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> July 29, 2005 LR-N05-0379

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Mr. Samuel Collins Regional Administrator United States Nuclear Regulatory Commission Region I 475 Allendale Road King of Prussia, PA 19406-1415

PSEG METRICS FOR IMPROVING THE WORK ENVIRONMENT SALEM AND HOPE CREEK GENERATING STATIONS QUARTERLY REPORT DOCKET NOS. 50-272, 50-311 AND 50-354

Dear Mr. Collins:

This letter provides a copy of the PSEG Nuclear (PSEG) Safety Conscious Work Environment (SCWE) metrics for the second quarter 2005. PSEG put these metrics in place to objectively measure the effectiveness of the SCWE improvements at Salem and Hope Creek Generating Stations. PSEG has conducted an analysis of each metric and decided whether and to what extent the results warrant additional actions. The current PSEG SCWE action plan remains in effect.

PSEG has also considered these metrics in an overall assessment of its progress toward sustained performance against the following factors:

- 1. Employees are free to raise concerns;
- 2. Management is effective in addressing concerns;
- 3. The Employee Concerns Program (ECP) provides an effective outlet mechanism for raising concerns; and
- 4. Management is effective in responding to retaliation concerns.

Employees Continue to Raise Concerns:

In general, employees feel free to raise concerns. The indicator for total notifications shows that site personnel continue to identify problems and write notifications at a high rate. There is an apparent improvement in anonymous concerns (i.e., decrease in the number of anonymous concerns) and a slight increase in confidential concerns from the first quarter to the second quarter.

The SCWE Group performed an analysis of the 2005 Synergy survey results against the 2003 results. The results showed that a number of station departments had noteworthy improvements over the 2003 survey results while a few departments did not score as well. Those departments that did not score as well are developing and implementing actions plans to improve performance in this area.

Management is Increasingly Effective at Addressing Concerns:

The SCWE indicators showed positive trends in Online Corrective Maintenance Backlog, Corrective Action Problem Resolution (closure acceptance rate), timely closure of condition reports, and Repeat Maintenance Issues indicators. Most safety systems performance indicators are currently at top quartile performance levels on an annual basis; however, performance in prior years is causing the three-year rolling average goal not to be met. For those systems where goals are not being met, actions have been identified to improve their performance and achieve the goal.

In addition to the enclosed metrics, PSEG has taken a number of visible steps to emphasize management's willingness and ability to address issues. For example, management oversaw the successful, timely completion of the Salem Unit 2 refueling outage by addressing both planned work as well as emergent issues during the outage. Management also took additional actions to enhance the security program and facilities.

In the area of the Corrective Action Program (CAP), the majority of the CAP Recovery Plan actions were completed, establishing the foundation of a strong process for the CAP. A CAP Excellence Plan focusing on behaviors has also been developed, with input from industry peers, to continue improvements. Performance indicators reflect the positive results of these efforts.

Employee Concerns Program is an Effective Outlet for Employees to Raise Concerns:

The ECP received an increased number of contacts in the second quarter. PSEG employees and contractors continue to use the program to raise issues.

A self-assessment of the ECP was performed in the second quarter of 2005. The selfassessment team included industry experts from other utilities. No significant issues were identified, but opportunities for improvement were indicated in some areas, such as improving communication of the ECP program requirements and recognition of ECP personnel. These issues have been entered in the CAP.

The attached ECP metric includes a corrected copy of our statistics; one additional contact was identified in May 2005 that should have been classified as confidential and included in the performance indicator.

Management is Effective in Responding to Retaliation Claims:

The indicator for Executive Review Board (ERB) action approvals meets the applicable goal. SCWE training has been completed. The Executive Protocol Group (EPG) has supplanted the People Team, which was established to provide an effective mechanism for timely and comprehensive response to events that could involve elements of

retaliation or chilling effect. The EPG, similarly to the People Team, is chartered to review employee and contractor issues from various sources and proactively identify and analyze trends.

A SCWE self-assessment is currently in progress utilizing an industry peer. The selfassessment will be completed in August 2005 and any issues identified will be entered in the CAP.

In summary, PSEG continues to focus on areas that have the largest impact on SCWE, such as fixing known problems, implementing the correct operating standards, actively and openly communicating with employees, and strengthening the Work Management and CAP programs.

PSEG will continue to monitor its progress and report quarterly to the NRC. If you have any questions, please contact Darin Benyak, Director, Regulatory Assurance at 856-339-1740.

Very truly yours,

William Levis Senior Vice President & Chief Nuclear Officer

Attachments

Mr. Samuel Collins LR-N05-0379

C Mr. S. Collins, Administrator - Region I U. S. Nuclear Regulatory Commission 475 Allendale Road King of Prussia, PA 19406

> U. S. Nuclear Regulatory Commission Attn: Mr. S. Bailey Licensing Project Manager – Salem Mail Stop 08B1 Washington, DC 20555-0001

USNRC Senior Resident Inspector - Salem (X24)

USNRC Senior Resident Inspector - HC (X24)

Mr. K. Tosch, Manager IV Bureau of Nuclear Engineering P.O. Box 415 Trenton, NJ 08625



Safety Conscious Work Environment

June 2005

EXECUTIVE REVIEW BOARD (ERB) ACTION APPROVALS

2004

Total Cases El Approved Cases

Updated: Monthly



Goal:

Executive Review Board (ERB) reviews proposed personnel actions to ensure no retaliation or chilling effect implications

No Adverse Trend

Chart Owner

Safety Conscious Work Environment Manager

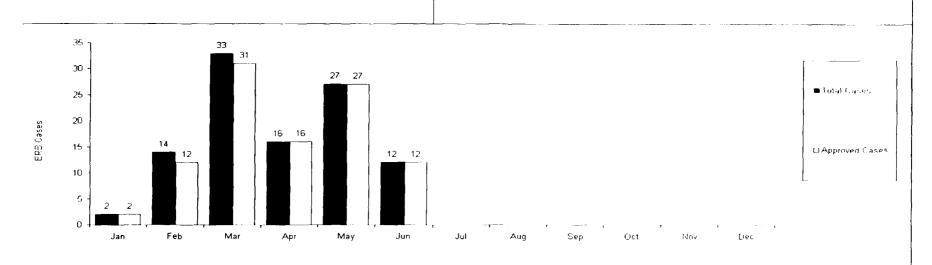
Oct

Nov Dec

The Executive Review Board (ERR) was established to ensure that no adverse action is taken or perceived to be taken against site personnel for raising nuclear safety issues. This Board reviews significant proposed discipline, promotions, transfers and terminations for PSEC employees and supplemental (contract) personnel.

Analysis: The Executive Review Board (ERB) completed reviews for 55 proposed actions during the 2nd Quarter. None were "objected to." There is no adverse trend and the goal is being met

<u>Actions</u>: The SCWE Leader has completed rollouts on the mechanics and applicability of ERB (Notification 20233448). This included meeting with a representative of the supplemental organization involved in the missed ERD in April. Additionally, the SCWE group is working with Human Resources to further enhance the process used to select individuals for promotional opportunities and other assignment changes.





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Reporting/data entry

starts in April

Apr May Jun Jul Aug Sep

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Jan Feb Mar

ERB Cases 01 Cases

EMPLOYEEE CONCERNS PROGRAM -The number of Employee Concerns Program concerns filed anonymously/confidentially versus R Updated. Monthly R CONCERNS total number of concerns per month. Chart does not include NRC 30-day requests. CONFIDENTIALITY/ANONYMITY REQUEST 10 2005 20 2005 **Chart Owner Employee Concerns Program Manager** Goal: No Adverse Trend This metric shows the total number of concerns brought to the Employee Concerns Manager. This is an 60 alternate means to have issues addressed outside of line management. 51 50 40 30 30 Analysis An adverse trend continues with Anonymous and Confidential contacts. During the 1st guarter there were six Anonymous/Confidential concerns, during the 2nd quarter there were nine. A predominant department was identified in the 1st quarter as having an adverse trend, action was taken, and no issues were identified related to this same department in the 2nd quarter. Regarding the 2nd quarter, all three Anonymous concerns are related to industrial safety, and were from separate departments. Three of the six Confidential concerns are retaliation allegations, which were unsubstantiated, and were from separate departments 12 10 During the monthly ECP review for May 2005, it was identified that one additional case should have been classified as a confidential contact on the performance indicator. That resulted in a change from one to two confidential cases in the month of March . This issue was documented in a notification in the Corrective Action Program 2003 2004 Δ ctions - ECP is meeting with first-line supervisors and above, discussing actions supervisors need to take when DConfidentiality Requested Anonymous # Total Number of Concerns issues are raised by their direct reports, reviewing employee concerns trends with sonior management, and meeting with employees throughout the site, pulsing various groups in order to give employees an opportunity to raise concerns. 16 14 Monthly Anunymous 12 11 Number of ECP concerns 10 1 D Monthly Total of Concerns 8



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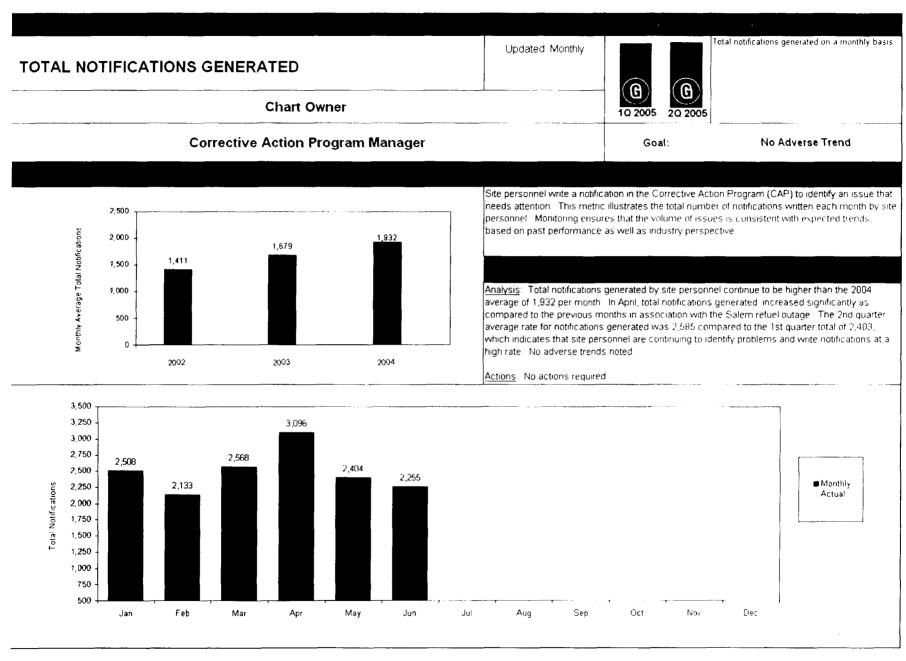
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Jan

f1 Monthly Total Confidentiality

Requested

D Monthly Total of Open Concerns





ONLINE CORRECTIVE MAINTENANCE BACKLOG

Updated Monthly



The number of open online corrective maintenance work items

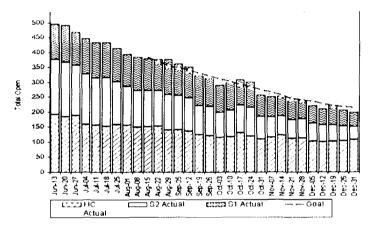
Chart Owner

10 2005

Goal:

Salem Maintenance Manager and Hope Creek Maintenance Manager

45 by year end



This metric measures the total backlog of on-line corrective maintenance. These are items that have an impact on plant operations and can be fixed while the unit is in service. Benchmarking indicates the industry median at 90, with top performance at 45 for the site. The gual is to achieve top performance by the end of 2005

Analysis

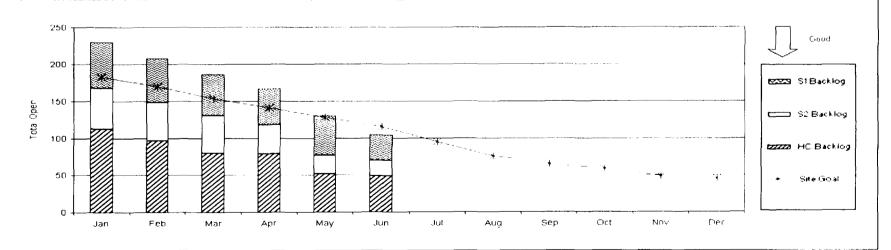
Salem: During the outage, Salem station witnessed an increase in identified CM orders. As of May, the station is back on goal, the overall site goal is on track as of June.

Hope Creek: The Corrective Maintenance backlog decreased by 32 items this quarter. This improvement has put Hope Creek on track to meet the year end goal of 15. This improvement was achieved frum a team effort in improving Equipment Reliability.

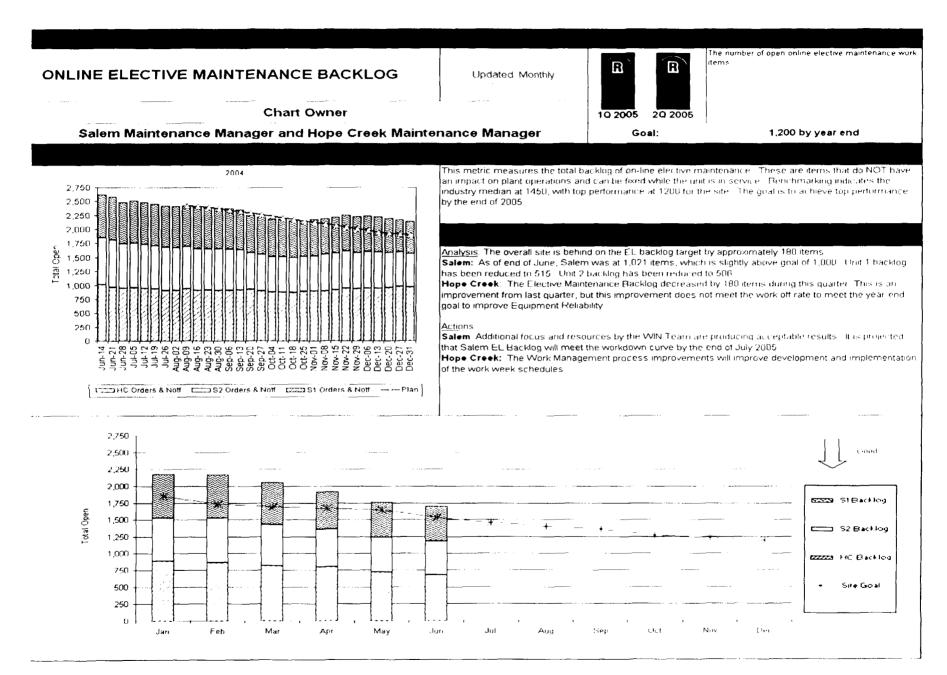
Actions:

Salem: Continue with the CM Reduction Tearn to resolve restraints on preparation of work activities and weekly review meetings to ensure WIN Team job prioritization is correct

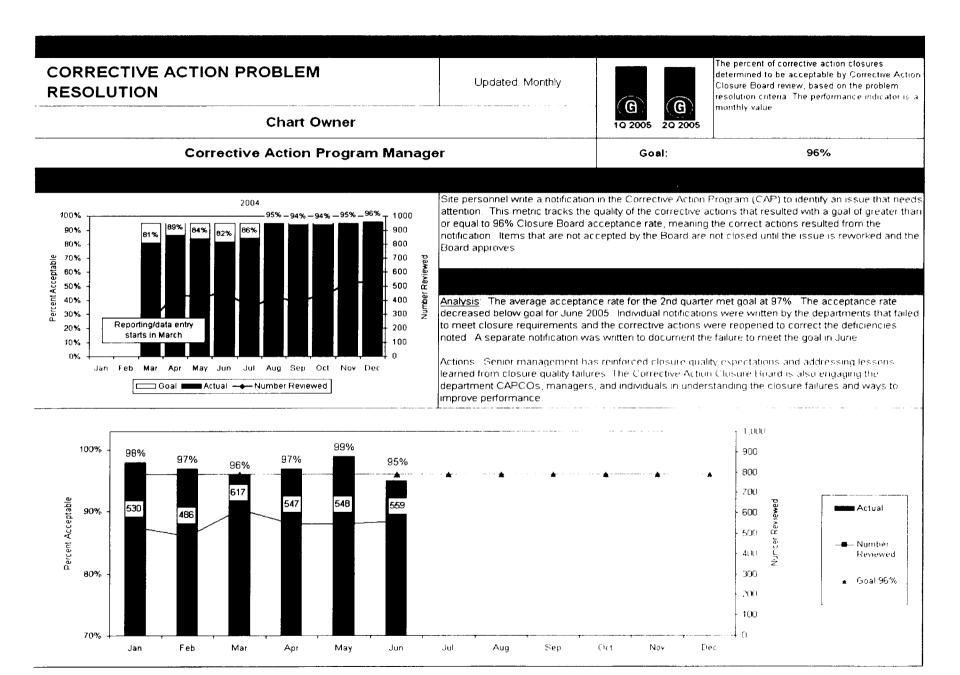
Hope Creek. The Work Management process improvements will improve development and implementation of the work week schedules

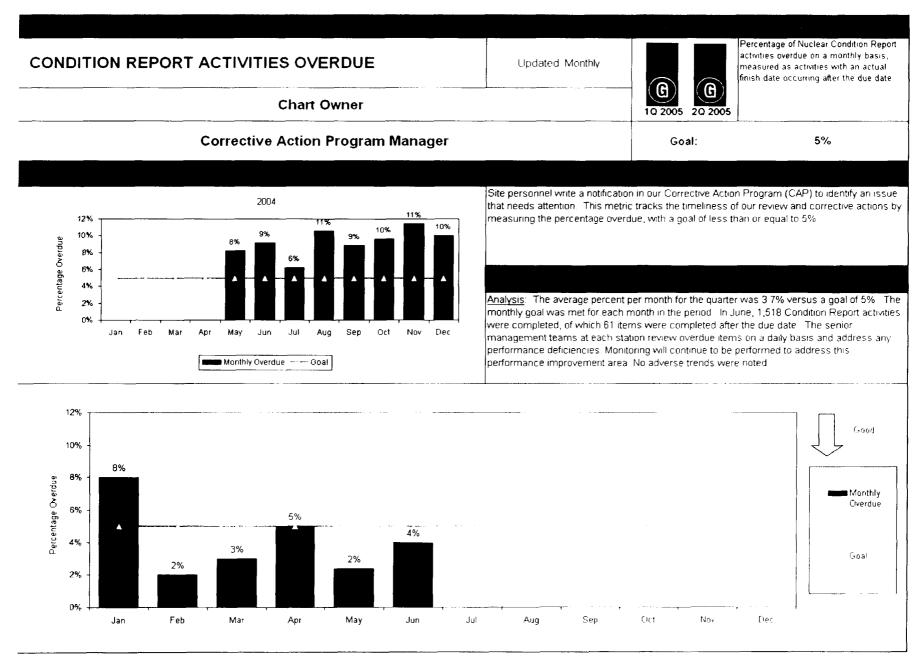




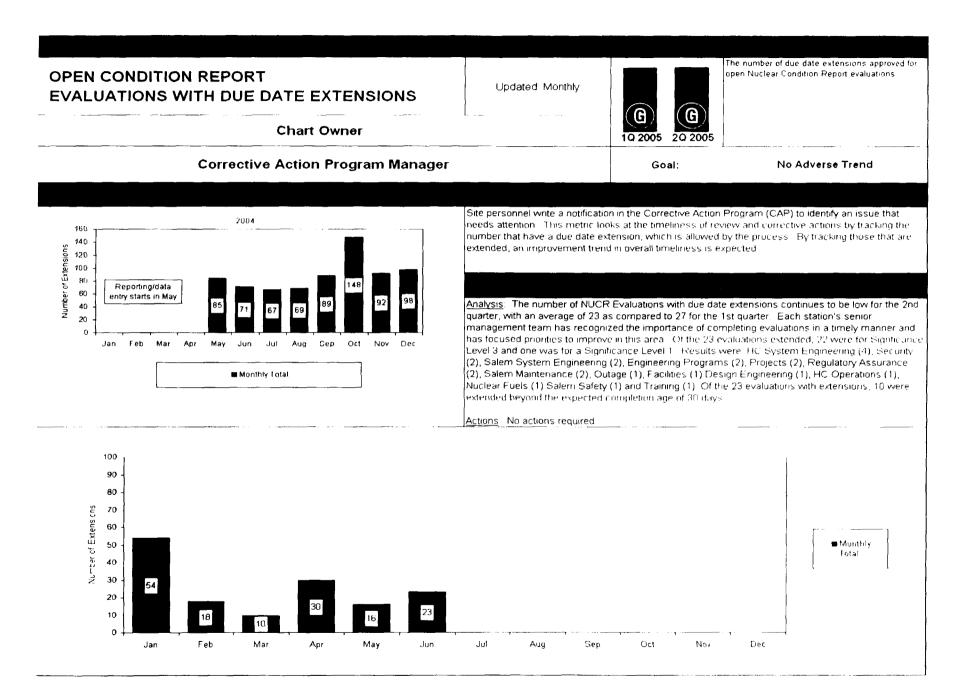


Salem Hope Creek

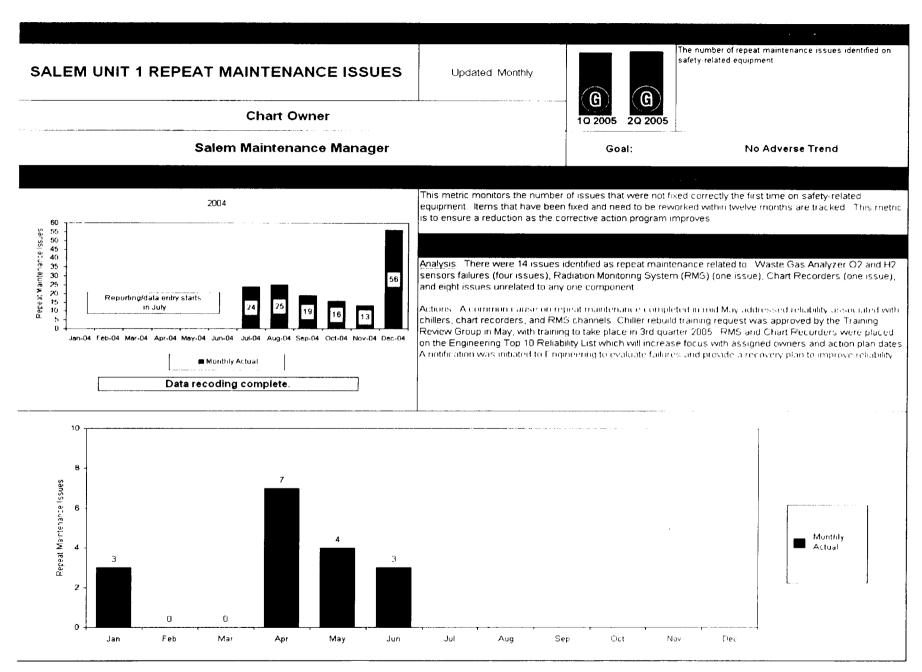














SALEM UNIT 2 REPEAT MAINTENANCE ISSUES

Updated Monthly



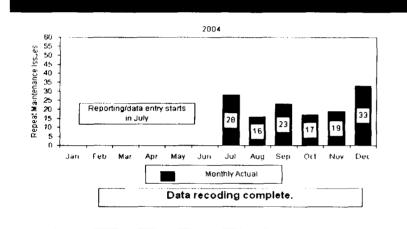
Goal:

The number of repeat maintenance issues identified on safety-related equipment

No Adverse Trend

Chart Owner

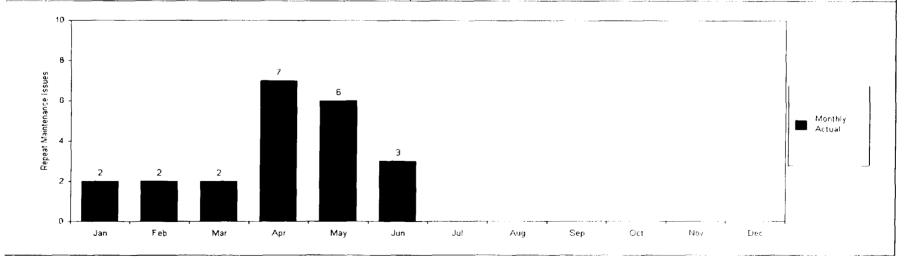
Salem Maintenance Manager



This metric monitors the number of issues that were not fixed correctly the first time on safety-related equipment litems that have been fixed and need to be reworked within twelve months are tracked. This metric is to ensure a reduction as the corrective action program improves.

Analysis: There were 16 issues identified as repeat maintenance related to: Chillers (two issues), Radiation Monitoring System (RMS) channel failures (three issues), chart failures (two issues), and one issue that was not identified as a degrading trend

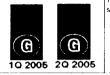
<u>Actions</u>: A common cause on repeat maintenance completed in mid May addressed decreasing trends on reliability associated with chillers, chart recorders, and RMS channels. Chiller rebuild training request was approved by the Training Review Group in May, with training to take place in the 3rd quarter 2005. RMS and Chart Recorders were placed on the Engineering Top 10 Reliability List which will increase focus with assigned owners and action plan dates.





HOPE CREEK REPEAT MAINTENANCE ISSUES

Updated Monthly



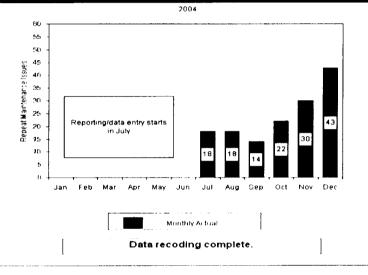
Goal:

The number of repeat maintenance issues identified on safety-related equipment

No Adverse Trend

Chart Owner

Hope Creek Maintenance Manager



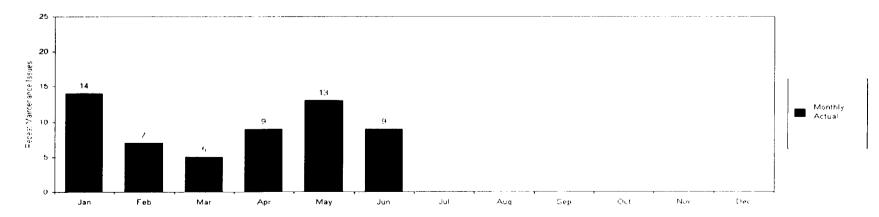
This metric monitors the number of issues that were not fixed correctly the first time on safety-related equipment. Items that have been fixed and need to be reworked within twelve months are tracked. This metric is to ensure a reduction as the corrective action program improves.

Analysis

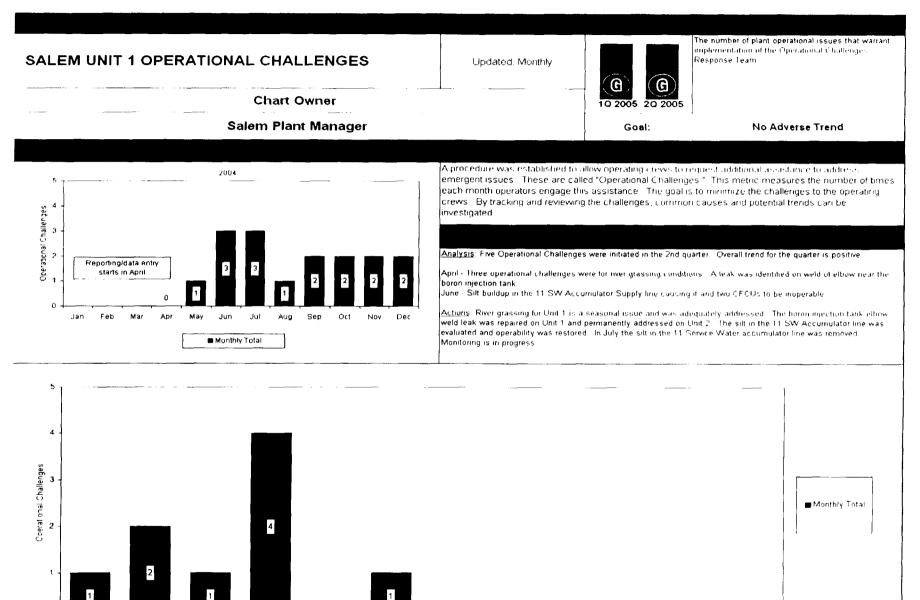
Work Management coded notifications for 2004 and 2005 as either repeat or rework maintenance. An in depth review of repeat maintenance issues began in the 1st quarter 2005 and will continue going forward to ensure coding accuracy. The Troubleshooting Dynamic Learning Activity (DLA) completed this quarter has improved performance and problem identification is more timely and accurate. There were additional failures of Honeywell paper recorders in Radiation Montitoring System equipment during the quarter.

Actions

The items identified this quarter are being tracked in the Corrective Action and Corrective Maintenance Programs and actions are being implemented as per the schedule. Reliability of this equipment will be enhanced through the Plant Health Committee System and will be evaluated in the Hope Creek training process.

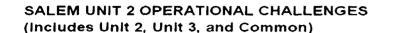






Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec





Updated Monthly



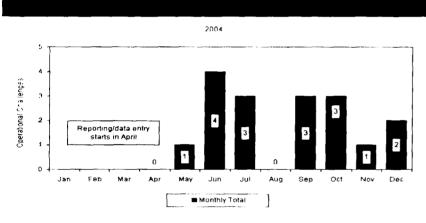
Goal:

The number of plant operational issues that warrant implementation of the Operational Challenges Response Team

No Adverse Trend

Chart Owner

Salem Plant Manager



A procedure was established to allow operating crews to request additional assistance to address, emergent issues. These are called "Operational Challenges." This metric measures the number of times each month operators engage this assistance. The goal is to minimize the challenges to the operating crews. By tracking and reviewing the challenges, common causes and potential trends can be investigated.

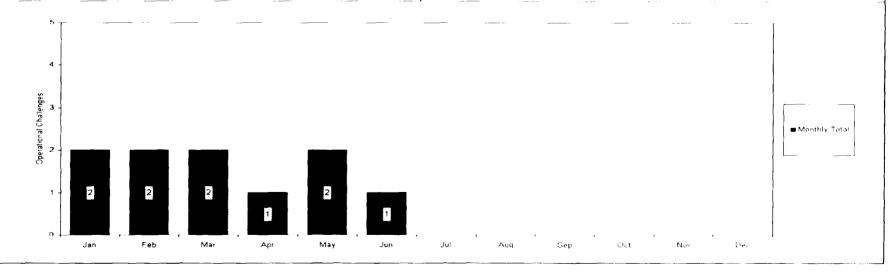
Analysis: There were four operational challenges initiated in the 2nd quarter. Overall trend for the quarter is steady

April - Leak identified on weld of pipe elbow near boron injection tank

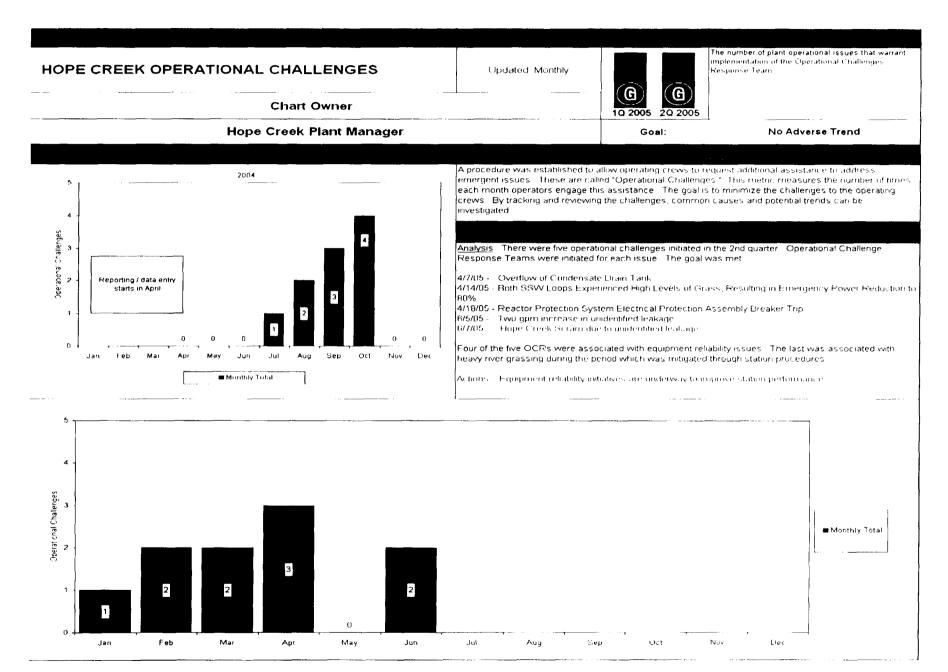
May - 12B diesel generator 4Kv breaker gaplissue - Failed surveillance due to 1A RHR pump discharge check valve back teakage indication

June - Silt buildup in the 21 Service Water Accumulator Supply line causing it and two CFCUs to be inoperable.

Actions The boron injection tank elbow weld leak was repaired on Unit 1 and permanently addressed on Unit 2. Subsequent 2B diesel run was performed and breaker gap issue was resolved, with appropriate tolerances included in the surveillance. Alternate test methods to determine check valve operability validated that the RHR pump discharge check valve was in its expected position. The silt in the 21 Service Water Accumulator line was removed and operability was restored. Montholog is in progress and no forther actions are required.



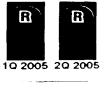






SALEM UNIT 1 UNPLANNED SHUTDOWN LIMITING CONDITION OF OPERATION (LCO) ENTRIES

Updated Monthly



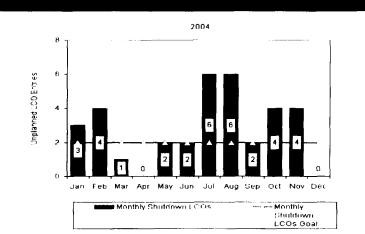
Goal:

The number of Unplanned Shutdown Technical Specification Limiting Conditions of Operation (ECUS) entered during the munth

2 per Month

Chart Owner

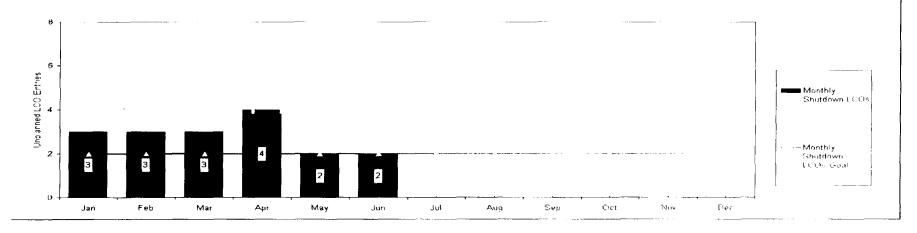
Salem System Engineering Manager



Nuclear plants are operated under a fundamental set of rules from the Nuclear Regulatory Commission (NRC) called Technical Specifications. Certain rules require operators to enter a shutdown LCO, meaning the equipment must be fixed in a defined period of time, or unit shutdown is required. This metric measures the unplanned entries made at Salem Unit 1, compared to the expected number at top performing nuclear units (less than or equal to 2/month).

Analysis: There were a total of eight Unplanned Shutdown LCOs versus a goal of two per month (Six total). The goal was not met. The eight Unplanned Shutdown LCOs were a result of 13 CFCU flow control valve (12SW57) cycling (2 times), 1R11A radiation monitor (2 times - paper jam and fluctuating reading), ASME leak on 1SJ6 requiring plant shutdown, 1R12A radiation monitor inoperability, subcooling margin monitor recorder not advancing, and 13 CFCU outlet valve (13SW223) failing open due to a leak in control air tubing.

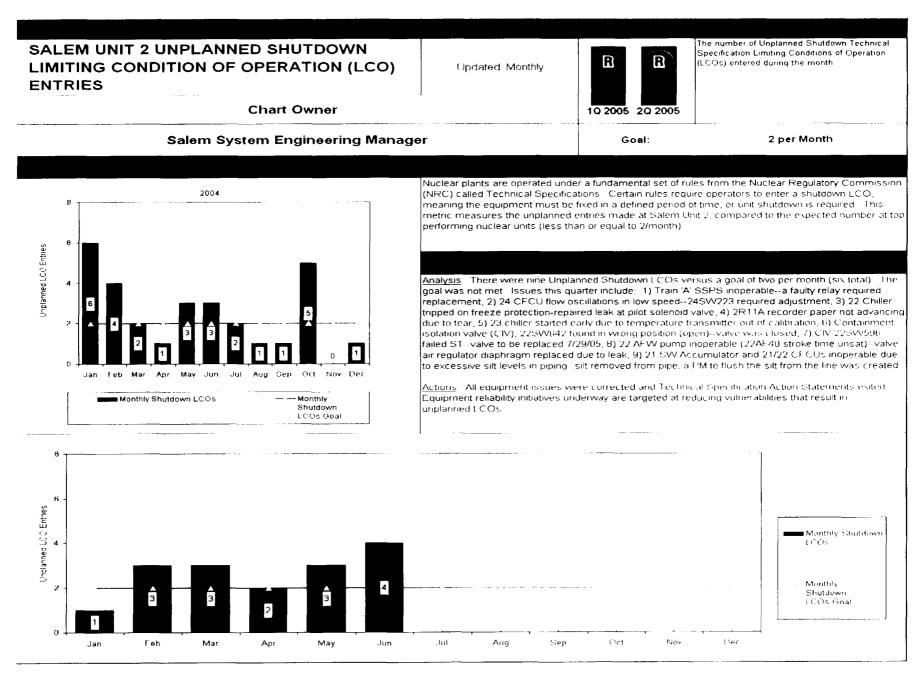
Action — All issues detailed above were corrected and the applicable Technical Specification LCOs were exited. Salem's Top 10 Equipment Issues list was revised this quarter to addicadation monitors (RMS), CECUs, and control room chart recorders, all of which have inegatively affected this metric in the current as well as previous quarters. Action plans are being developed to correct these issues. To improve RMS, performance, a Common Cause Analysis was conducted, with resulting corrective action being to implement Design Change Packages and improve RM and PM frequencies.



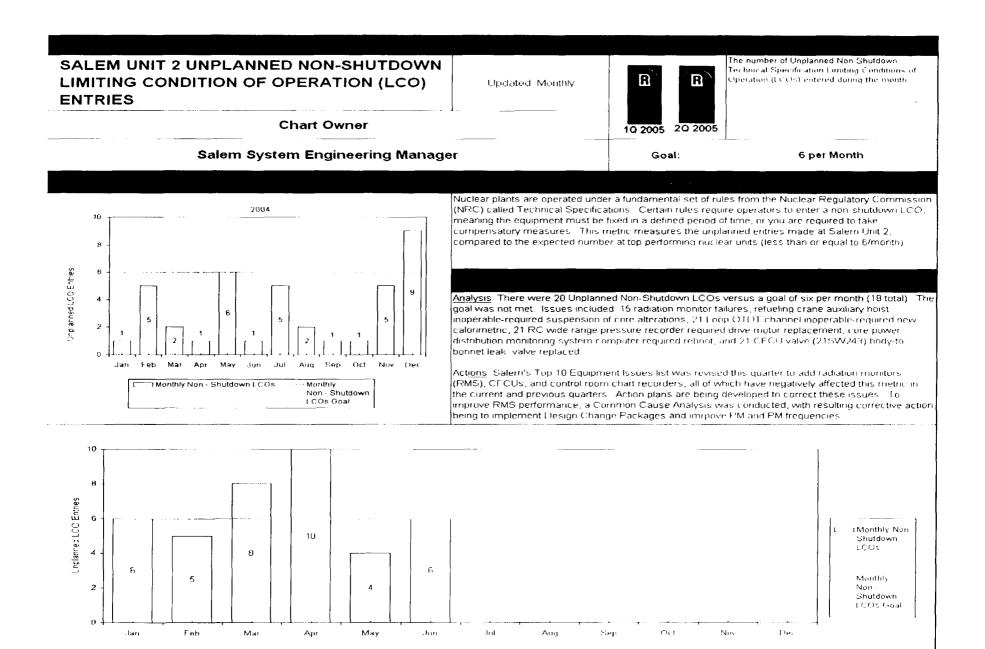


The number of Unplanned Non-Shutdown Technical SALEM UNIT 1 UNPLANNED NON-SHUTDOWN Specification Limiting Conditions of Operation (LCOs) entered during the month LIMITING CONDITION OF OPERATION (LCO) Updated Monthly ENTRIES Թ A **Chart Owner** 10 2005 20 2005 Salem System Engineering Manager Goal: 6 per Month Nuclear plants are operated under a fundamental set of rules from the Nuclear Regulatory Commission 2004 (NRC) called Technical Specifications. Certain rules require operators to enter a non-shutdown LCO. meaning the equipment must be fixed in a defined period of time, or you are required to take 20 compensatory measures. This metric measures the unplanned entries made at Salem Unit 1, compared 18 16 Unplanned LCO Entries to the expected number at top performing nuclear units (less than or equal to 6/month) 14 12 10 8 15 6 ۵ 5 5 Analysis: There were 11 Unplanned Non-Shutdown LCOs versus a goal of six per month (18 total) The 2 -3 goal was met. Feb Jan Mar Apr Mav Jun Jut Aug Sep Oct Nov Dec Actions: No actions required. Monthly Non - Shutdown LCOs ---- Monthly Non - Shutdown LCOs Goal 10 8 Jnp'anned LCO Entries 6 Shutdown LCOs 4 Monthly 5 5 Non - Shutdown 2 LCOs Goal З З 2 D Jan Feb May Jul Aug Oct Mar Apr Jun Sep Nov Dec



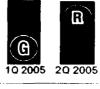








HOPE CREEK UNPLANNED SHUTDOWN LIMITING CONDITION OF OPERATION (LCO) ENTRIES



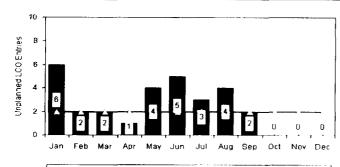
Goal:

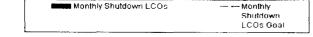
The number of Unplanned Shutdown Technical Specification Limiting Conditions of Operation (LCOs) entered during the month

2 per Month

Chart Owner

Hope Creek System Engineering Manager

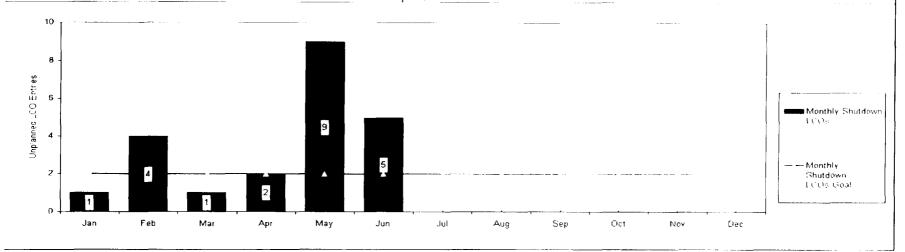




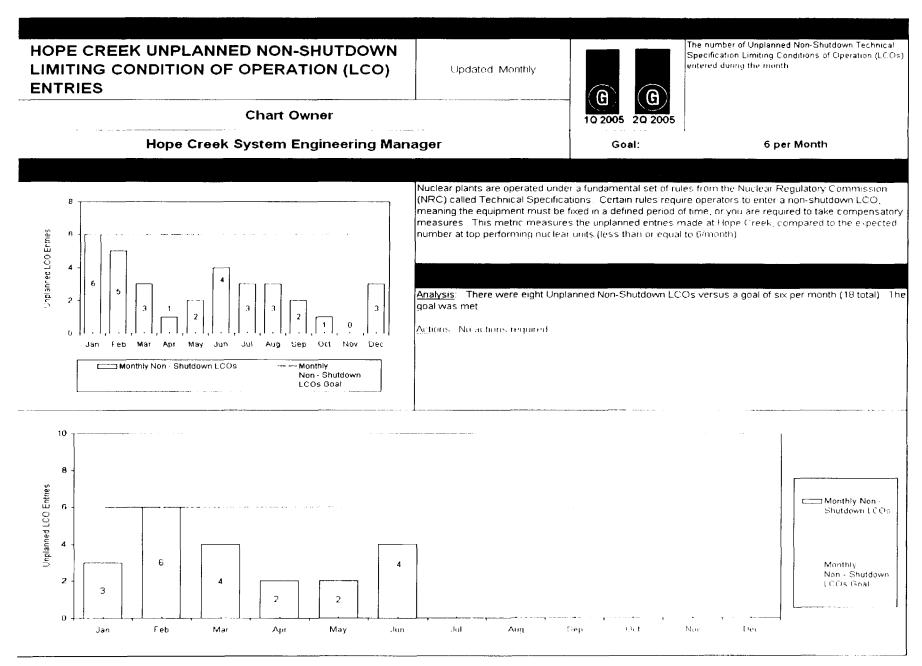
Nuclear plants are operated under a fundamental set of rules from the Nuclear Regulatory Commission (NRC) called Technical Specifications. Certain rules require operators to enter a shutdown ECO, meaning the equipment must be fixed in a defined period of time, or unit shutdown is required. This metric measures the unplanned entries made at Hope Creek, compared to the expected number at top performing nuclear units (less than or equal to 2/month).

Analysis: There were 16 Unplanned S/D LCOs versus a goal of two per month (six total) The goal was not met. Six LCOs were from severe weather coincident with a building flood door not OPERABLE, two were related to exceeding unidentified leakage rates inside primary containment, six were due to unrelated electronic equipment failures, one due a control room chiller mechanical issue, one due to a failed emergency diesel fuel oil pump, and one due to a personnel error causing a momentary loss of an electrical bus

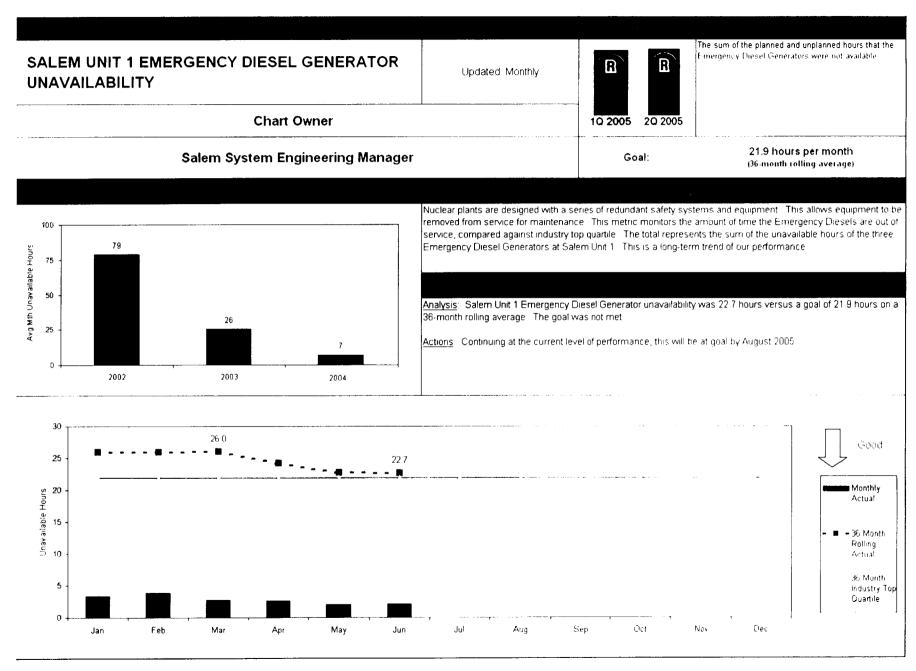
<u>Actions</u>. The significant flood door rework is due to complete by September, the inside containment leak has been resolved, the remaining nine issues have been addressed and do not represent repetitive equipment failures



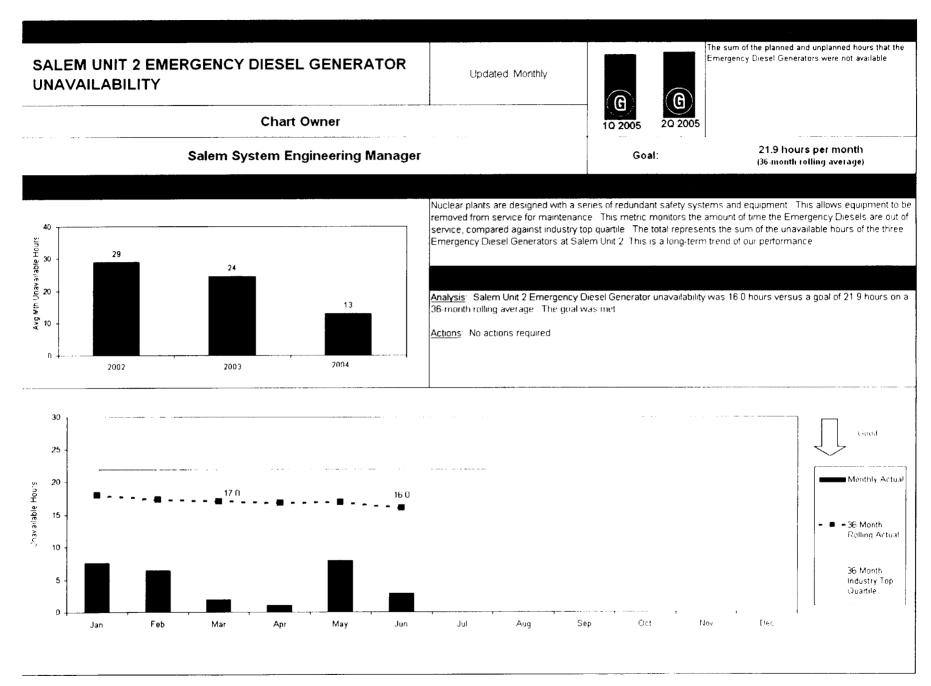




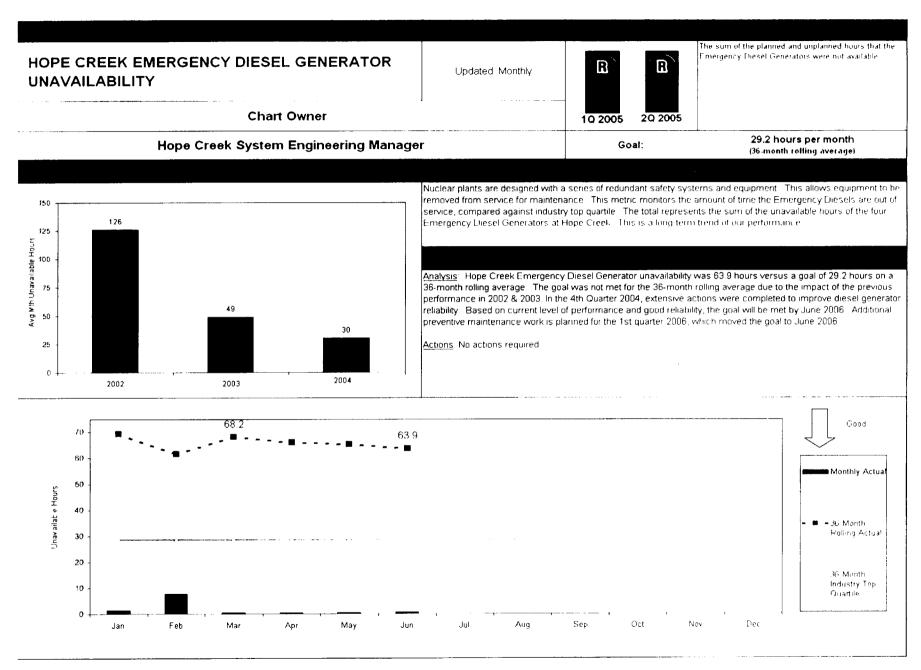




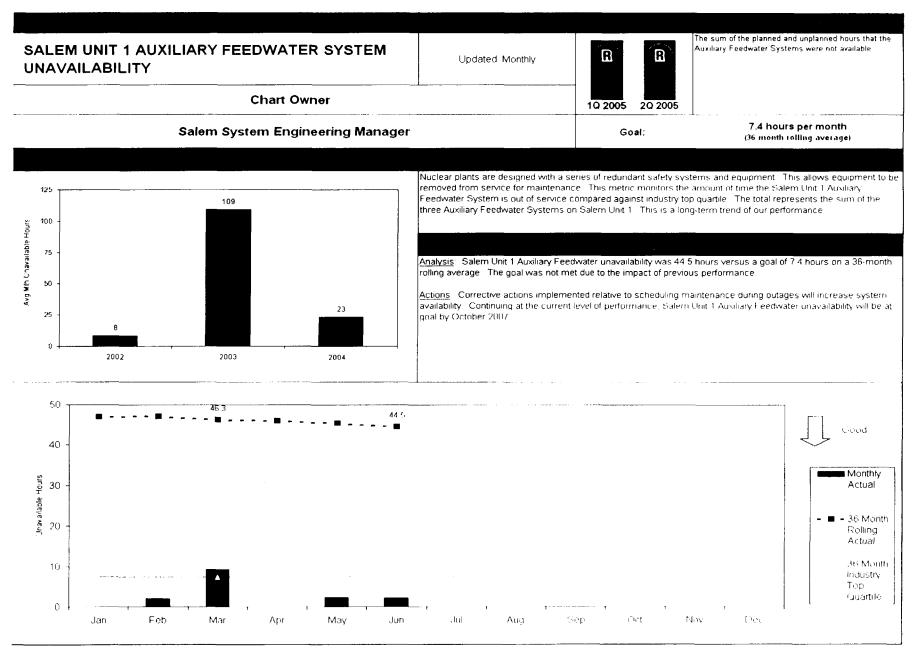
Salem Hope Creek



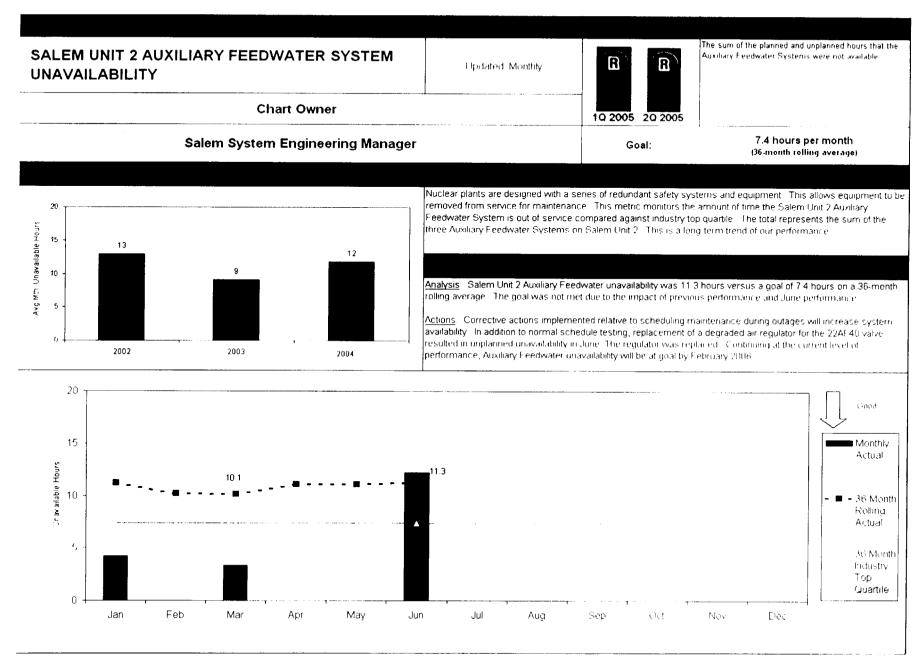




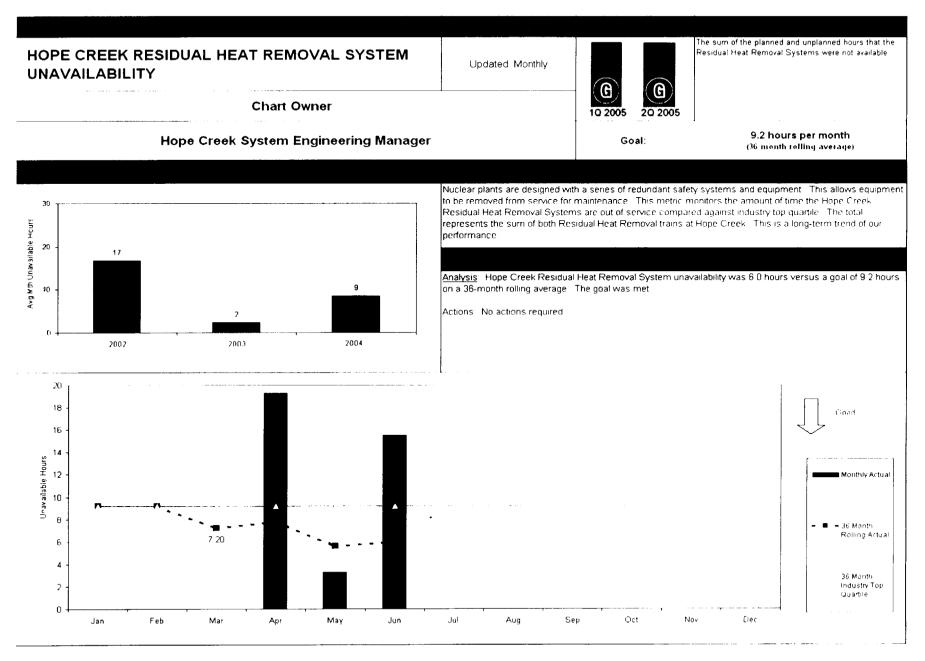












Salem Hope Creek

