

September 18, 2006

Mr. L. William Pearce  
Vice President  
FirstEnergy Nuclear Operating Company  
Perry Nuclear Power Plant  
10 Center Road, A290  
Perry, OH 44081

SUBJECT: REQUEST FOR INFORMATION  
UPCOMING PERRY NUCLEAR POWER PLANT CONFIRMATORY ACTION  
LETTER (CAL) FOLLOWUP INSPECTION  
CORRECTIVE ACTION PROGRAM ACTION ITEM EFFECTIVENESS

Dear Mr. Pearce:

On November 6, 2006, the NRC will begin a review of your actions to address issues related to the implementation of your corrective action program as part of our September 28, 2005, Confirmatory Action Letter followup inspection activities. This inspection will focus on determining whether actions taken by FirstEnergy to improve corrective action program implementation have been effective and whether additional inspection beyond that prescribed by the ROP baseline inspection program is required. The actions you have taken include Commitments identified in FirstEnergy's August 8 and 17, 2005 letters, responding to our IP 95003 supplemental inspection report, and selected completed actions prescribed in the Perry Phase 1 and Phase 2 Detailed Action and Monitoring Plan.

As such, the inspection objectives are to: 1) determine whether actions to address issues in the licensee's program for identifying, assessing, and correcting performance deficiencies were effective, and 2) determine whether corrective action program monitoring tools, such as Key Performance Indicators (KPIs), reflect a sustained improvement in the implementation of the corrective action program and whether corrective actions are identified and implemented, as required, based upon the KPI data that is collected.

In order to minimize the impact that the inspection has on the site and to ensure a productive inspection, we have enclosed a request for documents needed for the inspection. The documents should be ready for NRC review by October 18, 2006.

If there are any questions about the material requested, or the inspection in general, please call Geoffrey Wright, who is the team leader for this inspection, at (630) 829-9602.

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter and its enclosure will be available electronically for public inspection in the NRC Public Document Room or from the Publicly Available Records (PARS) component of NRC's document system (ADAMS), accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html> (the Public Electronic Reading Room).

Sincerely,

**/RA/**

Eric R. Duncan, Chief  
Branch 6  
Division of Reactor Projects

Docket No. 50-440  
License No. NPF-58

Enclosure:

Request for Information Regarding CAL Followup Inspection - Corrective Action Program Action Item Effectiveness Inspection

cc w/encl: G. Leidich, President - FENOC  
J. Hagan, Chief Operating Officer, FENOC  
D. Pace, Senior Vice President Engineering and Services, FENOC  
Director, Site Operations  
Director, Regulatory Affairs  
M. Wayland, Director, Maintenance Department  
Manager, Regulatory Compliance  
G. Halnon, Director, Performance Improvement  
J. Shaw, Director, Engineering Department  
D. Jenkins, Attorney, FirstEnergy  
Public Utilities Commission of Ohio  
Ohio State Liaison Officer  
R. Owen, Ohio Department of Health

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**Requested Material to Support the November 2006  
Perry Corrective Action Program Effectiveness Review**

Please provide 5 copies of the following information electronically for Calendar Year 2006, unless otherwise noted. The electronic folders should be organized consistent with the outline below. One paper copy should be available for review on-site.

1. All Condition Reports (CRs), assessments, corrective actions, and effectiveness review documents involving Root Cause Analyses for 2005 and 2006.
2. All CRs, assessments, and corrective actions involving:
  - a. Full apparent cause evaluations;
  - b. NRC non-cited violations;
  - c. 10 CFR 50.72 reportable events;
  - d. Actual events involving the call-out of the Emergency Response Organization;
  - e. Detailed Action and Monitoring Plan (DAMP) Action Items D1.6, I.3.5, I.4.2, and D.9.2;
  - f. Corrective Action Program observations from the 2005 IP 95003 inspection;
  - g. Key Performance Indicators; and
  - h. Corrective Action Program internal and external audit findings.
3. Audits and assessments performed by the quality assurance group, line organizations, and external organizations.
4. Closure documentation associated with Commitment 2.d/DAMP Action Item 1.10: "Perform a self-assessment that evaluates the overall health of the CAP [Corrective Action Program], including an aggregate assessment of key performance indicator trends. Assess whether progress has been made in CAP performance."
5. Evaluation of and corrective actions associated with CR 06-00787, "Inconsistencies With GAP Closure Plans for Red/Yellow Corrective Action Program KPIs."
6. Key Performance Indicators (KPIs) associated with the Corrective Action Program.
7. List of all CRs associated with limited apparent cause evaluations.
8. List of operating experience information received after January 1, 2006.
9. List of all observations from the IP95003 supplemental inspection conducted in 2005 and associated condition reports and applicable assessments.

In addition, please have the following information available at the site when the team arrives.

Procedures and/or Business Practices Associated with:

1. Corrective Action Program, including root cause evaluations, full apparent cause reviews, and limited apparent cause reviews.
2. Operating Experience Program.
3. Key Performance Indicators.

Enclosure