

g:\alleg\panel\20030110arb11.wpd ALLEGATION REVIEW BOARD DISPOSITION RECORD

Allegation No.: RI-2003-A-0110
Site/Facility: Salem/Hope Creek
ARB Date: 02/19/2004

Branch Chief (AOC): Meyer
Acknowledged: Yes
Confidentiality Granted: No

Issue discussed: Periodic update of PSEG safety conscious work environment (SCWE) allegation

Alleger contacted prior to referral to licensee? -----

ALLEGATION REVIEW BOARD DECISIONS

Attendees: Chair - Blough Branch Chief (AOC) - Meyer SAC - Vito
OI Rep. - Neff, Wilson RI Counsel - Farrar Others - Barber

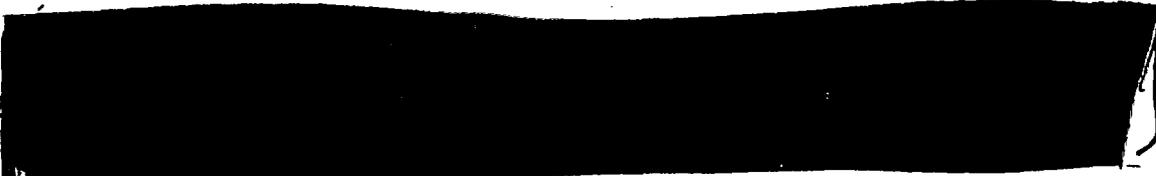
DISPOSITION ACTIONS:

- 1) Review status of licensee actions to address SCWE letter issued on January 28 including any feedback from the alleger and from David Lochbaum of UCS. Randy to provide e-mail summarizing PSE&G actions and proposed actions in response to 1/28/04 letter.

Responsible Person: Meyer/SAC/Blough
Closure Documentation: _____

ECD: 2/27/04
Completed: _____

2)



Responsible Person: Meyer/Barber
Closure Documentation: _____

ECD: 2/27/04
Completed: _____

- 3) After receipt of licensee plan determine to what extent it relies on or disregards previous surveys (ECP, Winston and Strawn, and Gallup Q12). Repanel to consider whether to compare depth of these previous surveys at PSEG with those of other utilities such as Susquehanna.

Responsible Person: Meyer
Closure Documentation: _____

ECD: 3/26/04
Completed: _____

- 4) DRP/DRS to continue review of interview transcripts and provide summaries in terms of safety culture/SCWE and technical issues.

Responsible Person: Blough/Lanning
Closure Documentation: _____

ECD: Ongoing
Completed: _____

- 5) Review and update insights from Hope Creek interviews performed since the last ARB (1/29/04).

Responsible Person: All
Closure Documentation: _____

ECD: 1/29/04
Completed: 2/19/2004

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- 6) Finish the last Hope Creek shift manager and AOM interviews. Schedule interviews to [redacted] Upon completion of these interviews determine if additional licensee staff and management interviews are necessary and to better develop identified technical issues.

Responsible Person: Barber/Neff
 Closure Documentation: _____

ECD: Ongoing
 Completed: _____

- 7) Upon completion of the additional interviews reconvene the ARB to determine the need for additional NRC action (beyond the 1/28/04 letter).

Responsible Person: All
 Closure Documentation: _____

ECD: 3/4/2004
 Completed: _____

- 8) Residents to continue assessment of root cause evaluation of O&P issues with the author to fully understand context, purpose and conclusions.

Responsible Person: Meyer

ECD: 3/4/2004

- 9) Next periodic ARB

Responsible Person: SAC
 Closure Documentation: _____

ECD: 3/4/2004
 Completed: _____

SAFETY SIGNIFICANCE ASSESSMENT: SCWE Review

PRIORITY OF OI INVESTIGATION:

If potential discrimination or wrongdoing and OI is not opening a case, provide rationale here (e.g., no prima facie, lack of specific indication of wrongdoing):
 Rationale used to defer OI discrimination case (DOL case in progress):

ENFORCEMENT STATUTE OF LIMITATIONS CONSIDERATION (only applies to wrongdoing matters (including discrimination issues) that are under investigation by OI, DOL, or DOJ):

What is the potential violation and regulatory requirement? _____

When did the potential violation occur? _____

(Assign action to determine date, if unknown)

Once date of potential violation is established, SAC will assign AMS action to have another ARB at four (4) years from that date, to discuss enforcement statute of limitations issues.

NOTES: (Include other pertinent comments. Also include considerations related to licensee referral, if appropriate. Identify any potential generic issues)

Distribution: Panel Attendees, Regional Counsel, OI, Responsible Individuals (original to SAC)

ARB MINUTES ARE REVIEWED AND APPROVED AT THE ARB

Strategy for Regulatory Oversight of PSEG as of Feb. 19

Objective: Perform regulatory oversight of PSEG such that ROP actions, allegation followup, and evaluation of work environment concerns enable prompt, proper regulatory actions regarding Salem and Hope Creek.

Methods:

January 28th Work Environment Letter

1. Interact with PSEG regarding preliminary plan ([REDACTED] discussions) 76
2. Evaluate PSEG-submitted SCWE self-assessment plan (factors attached)
3. Schedule, plan, and prepare for public meeting on submitted plan (tentatively March 18)
4. Formulate follow-on meeting to review action plan results (mid-summer?)

SCWE

1. Schedule, prepare, and execute meeting with Randy and PSEG workers arranged with Lochbaum - Canceled on Feb 18
2. Complete Hope Creek shift manager interviews (4 of 5 done; last on Feb. 20)
3. Complete [REDACTED] executive interviews 76
4. Complete any additional staff wrongdoing interviews
5. Complete review of transcripts and binning of issues
6. Complete resident review of root cause evaluation referred by allegor
7. Continue periodic allegation review meetings to reassess and update status
8. Complete SCWE review, determine need for onsite SCWE inspection, evaluate referral of some information, and document results.

ROP Actions

1. Issue Annual Assessment Letter, including PI&R cross-cutting issue and SCWE discussion, and request response on PI&R (March 3)

2. **Schedule Annual Assessment Meeting (most likely combined with second SCWE meeting, following written response on PI&R)**
3. **Complete baseline program at greater than nominal samples (SSDI at Salem begins Feb 23; outage at Salem 1 begins April 1)**

Other Actions

1. **Determine suitable date for next management site visit (just before response review public meeting or mid-summer meeting)**

Discrimination

1. **OI to complete discrimination investigation**

Resources:

1. **Residents - Four residents plus backfill when assigned residents are unavailable and augmented for outage.**
2. **Regional - Branch 3 with BC, SPE & 2 PEs, augmented with other regional staff for discrete tasks when available.**

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SCWE Response Evaluation

Factors which should be expected to be in a thorough plan to address the Work Environment at Salem & Hope Creek:

- 1. Synergy survey and full analyses**
- 2. Independent review - Utility Service Alliance (USA) assessment**
- 3. Indepth interviews of staff to fully understand developed issues**
- 4. Comprehensive integration and management review of results**
- 5. Monitoring of measures of corrective action effectiveness**
- 6. Monitoring of operational decision-making (as applicable)**
- 7. Implementation \ corrective action plan to address developed issues**
- 8. Communication of management messages**

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