

*Designated Original
Per Linda Marshall*



September 27, 2005
AET 05-0072

Mr. Jack R. Strosnider
Director, Office of Nuclear Material Safety and Safeguards
Attention: Document Control Desk
U.S. Nuclear Regulatory Commission
Washington, D.C. 20555-0001

**American Centrifuge Plant
Docket Number 70-7004
Submittal of Additional Information Related to the Nuclear Criticality Safety for the American
Centrifuge Plant (TAC Nos. L32306, L32307, and L320308) – Non-Proprietary and Export
Controlled Information**

**INFORMATION TRANSMITTED HEREWITH IS PROTECTED FROM
DISCLOSURE PURSUANT TO 10 CFR PART 810**

Dear Mr. Strosnider:

USEC Inc. (USEC) hereby submits to the U.S. Nuclear Regulatory Commission (NRC) additional information related to the Requests for Additional Information regarding Nuclear Criticality Safety (NCS) for the American Centrifuge Plant.

Enclosure 1 provides USEC's (Export Controlled Information) responses to the additional questions noted on an NRC conference call held on September 1. Enclosure 2 provides USEC's (Non-Proprietary) additional responses noted on an NRC conference call held on September 1 and additional follow-up from a meeting held on September 14 regarding NCS code validation. Enclosure 3 provides changed pages for the License Application. In addition to the changes noted in the enclosures, minor changes have been made to pages 5-13, 5-18, and 5-19 to provide additional clarifying information. Revision bars in the right hand margin depict changes from the previous version submitted to the NRC.

Enclosure 1 has been determined, in accordance with the guidance provided by the U.S. Department of Energy, to contain Export Controlled Information. This information must be protected from disclosure per the requirements of 10 CFR Part 810.

NMSSO 1

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If you have any questions regarding this matter, please contact Peter J. Miner at (301) 564-3470.

Sincerely,

S. A. Toelle 

Steven A. Toelle
Director, Nuclear Regulatory Affairs

cc: Y. Faraz, NRC HQ
B. Smith, NRC HQ
C. Tripp, NRC HQ

Enclosure: As Stated

Enclosure 2 to AET 05-0072

Submittal of Additional Responses Related to Nuclear Criticality Safety

(Non-Proprietary Information)

Enclosure 2 of AET 05-0072

Follow-up Responses from the Conference Call held on September 1, 2005

1. NC-10: The U.S. Nuclear Regulatory Commission (NRC) has requested additional information regarding the training for front line managers concerning their ability to recognize nuclear criticality safety (NCS) issues.

USEC Response

The training will be similar to the gaseous diffusion plant's (GDP) NCS for Managers training. In addition to demonstrating a basic knowledge of NCS concepts, the principles associated with the management of fissile material workers, and the oversight responsibilities of fissile material operations, NCS training for managers includes the following topics: 1) description of the plant's NCS policy; 2) explanation of the use of check lists, sign-off sheets, and documentation in the execution of procedures that are pertinent to criticality safety; 3) discussion of relevant procedures that pertain to criticality safety with emphasis given to criticality safety limits, controls, and emergency procedures; 4) description of the policy that relates to situations not covered by procedures and to situations in which the safety of the operation is in question; and 5) emphasizing the fact that employees are to be informed of their right to question any operation they believe may not be safe. Section 11.3.1.4 of the American Centrifuge Plant (ACP) license application has been revised to include the additional details discussed above.

2. NC-17: Section 5.4.2.1 of the license application (page 5-11) states "Controls are sometimes applied to a non-fissile material operation to ensure it does not inadvertently involve fissile material. These controls can be either engineered or administrative and may be incorporated into applicable operating procedures or work instructions at the discretion of the responsible line manager." USEC planned to change the "may" to "will," however, this change was not made.

USEC Response

Section 5.4.2.1 was previously changed by Revision 3 of the license application. Due to an administrative error, the "may" was not changed to "will." Section 5.4.2.1 of the license application has been revised and is being submitted under Enclosure 3 of this letter.

Additional Information Concerning NRC RAI NC-47 as Discussed on September 14, 2005

NC-47 Justify the use of a minimum margin of subcriticality of 0.02 for ACP operations. Show that this provides adequate assurance of subcriticality.

10 CFR 70.61(d) requires that processes be assured to be subcritical "including the use of an approved margin of subcriticality for safety." This information is required to ensure that a sufficient margin of subcriticality for safety will be used.

Revised USEC Response

This revised response supersedes that submitted to the NRC by USEC letter AET 05-0006, dated March 9, 2005.

Historically, 0.02 has been the margin of safety applied to the Paducah Gaseous Diffusion Plant, the Portsmouth Gaseous Diffusion Plant, and the Lead Cascade Demonstration Facility. The derivation of the Upper Safety Limit (USL) for reactivity calculations includes this arbitrary margin of subcriticality as an additional safety margin to account for potential unknown uncertainties in the validation method. The USL is the maximum allowed value for the reactivity of any system and only applies to upset conditions. In addition, Section 5.4.5.2 of the license application requires a validation document that shows a "95 percent confidence that 99.9 percent of future k_{eff} values" are less than the derived USL. This high confidence interval is more conservative than the industry standard of a 95 percent confidence that 95 percent of calculated values are less than the derived USL and is an additional conservatism applied at the ACP.

Uncertainties in the validation could stem from errors or uncertainties in the benchmark experiment descriptions, errors in the modeling of the benchmark experiments, or errors/uncertainties in the isotopic neutron cross sections used in the neutron transport calculations to determine system reactivity in the computer codes. None of these sources of error or uncertainty in the validation method is expected to be anywhere near the magnitude of 0.02 due to the inherent nature of performing validations. Any significant errors or uncertainties in the description of the benchmark experiments would result in a calculated reactivity very different from 1.00. Similarly, any significant errors in the modeling of the experiments would also result in a calculated reactivity very different from 1.00. Lastly, the neutron cross-section libraries have been developed over the last 50 years by the world's leading nuclear research facilities. The experiments and their models do not include any exotic materials of construction that have not already been validated many times throughout the world. There are dozens of facilities in the United States alone that use the cross section libraries to perform a variety of neutron transport calculations. Any significant deviation of the cross sections from reality would manifest itself in calculational results significantly different than experimental results. As a registered user of the reactivity code, any errors discovered in the cross section libraries would be quickly disseminated throughout the user community, which includes USEC.

Using engineering judgment, USEC concludes that calculated uncertainties in the reactivity calculation are small compared to 0.02. Modern computing platforms allow for the calculated uncertainty to be lower than 0.005 and even lower than 0.002 depending on the user parameters

selected within the code. With the calculated uncertainty at least a factor of four and up to a factor of ten (and possibly more) lower than the arbitrary margin of subcriticality, there is no potential for the calculated uncertainty in the reactivity code to jeopardize the margin of subcriticality.

The risk of an accidental criticality resulting from ACP operations is inherently low and there are layered conservatisms in the assumptions and analyses. Operations planned for the ACP do not include solutions of enriched uranium. Liquid UF_6 operations have been minimized through process design. Planned operations have accounted for UO_2F_2 solutions if determined to be a credible upset condition to ensure equipment geometries remain subcritical. Maintenance evolutions have been evaluated as involving moderated material as part of the normal case because it was not needed to show compliance with the double contingency principle, not because moderated material is considered a routine occurrence in the ACP. Because moderated uranium systems are not planned for the ACP, the likelihood of a criticality is very low.

Uranium in the centrifuge operations is inherently a very dry, unmoderated material. Even when accumulated in large UF_6 cylinders, cold traps vessels, or freezer/sublimator vessels, neither UF_6 nor UO_2F_2 can achieve criticality without moderation at the maximum 10 percent enrichment limit. Therefore, because virtually all the enriched uranium is stored, handled, and processed within airtight equipment, the inherent risk of a criticality is low and a 0.02 margin of subcriticality is adequate.

Enclosure 3 to AET 05-0072

Submittal of Changed Pages for the License Application for the American Centrifuge Plant

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License Application

for the American Centrifuge Plant

in Piketon, Ohio



Revision 8

Docket No. 70-7004

September 2005

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Date: 09/13/05

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LA-3605-0001

LICENSE APPLICATION
for the American Centrifuge Plant
in Piketon, Ohio

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UPDATED LIST OF EFFECTIVE PAGES

Revision 0 – 10 CFR 1045 review completed by L. Sparks on 07/29/04 and the Export Controlled Information review completed by R. Coriell on 07/30/04.

Revision 1 – 10 CFR 1045 review completed by L. Sparks on 03/04/05 and the Export Controlled Information review completed by R. Coriell on 03/10/05.

Revision 2 – 10 CFR 1045 review completed by J. Weidner on 04/29/05 and the Export Controlled Information review completed by R. Coriell on 04/29/05.

Revision 3 – 10 CFR 1045 review completed by J. Weidner on 05/23/05 and the Export Controlled Information review completed by R. Coriell on 05/23/05.

Revision 4 – 10 CFR 1045 review completed by R. Coriell on 06/16/05 and the Export Controlled Information review completed by D. Hupp on 06/16/05.

Revision 5 – 10 CFR 1045 review completed by J. Weidner on 06/21/05 and the Export Controlled Information review completed by D. Hupp on 06/21/05.

Revision 6 – 10 CFR 1045 review completed by J. Weidner on 08/30/05 and the Export Controlled Information review completed by D. Hupp on 08/30/05.

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Revision 8 – 10 CFR 1045 review completed by J. Weidner on 09/27/05 and the Export Controlled Information review completed by D. Hupp on 09/13/05.

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USEC maintains the ISA and ISA Summary so that it is accurate and up-to-date by means of a suitable configuration management system, described in Section 11.1 of this license application. ACP procedures specify the criteria for changing the ISA Summary. Changes to the ACP are evaluated against the ISA and ISA Summary using a change process that meets the requirements of 10 CFR 70.72. Changes to the ISA Summary are submitted to the NRC in accordance with 10 CFR 70.72(d)(1) and (3). The ISA accounts for any changes made to the ACP or its processes (e.g., changes to the site, operating procedures, or control systems). Any facility change, operational change, or change in the process safety information that may alter the parameters of an accident sequence is evaluated by means of the ISA methods. USEC evaluates proposed changes to the ACP or its operations by means of the ISA methods and designates new or additional IROFS, along with appropriate management measures, as necessary. USEC will periodically review IROFS per the requirements of 10 CFR 70.62(a)(3) to ensure their availability and reliability for use, and consistency with the ISA. As the final design is developed for the ACP, the management system and design approach will require that the final designs be reviewed against the ISA to ensure the ISA is bounding.

USEC also evaluates the adequacy of existing IROFS and associated management measures and makes any required changes prior to making changes to the ACP and/or its processes. If a proposed change results in a new type of accident sequence (e.g., different initiating event or significant changes in the consequences) or increases the consequences and/or likelihood of a previously analyzed accident sequence within the context of 10 CFR 70.61, USEC evaluates whether changes to existing or additional IROFS, or associated management measures are required. For any changes that require prior NRC approval under 10 CFR 70.72, USEC will submit an amendment request in accordance with 10 CFR 70.34 and 70.65.

The Engineering Manager is responsible for maintaining the ISA and ISA Summary (i.e., reviewing proposed changes, performing analyses, and ensuring implementation of required updates). The Regulatory Manager is responsible for submitting the required changes to the NRC and coordinating information requests from the NRC.

Suitably qualified personnel update and maintain the ISA and ISA Summary. The ISA team consists of at least one team leader who is formally trained and knowledgeable in the ACP's ISA methods and individuals with specific, detailed experience in the operation, hazards, and safety design criteria of the particular process being evaluated. Personnel with appropriate experience and expertise in engineering and process operations are utilized in the maintenance and updating of the ISA and ISA Summary. Written procedures are used to implement the ISA process and are maintained onsite. For any revisions to the ISA Summary, personnel having qualifications similar to those of ISA team members who conducted the original ISA are used.

3.1.2.1 Integrated Safety Analysis Methodology

The ISA analyzes the hazards associated with ACP operation, its associated direct support equipment and support systems, and the buildings and facilities where it is located. This analysis does not address hazards associated with sabotage, chemical hazards that do not result from the processing of licensed nuclear material or have the potential for adversely affecting radiological safety, or Standard Industrial Hazards as presented in Section 3.1.2.3.1.3.2 of this chapter.

3.1.2.2 Selection of Evaluation Method

The guidelines presented in Appendix A of NUREG-1513 (Reference 2) serve as a basis for selecting the Hazard Evaluation Method, using the methodology in the flowchart, Figure A.1 of NUREG-1513. The method was selected using WSMS evaluation techniques, experience, and judgment. Answering the questions at each decision branch led to a selection of the Preliminary Hazard Analysis (PHA) method or the What-If/Checklist (WI/CL) method of analysis. The specific questions at each branch were answered as follows:

- | | |
|---|---|
| -Is the Hazard Evaluation (HE) Study for regulatory purposes? | -Yes. |
| -Is a specific HE method required? | -No. |
| -Is this a recurrent review? | -No. |
| -What type of results are needed? | -A list of specific accident situations. |
| -Will these results be used in a QRA*? | -No. |
| -Is the process operating? Are procedures available? | -No. |
| -Is detailed design information available? | -No. |
| -Is basic process information available? | -Yes. Consider using WI (What If), PHA, or WI/CL. |

*QRA = Quantitative Risk Assessment

As a result, the ISA team selected a hybrid method that incorporated elements of both the WI/CL and PHA methods. The WI/CL method combines the broad spectrum of accidents that can be postulated by a brainstorming team of experts with the detailed and comprehensive structure provided by a systematic Hazard Identification and Event Category checklist. Additionally, the use of a tabular accident recording form borrowed from the PHA technique provides for the effective listing and presentation of accidents along with their causes, hazard category, risk assessment and potential preventive and mitigative controls.

3.1.2.3 Description of Selected Integrated Safety Analysis Method

The selected Hazard Analysis (HA) method for the ISA involves a combination of the PHA and WI/CL methods, as discussed above, which incorporates an unmitigated and mitigated approach. The method and approach has the advantage of providing a comprehensive and systematic process for addressing baseline facility and process hazards and potential accidents associated with those hazards, while the process and facility are still in the conceptual or preliminary design stages, thus helping to identify early in the design process those controls that are necessary to protect the public and workers.

The HA provides a systematic analysis of potential process-related, and external hazards including natural phenomena, that can affect the public and facility workers. The analysis considers the potential for both equipment failure and human error. In performing the HA, the ISA Team provides a thorough, predominantly qualitative evaluation of the spectrum of risks to the public, the workers, and the environment due to accidents involving the identified hazards. NUREG-1513 and NUREG-1520 (References 1 and 2) require that the hazard analysis comprehensively identify potential accidents and their causes, and estimate the frequency and

The minimum requirements for a qualified Senior NCS Engineer are:

- Completion of the minimum requirements for a qualified NCS Engineer;
- Performance of the functions of a qualified NCS Engineer;
- Completion of one year as a qualified NCS Engineer; and
- Approval by the NCS Manager (or equivalent).

The NCS Manager (or equivalent) may modify the minimum Senior NCS Engineer qualification requirements for personnel who have worked for a minimum of five years at other facilities as a nuclear criticality safety engineer.

5.3 Management Measures

5.3.1 Procedure Requirements

Operations to which NCS pertains are governed by written procedures or work packages. These procedures or work packages contain the appropriate NCS controls for processing, storing, and handling fissile material. The NCSE requirements that specify employee actions are incorporated into procedures or work packages as work instructions and are identified. Identifying these requirements ensures changes to these requirements are not made without review and approval by NCS. The NCSE requirements are incorporated into the appropriate procedures or work packages as required by the NCS Program procedure.

New and modified procedures or work packages are reviewed by the appropriate safety organizations, including NCS, as specified in the procedure for procedure control and/or work control process. NCS reviews the procedures and/or work instructions to verify that the appropriate NCSE requirements have been incorporated and to verify that the proposed operation complies with NCS Program requirements. Section 11.4 of this license application provides more details related to the procedure development and change process.

5.3.2 Posting and Labeling Requirements

Administrative NCS limits and controls for areas, equipment, and containers are presented through the use of postings and labels as specified in approved NCSEs and procedures. Postings and labels are proposed, reviewed, and approved during the NCSE review and approval process. Postings and/or labels are not required for engineered controls and may not be required for administrative controls when those limits and controls are included in "in-hand" operating procedures. These limits and controls are posted on

the NCS requirements signs as required by the plant NCS procedures. Approved NCSEs specify the wording for the postings. Labels are prepared in accordance with the plant NCS procedures and used as required by NCSEs. Limits and controls are printed or written in an appropriate size, and the postings and labels are placed in conspicuous locations such that they are legible to the operator at the work location, on the specific component, item, or piece of equipment, or posted at the entrance to an operating area or storage area. The specific locations may be specified in the applicable NCSE or determined by the supervision responsible for the material.

5.3.3 Change Control

A configuration management (CM) program ensures that any change from an approved baseline configuration is managed so as to preclude inadvertent degradation of safety or safeguards. The CM Program, described in Section 11.1 of this license application, includes organization and administrative processes to ensure accurate, current design documentation that matches the plant's physical configuration. NCS controls that are IROFS are controlled as QL-2 items and NCS controls that are not IROFS are controlled as QL-3 items. The CM program applies to NCS and a change control process is utilized that helps ensure that the requirements of 10 CFR 70.72 are met, including the ISA Summary update requirements contained in 10 CFR 70.72(d)(3).

Functional and physical characteristics of operations controlled for NCS are described in NCSEs and the ISA. When those characteristics are required to maintain IROFS, the management measures described in the CM program associated with the QL-2 classification are applied. When those functional and physical characteristics are required to maintain double contingency, but are not IROFS, the management measures in the CM program associated with the QL-3 classification are applied. Non-IROFS double contingency controls will be handled as QL-3B items. QL-3B is a quality grouping for structures, systems, and components required to fulfill the functions and meet the requirements established by the license application.

Components and features that are identified in the NCSEs or the ISA are analyzed to determine the "boundary" of the system, encompassing those interconnecting and/or supporting items that are essential to ensure availability and reliability. The boundaries are identified on system drawings, and the configuration is verified to be as-built. These components and features are maintained in a design control document for the building or process. Each time a change is planned, the document is reviewed by the individual (e.g., design authority, systems engineer, operations manager, maintenance, etc.) planning the change to determine if the change affects an IROFS or double contingency control. The NCS Program establishes and maintains NCS safety limits and NCS operating limits for IROFS and double contingency controls in nuclear processes and maintains adequate management measures to ensure the availability and reliability of the IROFS and the double contingency controls.

The change control process specifies the organizations required to perform reviews of changes. If an item is relied on for the criticality safety of an operation (i.e., is an IROFS or a double contingency control), it will be identified and NCS reviews the NCSE for the specific operation and determines if the change affects the analysis performed and the conclusions made in the NCSE. The change request will be approved by NCS only if the change does not adversely impact NCS, or once a revised NCSE has determined that the change is acceptable and meets NCS Program requirements. If a change affects the ISA Summary, it is updated appropriately. In this way, modifications to controlled operations are evaluated and approved prior to implementation and placing the affected

structures, systems, or components in service.

Records management and document control (RMDC) is another element of CM and is described in Section 11.7 of this license application. Procedures, documents, and records control programs provide for centralized control and issuance of documents essential to the maintenance of the design history, and a repository for records to verify this maintenance. NCSEs are specifically included in the index of documents that are required to be controlled.

5.3.4 Operation Surveillance and Assessment

To ensure that the NCS Program is properly established and implemented, walk-throughs, assessments, and audits are utilized.

Operating SNM process areas are reviewed on a regular basis through a combination of walk-throughs and reviews by work crew supervision. NCS walk-throughs of facilities that may contain fissile material operations are performed by NCS personnel to determine the adequacy of implementation of NCS requirements and to verify that conditions have not been altered to adversely affect NCS. These walk-throughs are performed as specified by the NCS procedure on walk-throughs. For example, a walk-through inspection can be performed in response to trend data, at the request of the operations personnel, or due to concerns raised by employees or NCS personnel. As a minimum, specific fissile material operating areas are assessed by NCS personnel via walk-through at least annually, sometimes in conjunction with the assessments discussed below. By distributing the various areas' walk-throughs over a year's time, NCS personnel are performing a field walk-through on approximately a monthly basis.

Work crew supervision provides real-time assessments of fissile material operations within their operating area to ensure NCS requirements are being adequately implemented and operating conditions have not been altered to adversely affect NCS. Fissile material operations management also performs an annual self-assessment to ensure NCS program requirements are being met in the field.

In addition to the annual self-assessments, independent internal audits of the NCS Program are conducted or coordinated by the Quality Assurance Manager as described in Section 11.5 of this license application. The purpose of these audits is to determine the adequacy of the overall NCS Program. This includes the adequacy of the NCSEs, internal assessment programs, and implementation of the NCS requirements.

The results of these walk-throughs, assessments, and audits are documented and reported to appropriate management.

If a condition is identified that is non-compliant with NCS program requirements, field personnel are to report the condition as directed by plant procedures. If the condition is not covered by an existing procedure, consultation with a qualified NCS engineer is required before taking any corrective action. Immediate corrective actions may be provided by the responding NCS engineer verbally or in writing. NCS emergency response is discussed in Section 5.4.2 below.

Managers in charge of fissile material operations are provided additional training on NCS and response to NCS deficiencies as described in Section 11.3.1.4 of this license application. NCS deficiencies are reported in accordance with the requirements contained in 10 CFR Part 70, Appendix A or other appropriate reporting requirements. Incident reporting and investigation is described in Section 11.6 of this license application. The deficiency data is trended to monitor and prevent future violations. Corrective actions are taken for adverse trends in accordance with the Quality Assurance Program Description for the American Centrifuge Plant and the Corrective Action Program as described in Section 11.6.7 of this license application, and records of actions taken are retained in accordance with RMDC requirements described in Section 11.7 of this license application.

5.4 Methodologies and Technical Practices

5.4.1 Adherence to American National Standards Institute/American Nuclear Society Standards

The NCS Program has been developed to comply with the American National Standards Institute (ANSI)/American Nuclear Society (ANS) ANSI/ANS-8.1-1998, ANSI/ANS-8.19-1996, and ANSI/ANS-8.21-1995 standards as discussed in this section.

5.4.2 Process Evaluation and Approval

Each operation involving uranium enriched to 1 wt. percent or higher ^{235}U and 100 g or more of ^{235}U is evaluated for NCS prior to initiation. The evaluation describes the scope of the operation, evaluates credible criticality accident contingencies, and establishes NCS requirements to maintain the operation subcritical. The evaluation process is governed by written procedures.

When an NCSE (or a change to an existing NCSE) is needed for a particular fissile material operation, a request is submitted to the NCS group to evaluate the proposed operation. Other methods for initiating an NCS change include, but are not limited to: 1) the engineering change process, and 2) the corrective actions process, self-assessments, and external audits and inspections.

In response to the request, an NCS evaluation may be performed or the request may be returned due to inadequate detail, the change is bounded by a current analysis, or the operation does not involve uranium enriched to 1 wt. percent or higher ^{235}U and with mass of 100 g or more ^{235}U (see Section 5.4.2.1). If necessary, a NCSE is prepared (or an existing NCSE is revised) to document the analyses performed as specified in the NCS evaluation procedure. A hazard identification process (e.g., a "What-If" analysis) is used to identify and document potential upset conditions, or contingencies, presenting NCS concerns. Engineering judgment of the qualified NCS engineer may indicate the need for a more detailed study. For example, a hazards and operability study may be used if the operation is complex and involves multiple interacting systems that require substantial input from operations, maintenance, and other subject matter experts to identify the possible upset conditions. A contingency analysis is performed in which the subcriticality of a process, given the occurrence of the contingency, is assessed. This analysis demonstrates the double contingency principle for the proposed operation.

The double contingency principle as stated in ANSI/ANS-8.1-1998, Section 4.2.2, is: "Process designs should incorporate sufficient factors of safety to require at least two unlikely, independent, and concurrent changes in process conditions before a criticality accident is possible." The ACP NCS Program meets the double contingency principle by implementing at least one control on each of two different parameters or implementing at least two controls on one parameter. Controls include passive engineered barriers (e.g., structures, vessels, piping, etc.); active engineered features (e.g., valves, thermocouples, flow meters, etc.); reliance on the natural or credible course of events (e.g., relying on the nature of a process to keep the density of uranyl fluoride less than a specified fraction of theoretical); and administrative controls that require performance of human actions in accordance with approved procedures or work instructions, or by other means that limit parameters within specified values. If two controls are implemented for one parameter, the violations or failure scenarios addressed by the controls will be independent. Application of this principle ensures that no single credible event can result in an accidental criticality or that the occurrence of events necessary to result in a criticality is not credible.

The NCSE will document the basis for the conclusion that a change in a process or parameter is "unlikely". The basis may be an engineered feature, administrative control, the natural or credible course of events, or any combination of these or other means necessary to ensure the change is unlikely to occur. The parameters or conditions relied on and the limits must be specified in the NCSE and controlled.

Where the natural or credible course of events is relied upon in whole or in part to prevent a process condition change, the factors that influence the process are described in sufficient detail in the NCSE as items related to NCS and programmatically controlled. For items that are established, maintained, and implemented by non-NCS programs, credit for availability and reliability is established as described in Section 11.1 of this license application without the need for additional NCS controls. For situations where the NCS-credited controls do not provide adequate assurance of availability or reliability (i.e., situations where non-NCS programmatic and physical plant changes could adversely affect the intended criticality safety function of the items relied upon for criticality safety), specific NCS controls are established, maintained, and implemented to ensure criticality safety.

The NCS evaluation process involves a review of the proposed operation and procedures or work instructions, discussions with the subject matter experts to determine the credible process upsets which need to be considered, development of the controls necessary to meet the double contingency principle, and identification of the assumptions and equipment (i.e., physical controls) needed to ensure criticality safety.

Engineering judgment of both the analyst and the technical reviewer is used to ascertain independence of events and their likelihood or credibility. The basis for this judgment is documented in the NCSEs. Depending on the complexity of the operation, analytical methods such as Fault Tree and Event Tree Analyses may be used in the evaluation process to examine potential accident scenarios. When needed to support the analytical method, qualitative or quantitative estimates of event frequency are developed to support the determination of the likelihood of an event.

Once the NCSE is completed, a technical review of the evaluation is performed and documented. The technical review of an NCS evaluation is performed by a Senior NCS Engineer or is a NCS Engineer completing the technical review under the guidance of a Senior NCS Engineer.

The NCSE documents the NCS requirements for the operation. The NCS requirements include the process conditions that must be maintained to meet the double contingency principle or preserve the documented basis for criticality safety and restrict the modes of operation to those that have been analyzed in the NCSE. The requirements to be included in operating procedures and/or work instructions, and postings are identified.

The NCSE approval process first involves the acceptance of the NCSE by the technical reviewer. A review is then performed by the NCS Manager to ensure consistency with other NCSEs and other potentially conflicting requirements or regulations. After approval by the NCS Manager, a review is performed in accordance with 10 CFR 70.72 as described in Section 11.1.4 of this license application to determine whether prior NRC approval of the NCSE is required. If NRC approval is not required, the NCSE is reviewed by the responsible organization manager. Editorial changes require only the approval of the NCS Manager. Editorial changes are defined as changes that do not change the technical basis of the NCSE. Once approved, the NCS controls, limits, evaluation assumptions, and safety items are verified to be fully implemented in the field. The operations organization and NCS personnel perform this verification process. The documentation of this verification process is maintained as a quality record along with the NCSE.

Management of the operating organization is responsible for implementing, through training and procedures or work instructions, the conditions delineated in the NCSE. Operational aids such as postings, labels, boundaries for fissile material operations, and fissile material movement guidelines are provided as specified in the NCSE. The manager/supervisor ensures postings and labels are prepared and verify that they are properly installed as required by the NCSE. The procedures and/or work instructions are prepared or modified to incorporate the NCSE requirements. Managers/supervisors are responsible for ensuring the employees understand the procedures and/or work instructions and understand the NCS requirements before the work begins.

Each completed NCSE is issued as a controlled document. Completed NCSEs are archived and retrievable as permanent quality records in accordance with the RMDC requirements described in Section 11.7 of this license application. The NCSE process provides assurance that operations will remain subcritical under both normal and credible abnormal conditions.

Emergencies arising from unforeseen circumstances can present the need for immediate action. If NCS expertise or guidance is needed immediately to avert the potential for a criticality accident, direction will be provided orally or in writing. Such direction can include a stop work order or other appropriate instructions. Documentation will be prepared within 48 hours after the emergency condition has been stabilized.

New operations must comply with the double contingency principle.

5.4.2.1 Non-Fissile Material Operations

Some operations involve situations in which the uranium has an enrichment of less than 1 wt. percent ^{235}U or an inventory of less than 100 g ^{235}U . These operations are termed "non-fissile material operations" and are performed without the need for NCS double contingency controls. The determination of which operations are fissile versus which operations are non-fissile may be contained within a NCSE or as a separate document. When the determination is outside a NCSE, the determination need not be performed by a qualified NCS Engineer. The determination of an operation being non-fissile must include normal and credible abnormal upset conditions to ensure the enrichment and/or inventory are maintained below 1 wt. percent ^{235}U or below 100 g ^{235}U . Controls are sometimes applied to a non-fissile material operation to ensure it does not inadvertently involve fissile material. These controls can be either engineered or administrative and will be incorporated into applicable operating procedures or work instructions when it is determined they are needed to maintain the non-fissile material operation below either 100 g ^{235}U or 1 wt. percent ^{235}U . This determination is made by the responsible line manager.

5.4.3 Design Philosophy and Review

Through the CM Program, designs of new fissile material equipment and processes must be approved by NCS before implementation. Where practical, the use of engineered controls on mass, geometry, moderation, volume, concentration, interaction, or neutron absorption will be used as the preferred approach over the use of administrative controls. Advantage will be taken of the nuclear and physical characteristics of process equipment and materials, provided control is exercised to maintain them if they may credibly degrade such that control of the parameter is jeopardized.

The preferred design approach includes two goals. The first is to design equipment such that NCS is independent of the amount of internal moderation or fissile concentrations, the degree of interspersed moderation between units, or the thickness of reflectors. The second is to minimize the possibility of accumulating fissile material in inaccessible locations and, where practical, to use favorable geometry for those inaccessible locations. The adherence to this approach is determined during the preparation and technical review of the NCSE performed to support the equipment design. This preferred design approach is implemented as described in NCS procedures.

Fissile material equipment designs and modifications are reviewed to ensure that engineered controls are used for NCS to the extent practical. Administrative limits and controls will be implemented to satisfy the double contingency principle for those cases where the preferred design approach is not practical.

5.4.4 Criticality Accident Alarm System Coverage

A criticality accident alarm system (CAAS) that complies with 10 CFR 70.24 and ANS/ANSI-8.3-1997 is provided to alert personnel if a criticality accident occurs. The system utilizes an audible and/or visual signal to alert personnel in the area to evacuate to reduce radiation exposure resulting from the incident.

The need for CAAS coverage is considered during the development process for NCS evaluations. In general, coverage is provided for fissile material operations, except the UF₆ cylinder storage yards as specified in Section 1.2.5 of this license application. Other exceptions to CAAS coverage are documented in NCS evaluations and are based on a conclusion in the NCSE that a criticality accident is non-credible in the area where the fissile material operation is ongoing. Conclusions of non-credibility require at a minimum that the inventory of ²³⁵U in the area is less than 700 g, less than 50 g per square meter, or less than 5 g in any 10 liter volume and that it is non-credible for these values to be exceeded (See Section 1.2.5 for a description of the exemption to the requirements of 10 CFR 70.24). In addition, CAAS is not required for areas having material that is either packaged or stored in accordance with 10 CFR Part 71 or specifically exempt according to 10 CFR 71.53. Areas that do not contain fissile material operations do not require a NCSE and do not require CAAS coverage.

The CAAS is designed to detect neutron radiation levels that would result from the minimum criticality accident of concern as defined by ANSI/ANS 8.3-1997 and to provide an audible evacuation alarm. A secondary function is to activate the building radiation warning lights and alarms at the X-3012 Process Support Building Area Control Room (ACR) and the X-1020 Emergency Operations Center.

For each area requiring CAAS coverage, a monitoring system is installed that provides coverage of the area by at least two independent detection units, each with the ability to actuate the alarm. This arrangement allows for one detection unit to be temporarily out of service with fissile operations continuing under the coverage of the other detection unit. A detection unit is a set of at least three neutron sensitive radiation detectors that may be co-located or may be distributed over the area. The detection logic of the system requires that two of the three neutron detectors must be activated to initiate the building evacuation alarm system. Each detector may be logically part of more than one detection unit.

The building evacuation alarm system includes interior evacuation horns and exterior radiation warning lights to deter personnel from re-entering the building after an evacuation. In addition, facilities within 200 feet of a building/facility requiring CAAS coverage have radiation evacuation horns installed inside and radiation warning lights installed on the exterior. Personnel who have routine access to these facilities have been trained to recognize and respond to these indications as described in Section 11.3.1.1.2 of this license application.

To protect against the loss of coverage, the CAAS includes redundant decision logic, a backup power supply, detector status information and system self-diagnostic information are provided to the X-3012 building ACR and X-1020 building. The CAAS has been designed to survive and/or withstand credible abnormal events as described in the accident analysis for a sufficient time to warn personnel to evacuate. In the event CAAS coverage is lost for an operation, plant procedures provide for compensatory actions, which may include shutdown of equipment, limiting access, halting movement of uranium-bearing material, or other actions.

Additional information provided by the CAAS includes a historical log of events and the capability to monitor and record the criticality accident for managing the post-accident situation and any remedial action. Nuclear accident planning and response is discussed in Section 2.2.4 of the Emergency Plan for the American Centrifuge Plant.

5.4.4.1 Portable CAAS

In the event a fissile material operation requiring CAAS coverage is performed beyond the detection range of established CAAS instrumentation, a portable unit may be used. The portable unit has the same detection capabilities as the permanently installed units, although those capabilities may be based on gamma radiation. Alarm annunciation, however, is usually limited to the immediate area within the audible range of the unit's alarm with an additional telemetric link to the X-3012 ACR and X-1020. This link will transmit the location of the unit, if mobile, and allow the use of the plant PA system to warn personnel within 200 feet of the area of the portable unit to evacuate. A portable unit may only be used on a temporary basis and it may be located indoors, outdoors, or on a vehicle.

5.4.5 Technical Practices

5.4.5.1 Application of Parameters

Moderation

Water is considered to be the most efficient moderator commonly found in the ACP. When moderation is not controlled either optimum moderation or worst credible moderation is assumed as the normal case when performing analyses. When moderation is controlled, credible abnormal process upset conditions determine the worst-case moderated conditions. Generally, moderation control is not maintained by measurement; however, when used, dual independent sampling methods are implemented.

Moderation control is applied to plant equipment containing UF_6 . In areas where greater than the safe mass of uranium (as defined below) is handled, processed, or stored and moderation controls are applied, that facility's pre-fire plan (reference Section 7.1.4 of this license application) includes any unique firefighting strategy or tactics that may be needed to limit the use of moderator material. However, even in these areas, the application of the double contingency principle ensures the worst credible loss of moderation control cannot result in a critical configuration without an additional independent and concurrent upset event.

The centrifuge process equipment is comprised of a variety of closed systems designed to process gaseous UF_6 . This closed system prevents the introduction of moderation due to wet air in-leakage. Also, because UF_6 reacts chemically with moisture (a moderator) to produce solid uranium-bearing compounds that impedes the proper operation of the process equipment, the UF_6 bearing systems are designed to minimize introduction of moisture.

Volume

Volume limits are used as specified in NCSEs. The bases for volume limits are provided in each NCSE prepared for those operations requiring containers. Specific details of these bases can be obtained by referring to the applicable NCSE. When volume control is used, the size of the containers is ensured through the CM Program and/or by procedurally requiring the use of certain containers for fissile material operations.

Interaction

Interaction is controlled by spacing items bearing fissile material when those items could result in a criticality accident if not properly spaced. The spacing necessary to maintain a safe array of fissile material units is determined in the NCSE performed for the array. The amount of spacing needed between items is determined based on analysis of the normal and credible abnormal process upset conditions for the particular operation. The basis for the spacing is documented in NCSEs. In accordance with the preferred design approach, described in Section 5.4.3 of this chapter, passive engineered controls are used to the extent possible to ensure spacing requirements are maintained. When used, the structural integrity of the spacers or racks is sufficient to maintain spacing for normal and credible abnormal upset conditions.

Geometry

Geometry control is applied by limiting equipment dimensions for those systems that depend on the geometry for criticality safety. The geometry is determined in the NCSE that is performed for each system and depends on the normal and credible abnormal process upsets conditions related to the specific system. Geometry controls are specified in the NCSEs, are maintained by the CM Program, and are verified prior to authorizing initial operation. Safe geometry dimensions may be obtained from established standards or operation specific reactivity calculations.

Mass

Mass controls are applied on a case-by-case basis depending on the fissile material operation involved. The acceptable mass is determined based on the specific NCSE performed for the operation. The safe mass value depends on many factors including the geometry, the ^{235}U enrichment, composition, etc. Safe mass values may be obtained from established standards or operation specific reactivity calculations. Experimental data is not used as the sole source for safe mass values. Safe mass values are chosen to ensure no single credible upset can result in a critical configuration. When safe mass values are dependent on the geometry, enrichment, composition, or some other parameter, the combination of mass and the other parameter is used as one control to meet the double contingency principle. The safe mass values are communicated to the operating personnel via the operating procedures and/or work packages.

Unless specifically controlled, an item containing enriched uranium is assumed to contain the most ^{235}U credible based on the available volume. When mass is determined through measurement, instrumentation is used.

Enrichment

Uranium-containing material in the ACP with ^{235}U enrichment less than 1 wt. percent is considered incapable of supporting a nuclear chain reaction, but interaction of such materials with materials of higher enrichment is taken into consideration in the specific NCSE for those operations which involve material enriched to greater than 1 wt. percent.

The maximum ^{235}U enrichment of UF_6 in the ACP is 10 wt. percent. Small quantities of greater than 10 wt. percent ^{235}U may be present outside of plant equipment in the form of laboratory samples or standards. Some buildings on the reservation may be used to process and/or store fissile material from both the ACP and Portsmouth Gaseous Diffusion Plant (GDP). Although the GDP has historically processed material at greater than 10 wt. percent ^{235}U , this material is no longer readily available to interact with ACP operations. However, for conservatism, some operations in these common buildings may be analyzed at greater than 10 wt. percent ^{235}U enrichment.

The maximum ^{235}U enrichment for each operation is established by the specific NCSE. The NCSE specifies the maximum acceptable enrichment for each operation. Credible process upset conditions that could alter the ^{235}U enrichment are also considered in the NCSEs. Due to the difficulty in obtaining reliable, real-time enrichment measurements that are both accurate and precise enough to use as a NCS control, enrichment is assumed to be the maximum credible for each operation. When the enrichment of uranium needs to be measured for a NCS control, the measurement is obtained using either installed equipment or based on samples analyzed in a laboratory.

Density

The density of materials used in a given operation is justified in the NCSE for the operation being considered. If the density must be controlled to maintain compliance with the double contingency principle, it will be documented in the specific NCSE for the operation and it will be measured using instrumentation.

UF_6 in the gaseous phase, at any credible pressures and temperatures existing in the plant equipment, is incapable of supporting a nuclear chain reaction even when intermixed with hydrogenous material (e.g., hydrogen fluoride [HF]). UF_6 in the gaseous phase in plant equipment has low material density.

Heterogeneity

Heterogeneous configurations are considered for those operations that involve small fissile material and moderator regions. Heterogeneous groupings may occur for the handling of small sample containers; however, 10 wt. percent ^{235}U is assumed for samples handled on a safe mass basis. Using the homogeneous safe mass of 10 wt. percent ^{235}U is also safe for heterogeneous 10 wt. percent ^{235}U because, at this enrichment, the homogeneous and heterogeneous minimum critical masses are close in value.

Concentration

Concentration controls are used on a case-by-case basis. When the criticality safety of an operation depends on the concentration of fissile material, the medium is sampled twice, the samples are verified to be properly taken by a second individual, and the two samples are independently analyzed as required by the specific NCSE for the operation involved. The specific controls and details are documented in the NCSE for each operation that relies on concentration controls. No operations exist at the plant where concentration control is applied to an operation involving more than a safe mass of uranium. A container with concentration controlled solution is kept normally closed. Precipitating agents, including freezing, are controlled as necessary to ensure they do not inadvertently increase the concentration.

A typical operating limit is 5 g ^{235}U per liter, regardless of enrichment. A concentration of 11.6 g ^{235}U per liter is considered subcritical at any enrichment, as recognized by ANSI/ANS-8.1. If, under all postulated conditions, the concentration is always less than 11.6 g ^{235}U per liter, the operation is considered subcritical.

Reflection

Normal and credible abnormal reflection is considered when performing NCS evaluations. The possibility of full water reflection is considered when performing analyses. It is recognized that concrete can be a more efficient reflector than water, and its potential presence is considered. Reflection controls are used to limit the potential reactivity of a fissile material operation.

Neutron Absorption

When neutron absorbers are used as NCS controls, the intended distributions and concentrations under both normal and credible abnormal conditions are maintained in accordance with the requirements of the applicable NCSE and ANSI/ANS-8.21-1995. These requirements are: representative sampling of the neutron absorber, sampling at a frequency based on the environment to which the neutron absorber is exposed, analyzing of samples for all material attributes for which credit is taken in the NCSE, and periodic inspections of fixed neutron absorbers to ensure adequate distribution as specified in the NCSE.

A NCS evaluation can take credit for the neutron absorption properties of the materials (1) added specifically for the purpose of absorbing neutrons, and (2) of construction, provided an allowance has been made for manufacturing and dimensional tolerances, corrosion, chemical reactions, neutron spectra, and uncertainties in the neutron cross-sections.

5.4.5.2 Methods of Calculation

Experimental Data

Experimental data are not specific enough to allow evaluation of operations performed in the ACP. The generic nature of the experimental data does not address the variables present in the different operations. However, experimental data are used for validation of the computer code (e.g., KENO V.a) used to perform the calculations needed to support the development of NCSEs. The experimental data used are discussed in the code validation report (Reference 11).

Handbooks

Handbooks are also used in some cases when simple systems are being evaluated. Most of the operations performed in the ACP are too complicated to be adequately addressed by data in a handbook. When isolated operations are performed with small amounts of fissile material, referencing handbooks is useful to support conclusions in the NCSE. Examples of the handbooks used include, but are not limited to, ARH-600, *Criticality Handbook* and LA-10860-MS, *Critical Dimensions of Systems Containing ^{235}U , ^{239}Pu , and ^{233}U .*

Hand Calculations

Applicable methods for evaluating single units include Modified Two Group Diffusion Equation (i.e., Critical Equation), Buckling Conversion, and Comparative Analysis.

- **Modified Two Group Diffusion Equation** – This method is applicable to, and most widely used for, solution systems.
- **Buckling Conversion** – The method of buckling conversion or shape conversion is applicable to all materials.
- **Comparative Analysis** – This method involves direct comparison of the system configurations to subcritical data from NCS handbooks.

Applicable methods for evaluating arrays include the Solid Angle Method and the Surface Density Method using unit shape factor.

- **Solid Angle Method** – This method is applicable to solution systems. It is not useful if reflection is more effective than a thick water reflector located at the array boundary. The conditions that must be satisfied in order to successfully apply the solid angle method are (1) $k_{\text{effective}}$ (k_{eff}) of any unreflected unit does not exceed 0.80; (2) each unit is subcritical when completely reflected by water; (3) the minimum surface-to-surface separation between units is 0.3 meters; and (4) the allowed solid angle does not exceed 6 steradians.
- **Surface Density Method using unit shape factor** – This method can be used as an approximation for large arrays of identical units containing solutions and metals. This method determines the spacing and mass of units independent of the number of units. An important feature of the Surface Density Method is that it is equally applicable to more irregular geometries.

When hand calculations are used, the specific methodology employed will be as described in "Nuclear Criticality Safety" by R.A. Kneif, American Nuclear Society, 1991 and subject to a total system reactivity of 0.95 for all credible off normal events.

Computer Calculations

For those cases where adequate references are not available, NCS computational analyses are performed, which involve the calculation of k_{eff} to determine whether the system will be subcritical under both normal and credible abnormal process conditions. Computer codes that simulate the behavior of neutrons in a process system or that solve the Boltzmann transport equation are used.

Computer calculations of k_{eff} provide a method to relate analytical models of specific system configurations to experimental data derived from critical experiments. A critical experiment is defined as a system that is intentionally constructed to achieve a self-sustaining neutron chain reaction or criticality. Critical experiments that have specific, well-defined parametric values and are adequately documented are termed benchmark experiments. Computer codes are validated using experimental data from benchmark experiments that, ideally, have geometries and material compositions similar to the systems being modeled.

Validation of the computer code determines its calculational bias or uncertainty as well as the effective margin of subcriticality. The validation involves the modeling of benchmark critical experiments over a range of applicability. Because the k_{eff} value of a critical experiment is essentially 1, the bias of the code is taken to be the deviation of the calculated values of k_{eff} from unity. Statistical analysis is employed to estimate the calculational bias, which includes the uncertainty in the bias and uncertainties due to extensions of the area of applicability, as well as the effective margin of subcriticality. Uncertainty in the bias is a measure of both the precision of the calculations and the accuracy of the experimental data. The validation of the computer code specifically defines the maximum acceptable k_{eff} used to determine subcriticality.

The margin of subcriticality used for the plant results in a k_{eff} upper safety limit that ensures that there is a 95 percent confidence that 99.9 percent of future k_{eff} values less than this limit will be subcritical. The minimum margin of subcriticality of 0.02 in k_{eff} is used to establish the acceptance criteria (i.e., upper safety limit) for criticality calculations. The upper safety limit varies with the computer system, codes, cross sections, and materials used in the validation.

The calculation of k_{eff} is accomplished by the use of computer codes that utilize Monte Carlo techniques to determine k_{eff} of a system. Computer models representing the geometrical configuration and material compositions of the system are developed for use within the code. The development of appropriate models must account for or conservatively bound both normal and credible abnormal process conditions.

When NCS is based on computer code calculations of k_{eff} , controls and limits are established to ensure that the maximum k_{eff} complies with the applicable code validation for the type of system being evaluated. For example, NCS related IROFS developed during initial license application were developed using reactivity calculations performed on personal computers running the Microsoft Windows XP operating system and validated as described in Reference 11. Generally, these calculations were performed with an upper safety limit of 0.955; however, specific cases may use a higher or lower limit based on equations from Table 14 of Reference 11. Reactivity calculations, performed after initial license application, comply with the code validation for the specific system used to perform the calculation.

Scoping and analysis calculations may be performed utilizing various unvalidated computer codes; however, computer calculations of k_{eff} used as the basis for NCS evaluations are confirmed by, or performed using, configuration-controlled codes and cross-section libraries for which documented validations are performed with at least the same degree of conservatism as that presented in the validation report WSMS-CRT-03-0093, Revision 0, November 2003, and are in accordance with ANSI/ANS-8.1-1998.

The computer codes and cross sections used in performing k_{eff} calculations are maintained in accordance with a configuration control plan. Quarterly, or prior to use, one of the following is performed: a bit-by-bit comparison of the production version of the software (executable modules and data libraries) versus an archived production version; or a comparison of the output from all validation cases versus archived output of all validation cases from the original validation performed when the production version was installed to ensure no changes in the calculated k_{eff} for the validation cases. Changes to the hardware or software are evaluated in accordance with 10 CFR 70.72 change requirements. The System Administrator, a NCS engineer, is responsible for controlling access to the software.

5.5 References

1. ANSI/ANS-8.1-1998, *Nuclear Criticality Safety in Operations with Fissionable Materials Outside Reactors*
2. ANSI/ANS-8.3-1997, *Criticality Accident Alarm System*
3. ANSI/ANS-8.19-1996, *Administrative Practices for Nuclear Criticality Safety*
4. ANSI/ANS-8.21-1995, *Use of Fixed Neutron Absorbers in Nuclear Facilities Outside Reactors*
5. ARH-600, *Criticality Handbook*, Volumes I, II, and III, Atlantic Richfield Hanford Co. report (1968)
6. LA-3605-0003, *Integrated Safety Analysis Summary for the American Centrifuge Plant*
7. LA-10860-MS, *Criticality Dimensions of Systems Containing ^{235}U , ^{239}Pu , and ^{233}U* , 1986 Revision
8. NRC Regulatory Guide 3.71, Revision 0, *Nuclear Criticality Safety Standards for Fuels and Material Facilities*
9. NUREG-1513, *Integrated Safety Analysis Guidance Document*
10. NUREG-1520, *Standard Review Plan for the Review of a License Application for a Fuel Cycle Facility*
11. WSMS-CRT-03-0093, United States Enrichment Corporation (USEC) PC-SCALE 4.4a Validation (U), Revision 1, April 2005

11.0 MANAGEMENT MEASURES

Management measures are functions that are applied to items relied on for safety (IROFS) to provide reasonable assurance that the IROFS are available and reliable to perform their functions when needed. The phrase "available and reliable," as used in 10 *Code of Federal Regulations* (CFR) Part 70, means that, based on the analyzed, credible conditions in the Integrated Safety Analysis (ISA), IROFS will perform their intended safety function when needed to prevent accidents or mitigate the consequences of accidents to an acceptable level. Management measures are implemented to provide reasonable assurance of compliance with the performance requirements, considering factors such as necessary maintenance, operating limits, common-cause failures, and the likelihood and consequences of failure or degradation of the IROFS and the measures. This chapter addresses each of the management measures included in the 10 CFR Part 70 definition of management measures, i.e., configuration management (CM), maintenance, training and qualifications, procedures, audits and assessments, incident investigations, records management, and other quality assurance (QA) elements. Management measures are applied in a graded approach. The degree to which management measures are applied to the IROFS is a function of the item's importance in terms of meeting the performance requirements as evaluated in the ISA. USEC will periodically review IROFS per the requirements of 10 CFR 70.62(a)(3) to ensure their availability, reliability, and have not changed. As the final design is developed for the ACP, the management system and design approach will require that the final designs be reviewed against the ISA to ensure the ISA is bounding.

11.1 Configuration Management

The Configuration Management (CM) Program for the American Centrifuge Plant (ACP) is described in the following paragraphs.

11.1.1 Configuration Management Policy

In accordance with 10 CFR 70.72, a CM Program is implemented to ensure that changes from the plant baseline configuration are identified and controlled to help ensure safety through consistency among the plant design and operational requirements, the physical configuration, and the plant documentation. The CM Program includes:

- Identification and documentation of IROFS;
- Organizational descriptions of duties and responsibilities; and
- Administrative controls, procedures and policies, to implement and document activities that maintain the plant's configuration.

The goal of the CM program is to ensure that the ACP has accurate, current documentation that matches the plant's physical/functional configuration, while complying with applicable requirements.

11.1.1.1 Program Overview

The Engineering Manager has primary responsibility for the implementation of the CM Program for the ACP. The CM Program is applicable to the plant, structures, processes, systems, equipment, components, computer programs, and activities of personnel, regardless of the item's Quality Level (QL) classification.

CM Program procedures provide for a graded application of resources taking into consideration:

- QL (risk significance);
- Applicable regulations, industry codes, and standards;
- Complexity or uniqueness of an item or activity and the environment in which it has to function;
- Quality history of the item in service;
- Degree to which functional compliance can be demonstrated or assessed by test, inspection, or maintenance methods;
- Anticipated life span;
- Degree of standardization;
- Importance of data generated;
- Reproducibility of results; and
- Consequence of failure.

QLs are established in accordance with their importance to safety as follows:

Level Criteria

QL-1 A single IROFS that prevents or mitigates a high consequence event.

QL-2 Two or more IROFS that prevent or mitigate a high consequence event; one or more IROFS that prevents or mitigates an intermediate consequence event.

QL-3 Any item other than QL-1 and QL-2; QL-3 items are controlled in accordance with standardized commercial practices.

- Radioactive Contamination Control to minimize and control the spread of contamination
- Radiological Postings and Controls for familiarization with the signs and postings in the work area
- Emergencies involving radiological material and the correct response
- Chemical Toxicity of Soluble Uranium Compounds

This training includes knowledge examinations and practical factor examinations of the personal protective equipment, personnel monitoring, and radiation measurements, if needed. Radiation Worker Training is reviewed and approved by the Radiation Protection Manager. The extent of the course material is commensurate with the potential for exposure. The training program is reviewed and evaluated every two years.

11.3.1.4 Nuclear Criticality Safety Training

NCS training based on ANSI/ANS-8.20-1991 is provided for personnel who handle or manage the handling of fissile material and work within Fissile Material Operations Areas. This training is reviewed and approved by the NCS technical staff and includes a discussion of the following:

- The fission process
- Controllable factors and examples of their application at this plant
- NCS postings
- NCS emergency procedures
- Consequences of historical criticality accidents

Personnel are trained to report defective or anomalous NCS conditions and to perform actions only in accordance with written, approved procedures. Personnel are trained that unless a specific procedure deals with the situation, they will take no action until the NCS personnel have evaluated the situation and provided recovery guidance. NCS refresher training is required every two years.

Managers of personnel described above receive additional training on the managerial responsibilities relating to NCS. In addition to demonstrating a basic knowledge of NCS concepts, the principles associated with the management of fissile material workers, and the oversight responsibilities of fissile material operations, NCS training for managers includes the following topics:

- Description of the plant's nuclear criticality safety policy;

- Explanation for the use of check lists, sign-off sheets, and documentation in the execution of procedures that are pertinent to criticality safety;
- Discussion of relevant procedures that pertain to criticality safety with emphasis given to criticality safety limits, controls, and emergency procedures;
- Description of the policy that relates to situations not covered by procedure and to situations in which the safety of the operation is in question; and
- Emphasizing the fact that employees are to be informed of their right to question any operation they believe may not be safe.

11.3.1.5 Environmental, Safety, and Health Training

This training covers environmental, worker safety, and health subject areas required by applicable local, state and federal regulations. It is provided to personnel commensurate with their job assignments. Specific modules identified as required compliance training for plant employees are contained in each individual's training requirement matrix. Some of the areas include:

- Radiological Worker Safety
- NCS
- Respiratory Training
- Hearing Conservation
- Occupational Safety and Health Administration (OSHA) Hazard Communication
- Hoisting and Rigging
- Mobile Equipment Operations
- Lockout/Tagout Work Permits
- Safety and Health Work Permits
- *Resource Conservation and Recovery Act* for Hazardous Waste Generators
- OSHA Hazardous Waste Operations and Emergency Response Standard
- Personal Safety
- Spill Prevention Control and Countermeasure Plan

11.3.1.6 Operations and Maintenance Personnel Training

Training is designed, developed, and implemented to assist plant employees in gaining an understanding of applicable fundamentals, procedures, and practices specific to the plant. It is also used to develop the skills necessary to perform assigned work in a safe manner. If a task is identified to operate or maintain an IROFS, then the PBT methodology is used. Initial and continuing training is provided for the following operations and maintenance job categories relied on to operate and/or maintain IROFS.

11.3.1.6.1 Operations Technician

This program is designed for personnel who monitor and operate centrifuge feed, withdrawal, product, equipment and supporting systems. They operate systems necessary to support the plant, perform integrated system testing, execute valving orders, adjust equipment settings, start-up, and shutdown equipment. The Operations Technician also assemble, transfer, install, repair, and test centrifuge machines. The Operations Technician training and qualification program is separated into three sequential phases:

- Phase I provides classroom training on basic fundamentals and consists of the following: Centrifuge Operations Orientation; Uranium Enrichment Technology; Operating Principles and Theory of Centrifuge Equipment; Process Control; and Process Support Systems.
- Phase II provides classroom and OJT on the design, assembly, transport, and repair of centrifuge machines.
- Phase III provides classroom and OJT on the IROFS identified in the ISA Summary; NCS limits and controls; equipment operations; support systems; and normal, off-normal, and emergency operating procedures for the plant.

11.3.1.6.2 American Centrifuge Plant Operations Supervisor

This program is designed for personnel who supervise the Operations Technician and make operational decisions during normal, off normal, and emergency operations. The Operations Supervisor is the senior person on shift and directs equipment start-up, shutdown, and changes in system alignments. The Operations Supervisor training and qualification program is separated into four sequential phases:

- Phase I provides classroom training on basic fundamentals and consists of the following: Centrifuge Operations Orientation; Uranium Enrichment Technology; Operating Principles and Theory of Centrifuge Equipment; Process Control; and Process Support Systems.
- Phase II provides classroom and OJT on the design, assembly, transport, and repair of centrifuge machines.

- Phase III provides classroom and OJT on the IROFS identified in the ISA Summary; NCS limits and controls; operations; support systems; and normal, off-normal, and emergency operating procedures for the plant.
- Phase IV provides classroom and OJT on the supervisory roles and responsibilities for the safe operation of the plant.

11.3.1.6.3 Centrifuge Support Mechanic

This program is designed for maintenance personnel who service and repair computers, programmable controllers, and electrical, electronic, and pneumatic support systems and components. The Centrifuge Support Mechanic training and qualification program is separated into three sequential phases:

- Phase I provides classroom training on Centrifuge Operations Orientation and Operating Principles and Theory of Centrifuge Equipment.
- Phase II provides classroom and OJT on the plant electrical, instrument, and electronic control systems and components.
- Phase III provides classroom and OJT on maintenance procedures, programs, and practices.

11.3.1.6.4 Centrifuge Maintenance Mechanic

This program is designed for maintenance personnel who install, remove, repair, and service mechanical equipment and systems in the field and in shop locations. The Centrifuge Maintenance Mechanic training and qualification program is separated into three sequential phases:

- Phase I provides classroom training on Centrifuge Operations Orientation and Operating Principles and Theory of Centrifuge Equipment.
- Phase II provides classroom and OJT on the plant mechanical systems and components.
- Phase III provides classroom and OJT on maintenance procedures, programs, and practices.

11.3.1.6.5 Centrifuge Maintenance Supervisor

This program is designed for the supervisors of the Centrifuge Maintenance and Support Mechanics. The Centrifuge Cascade Maintenance Supervisor training and qualification program is separated into four sequential phases:

- Phase I provides classroom training on Centrifuge Operations Orientation and Operating Principles and Theory of Centrifuge Equipment.
- Phase II provides classroom and OJT on the plant mechanical, electrical, instrument, and electronic control systems and components.
- Phase III provides classroom and OJT on maintenance procedures, programs, and practices.
- Phase IV provides classroom and OJT on the supervisory roles and responsibilities for the safe operation of the plant.

11.3.1.7 Operations Analysis Engineer Training

Operations Analysis Engineer training is provided to those persons, who review process equipment operational parameters, analyze the data and determine equipment settings. The Operations Analysis Engineer is an advisor to the Operations Supervisor concerning plant operational decisions. The Operations Analysis Engineer has as a minimum a bachelor's degree in engineering or the physical sciences or equivalent technical experience, and three years of nuclear experience. The training is based on a review of job analysis data, training requirements for specific systems, and existing training materials.

11.3.1.8 System Engineer Training

System Engineer training is provided to those persons who provide engineering support and review of the design and modifications of IROFS. System Engineers are responsible for reviewing design proposals and modifications; ensuring that the appropriate documents and procedures are updated to be consistent with modifications; and assisting in work control preparation and identification of post-maintenance test requirements for IROFS. The System Engineer has as a minimum a bachelor's degree in engineering or the physical sciences or equivalent technical experience, and three years of nuclear experience. The training is based on a review of job analysis data, training requirements for specific systems, and existing training materials.

11.3.1.9 Nuclear Criticality Safety Engineer Training

NCS personnel administer Nuclear Criticality Analyst training and qualification. Training is based on ANSI/ANS-8.20-1991 and ANSI/ANS-8.19-1996, *Administrative Practices for Nuclear Criticality Safety*. NCS procedures define educational and experience prerequisites, along with required training courses and OJT activities to be completed prior to qualification.

11.3.1.10 Health Physics Technician Training

Health Physics support training and qualification is administered in accordance with guidelines provided in the Training Development and Administrative Guide (TDAG) for Health Physics Technicians. It utilizes the performance based training methodology and applies to those individuals, both plant and contractor, who are engaged in the evaluation of radiological

conditions in the plant and the implementation of the necessary radiological safety measures as they apply to nuclear plant workers and members of the general public.

11.3.1.11 Laboratory Technician Training

Laboratory support training and qualification is administered in accordance with the guidelines set down in the TDAG for the Laboratory and Technician Training Program. The training utilizes the performance based training methodology. Training is provided in the areas of Laboratory Controls and Standards, Mass Spectrometry, Process Services, Chemical Technology, Uranium Sampling, and Uranium Analysis.

11.3.1.12 Fire Protection and Emergency Management Training

11.3.1.12.1 Fire Protection Training

State certification requirements provide the basis for firefighter training programs. Emergency medical response personnel meet requirements for state certification as emergency medical technician (these are usually also firefighters). Qualified instructors provide a range of classroom and hands-on training to maintain standards of performance for response personnel. Training needs are reviewed annually and the training program modified to meet identified needs. Drills are conducted quarterly, as part of the Emergency Plan training.

11.3.1.12.2 Emergency Management Training

Training is conducted in the areas of:

- General Emergency Plan training
- Specialized Emergency Plan training for the Emergency Response Organization
- Off-site Emergency Management training

Emergency Management drills and exercises are conducted to develop, maintain, and test the response capabilities of personnel, facilities, equipment, and training.

11.3.2 Analysis and Identification of Functional Areas Requiring Training

A needs/job analysis is used to identify the tasks affecting worker or public safety, safeguards of regulated material, or protection of the environment as identified in the ISA Summary. The analysis is conducted with applicable program area SMEs and training personnel. The training programs for the following plant job positions/worker classifications are based on a needs/job analysis:

- Operations Technician
- Operations Supervisor

- Centrifuge Maintenance Mechanic
- Centrifuge Support Mechanic
- Centrifuge Maintenance Supervisor
- Operations Analysis Engineer
- System Engineer
- NCS Engineer
- Health Physics Technicians
- Laboratory Technicians

The plant-specific task list is developed for each of the above positions/classifications. The task lists are analyzed based on input from line management and SMEs, rating each task on degree of difficulty, importance of the task, and frequency of task performance. From this analysis, the tasks are selected for training based on their rating. The ratings are:

- **Overtrain** - requires initial and continuing training;
- **Train** - requires initial training;
- **Pre-train or just-in-time** - requires training but is not taught until that specific knowledge or skill is needed; or
- **No train** - formal training is not required.

The tasks selected for training are matrixed to the associated procedures and training materials. The matrices are reviewed and updated in conjunction with the periodic review of the associated procedures.

Procedure changes, equipment changes, job scope changes, plant modifications and other changes affecting task performance are monitored and evaluated for their impact on the development or modification of initial and continuing training programs. The affected training materials are modified or new materials developed, based on the significance of the change, and modifications are documented in the program files. The training materials are updated prior to conducting training.

11.3.3 Position Training Requirements

Plant procedures and individual TRMs delineate initial and continuing training requirements for employees. The training program requirements for those positions relied on for

safety or personnel who perform actions that prevent or mitigate accident sequences described in the ISA Summary, are defined in TDAGs. The TDAGs include:

- Organization and Administration Responsibilities
- Trainee Selection Criteria, including the minimum educational, technical, experience, and physical requirements
- Course Loading for Initial and Continuing Training
- Test/Evaluation Guidelines
- Training and Evaluation Documentation Guidelines
- Training Courses or Modules for Specific Qualification Areas

11.3.4 Development of the Basis for Training, Including Objectives

Learning objectives are established to identify the training content and to define satisfactory trainee performance for the task or group of tasks selected for training from the job analysis. Learning objectives state the requisite knowledge, skills, and abilities the trainee must demonstrate. The conditions under which the required actions take place and the standards of performance required of the trainee are also determined in development of the learning objectives. Learning objectives are sequenced within training materials based on their relationship to one another.

Learning objectives are documented in lesson plans and training guides and are revised as necessary based on changes in procedures, plant systems/equipment, or job scope.

11.3.5 Organization of Instruction, Using Lesson Plans and Other Training Guides

Learning objectives derived from the rated task lists are analyzed to determine the appropriate training setting. Classroom lesson plans, OJT guides, or other instructional materials are procured or developed based on this instructional analysis and design. Lesson plans and other training guides provide the guidance and structure necessary to ensure consistent delivery of training material from trainer to trainer and class to class. The lesson plans and other training guides provide the evaluation tools necessary to ensure mastery of the learning objectives.

Classroom lessons are used primarily to provide cognitive learning on the fundamentals, theory, basic operating and maintenance principles, individual systems, system inter-relations, safety requirements, and processes used in the plant.

Other forms of instructional materials, such as video, computer-based training and self-study may be used as alternatives or supplements to classroom instruction.

Classroom lesson plans, OJT guides, and other instructional materials receive technical reviews by designated SMEs and instructional reviews by training management as part of the approval process. The responsible line and training managers approve training materials before issuance.

Designated SMEs or technical trainers provide classroom training and/or OJT evaluations. These personnel receive training and are qualified on the instructional methods and techniques applicable to the training setting.

11.3.6 Evaluation of Trainee Learning

Within the job position/worker classification, training programs are logical instructional blocks or "modules" presented in such a manner that specific learning objectives are accomplished. Trainee progress is evaluated by line and training management through a variety of performance demonstrations such as written examinations, oral examinations, and practical tests to ensure mastery of the job performance requirements or learning objectives contained in these modules. Comprehensive qualification programs contain periodic evaluations of trainee performance. Remediation is provided as appropriate.

11.3.7 Conduct of On-The-Job Training

OJT is a systematic method of providing training on job-related skills and knowledge for a position. This training is conducted in the work environment and demonstrates actual task performance whenever practical. When the actual task cannot be performed, the conditions are documented and the task may be simulated. Applicable tasks and related procedures for each technical area provide the input for the OJT that is designed to supplement and complement training received through formal classroom or laboratory training and to ensure personnel are qualified to perform their assigned tasks.

11.3.8 Evaluation of Training Effectiveness

Systematic evaluations of training effectiveness and its relation to on-the-job performance are used to ensure that the training program conveys required skills and knowledge and to revise the training, where necessary, based on the performance of trained personnel in the job setting. The student feedback of the training received and the line manager's evaluation of the student's performance on the job after training is completed are utilized to determine the training effectiveness and areas for refinement. Student feedback occurs at several points in the training program. At the completion of training, the student evaluates the instructor and course. Post training evaluations of the effectiveness of training is requested from students and supervisors after completion of training. Each of these evaluations is specified in plant training procedures.

Plant design changes, modifications, or changes in task performance are analyzed by line and training personnel for impact on training. Corrective actions involving training are assigned, scheduled and tracked to completion. Lessons learned, which have an impact on initial training, are factored into training materials prior to the delivery of the next training session.

Line and training management conduct self-assessments and evaluations of the individual training programs. QA auditors provide additional assessments through the audit program. These assessments and evaluations are used to determine training program strengths and weaknesses for continuous improvement of the training.

11.3.9 Personnel Qualification

Personnel are selected for entry into the training and qualification programs in conformance with the established general employment policies. The minimum education, experience, and qualification requirements for managers, engineers, and technical professional staff, supervisors, technicians, and maintenance personnel are described below. Additional details are provided in Chapter 2.0, Organization and Administration, of this license application.

ACP managers have, as a minimum, a bachelor's degree in engineering or the physical sciences or equivalent technical experience, and four years of nuclear experience.

Engineers and other technical professional staff, who affect the design, modification, operation, or maintenance of IROFS identified in the ISA Summary, have, as a minimum, a bachelor's degree in engineering or the physical sciences or equivalent technical experience, and three years of nuclear experience. Other technical professional staff, whose actions are not relied upon for safety, have, as a minimum, a bachelor's degree in engineering or the physical sciences or equivalent technical experience, and one year of nuclear experience.

Supervisors of technicians, maintenance personnel, and other staff whose actions are relied upon for safety have, as a minimum, a bachelor's degree in engineering or the physical sciences or equivalent technical experience, and three years of industrial/chemical/nuclear plant operations, maintenance, engineering, or support experience. Supervisors must have one-year supervisory experience or completion of a supervisory training course.

Plant maintenance personnel and technicians have, as a minimum, an associates degree in engineering or the physical sciences or equivalent technical experience, and three years of industrial/chemical/nuclear plant operations, maintenance, engineering, or support experience.

Construction personnel, plant technicians, maintenance personnel, and other staff whose actions are relied upon for safety complete the applicable training programs or have equivalent experience or training.

11.3.10 Provisions for Continuing Assurance

Continuing training and periodic requalification is provided for employees in the interest of promoting safety, safeguards and security, and environmental protection awareness. Continuing training is also provided as a means to maintain and improve job-related knowledge and skills and is based on the following factors:

- Frequency required by regulatory agencies and national standards
- Overtrain tasks identified in PBT-based programs

- Training needs as determined by line management. This includes, but is not limited to, nuclear criticality safety assessments, plant or system changes, component changes, procedure changes, lessons learned (including industry and in-house operating experiences, and event reports), and emergency response procedures.

11.3.11 References

1. ANSI/ANS-8.20-1991, *American National Standard for Nuclear Criticality Safety Training*
2. ANSI/ANS-8.19-1996, *Administrative Practices for Nuclear Criticality Safety*

11.4 Procedures

USEC is committed to the use of approved and controlled written procedures to conduct nuclear safety, safeguards, and security activities for the protection of the public, plant employees, and the environment. Procedures are used to ensure safe work practices and apply to workers, visitors, contractors, and vendors. A balanced combination of written guidance, craftsman skills, and work site supervision is utilized. The procedure process utilizes a graded approach to provide the necessary rigor for safe plant operation, assure USEC's commitments to meeting regulations and standards, and assure a balance of effective safety with practical efficiency in plant operations. Activities involving nuclear material and/or IROFS are conducted in accordance with approved procedures.

A management controls program for procedures includes the basic elements of identification, development, verification, review and comment resolution, approval, validation, issuance, and change control, and periodic review. These elements are outlined in a procedures management writer's guide and described in implementing procedures.

11.4.1 Types of Procedures

Procedures are intended to prescribe those essential actions or steps needed to safely and consistently perform operations and maintenance activities. Procedures that are related to the operation of IROFS where human actions are important and for the management measures supporting those IROFS are governed by the requirements of this section. The two general types of procedures used at the ACP are Operating and Administrative.

11.4.1.1 Operating Procedures

Operating procedures are used to directly control process operations at the workstation and include direction for normal operations, off-normal operations, maintenance, alarm response, and emergency operations caused by failure of an IROFS or human error. These procedures

provide reasonable assurance of NCS, chemical safety, fire safety, emergency planning, and environmental protection. Operating procedures contain the following elements, as applicable:

- Purpose of the activity
- Regulations, policies, and guidelines governing the procedure
- Type of procedure
- Steps for each operating process phase
- Initial start-up
- Normal operations
- Temporary operations
- Emergency shutdown
- Emergency operations
- Normal shutdown
- Start-up following an emergency or extended downtime
- Hazards and safety considerations
- Operating limits
- Precautions necessary to prevent exposure to hazardous chemicals (resulting from operations with special nuclear material) or to licensed special nuclear material
- Measures to be taken if contact or exposure occurs
- IROFS associated with the process and their functions
- The timeframe for which the procedure is valid

Maintenance procedures involving IROFS for corrective and preventative maintenance, functional testing after maintenance, and surveillance maintenance activities describe:

- Qualifications of personnel authorized to perform the maintenance or surveillance
- Controls on and specification of any replacement components or materials to be used
- Post-maintenance testing to verify operability of the equipment

- Tracking and records management of maintenance activities
- Safe work practices (e.g., lockout/tagout; confined space entry; moderation control or exclusion area; radiation or hot work permits; and criticality, fire, chemical, and environmental issues)
- Pre-maintenance activities require reviews of the work to be performed, including procedure reviews for accuracy and completeness
- Steps that require notification of affected parties (technicians and supervisors) before performing work and on completion of maintenance work. The discussion includes potential degradation of IROFS during the planned maintenance.

Alarm Response Procedures provide information that identifies the symptoms of the alarm, possible causes, automatic actions, the immediate operator action to be taken, and the required supplementary actions.

Off-Normal Procedures describe actions to be taken during unusual or out-of-the ordinary situations.

Emergency Operating Procedures direct actions necessary to mitigate potential events or events in progress that involve needed protection of on-site personnel; public health and safety; and the environment.

11.4.1.2 Administrative or Management Control Procedures

Administrative procedures or "management control procedures" are used for activities that support the process operations. These procedures are used to manage activities such as configuration management, radiation protection, maintenance, QA, training and qualification, audits and assessments, incident investigations, record keeping, and reporting. Administrative procedures direct the following activities:

- Design
- Configuration Management
- Procurement
- Construction
- Radiation safety
- Maintenance
- QA elements

- Training and qualification
- Audits and assessments
- Incident investigations
- Records management
- Criticality safety
- Fire safety
- Chemical process safety and reporting requirements

11.4.2 Procedure Process

Procedures are developed or modified through a formal process incorporating the change controls described in Section 11.1 of this license application. The procedure process ensures that:

- Procedures are identified and developed as needed;
- Procedures are provided for those operations of IROFS where human actions are necessary and for the Management Measures described in this chapter;
- Essential elements that are generic are included as applicable. These include: nuclear criticality; chemical process and fire safety; warnings and cautions; notes or reminders of pertinent information regarding specific hazards or concerns; Material Safety Data Sheet availability; special precautions; radiation and explosive hazards; and special personal protective equipment;
- Procedures are approved under the guidelines of the configuration management program by personnel responsible and accountable for the operation;
- Procedures are verified and validated through field tests by workers and technicians during procedure development to provide assurance that they are usable and accurate;
- Procedures are periodically reviewed and re-verified and validated;
- Current procedures are available to personnel and that users are qualified on the latest version;
- Operating limits and IROFS are specified in the procedure;

- Safety limits and IROFS will be clearly identified, as such, in the procedure for operations;
- Procedures include required actions for off-normal conditions of operation, as well as normal operations;
- If needed, hold points or safety checkpoints are identified at appropriate steps in the procedure;
- A mechanism is specified for revising and reissuing procedures in a controlled manner;
- Current procedures are available and used at work locations; and
- The plant Training Program trains the required persons in the use of the latest procedures available.

The procedure process utilizes nine basic elements to accomplish procedure development, review, approval, and control: Identification; Development; Verification; Validation; Review and Comment Resolution; Approval; Issuance; Change Control; and Periodic Review. These elements are discussed in the following sections.

11.4.2.1 Identification

ACP organization managers have the responsibility for identifying which tasks will be proceduralized within their areas of control.

As a minimum, a procedure is required for:

- The operation of IROFS and the management measures supporting those IROFS as identified in the ISA Summary
- Operator actions necessary to prevent or mitigate the consequences of accidents described in the ISA Summary
- Safe work practices to control processes and operations with special nuclear material, IROFS, and/or hazardous chemicals incident to the processing of licensed material.

A detailed procedure is normally not needed if the task analysis determines that:

- The work is not complex or only involves a few actions (unless failure to properly conduct those actions could result in significant consequences)
- The task requires those skills normally possessed by a qualified person (otherwise known as "skill-of-the-craft")

- The consequences of an error would be minimal

Maintenance activities can be addressed by written procedures, documented work instructions, or drawings appropriate to the circumstances as discussed in Appendix A.6, paragraph (a), of ANSI/ANS 3.2-1994, *Administrative Controls and Quality Assurance for the Operational Phase of Nuclear Power Plants*.

11.4.2.2 Development

Procedure development and quality is the user organization's responsibility. Procedure development is accomplished in accordance with procedural guidance. A general description follows:

- A system is in place to track and document the procedure process.
- Interviews with procedure users and process walk downs are utilized to ensure procedures are usable; reflect as-built conditions and process operations; and maintain management controls for nuclear safety, safeguards, and security.
- The procedure use category is determined. This determination documents the designation of a procedure as In-Hand (Continuous Use), Reference Use, or Information Use. The designation is based on the administrative or non-administrative use of the procedure, and the safety or financial consequences of failing to adhere to procedural requirements. Procedure use is discussed in Section 11.4.7 of this license application.
- As the procedure is drafted, attributes that enhance procedural use are included, such as standard style organization, format, cautions, and warnings.
- Input and review by affected parties is required. Other selected reviews are obtained, such as QA to ensure that QA requirements are identified and included in operating procedures.
- The approval process for the procedure is described in Section 11.4.2.6 of this license application.

11.4.2.3 Verification

Verification is a process that ensures the technical accuracy of the procedure and that it can be performed as written. Procedures are verified by the procedure owner/user during the procedure development/change process. There are two basic attributes of the verification process. The first attribute relates to the technical accuracy of the procedure. It ensures that technical information including formulas, set points, and acceptance criteria are correctly identified in the procedure. The second attribute is administrative, in that it verifies the

procedure format and style and that it is consistent with the procedure-writing guide. Verification consists of a walk-down of the procedure in the field or a tabletop walk-through. A standard checklist is used to ensure required attributes are included.

11.4.2.4 Validation

The purpose of procedure validation is to ensure that no technical errors or human factor issues were inadvertently introduced during the procedure review process. Validation is required for new procedures or for intent changes to the procedure. Validation is performed in the field by qualified personnel, and may be accomplished by detailed scrutiny of the procedure as part of a walk-through exercise or as part of a walk-through drill (particularly for emergency or off-normal procedures). If the particular system or process is not available for a walk-through validation, talk-through may be performed in the particular shop or training environment. Performance of procedure validation is documented.

11.4.2.5 Review

Drafts of new procedures and procedure changes are distributed for technical reviews, safety discipline reviews (e.g., nuclear criticality, fire, radiation, industrial, and chemical process safety), and cross-discipline reviews, as needed.

Functional area and cross-discipline reviews are performed for the new procedure or procedure change. Comments/questions generated during the review process are resolved with the originating organizations. 10 CFR 70.72 and intent/non-intent screenings are performed for new and changed procedures (except minor administrative changes that are processed according to the procedure process).

Any new or revised NRC requirements that are promulgated are evaluated to determine the impact on existing implementing procedures or to identify the need for new implementing procedures. Procedures are reviewed following unusual incidents; such as an accident, unexpected transient, significant operator error, or equipment malfunction to determine if changes are appropriate based on the cause and corrective action determination for the particular incident. Procedure changes that are necessary because of a system modification are addressed in Section 11.1 of this license application, as part of the modification control process.

In addition, the Plant Safety Review Committee will review:

- Each new procedure required by Section 11.4.2.1 for this license application
- Each proposed change to procedures required by Section 11.4.2.1 of this license application, if the proposed change constitutes an intent change (i.e., a change in scope, method, or acceptance criteria that has safety significance)

11.4.2.6 Approval

Following the resolution of review comments, procedures are approved. Approval authority rests with the applicable ACP organization manager responsible for the activity.

Managers ensure that appropriate training is completed on new and revised procedures.

11.4.2.7 Issuance and Distribution

Procedures are issued and controlled in accordance with the RMDC program procedures. Copies of current approved procedures are available to users via electronic and/or hard copy distribution in the work areas.

11.4.3 Procedure Hierarchy

The procedure hierarchy is established in four levels. The levels are:

- **Level 1** - Policy statements issued by executive management that apply to ACP personnel
- **Level 2** - Standard Practice Procedures that apply to more than one organization
- **Level 3** - Procedures issued at the organization level that apply to more than one group within a larger group or specific organization
- **Level 4** - Procedures issued within a group or sub-function

11.4.4 Temporary Changes

Temporary changes to procedures required by Section 11.4.2.1 of this license application can be made, provided:

- The temporary change does not result in a change to the ISA as determined by the 10 CFR 70.72 review
- The temporary change does not constitute an intent change (i.e., a change in scope, method or acceptance criteria that has safety significance)
- The change is documented

These temporary changes to procedures may be used for a period of time, which should not exceed 30 days or a period for which the temporary condition exists whichever is greater. Temporary changes that need to exceed this period are assessed to ensure it is appropriate to extend the use of the temporary change or to process a permanent change. Temporary changes may be made permanent once the change is reviewed and approved as required by Section 11.4.2.4 of this license application.

11.4.5 Temporary Procedures

Temporary procedures may be issued only when permanent procedures do not exist to:

- Direct operations during testing, maintenance, and modifications
- Provide guidance in unusual situations not within the scope of permanent procedures
- Ensure orderly and uniform operations for short periods when the building, a system, or component of a system is performing in a manner not covered by existing permanent procedures, or has been modified or extended in such a manner that portions of existing procedures do not apply

These temporary procedures may be used for a period of time, which should not exceed 60 days or a period for which the temporary condition must exist, whichever is greater. Temporary procedures that need to exceed this period are assessed to ensure it is appropriate to extend the use of the temporary procedure or to develop a permanent procedure. These temporary procedures are subject to the same level of review and approval as required for permanent procedures.

11.4.6 Periodic Review

Approved procedures are periodically reviewed to ensure their continued accuracy and usefulness. Procedures are periodically reviewed according to established criteria. The periodicity of these reviews is based on procedure content as follows:

<u>Periodic Review Cycle</u>	<u>Procedures to Be Reviewed</u>
1 year	Emergency Operating, Alarm Response and procedures dealing with highly hazardous chemicals as defined by the chemical safety program
5 years	Procedures not included as part of the one-year review cycle

When conducting the periodic review, the procedure owner or SME performs a complete administrative and technical (requirements and references) review ensuring information is complete and accurate and that the procedure is usable as written.

11.4.7 Use and Control of Procedures

In-Hand (Continuous Use) procedures are followed step-by-step and are present in the work area while the task is being performed. In-Hand procedures, approved equipment alignment check sheets (e.g., valve lineups or electrical switching orders), or approved operator aids (e.g., process flow-charts or component identification tables) are developed for IROFS that

have:

- Extensive or complex tasks;
- Tasks which are infrequently performed; or
- Tasks in which operations must be performed in a specified sequence.

Reference Use procedures are provided for routine procedural actions that are frequently repeated or of minimal complexity, and can be performed from memory. Reference Use procedures are not required to be present in the work area.

Information Use procedures are followed to implement administrative or programmatic requirements.

Hard copy controlled copies of procedures are marked "Controlled Copy." Working copies of procedures are marked "Working Copy," and verified as the latest version prior to use. Information Only copies of In-Hand (Continuous Use) or Reference Use procedures are marked "Information Only" to indicate they are not controlled copies and are not used to perform work. Procedures may be accessed and used directly from the electronic document management system.

If a step of a procedure cannot be performed as written, work is stopped, the system is immediately placed in a safe condition, and corrective actions are initiated in accordance with plant procedures.

ACP organization managers ensure personnel are trained on the use of procedures and are appropriately trained and qualified on the current version of the procedure as described in Section 11.3 of this license application.

11.4.8 Records

Records generated during procedure use are identified in the governing procedure and controlled according to the ACP RMDC program practices as described in Section 11.7 of this license application.

11.4.9 Topics to be Covered in Procedures

Activities defined by Section 11.4.2.1 of this license application are the minimum activities that are to be covered by written procedures. In addition, any activity described in Section 11.4.2.1 of this license application and listed below is covered by a written procedure (except for the maintenance activities listed below which may be covered by written procedures, documented work instructions, or drawings appropriate to the circumstances). This list is not intended to be all-inclusive, because many other activities carried out during plant operations may be covered by procedures not included in this list. Similarly, this listing is not intended to

imply that procedures need to be developed with the same titles as those in the list. This listing provides guidance on topics to be covered rather than specific procedures.

▪ **ADMINISTRATIVE PROCEDURES**

- Training
- Audits and inspections
- Investigations and reporting
- RMDC
- Changes in facilities and equipment
- Modification design control
- QA
- Equipment control (lockout/tagout)
- Shift turnover
- Work control
- Management control
- Procedures management
- NCS
- Fire safety
- Radiation protection
- Radioactive waste management
- Maintenance
- Environmental protection
- Chemical process safety
- Operations
- IROFS surveillances

- Calibration control
- Preventive maintenance
- Procurement
- **SYSTEM PROCEDURES THAT ADDRESS START-UP, OPERATION, AND SHUTDOWN**
 - Electrical power
 - Ventilation
 - Shift routines, shift turnover, and operating practices
 - Sampling
 - UF₆ cylinder handling
 - UF₆ material handling equipment
 - Decontamination operations
 - Plant air
 - Plant nitrogen
 - Cooling water
 - Sanitary water
 - Plant water
 - Temporary changes in operating procedures
 - Purge and evacuation vacuum systems
 - Installation and removal of centrifuge machines
- **ABNORMAL OPERATION/ALARM RESPONSE**
 - Loss of cooling
 - Loss of instrument air
 - Loss of electrical power
 - Fires

- Chemical process releases
- Loss of feed capacity
- Loss of withdrawal capacity
- Loss of purge vacuum
- **MAINTENANCE ACTIVITIES THAT ADDRESS SYSTEM REPAIR, CALIBRATION, INSPECTION, AND TESTING**
 - Repairs and preventive repairs of IROFS
 - Calibration of IROFS
 - Functional testing of IROFS
 - High-efficiency particulate air filter maintenance
 - Safety system relief valve replacement
 - Surveillance/monitoring
 - Piping integrity testing
 - Containment device testing
 - Repair of UF₆ valves
 - Testing of cranes
 - UF₆ cylinder inspection and testing
 - Centrifuge assembly/installation
- **EMERGENCY PROCEDURES**
 - Toxic chemical releases (including UF₆)

11.4.10 References

1. ANSI/ANS 3.2-1994, *Administrative Controls and Quality Assurance for the Operational Phase of Nuclear Power Plants*

11.5 Audits and Assessments

The ACP implements a system of audits and assessments to help ensure that the health, safety, and environmental programs, as described in this license application are adequate and effectively implemented. The system is designed to ensure comprehensive program oversight at least once every three years. The system is comprised of two distinct levels of activities. These are audits and assessments.

11.5.1 Audits

Audits are conducted by the QA Organization in accordance with written procedures or checklists by qualified auditors. The auditing organizations are independent from operations of the plant. Audits verify the effectiveness of health, safety, and environmental programs and their implementation and determine the effectiveness of the process being assessed. Audits further verify that the plant operations are being conducted safely in accordance with regulatory requirements and license application commitments.

These audits and their associated frequencies are conducted in accordance with Section 18.0 of the QAPD and use written procedures or checklists. Audits are performed under the direction of a Lead Auditor, qualified in accordance with the American Society of Mechanical Engineers (ASME) NQA-1, Supplement 2S-3. Lead Auditors and staff auditors are functionally and organizationally independent of the programs and activities that are examined. Where appropriate, audit teams are supplemented with plant and/or external technical specialists.

In addition to periodically evaluating aspects of the QAPD, audits are conducted for the areas of radiation safety; NCS; chemical safety; fire safety; environmental protection; emergency management; QA; CM, maintenance; training and qualification; procedures; incident investigation; and records management.

Audit results are documented and reported to the plant senior management as specified in plant procedures. Provisions are made for reporting and corrective action, where warranted. The plant Corrective Action Program, described in Section 11.6 of this license application, is administered by the Regulatory Organization to ensure proper control of corrective actions as defined in Section 16.0 of the QAPD.

11.5.2 Assessments

Management responsible for implementing portions of the QAPD performs assessments to verify the adequacy of the part of the QAPD for which they are responsible and to assure its effective implementation. Personnel from the area being assessed may perform the assessment, provided that they do not have direct responsibility for the specific activity being assessed. Results of assessments are documented. The responsible organization manager resolves any observations from these programmatic assessments.

Organization managers maintain an assessment process within their organization to assess the adequacy of, and effectiveness of, the implementation of the programs under their cognizance. As a minimum, these assessments are conducted for the areas of radiation safety; NCS; chemical safety; fire safety; environmental protection; emergency management; QA; CM; maintenance; training and qualification; procedures; incident investigation; and records management.

Assessment results are documented and reported as specified in the plant procedures. Provisions are made for reporting and corrective action, where warranted, in accordance with the plant's Corrective Action Program.

11.6 Incident Investigations

This section encompasses the identification, reporting, and investigation of abnormal events or conditions, including precursor events that may occur during operation of the ACP. This includes identification and categorization of the incident, as well as an analysis to determine the specific or generic causes, as well as generic implications.

The ACP is required by 10 CFR 70.50 and 70.74 to notify the NRC of certain events and conditions and to determine the root cause of the event, including all factors that contributed to the event and the manufacturer and model number (if applicable) of any equipment that failed or malfunctioned. Corrective actions taken or planned to prevent occurrence of similar or identical events in the future and the results of any evaluations or assessments must also be provided.

The ACP satisfies these requirements by following administrative procedures relating to incident identification and reporting. These procedures work together to ensure that abnormal events and conditions occurring at the ACP are promptly reported to appropriate personnel, assessed, and when required, reported to the NRC Operations Center or designated NRC office.

11.6.1 Incident Identification, Categorization, and Notification

In accordance with procedures, plant personnel are required to report to their line manager or directly to the Operations Supervisor abnormal events or conditions that may have the potential to harm the safety, health, or security of on-site personnel, the general public, or the environment, including precursor events. These conditions may require an emergency response.

The Operations Supervisor, in accordance with procedures, assesses and categorizes abnormal events or conditions using the notification and reporting criteria set forth in 10 CFR 70.50 and 70.74 and other applicable regulations. In making the assessment, the Operations Supervisor may consult with ACP senior management or other personnel possessing expertise or knowledge concerning the type of event or condition being assessed.

If an event or condition within the plant is categorized as a reportable event, the Operations Supervisor makes initial notification to the NRC Operations Center or designated NRC office and provides, to the extent known at the time of notification, the information

specified in 10 CFR 70.50(c)(1). Notification is made as soon as possible, but not later than the time period stated in the regulations. Notification time periods vary between 30 minutes and 24 hours. Verbal and/or written communication involving classified information is conducted in accordance with Chapter 2.0 of the Security Program for the American Centrifuge Plant.

11.6.2 Conduct of Incident Investigations

The level of investigation of abnormal events and precursor events is based on a graded approach relative to the severity of the incident. Each reportable event where a follow-up written report to the NRC is required is investigated to determine the cause and corrective actions necessary to prevent recurrence. This investigation is conducted and documented in accordance with procedures. Other events not requiring a written report are evaluated using the Corrective Action Program to determine actions to be taken.

The investigation process includes a prompt risk-based evaluation and, depending on the complexity and severity of the event, one individual may suffice to conduct the evaluation or an event investigation team may be warranted. Investigations will begin within 48 hours of the abnormal event, or sooner, depending on the safety significance of the event and commensurate with the safety of the investigators. The investigator(s) are independent from the line function involved with the incident under investigation. A procedure provides a documented plan for investigating abnormal events and includes the functions, responsibilities, and scope of authority of investigators. This plan is separate from any required Emergency Plan or emergency response. A reasonable, systematic, structured approach is used to determine the specific or generic root causes and generic implications of abnormal events, such as the TapRoot[®] methodology. The record of IROFS failures required by 10 CFR 70.62(a)(3) for IROFS is reviewed as part of the investigation and updated in accordance with regulatory requirements.

For each event or condition that requires a follow-up written report to the NRC, the incident investigation report includes a description, contributing factors, a root cause analysis, and findings and recommendations. Auditable records and documentation related to abnormal events, investigations, and root cause analyses are maintained. Documentation relating to the investigation is retained for two years or for the life of the operation, whichever is longer. The original investigation reports are available to the NRC upon request.

The investigator(s) have the authority to obtain all the information considered necessary during the course of the investigation and participants of an investigation team are assured of no retaliation for participation in an investigation. Line management cooperates fully with the investigators. The individual leading the investigation is trained and qualified in root cause analysis techniques. This individual is responsible for ensuring the conduct of the investigation is in accordance with procedures and that the outcome of the investigation is properly documented and reported to appropriate levels of management with responsibility for the abnormal event. If a team is used, it includes at least one process expert in addition to the trained root cause investigator. An individual is chosen to lead the incident investigation based on experience and knowledge of the particular area involved with the event or condition.

11.6.3 Follow-up Written Report

When required by regulations, a report summarizing the results of the event investigation is prepared in accordance with procedures. The report contains, at a minimum, the information specified in 10 CFR 70.50(c)(2). The written report is forwarded to the NRC within the time limit specified in the applicable NRC regulations, with the exception that the follow-up written reports required by 10 CFR 70.50(c)(2) are submitted within 60 days.

The 10 CFR 70.50(c)(2) reporting criteria require that the ACP submit a written follow-up report within 30 days of the initial report required by 10 CFR 70.50 (a) or (b) or by 10 CFR 70.74 and Appendix A of Part 70. In lieu of the 30-day requirement described in 10 CFR 70.50(c)(2), NRC approval to submit the required written reports within 60 days of the initial notifications is hereby requested. This exemption request is provided in Section 1.2.5 of this license application.

11.6.4 Corrective Actions

For each significant condition adverse to quality or reportable event where a follow-up written report to the NRC is required, corrective actions to prevent recurrence are developed by responsible management, tracked in a database, and monitored through completion in accordance with the Corrective Action Program. Corrective actions are taken within a reasonable period, commensurate with the safety significance of the event. Evidence files used to support action closure are maintained in accordance with approved records management procedures.

Documentation is maintained so that "lessons learned" may be applied to future operations of the ACP. Details of the event sequence are compared with accident sequences already considered in the ISA. Should it be necessary, the ISA Summary is modified to include evaluation of the risk associated with accidents of the type actually experienced. Relevant findings from incident investigations are reviewed with affected ACP personnel.

11.7 Records Management and Document Control

RMDC programs are established to ensure records and documents required by the QAPD are appropriately managed and controlled. These programs are designed to meet the specific record keeping and document control requirements set forth in 10 CFR Part 70 and the applicable provisions of other parts of 10 CFR. These programs provide administrative controls that establish standard methods and requirements for collecting, maintaining, and disposing of records. These programs also ensure that documents are controlled and distributed in accordance with identified written requirements and authorizations. The administrative controls for the generation and revision of records and documents are contained in implementing procedures. The principal elements of each of the RMDC programs and a brief description of the manner in which the functions associated with each element are performed are provided below, along with a list of the types of records that are retained for the duration of the licensed activities.

11.7.1 Records Management Program

The Records Management program provides direction for the handling, transmittal, storage, and retrievability of records. Records Management design provides for adequate assurance that the appropriate records of IROFS are maintained in accordance with the BDC contained in 10 CFR 70.64(a) and the defense in depth requirements of 10 CFR 70.64(b). Records maintained pursuant to 10 CFR Part 70 may be the original, a reproduced copy, electronic media, or microform, if such reproduced copy, electronic media, or microform is duly authenticated by authorized personnel and is capable of producing clear, complete, accurate and legible copies through storage for the period specified by regulation. Records such as letters, drawings, and specifications must include pertinent information such as stamps, initials, and signatures. Initials and signatures may be authenticated electronic reproductions. Records are categorized and handled in accordance with their relative importance to safety and storage needs. Special provisions are made for handling contaminated records and ensuring their inclusion in the program. This program is implemented through procedures that provide guidance for the following program elements.

11.7.1.1 Legibility, Accuracy, and Completeness

Documents designated to become records must be legible, accurate, complete, and contain an appropriate level of detail commensurate with the work being performed and the information required for that type of record.

11.7.1.2 Identification of Items and Activities

Records clearly and specifically identify the items or activities to which they apply.

11.7.1.3 Authentication

Records are authenticated or validated by the manager of the organization that originates the record, or his designee, as specified in the procedure, which controls the generation and revision of these records.

11.7.1.4 Indexing and Filing

Methods are specified for indexing, filing, and locating records within the record system to ensure the records can be retrieved in a timely manner.

11.7.1.5 Retention and Disposition

Records retention times are specified in a retention schedule, developed by the manager of the organization that originates the record, or the designee. The process for disposition of records that have reached the end of their retention lifetime is specified by procedures and conforms to applicable requirements.

11.7.1.6 Corrections

Corrections to records are approved by the organization that created the record unless other organizations are specifically designated. Changes are made by clearly indicating the correction, the date of the correction and the identification of the individual making the correction.

11.7.1.7 Protection of Records

Controls are established for protection of records from deterioration, loss, damage, theft, tampering, and/or unauthorized access for the life of the record. Requirements include instructions on protection of records by the record originator until they are transferred to Records Management. Instructions for the protection of special record media such as radiographs, photographs, negatives, microform and magnetic media are provided to prevent damage from excessive light, stacking, electromagnetic fields, temperature, humidity, or any other condition adverse to the preservation of those records. Records, which cannot be duplicated, are stored in a fashion that minimizes deterioration.

11.7.1.8 Storage Requirements

Records encompassed by the QAPD are stored in authorized facilities or containers providing protection from fire hazards, natural disasters, environmental conditions, and infestations of insects, mold, or rodents. Storage facilities are maintained to ensure continuous protection of the records. Requirements are specified for both permanent and temporary storage of records.

▪ Permanent Storage

Records are permanently stored in facilities satisfying the following requirements:

- Storage in 2-hour-rated containers meeting National Fire Protection Association (NFPA) 232-2000 with the clarification that if the NFPA 232 method of storage in 2-hour-rated containers is used, any exceptions to this standard will be documented and justified by the authority having jurisdiction; or
- Storage of duplicate copies in separate facilities that are sufficiently remote from each other to eliminate the possibility of exposure to simultaneous hazards; or
- Storage in facilities that have the following: doors, structures, frames, and hardware that comply with a minimum 2-hour fire rating; a fire protection system; 2-hour fire rated dampers on boundary penetrations; sealed floor surface to minimize concrete dust; adequate access and aisle ways; and a prohibition on eating, drinking, or smoking and performing work other than that associated with records storage or retrieval.

▪ Temporary Storage

The RMDC process requires that those completed records documenting nuclear safety or safeguards and security matters, which are being held temporarily by originating organizations, be properly protected by maintaining them in 1-hour, fire-rated containers. If 1-hour fire-rated containers are used they either bear an Underwriters Laboratory label (or equivalent) certifying 1-hour fire protection, or the containers are certified for 1-hour fire protection by an authorized individual competent in the field of fire protection. Procedural requirements are used to limit the length of time during which records may be maintained in temporary storage, based on the significance of the record.

11.7.1.9 Receipt of Records

A record transmittal process is used to formally transmit records to Records Management. The process includes a receipt acknowledgment that notifies the sending organization that the records have been received and accepted.

11.7.1.10 Access to Records and Accountability for Removed Records

Requirements for controlling access to records and maintaining accountability for records are provided to ensure that only authorized personnel have access to records and to prevent loss, damage, or inadvertent destruction of records.

11.7.1.11 Records Requirements for Procured Goods or Services

Records management requirements for goods or services procured from outside suppliers are specified in the applicable procurement documents. These requirements cover:

- Supplier methods for collection, storage, and maintenance of records
- Identification of required records and applicable retention periods
- Records submittal plans or indexes
- Availability, accessibility, and if applicable, disposition criteria for records retained by the supplier
- Accessibility of the supplier's records prior to the final transfer to the purchaser

11.7.1.12 Control of Sensitive Records

Control, accountability, protection, and disposition of classified and sensitive records are in accordance with Chapter 2.0 of the Security Program for the American Centrifuge Plant and

any other applicable security and privacy requirements. Control of contaminated records is in accordance with applicable radiological control requirements.

11.7.1.13 Types of Records

The requirements for records management vary according to the nature of the plant and the hazards and risks posed by it. Examples of the records required by 10 CFR Parts 19, 20, 21, 25, and 70 are identified in Section 11.7.5 of this license application. The records are listed under the chapter headings of the Standard Review Plan (SRP). The list is not intended to be exhaustive or prescriptive. Different or additional records may be required in certain circumstances.

11.7.1.14 Usage and Control of Computer Codes and Data

Computer programs used in the Records Management program are controlled and maintained in accordance with procedures. These requirements and practices provide for virus protection as well as access control to the Records Management program database and ensure continuing usability of the codes as hardware and software technology change. Routine backups of the Records Management database are performed by application administrators. Precautions are taken to ensure that computer data that constitute a record are stored in a format that is readily retrievable even as hardware and software technology evolve. The storage format of computer data is reviewed as required to determine threats to future retrievability, and if necessary, the data are translated to an updated format and verified acceptable.

11.7.1.15 Items Relied On For Safety Failures

Records of IROFS failures are kept and updated in accordance with 10 CFR 70.62 (a)(3). Record revisions necessitated by post-failure investigation conclusions will be made promptly in accordance with 10 CFR 70.62(a)(3) based on the nature of the record, extent of revision necessary, and potential safety significance. Necessary record revisions will be made within 30 days of the completion of the investigation, unless specifically approved by ACP management

11.7.1.16 Assessment

The overall effectiveness of the Records Management program is evaluated through the audit program described in the Section 18 of the QAPD. Deficiencies identified are corrected in a timely manner in accordance with the procedures described in Section 11.6 of this license application.

11.7.2 Document Control Program

The Document Control program provides direction for the handling, distribution, and transmittal of documents important to nuclear safety and safeguards and security that specify quality requirements or prescribe activities affecting quality, such as procedures, drawings, and calculations. This program is implemented through procedures that provide guidance on the following program elements.

11.7.2.1 Unique Identifier

A unique identification number is assigned or obtained by the generator for each document requiring controlled distribution. Document Control concurs with the numbering scheme for each document type.

11.7.2.2 Approval and Release of Documents

For documents and changes to documents required by the QAPD, requirements are established for approval and release of those documents for distribution. Organizations that are authorized to approve controlled documents are identified in the plant procedures. Changes to controlled documents are approved. After approval, the documents are forwarded to Document Control for control and distribution pursuant to the personnel on the approved distribution list.

11.7.2.3 Master Copy

A master copy of approved controlled documents is maintained by Document Control to ensure the document is available for controlled copy issuance.

11.7.2.4 Controlled Document Index and Distribution Lists

Creation and maintenance of a controlled document index and controlled distribution list(s) for each document or document type are required. The controlled document index is used to maintain a list of controlled documents and to track the current (latest) approved revision levels of those documents. The index is available to users to verify current document revision levels. The controlled document index and the distribution lists are maintained and updated by Document Control.

11.7.2.5 Copies of Controlled Documents

Each controlled copy is stamped, marked, or otherwise identified. A method is established in procedures for duplicating and marking controlled documents so that duplicates are distinguishable from the controlled version. Copies of controlled documents that are not marked or otherwise identified in accordance with procedural requirements are considered information only.

11.7.2.6 Distribution

Controlled documents are distributed in accordance with controlled distribution lists to ensure that they are available in a timely manner at locations where work is being performed. Specific time requirements are established for controlled document distribution and receipt acknowledgment. Document Control uses a transmittal form to distribute controlled documents to copyholders. Copyholders sign, date, and return the transmittal form to confirm that they have received the documents. Document Control tracks the issuance and receipt of transmittals.

11.7.2.7 Voided, Canceled, or Superseded Documents

When notified by the generator of a controlled document that the document has been voided, canceled, or superseded, Document Control removes the document from distribution and notifies copyholders of the changed status.

The approved revised document is distributed at the time that the original document is superseded. The Document Control database is updated to identify the latest approved revision of the document. Distribution of revised documents is described in the Document Control Program procedure and using a Transmittal Form distributed by either interoffice mail or hand delivery. The holder of the Controlled Copy is required to acknowledge receipt by returning a signed Transmittal Form to Document Control. Document distribution is completed in accordance with the safety significance of the document being distributed.

11.7.2.8 Marking Sensitive Documents

Proper marking and handling of documents designated as classified or sensitive documents is accomplished in accordance with Chapter 2.0 of the Security Program for the American Centrifuge Plant and any other applicable security and privacy requirements.

11.7.2.9 Change Documents

Change documents are documents that are used to modify controlled documents. Controls are also applied to the change documents to provide revision approval and distribution controls equivalent to the original document until completion of installation, at which time the original document is revised. Documents showing the current configuration are not changed until the modifications are completed.

11.7.2.10 Revision Identification

The controlled document revision level is clearly identified on the document.

11.7.2.11 Document User Responsibilities

Responsibilities of the end user and copyholders are defined. Responsibilities include requirements for the use of controlled documents and working copies. Copyholders of controlled documents update their controlled documents each time a revision or change is sent out, and promptly return the transmittal form acknowledging receipt.

11.7.2.12 Usage and Control of Computer Codes and Data

Computer programs used in the Document Control program are controlled and maintained in accordance with the "Computing and Telecommunications Security Manual" and Information Systems procedures. These requirements provide for virus protection as well as access control to the Document Control program database and ensure continuing usability of the codes and data as hardware and software technology change. For example, procedures allow

older forms of information and codes for older computing equipment to be transferred to contemporary computing media and equipment. Routine backups of the Document Control database are performed by application administrators.

11.7.2.13 Assessment

The overall effectiveness of the Document Control program is evaluated through the audit program described in Section 18 of the QAPD. Deficiencies identified are corrected in a timely manner in accordance with the requirements described in Section 11.6 of this license application.

11.7.2.14 Archiving Documents

The record copy of revisions of controlled documents is transmitted to Records Management in accordance with the requirements of the Records Management program.

11.7.3 Organization and Administration

11.7.3.1 Responsibilities

The Engineering Manager is responsible for the RMDC program. These responsibilities include:

- Directing the activities and personnel of the RMDC programs
- Directing the development, implementation, and maintenance of methods and procedures encompassing a records management program
- Directing the development, implementation, and maintenance of methods and procedures encompassing a document control program
- Assuring that the laws, codes, standards, regulations, and company procedures pertaining to record keeping and document control requirements are met

11.7.3.2 Training and Qualifications

Appropriately trained and qualified personnel manage the RMDC programs. No specific experience related to the control of documents or management of records is required, although previous technical or RMDC experience is recommended.

11.7.4 Employee Training

General training in RMDC is provided to employees as part of the general topics covered in GET, as described in Section 11.3 of this license application.