President, E&TS is responsible for the development, maintenance, and independent verification of implementation of the STP Quality Program; making periodic reports on its effectiveness; review of selected documents which control activities within its scope; and preparation, control, and approval of the OQAP and revisions thereto.

The Vice President, E&TS is responsible for implementing quality program requirements applicable to independent oversight activities, including organizational unit independent reviews. QA-055

The Vice President, E&TS has the authority to identify, initiate, recommend, or provide solutions to quality-related problems and verify the implementation and effectiveness of the solutions. This position has the independence to conduct Quality activities without undue pressure of cost or schedule.

5.1.3.1 The senior management of the Quality & Licensing function is responsible for independent oversight activities, including audits, independent assessments, evaluations, surveillances, performance monitoring, inspections, independent oversight of NDE examinations, and administration of organizational unit independent review activities. QA-055

5.1.3.2 The senior management of the Quality & Licensing function, at his discretion, reports directly to the President and Chief Executive Officer. During performance of independent oversight of activities relating to Licensing, the management of the Programmatic Oversight function, at his discretion, may report to the President and Chief Executive Officer.

5.1.3.3 The senior management of the Quality & Licensing function has the authority to stop work for cause. This authority has been granted by the President and Chief Executive Officer. The Quality organization, including the inspection staff, is based upon the anticipated Quality involvement in operations, modification, and maintenance activities. QA-055

5.1.3.4 The senior management of the Probabilistic Risk Assessment function is responsible for activities related to the Comprehensive Risk Management Program, including oversight of Probabilistic Safety Assessment activities. The Comprehensive Risk Management Expert Panel guides the implementation of the Comprehensive Risk Management Program and is composed of a Chairman and additional senior level management designated by the President and Chief Executive Officer.

5.1.4 The General Manager, Station Support is responsible for implementing quality program requirements applicable to the following functions: human resources, information technology, plant protection, records management services and administration for STP. The senior management of these functions report to the General Manager, Station Support. QA-053

5.1.5 The General Manager, Financial Support is responsible for implementing quality program requirements applicable to the following functions: supply chain management, nuclear accounting, and financial service activities. The senior management of these functions report to the General Manager, Financial Support. QA-053

5.1.6 The Manager, Safety Quality Concerns Program is responsible for implementing quality program requirements applicable to this function.

6.0 REQUIREMENTS

6.1 The fundamental responsibility for implementing quality program requirements is assigned to all personnel performing activities affecting the safe and reliable operation of the STP. These personnel and their management are responsible for implementing through approved procedures and other work documents, the quality assurance program controls described in the OQAP. Line organizational details and responsibilities are further described in STP UFSAR Chapter 13.1.

7.0 DOCUMENTATION

7.1 None

8.0 ATTACHMENTS

8.1 None

1.0 PURPOSE

1.1 The purpose of this chapter is to define criteria and establish administrative controls for implementation of the Quality Assurance (QA) Program for the South Texas Project Electric Generating Station (STP).

2.0 SCOPE

2.1 The QA Program is implemented and controlled in accordance with the Operations Quality Assurance Plan (OQAP) and is applicable to structures, systems, and components to an extent consistent with their importance to safety, and complies with the requirements of 10CFR50, Appendix B and other program commitments as appropriate.

2.2 The QA Program will also extend, as applicable and/or determined by STP management, to programs including 10CFR71, Subpart H (except design and fabrication of NRC certified radioactive waste shipping casks), ASME Boiler and Pressure Vessel Code, Sections III and XI; and to quality-related areas as defined herein including the Fire Protection Program, Emergency Plan, Radiological Environmental Monitoring Program, Radwaste Management Program, Computer Program Verification and Control, Seismic and Environmental Equipment Qualification Programs, Radiation Protection Program, and Station Blackout (SBO) systems and equipment.

3.0 DEFINITIONS

3.1 Comprehensive Risk Management - A process by which the change in risk to station personnel, the public's health and safety are evaluated as a result of changes in commitments, processes, activities, and human and equipment performance.

3.2 Graded Quality Assurance - The process by which risk-based methodology [i.e., Probabilistic Safety Assessment (PSA)] and deterministic and performance-based information analyses are combined to establish appropriate levels of programmatic controls for SSCs and appropriate levels of first line and independent oversight needed to provide the necessary assurance that SSCs will operate safely.

3.3 Full program controls - The highest levels of controls and oversight applied to safety-related SSCs categorized as High Safety Significant (HSS), as prescribed in Table I to this chapter and throughout individual OQAP chapters.

3.4 Basic program controls - Levels of control and oversight, lower than in the Full Program, applied to safety-related SSCs categorized as Medium Safety Significant (MSS), as prescribed in Table I to this chapter and throughout individual OQAP chapters.

3.5 Targeted program controls - Selected program controls applied to certain non-safety-related SSCs categorized as either HSS or MSS.

3.6 Limited program controls – Limited controls applied to safety-related SSCs categorized as either Low Safety Significant (LSS) or Non-Risk Significant (NRS).

4.0 REFERENCES

4.1 10CFR50, Appendix B

4.2 10CFR71, Subpart H

4.3 ASME B&PV Code

4.4 OQAP Chapter 14.0, Records Control

4.5 10CFR50.63, Loss of All Alternating Current Power

4.6 10CFR50.54(a)

4.7 Updated Final Safety Analysis Report

4.8 Safety Evaluation on Exemption Requests from Special Treatment Requirements of 10 CFR Parts 21, 50, and 100 (TAC NOS. MA6057 AND MA6058)

5.0 REQUIREMENTS

5.1 General Program Requirements

5.1.1 The OQAP shall be prepared and maintained to prescribe the STP QA Program. The OQAP reflects the quality program policies to be implemented. The OQAP describes the organization and responsibilities for attainment of quality objectives and verification of conformance to established requirements. The QA Program shall be in effect throughout the operating life of the STP.

5.1.2 The President and Chief Executive Officer has overall responsibility for quality assurance. The Vice President, Engineering & Technical Services (E&TS), is responsible for the development and maintenance of the OQAP.

5.1.3 The operations phase of the STP includes design, procurement, fabrication, repair, testing, operation, maintenance, refueling, inspection, independent oversight, modification, and other activities as discussed Table I to this chapter and throughout the OQAP. STP and its vendors are required, as appropriate, to comply with the criteria established by 10CFR50, Section 50.55a; 10CFR50, Appendix A, General Design Criterion (GDC) 1; 10CFR50, Appendix B, and 10CFR71, Sub-Part H (except design and fabrication of NRC certified radioactive waste shipping casks). These regulations are not applicable to LSS and NRS safety-related components, to the extent that the Nuclear Regulatory Commission has granted STP an exemption from the regulations as described in Reference 4.8.

STP will implement, as specified, the Regulatory Guides (RG) and implementing American National Standards Institute (ANSI) standards contained in Table I of this chapter.

5.1.4 STP shall maintain the OQAP as an effective and meaningful document to provide programmatic direction for the station. Changes to the OQAP shall be accomplished as prescribed by 10CFR50.54(a). When changes are made in the OQAP to the organizational elements only, appropriate notification will be made to the NRC within 30 days of implementation.

5.2 Organizational Independence

5.2.1 The reporting arrangement utilized by the Quality organization ensures that those personnel performing independent oversight have the organizational freedom to:

5.2.1.1 Identify quality problems.

5.2.1.2 Initiate, recommend, or provide solutions.

5.2.1.3 Verify implementation of solutions.

5.2.2 Personnel verifying compliance with quality requirements do not have direct responsibility for the performance of or directly supervise the activity being verified.

5.3 Graded Quality Assurance

5.3.1 Graded Quality Assurance (GQA) is fundamental to the STP QA Program. It is described in more detail in the implementing procedure for the STP Comprehensive Risk Management (CRM) Program.

5.3.2 GQA is a process by which risk-based methodology [i.e., Probabilistic Safety Assessment (PSA)], deterministic insights, and performance-based information are combined and analyzed to determine what levels of programmatic controls are needed for structures, systems, and components (SSCs) and what levels of first line and independent oversight are needed to provide assurance that items will operate safely and activities are accomplished as prescribed.

5.3.3 Selected systems are evaluated, at the component level, by a cross-discipline Expert Panel comprised of high level station management. Initial evaluations are performed by the Working Group.

5.3.4 These recommendations are developed in consideration of the risk significance of system functions, components' contribution to core damage frequency and large early release frequency, components' critical attributes (needed to support risk significant system functions), performance, regulatory/QA requirements, and other deterministic considerations as prescribed in the Comprehensive Risk Management procedures.

5.3.5 Program control recommendations are developed by the Working Group and ultimately approved by the Expert Panel and forwarded to the site for implementation. Controls are implemented in four graded applications (i.e., "Full", "Basic", "Targeted", and "Limited").

5.3.6 "Full" program controls are applied to safety-related SSCs categorized as HSS. These "Full" levels of controls and oversight are designed to provide a high degree of confidence that SSCs perform safely and activities are performed as expected. Table I to the OQAP chapter prescribes the program commitments applicable to "Full" program activities.

5.3.7 "Basic" program controls are applied to safety- related SSCs categorized as MSS. These are lower levels of control and oversight, designed to maintain/preserve those identified critical attributes of SSCs needed to support risk significant system functions. These controls are intended to reflect economical and efficient business practices. Table I to the OQAP chapter prescribes the program commitments applicable to "Basic" program activities.

5.3.8 "Limited" program controls are applied to safety-related SSCs categorized as either LSS or NRS. Only specific program controls related to the activities listed in the following subparagraphs are applicable to these SSCs. The other chapters of the OQAP are not applicable to safety-related LSS and NRS SSCs. Instead, the treatment processes applicable to these SSCs are described in the Updated Final Safety Analysis Report Section 13.7.3.3 and implementing procedures:

5.3.8.1 Those elements in Chapter 1.0 that are needed to implement and control activities described above;

5.3.8.2 Applicable requirements in this Chapter;

5.3.8.3 Modification/design activities as described in Chapter 6.0; and

5.3.8.4 Corrective action as described in Chapter 13.0.

5.3.9 "Targeted" program controls are applied to non-safety related SSCs, for which 10CFR50, Appendix B is not applicable, categorized as HSS or MSS . Specific program controls consistent with applicable portions of the "full" and "basic" program controls are applied to those items in a selected manner, "targeted" at those characteristics or critical attributes that render the SSC risk significant.

5.3.10 Safety-related components that are highly reliable, yet whose failure would result in a significant increase in risk, will receive Full program coverage, or will be evaluated based on their risk significance to ensure that Full program controls are applied to their critical attributes.

5.3.11 SSCs governed by the OQAP shall retain their current program coverage until such time as prescribed risk-informed, performance-based analyses are completed and approved, and they are placed into the graded program categories (i.e., "Full", "Basic", "Targeted", or "Limited") as appropriate.

5.3.12 A vital element of the GQA program is the "feedback" loop. On a periodic basis, and as prescribed in the Comprehensive Risk Management procedure, the GQA Working Group and Expert Panel shall review any changes to the PSA information and performance/operating experience that could result in recategorization of an SSC. These reviews are also used to assess the effectiveness and appropriateness of in-place quality program controls. Adjustments shall be made as determined necessary.

5.4 Delegation of QA Functions

5.4.1 The OQAP may be executed in whole or part by subcontract personnel. However, STP will retain responsibility for the total quality assurance program, and Quality organization personnel will perform appropriate oversight activities of subcontracted activities.

5.5 Identification of Safety Significant Structures, Systems, and Components

5.5.1 The program described herein is applied to activities affecting the safety functions of those structures, systems, and components which prevent, or mitigate the consequences of postulated accidents that could cause undue risk to the health and safety of the public. The structures, systems, and components controlled are listed in UFSAR Section 3.2, along with their associated fire protection systems. UFSAR Section 3.2 also identifies those structures, systems, and components which may not represent a safety significant/risk important concern but to which the STP OQAP is applied.

5.5.2 The fire protection QA Program is part of the overall STP Operations QA Program. Fire protection QA Program criteria are implemented as part of the Operations QA Program.

5.5.3 Expendable or consumable items necessary for the functional performance of structures, systems, and components are subjected to quality assurance requirements as specified in written procedures. These procedures include provisions for review and control in accordance with industry standards and specifications.

5.6 QA Program Documents

5.6.1 The QA Program shall be implemented with documented instructions, procedures, and drawings which include appropriate quantitative and qualitative acceptance criteria for determining that prescribed activities have been satisfactorily accomplished. Procedures shall include the control of the sequence of required inspections, tests, and other operations when important to quality. To change these controls, the individual procedure must be changed and shall require the same level of review and approval given to the original procedure. Such instructions, procedures, and drawings are reviewed and approved for compliance with requirements appropriate to their safety significance by individuals qualified to do so.

5.7 Personnel Indoctrination and Training

5.7.1 General indoctrination and training programs shall be provided for site personnel to assure that they are knowledgeable regarding quality programs and requirements. The training requirements for STP personnel are described in UFSAR Section 13.2. Personnel performing complex, unusual, or potentially hazardous work shall be instructed in special indoctrination or briefing sessions. Emphasis shall be on special requirements for safety of personnel, radiation control and protection, unique features of equipment and systems, operating constraints, and control requirements in effect during performance of work. Where required by codes and standards, personnel are trained, qualified, and certified according to written procedures in the principles and techniques of performing specific activities.

5.8 Policies and Goals

5.8.1 STP policy is to assure that the design, procurement, construction, testing, and operation of the STP are in conformance with specifications, procedures, codes, commitments and Nuclear Regulatory Commission (NRC) regulations to the extent not exempted. The responsibility of each organization supporting the STP is to ensure that the requirements stated in this QA Program are incorporated into procedures. Adherence to those procedures is mandatory for all STP organizations and contractors or vendors providing items or services covered by the QA Program.

5.8.2 The OQAP identifies activities and establishes requirements for procedures which identify, report, and verify the resolution of quality problems. The implementing procedures call for the resolution of quality problems at the lowest possible authorized level. However, if a dispute is encountered in the resolution of a quality problem which cannot be resolved at lower levels, the Vice President, Engineering & Technical Services or senior management of the Quality & Licensing function shall present the problem to the President and Chief Executive Officer for resolution.

5.9 Control of Activities

5.9.1 The OQAP requires Quality department review and/or approval of procedures which control selected activities. These procedures shall require the use of the proper equipment, completion of prerequisites for starting an activity, and suitable environment for performing the activity. Procedures will comply with the appropriate standards.

5.9.2 STP personnel attend planning, scheduling, and status meetings as necessary to assure adequate quality coverage and program application exists.

5.10 Management Review

5.10.1 The implementation of both line and OQAP requirements shall be verified through independent oversight activities. The Quality organization shall conduct independent oversight activities of the operating plant and of the interfacing organizations' activities.

5.10.2 Independent oversight of the implementation of the OQAP is conducted under the cognizance of the Senior Management Team and results are transmitted to appropriate line and senior management, including the President and Chief Executive Officer for review and/or action.

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5.10.3 STP may use the services of architect-engineer firms, Nuclear Steam Supply System (NSSS) suppliers, fuel fabricators, constructors, and others which provide or augment STP efforts during operations. As applicable, the QA programs of such contractors or consultants shall be subject to review, evaluation, and acceptance by the Quality organization before initiation of activities affected by the program.

5.11 Computer Code Programs

5.11.1 The development, maintenance, and use of computer code programs will be controlled. Prior to use of a computer code program, the appropriateness of the program shall be verified. In addition, all such programs shall be appropriately certified for use.

6.0 DOCUMENTATION

6.1 Procedures which are generated as required by this chapter shall identify the records which are required to implement and document those activities. The records shall be controlled in accordance with Reference 4.4.

7.0 ATTACHMENTS

7.1 Table I - Program Commitments

TABLE I

PROGRAM COMMITMENTS

R.G./ANSI STANDARD	FULL PROGRAM	BASIC PROGRAM
R.G. 1.8, rev. 1 (9/75)	No exceptions taken.	No exceptions taken.
ANSI N18.1, 1971	4.2.2-The Operations Manager requirements regarding holding a Senior Reactor Operator license are met by the Unit Operations Managers.	Same as full.
R.G. 1.28, rev. 0 (6/72)	This R.G. is not applicable to operations phase activities.	Same as full.
ANSI 45.2, 1971	This standard is not applicable to operations phase activities.	Same as full.
R.G. 1.33, rev. 2 (2/78)	C.2 - the specific revisions of the listed standards to which STP is committed are in this table and are not necessarily the "latest" revision.	Same as full.
	C.4 – Chapter 15.0 of the STP OQAP describes the audit program at STP that meets the intent of R.G. 1.33, rev. 2, position C.4 regarding frequency of audits	Same as full.
	C.4.a.b.c – STP performs these audits in accordance with a nominal biennial frequency.	Same as full.
ANSI NI8.7 – 1976/ANS 3.2	3.4.2 – refer to R.G. 1.8 regarding Operations Manager holding a Senior Reactor Operator license.	Same as full.
		3.4.2 refer to R.G. refer to R.G. 1.5.8 regarding use of personnel not qualified in accordance with ANSI N45.2.6.
	4.5 – refer to R.G. 1.33 coverage regarding audit frequency.	Same as full.
	5.2.6 (5th paragraph) – independent verification may be concurrent with (same time as) work performance.	Same as full.

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PROGRAM COMMITMENTS

R.G./ANSI STANDARD	FULL PROGRAM	BASIC PROGRAM
ANSI N18.7/ANS 3.2 (cont'd)	5.2.7 (1st paragraph) – STP will use current approved design bases as opposed to original design bases.	Same as full. 5.2.7 – STP will perform inspection as deemed necessary, based on the relative complexity of the work.
	5.2.7.1 (5th paragraph) – STP takes exception to use of the word "promptly" with regard to determining, evaluating and recording the causes of malfunctions. The STP Corrective Action Program includes the elements with regard to timeliness of action associated with causal analyses.	Same as full. 5.2.7.2 – refer to table coverage of ANSI N45.2.11, 1974. 5.2.13 (1st paragraph) – refer to table coverage of ANSI N45.2.13, 1976. 5.2.13.1 (1st paragraph) – refer to table coverage of ANSI N45.2, 1971. 5.2.13.4 (5th paragraph) – refer to table coverage of ANSI N45.2.2, 1972.
	5.2.15 (4th paragraph) – Chapter 8.0 of the OQAP describes the requirements for control and issuance of documents, which meets the intent of R.G. 1.33, rev. 2. The intent of the biennial review is accomplished by other controls that assure that procedures are appropriately reviewed and revised to incorporate information based on plant operations, design changes, regulatory requirements, industry experience and other conditions that may impact plant procedures.	Same as full.

TABLE I

PROGRAM COMMITMENTS

R.G./ANSI STANDARD	FULL PROGRAM	BASIC PROGRAM
		5.2.17 (3rd paragraph) – STP may not implement the requirement for conduct of inspections in a manner similar to that associated with construction phase activities (i.e., regarding use of personnel not qualified to ANSI N45.2.6)
R.G. 1.38, rev. 2 (5/77)	No exceptions taken.	No exceptions taken.
ANSI N45.2.2, 1972	2.4 – Audit personnel are qualified in accordance with STP's commitment to R.G. 1.146/ANSI 45.2.23.	Same as full.
		2.4 – Offsite oversight of vendors of items in the Basic category will only be performed as deemed necessary.
	5.2.1 - These activities do not constitute an "inspection" as defined in ANSI/ASME NQA-1, 1983, Supplement S-1, Terms and Definitions. Therefore, the requirements for qualification to ANSI N45.2.6 as stated in Section 2.4 do not apply to personnel performing these activities.	Same as Full
R.G. 1.58, rev. 1 (9/80)	C.2 – STP is committed to ASNT-TC-1A, 1980. STP treats the recommendation ("should") of the 1980 edition as requirements ("shall").	Same as full.
ANSI N45.2.6, 1978		1.2 (1st paragraph) – with the exception of receipt inspection, personnel may perform inspections, examinations and tests provided they are experienced, task qualified journeymen, or supervisors, who did not perform or directly supervised the activity being inspected, examined or

TABLE I

PROGRAM COMMITMENTS

R.G./ANSI STANDARD	FULL PROGRAM	BASIC PROGRAM
ANSI N45.2.6, 1978		tested. These individuals shall also receive training to the applicable inspection procedure,processes, methods in accordance with a Quality approved training program; and Quality will provide periodic oversight of the inspection activities.
	1.2 (3rd paragraph) – refer to table coverage of R.G. 1.28.	Same as full.
	1.4.4 – refer to table coverage of R.G. 1.74/ANSI N45.2.10.	Same as full.
	Personnel performing the activities stated in ANSI N45.2.2, Section 5.2.1 do not require qualification to this Standard. (see exception to ANSI N45.2.2)	Same as Full
R.G. 1.64, rev. 2 (6/76)	No exceptions taken.	C.2 – STP may implement the requirement regarding design verification as prescribed in ANSI N45.2.11, 1974, 6.1, second paragraph/second sentence, as opposed to R.G. wording.
ASNI N45.2.11, 1974	No exceptions taken.	3.2 (1st paragraph) – STP will require personnel to consider items 1 through 28, but a documented checklist may not be required. 6.3 – Verification and checking of design may be accomplished through supervisory or management review/approval as provided for in 6.1 Personnel will be required to consider

TABLE I

PROGRAM COMMITMENTS

R.G./ANSI STANDARD	FULL PROGRAM	BASIC PROGRAM
ANSI N45.2.11, 1974		items 1 through 19, but a documented checklist may not be required.
R.G. 1.74 (2/74)	Not applicable to STP. STP uses ANSI/ASME NQA-1-1983 for Quality Assurance Terms and Definitions.	Same as full.
ANSI N45.2.10, 1973	Same as R.G. 1.74 above.	Same as full.
R.G. 1.88, rev. 2 (10/76)	No exceptions taken.	Same as full.
ANSI N45.2.9, 1974	Section 5.6 – supplement the provisions of this section by providing for alternate temporary storage of records. Allow the use of 1-hour fire rated cabinets to store records that are awaiting processing (e.g., processing into Optical Disk Storage). Storage of these records in 1-hour fire rated cabinets will be controlled by procedure which specify a maximum allowable time limit. Cabinets housing these records shall be controlled for access and shall be located in an area protected by sprinklers.	Same as full.
R.G. 1.123, rev. 1 (7/77)	C.6.b.and e. – The referenced section of ANSI N45.2.13 will be implemented as written.	
ANSI N45.2.13, 1976	Various sections refer to ANSI N45.2. Refer to table coverage of R.G. 1.28 and ANSI N45.2. 5.3 and 5.4 – Provision are established for, in special cases and with management approval, completion of these activities after award of contract. 9.0 – This section will be implemented based on the scope, complexity and safety significance of the items being procured.	Same as full. Same as full. Same as full. 10.3.1 – This section will only be implemented as deemed necessary.

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PROGRAM COMMITMENTS

R.G./ANSI STANDARD	FULL PROGRAM	BASIC PROGRAM
ANSI N45.2.13, 1976		12 – This section will only be implemented as deemed necessary for audits of suppliers.
R.G. 1.144, rev. 1 (9/80)	C.1 – refer to table coverage of R.G. 1.28 and ANSI N45.2.	Same as full.
	C.3a(1) – refer to table coverage of R.G. 1.33 regarding audit frequency.	Same as full.
		c.3.b STP will audit vendors only as deemed necessary. STP will perform biennial evaluations.
ANSI N45.2.12, 1977	No exceptions taken.	STP will audit vendors only as deemed necessary. These audits will be conducted as unplanned/unscheduled audits.
R.G. 1.146, rev. 0 (8/80)	C.1 – refer to table coverage of R.G. 1.28 and ANSI N45.2. Refer to table coverage of R.G. 1.74 and ANSI N45.2.10	Same as full.
ANSI N45.2.23, 1978	1.2 – refer to table coverage of R.G. 1.28.	Same as full.
	1.4 – refer to table coverage of R.G. 1.74.	Same as full.
	2.21 – refer to table coverage of R.G. 1.28.	Same as full.
	2.3.3.1 – refer to table coverage of R.G 1.28.	Same as full.

For Regulatory Guides addressed by the table, and unless specific clarification or exception is indicated, STP will implement the Regulatory Guide positions, including recommendations.

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PROGRAM COMMITMENTS

For ANSI Standards addressed by this table, and unless specific clarification or exception is indicated, STP will treat ANSI requirements (i.e., "shall") as such – except in instances where the standard itself provides options or requires a graded approach – this notwithstanding the general applicability statements found in many standards (i.e., section 1.0)

1.0 PURPOSE

1.1 The purpose of this chapter is to establish requirements for a system of independent oversight activities of quality assurance programs for the South Texas Project Electric Generating Station (STP).

2.0 SCOPE

2.1 This chapter provides for implementing a program of independent oversight activities which includes audits, assessments, evaluations, performance monitoring, and surveillances to ensure the requirements of the Operations Quality Assurance Program are being properly implemented.

3.0 DEFINITIONS

3.1 None

4.0 REFERENCES

4.1 OQAP Chapter 2.0, Table I

4.2 OQAP Chapter 4.0, Qualification, Training and Certification of Personnel

4.3 OQAP Chapter 7.0, Procurement

4.4 OQAP Chapter 13.0, Control of Conditions Adverse to Quality

4.5 OQAP Chapter 14.0, Records Control

5.0 REQUIREMENTS

5.1 Independent Oversight Activities

5.1.1 Procedures shall be developed to control independent oversight activities. These activities include, but are not limited to, audits, assessments, evaluations, performance monitoring, and surveillances. These activities shall be used to observe and verify that activities are accomplished in accordance with prescribed requirements.

5.2 Audits

5.2.1 A comprehensive audit program in compliance with Reference 4.1 shall be established and implemented by STP Nuclear Operating Company (STPNOC) to verify internal and external quality activity compliance with the Quality Program. The audit program shall assure that applicable elements of the program have been developed, documented, and are effectively implemented and shall provide for reporting and reviewing audit results by appropriate levels of management. The following areas are included in the audit program:

5.2.1.1 Operation, maintenance, and modifications

5.2.1.2 Preparation, review, approval, and control of designs, specifications, procurement documents, instructions, procedures, and drawings

5.2.1.3 Material and special process control

5.2.1.4 Indoctrination and training programs

5.2.1.5 Implementation of operating and test procedures

5.2.1.6 Calibration of measuring and test equipment

5.2.1.7 Corrective action and nonconformance control

5.2.1.8 Performance of the plant staff, including training records

5.2.1.9 Plant inspection activities

5.2.2 Qualified personnel assigned auditing responsibilities shall be independent of any direct responsibility for the performance of the activities which they audit; shall be experienced or trained commensurate with the scope, complexity, or special nature of the activities to be audited; and shall be qualified in accordance with the requirements of Reference 4.2.

5.2.2.1 An audit team consists of one (or more) qualified person(s). A qualified lead auditor shall be appointed as the audit team leader. The audit team leader shall be responsible for the written plans, checklists, team orientation, audit notification, pre-audit conference, audit performance, post-audit conference, reporting, and follow-up activity to assure corrective action. The audit team leader shall promptly report conditions requiring immediate corrective action to the appropriate management of the audited organization. Other audit findings will be identified to the audited organization at the post-audit conference.

5.2.2.2 Other qualified personnel may assist in the conduct of audits, such as technical specialists or management representatives.

5.2.3 Internal Audits

5.2.3.1 Internal audits shall be conducted by the Quality Department and performed with a frequency commensurate with their safety significance, past performance and regulatory requirements. Audits are scheduled on a nominal biennial frequency, except those audits whose frequency is specifically governed by regulation.

If a decision is made to extend an audit beyond that nominal frequency, the basis for that decision shall be documented. Decisions shall be approved by the senior management of the Quality & Licensing function and notifications made to the Vice President, Engineering & Technical Services and the Senior Management Team.

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5.2.3.2 Review of the audit program shall be performed at least semiannually by the Senior Management Team or by a management representative to verify that audits are being accomplished in accordance with the requirements of the Quality Program.

5.2.3.3 Audit results shall be reviewed periodically by the Quality organization for quality trends and overall audit program effectiveness. The results of these reviews shall be reported to appropriate management in periodic summary reports.

5.2.3.4 Audited organizations are responsible for providing timely corrective action including action to prevent recurrence for programmatic problems identified by an audit.

5.2.4 Supplemental audits shall be conducted when:

5.2.4.1 Significant changes are made to the quality assurance program.

5.2.4.2 It is necessary to determine the root cause of problem areas which may impact the effectiveness of the quality assurance program.

5.2.4.3 A systematic, independent assessment of program effectiveness is necessary.

5.2.4.4 Requested by appropriate management.

5.2.5 Audit implementation shall include the following:

5.2.5.1 Written notification to the audited organization of the audit, if an announced audit.

5.2.5.2 Development of an individual audit plan/scope. The audit plan and any necessary reference documents shall be available to the audit team members.

5.2.5.3 A pre-audit and post-audit conference with responsible organizational management.

5.2.5.4 Use of a checklist or procedure as a guide during the performance of the audit.

5.2.5.5 Identifying and documenting conditions adverse to quality.

5.2.5.6 Audit reports shall be prepared and submitted to the audited organization, senior management, and the President and Chief Executive Officer within thirty days after the post-audit conference. The audit report shall address those items required by Reference 4.1.

5.2.5.7 Audited organizations provide timely and thorough corrective action and recurrence control to discrepancies identified during the audit. In the event that corrective action cannot be completed within thirty days, the audited organization's response shall include a scheduled date for the corrective action. Earlier dates for corrective action may be established if circumstances dictate.

5.2.5.8 Evaluation of corrective action for conditions adverse to quality and follow-up verification as appropriate.

5.3 Surveillance/Quality Performance Monitoring

5.3.1 Procedures and/or instructions shall be developed to control surveillance/quality performance monitoring activities. Surveillance/quality performance monitoring activities shall be used to observe and verify that activities are accomplished in accordance with prescribed procedures.

5.3.2 Surveillance/quality performance monitoring activities will be performed during refueling outages, startup activities, and normal and off-normal operational activities. Areas to be monitored will be determined based on safety significance, past performance, regulatory requirements, and customer request.

5.3.3 The frequency of surveillance/quality performance monitoring activities is based upon the complexity of the activity, importance of the activity, and severity level of conditions noted during previous oversight activities.

5.3.4 Surveillance/quality performance monitoring results shall be documented and a summary shall be prepared and transmitted to responsible management.

5.4 Assessments/Evaluations

5.4.1 Assessments are conducted annually in accordance with written procedures to assess the Quality organization's implementation of the Operations Quality Assurance Plan.

5.4.1.1 These assessments will be conducted by organizations independent of the activities performed to assure the STPNOC OQAP is being properly implemented.

5.4.1.2 The Senior Management Team shall review the scope and schedule of the assessment.

5.4.1.3 The results of these assessments will be transmitted to the President and Chief Executive Officer and the Senior Management Team.

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5.4.2 Other assessments/evaluations may be performed to verify activities are accomplished in accordance with applicable requirements and prescribed procedures.

5.4.2.1 These assessments/evaluations will be performed on areas based on their safety significance, past performance, regulatory requirements, and customer request.

5.4.2.2 Assessment/evaluation results shall be documented and transmitted to appropriate management.

5.5 An approved oversight plan shall be issued annually to include:

5.5.1 Activities/organizations to receive independent oversight.

5.5.2 Time frame in which the oversight activity will be conducted.

5.6 Conditions adverse to quality identified during an independent oversight activity shall be documented in accordance with Reference 4.4.

5.7 Personnel performing independent oversight activities shall be trained and qualified in accordance with Reference 4.2.

6.0 DOCUMENTATION

6.1 Procedures which are generated as required by this chapter shall identify the records which are required to implement and document those activities. The records shall be controlled in accordance with Reference 4.5.

7.0 ATTACHMENTS

7.1 None

1.0 PURPOSE

1.1 The purpose of this chapter is to describe the requirements and responsibilities for independent technical review for the South Texas Project Electric Generating Station (STPEGS).

2.0 SCOPE

2.1 This chapter describes the independent technical review activities within the scope of the Operations Quality Assurance Plan (OQAP).

3.0 DEFINITIONS

3.1 None

4.0 REFERENCES

4.1 OQAP Chapter 1.0, Organization

4.2 OQAP Chapter 2.0, Program Description

4.3 OQAP Chapter 4.0, Qualification, Training, and Certification of Personnel

4.4 OQAP Chapter 13.0, Deficiency Control

4.5 OQAP Chapter 14.0, Records Control

4.6 OQAP Chapter 15.0, Quality Oversight Activities

5.0 RESPONSIBILITIES

5.1 The Vice President, Engineering & Technical Services is responsible for implementing quality program requirements including independent technical review.

5.2 The senior management of the Quality & Licensing function is responsible for independent oversight activities performed to accomplish the independent technical reviews.

6.0 REQUIREMENTS

6.1 Independent oversight activities, as described in Reference 4.6, shall be performed in accordance with implementing procedures to ensure the completion of independent technical reviews.

6.2 Independent technical reviews shall be used to observe and verify that activities are performed correctly and that human errors are reduced as much as practical.

6.3 Independent technical reviews shall include, but not be limited to, the following activities:

6.3.1 Unit-operating characteristics

6.3.2 Nuclear Regulatory Commission issuances

6.3.3 Industry advisories

6.3.4 Licensee Event Reports

6.3.5 Other sources of unit design and operating experience information, including units of similar design, which may indicate areas for improving unit safety.

6.3.6 Plant operations

6.3.7 Maintenance activities

6.3.8 Equipment modifications

6.4 As determined by Quality management, several personnel performing independent technical reviews will be required to have a degree in engineering or related science and at least 3 years of professional level experience in the nuclear field.

6.5 Personnel performing independent technical reviews should be independent of performance function, signoff function, and the plant management chain while performing this oversight activity.

6.6 The results of independent technical reviews will be periodically transmitted to appropriate line and senior management, the Senior Management Team, and the President and Chief Executive Officer for review and/or action and advise management on the overall quality and safety of operations.

6.7 Conditions adverse to quality and recommendations identified during the performance of independent technical reviews shall meet the requirements of Reference 4.4

7.0 DOCUMENTATION

7.1 Procedures which are generated as required by this chapter shall identify the records which are required to implement and document those activities. The records shall be controlled in accordance with Reference 4.5.

8.0 ATTACHMENTS

8.1 None

1.0 PURPOSE

1.1 The purpose of this chapter is to describe the administrative controls (as previously documented in the Technical Specifications) as related to quality assurance for the South Texas Project Electric Generating Station (STPEGS).

2.0 SCOPE

2.1 STP Nuclear Operating Company (STPNOC), as licensee, has the Quality responsibility for administrative controls of the STP.

3.0 DEFINITIONS

3.1 None

4.0 REFERENCES

4.1 OQAP Chapter 2.0, Table I

4.2 STP Technical Specifications

4.3 Updated Final Safety Analysis Report

4.4 OQAP Chapter 8, Control and Issuance of Documents

4.5 OQAP Chapter 14, Records Control

4.6 OQAP Chapter 15, Quality Oversight Activities

5.0 REQUIREMENTS

5.1 The Plant Operations Review Committee (PORC) shall function to advise the Plant Manager on all matters related to nuclear safety.

5.1.1 The PORC shall be composed of six members, who shall be appointed in writing by the Plant Manager from senior experienced onsite individuals, at the manager level or equivalent, representing each of the following disciplines: engineering, operations, chemistry, health physics, quality assurance/quality control and maintenance. The quality assurance/quality control representatives shall not be appointed as PORC Chairman.

5.1.2 The PORC Chairman shall be appointed in writing from among those members by the Plant Manager. One of the members shall meet the requirements of Regulatory Guide 1.8 (Personnel Selection and Training – Revision 1-R), Radiation Protection Manager.

5.1.3 All alternate members shall be appointed in writing by the Plant Manager to serve on a temporary basis; however, no more than two alternates shall participate as voting members in PORC activities at any one time.

5.1.4 The PORC shall meet at least once per calendar month and as convened by the PORC Chairman or his designated alternate.

5.1.5 The quorum of the PORC necessary for the performance of the PORC responsibility and authority provisions shall consist of the Chairman or his designated alternate and three other members including alternates.

5.1.6 The PORC shall be responsible for:

5.1.6.1 Review of all safety-related station administrative procedures and changes thereto.

5.1.6.2 Review of safety evaluations for (1) procedures, (2) changes to procedures, structures, components, or systems, and (3) tests or experiments completed under the provisions of 10CFR50.59 to verify that such actions did not require prior Nuclear Regulatory Commission (NRC) approval.

5.1.6.3 Review of proposed (1) procedures, (2) changes to procedures, structures, components, or systems, and (3) tests or experiments completed under the provisions of 10CFR50.59 which may require prior NRC approval.

5.1.6.4 Review of all required programs by Technical Specification 6.8 and changes thereto.

5.1.6.5 Review of all proposed changes to the Technical Specifications or the Operating License.

5.1.6.6 Review of all REPORTABLE EVENTS.

5.1.6.7 Review of reports of significant operating abnormalities or deviations from normal and expected performance of plant equipment or systems that affect nuclear safety.

5.1.6.8 Review of reports of unanticipated deficiencies in the design or operation of structures, systems, or components that affect nuclear safety.

5.1.6.9 Review of the Security Plan and implementing procedures and changes thereto.

5.1.6.10 Review of the Emergency Plan and implementing procedures and changes thereto.

5.1.6.11 Review of the PROCESS CONTROL PROGRAM and implementing procedures and changes thereto.

5.1.6.12 Review of the OFFSITE DOSE CALCULATION MANUAL and implementing procedures and changes thereto.

5.1.6.13 Performance of special reviews, investigations, or analyses and reports thereon as requested by the Plant Manager or the Senior Management Team (SMT).

5.1.6.14 Review of any accidental, unplanned, or uncontrolled radioactive release including the preparation of reports covering evaluation, recommendations, and disposition of the corrective action to prevent recurrence and the forwarding of these reports to the Plant Manager and to the SMT.

5.1.6.15 Reports of violations of codes, regulations, orders, Technical Specifications, or Operating License requirements having nuclear safety significance or reports of abnormal degradation of systems designed to contain radioactive material.

5.1.6.16 Review of the Fire Protection Program, quality-related implementing procedures and changes thereto.

5.1.7 The PORC shall recommend in writing to the Plant Manager approval or disapproval of items considered under section 5.1.6.1 through 5.1.6.5 prior to their implementation, and items considered under sections 5.1.6.9 through 5.1.6.12.

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5.1.8 The PORC shall render determinations in writing with regard to whether or not each item considered under sections 5.1.6.1 through 5.1.6.5 and 5.1.6.15 may require prior NRC approval under the provisions of 10CFR50.59.

5.1.9 The PORC shall provide written notification within 24 hours to the President and Chief Executive Officer and the SMT of disagreement between the PORC and the Plant Manager; however, the Plant Manager shall have the responsibility for resolution of such disagreements pursuant to Technical Specification 6.1.1.

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5.1.10 The PORC shall maintain written minutes of each PORC meeting that, at a minimum, document the results of all PORC activities performed under the responsibility provisions of this chapter. Copies shall be provided to the President and Chief Executive Officer and the appropriate organizational unit.

5.2 Appropriate organizational units shall function to provide independent review of designated activities as required by ANSI N18.7-1976/ANS-3.2, Sections 4.3, 4.3.1, 4.3.3, and 4.3.4.

5.2.1 Staff personnel required to perform these independent reviews shall collectively have the experience and competence to review operational activities in the following areas:

5.2.1.1 Nuclear power plant operations;

5.2.1.2 Nuclear engineering;

5.2.1.3 Chemistry and radiochemistry;

5.2.1.4 Metallurgy;

5.2.1.5 Instrumentation and control;

5.2.1.6 Radiological safety;

5.2.1.7 Mechanical and electrical engineering;

5.2.1.8 Civil engineering;

5.2.1.9 Training;

5.2.1.10 Nuclear assurance;

5.2.1.11 Nuclear licensing;

5.2.1.12 Plant security, and;

5.2.1.13 Environmental impact

Note: If sufficient expertise is not available from within the STPNOC for the areas noted above, appropriate expertise shall be brought to bear in the independent reviews through the use of outside consultants.

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5.2.2 The SMT shall functionally report to and advise the President and Chief Executive Officer on those areas of responsibility specified in sections 5.2.3 and 5.2.4.

5.2.3 Appropriate organizational units shall be responsible for the review of:

5.2.3.1 The safety evaluations for: (1) changes to procedures, equipment, or systems; and (2) tests or experiments completed under the provision of 10CFR50.59, to verify that such actions did not require prior NRC approval;

5.2.3.2 Proposed changes to procedures, equipment, or systems which require prior NRC approval under the provisions of 10CFR50.59;

5.2.3.3 Proposed tests or experiments which require prior NRC approval under the provisions of 10CFR50.59;

5.2.3.4 Proposed changes to Technical Specifications or the Operating License;

5.2.3.5 Violations of Codes, regulations, orders, Technical Specifications, license requirements, or of internal procedures or instructions having nuclear safety significance;

5.2.3.6 Significant operating abnormalities or deviations from normal and expected performance of unit equipment that affect nuclear safety;

5.2.3.7 All REPORTABLE EVENTS;

5.2.3.8 All recognized indications of an unanticipated deficiency in some aspect of design or operation of structures, systems, or components that could affect nuclear safety; and

5.2.3.9 Reports and meeting minutes of the PORC.

5.2.4 Reports of audits of unit activities shall be reviewed by the SMT. These audits shall encompass:

5.2.4.1 The conformance of unit operation to provisions contained within the Technical Specifications and applicable license conditions;

5.2.4.2 The training and qualification of the unit staff;

5.2.4.3 Actions taken to correct deficiencies occurring in equipment, structures, systems, components, or method of operation that affect nuclear safety;

5.2.4.4 The performance of activities required by the Operational Quality Assurance Program to meet the criteria of Appendix B, 10CFR50;

5.2.4.5 The fire protection programmatic controls including the implementing procedures;

5.2.4.6 The fire protection equipment and program implementation utilizing either a qualified offsite licensee fire protection engineer or an outside independent fire protection consultant;

5.2.4.7 The Radiological Environmental Monitoring Program and the results thereof;

5.2.4.8 The OFFSITE DOSE CALCULATION MANUAL and implementing procedures;

5.2.4.9 The PROCESS CONTROL PROGRAM and implementing procedures for processing and packaging of radioactive wastes;

5.2.4.10 The performance of activities required by the Quality Assurance Program for effluent and environmental monitoring; and

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5.2.4.11 Other activities and documents as requested by the SMT or the President and Chief Executive Officer.

5.2.5 Records of organizational unit independent review activities shall be prepared, approved, and distributed as indicated below:

5.2.5.1 Reports of organizational unit independent reviews encompassed by sections 5.2.3 and 5.2.4 shall be prepared, approved, and forwarded to the President and Chief Executive Officer and the SMT.

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5.3 Technical Review and Control

5.3.1 Activities that affect nuclear safety shall be conducted as follows:

5.3.1.1 Procedures required by Technical Specification 6.8, and other procedures that affect nuclear safety, and changes thereto, shall be prepared, reviewed, and approved. Each such procedure, or change thereto, shall be reviewed by an individual/group other than the individual/group who prepared the procedure, or change thereto, but who may be from the same organization as the individual/group who prepared the procedure, or change thereto. Procedures other than station administrative procedures shall be approved by the Plant Manager, Plant Superintendent, or the head of the responsible department prior to implementation. The Plant Manager shall approve station administrative procedures, security plan implementing procedures, and emergency plan implementing procedures. Temporary changes to procedures, which clearly do not change the intent of the approved procedures, shall be approved prior to implementation by two members of the plant staff, at least one of whom holds a Senior Reactor Operator's License. Changes to procedures that may involve a change to the intent of the original procedure shall be approved by the individual authorized to approve the procedure prior to implementation of the change.

5.3.1.2 Proposed changes or modifications to safety-related structures, systems, and components shall be reviewed as designated by the Plant Manager. Each such modification shall be reviewed by an individual/group other than the individual/group who designed the modification, but who may be from the same organization as the individual/group who designed the modification. Proposed modifications to safety-related structures, systems, and components shall be approved by the Plant Manager prior to implementation.

5.3.1.3 Proposed tests and experiments that affect nuclear safety and that are not addressed in the Final Safety Analysis Report shall be prepared, reviewed, and approved prior to implementation. Each such test or experiment shall be reviewed by an individual/group other than the individual/group who prepared the test or experiment but who may be from the same organization as the individual/group who prepared the test or experiment. Proposed tests and experiments shall be approved by the Plant Manager.

5.3.1.4 Individuals responsible for reviews performed in accordance with sections 5.3.1.1, 5.3.1.2, and 5.3.1.3 shall be members of the plant management staff previously designated by the Plant Manager. Each review shall include a determination of whether or not additional, cross-disciplinary review is necessary. If deemed necessary, such review shall be performed by qualified personnel of the appropriate discipline.

5.3.1.5 Each review will include a determination of whether or not prior NRC approval is involved pursuant to 10CFR50.59. NRC approval of items will be obtained prior to Plant Manager approval for implementation.

5.3.2 Records of the above activities shall be provided to the Plant Manager, PORC, and/or the appropriate organizational unit as necessary for required reviews. QA-055

5.4 Record Retention

5.4.1 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.

5.4.2 The following records shall be retained for at least 5 years:

5.4.2.1 Records and logs of unit operation covering time interval at each power level;

5.4.2.2 Records and logs of principal maintenance activities, inspections, repair, and replacement of principal items of equipment related to nuclear safety;

5.4.2.3 All REPORTABLE EVENTS;

5.4.2.4 Records of surveillance activities, inspections, and calibrations required by the Technical Specifications;

5.4.2.5 Records of changes made to the procedures required by Technical Specification 6.8;

5.4.2.6 Records of sealed source and fission detector leak tests and results; and

5.4.2.7 Records of annual physical inventory of all sealed source material of record.

5.4.3 The following records shall be retained for the duration of the unit Operating License:

5.4.3.1 Records and drawing changes reflecting unit design modifications made to systems and equipment described in the Final Safety Analysis Report;

5.4.3.2 Records of new and irradiated fuel inventory, fuel transfers, and assembly burnup histories;

5.4.3.3 Records of doses received by all individuals for whom monitoring was required;

5.4.3.4 Records of gaseous and liquid radioactive material released to the environs;

5.4.3.5 Records of transient or operational cycles for those unit components identified in the Updated Final Safety Analysis Report;

5.4.3.6 Records of reactor tests and experiments;

5.4.3.7 Records of training and qualification for current members of the unit staff;

5.4.3.8 Records of inservice inspections performed pursuant to the Technical Specifications;

5.4.3.9 Records of quality assurance activities required by the Operations Quality Assurance Plan;

5.4.3.10 Records of reviews performed for changes made to procedures or equipment or reviews of tests and experiments pursuant to 10CFR50.59;

5.4.3.11 Records of meetings of the PORC

5.4.3.12 Records of organizational unit independent reviews

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5.4.3.13 Records of secondary water sampling and water quality;

5.4.3.14 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;

5.4.3.15 Records of reviews performed for changes made to the OFFSITE DOSE CALCULATION MANUAL and the PROCESS CONTROL PROGRAM; and

5.4.3.16 Records of radioactive shipments.

6.0 DOCUMENTATION

6.1 Procedures which are generated as required by this chapter shall identify the records which are required to implement and document those activities. The records shall be controlled in accordance with the requirements of this chapter and Reference 4.4.

7.0 ATTACHMENTS

7.1 None