

Enclosure 14 to ET 07-0022

**WCNOC Procedure AP 28A-100, "Condition Report"**



AP 28A-100

CONDITION REPORTS

Responsible Manager

Manager Regulatory Affairs

Revision Number	3
Use Category	Reference
Administrative Controls Procedure	Yes
Management Oversight Evolution	No
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**1.0 PURPOSE**

1.1 This procedure implements a portion of Wolf Creek Nuclear Operating Corporation's (WCNOC) Corrective Action Program (CAP). It is used for evaluating human performance errors, procedural or programmatic issues. This program provides input to self-assessment, and trending programs. The CAP addresses deficiencies as well as those actions desired to improve performance and achieve excellence.

**NOTE**

WCNOC implements this program through the Performance Improvement, Learning, Observation and Trending (PILOT) software. Conditions identified in PILOT are documented and resolved as Condition Reports in accordance with this procedure. The PIR database, and applicable procedures, remains active to allow closure of PIRs written prior to PILOT.

**2.0 SCOPE**

2.1 Condition Reports are used to report conditions to be evaluated, corrected, and tracked to resolution. [3.2.21]

2.2 WCNOC Safety Manual compliance issues are exempted from the scope of this procedure because WCNOC implements what is known as a behavior based safety process as a stand-alone program to improve industrial safety. (3.1.3)

2.3 Condition Reports are used to document corrective actions for Licensee Event Reports (LERs), and cited NRC Violations. [3.2.2, 3.2.9]

2.4 Condition Reports are used to evaluate the programmatic aspects of significant hardware failures. [3.2.1]

2.5 Condition Reports are used to document and evaluate degraded or potentially indeterminate conditions (See AP 28-011 definition of Deficiency) of plant equipment that are not documented on a Work Request/Work Order because the specific plant equipment cannot or has not yet been identified (such as for Supplier Quality, vendor sources, a 10 CFR Part 21 notification, or some other form of operating experience). Once specific equipment has been identified, a WR must be initiated. [3.2.8]

2.6 Condition Reports are used for evaluating causes of hardware failure trends identified by the various trending programs. Condition Reports are used to evaluate performance trends and improve performance.

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### 3.0 REFERENCES AND COMMITMENTS

#### 3.1 References

- 3.1.1 USAR Section 17.2.16
- 3.1.2 10CFR50, Appendix B, Criterion 16
- 3.1.3 CR 2006-001594, provides a documented basis for why safety manual non-compliances are exempt from corrective action procedures.
- 3.1.4 CR 2006-002039, CA #495, CRs for non-cited violations.
- 3.1.5 CR 2006-002544, Technical Specification Section 5 violation definition
- 3.1.6 CR 2006-002051, Tracking of PIR Condition Actions using Work Requests/Work Orders

#### 3.2 Commitments

- 3.2.1 WM 88-0028, letter dated 01-29-88 from B. D. Withers, WCNOG to the NRC.
- 3.2.2 WM 90-0182, letter dated 10-25-90 from B. D. Withers, WCNOG, to the NRC, "Response to Request for Additional Information Concerning Notice of Violation 482/9026-01".
- 3.2.3 NRC Inspection Report 50-482/91-01, "Self-Assessment and Quality Verification"
- 3.2.4 PIR 94-0019, "Ineffective Corrective Action" NOV 482/9329-03. Letter # WM 94-0012.
- 3.2.5 QPV 07/91-065, "PDR Program Weaknesses"
- 3.2.6 INPO Evaluation of Wolf Creek Generating Station Final Report, August 1992, Finding OA.3-1
- 3.2.7 WM 88-0312, letter dated November 30, 1988 "Response to Inspection Report 50-482/88-200,"
- 3.2.8 PIR 95-0449, "Documentation of Potential Indeterminate Condition of Plant Equipment"
- 3.2.9 PIR 95-0447, "Lack of Significant PIR for NRC Violations"
- 3.2.10 PIR 96-2610, "Ineffective Corrective Actions for PIR 93-0131 Regarding Tech Spec Clarifications"

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- 3.2.11 PIR 96-3063, "Corrective Action Program Weaknesses Identified During QE Audit K-469"
- 3.2.12 PIR 96-2949, "Ineffective Corrective Action"
- 3.2.13 PIR 96-2878, LER 96-018-00 - Formation of a Corrective Action Review Board. Letter # WO 96-0168.
- 3.2.14 PIR 96-2592, NOV 9618-02 - Formation of a Corrective Action Review Board. Letter # WM 96-0137.
- 3.2.15 PIR 97-1591, "Corrective Actions Documented in LER Not Contained in PIR"
- 3.2.16 SOER 98-2, "Circuit Breaker Reliability Recommendation 3.C", as referenced in PIR 98-3483."
- 3.2.17 PIR 98-1218, "Potential Violation for Failure to Classify Equipment as a Maintenance Rule Functional Failure". Response to NOV 50-482/9805-05.
- 3.2.18 WM 96-0083, letter dated August 16, 1996, from N.S. Carns, WCNOG to the NRC, "Reply to Notice of Violation 482/9611-03." PIR 96-1624
- 3.2.19 PIR 98-1169, "Failure to Identify and Log Entrance Into Technical Specifications"
- 3.2.20 ITIP 02104 (SOER 92-01, Rev. 1), "Reducing the Occurrence of Plant Events Through Improved Human Performance"
- 3.2.21 PIR 95-2761, "Weak Root Cause Investigations for Significant PIRs"
- 3.2.22 WM 95-0044, letter dated March 10, 1995, from N. S. Carns, WCNOG, to the NRC, "Reply to Notice of Violation 482/9413-02". PIR 95-0260.
- 3.2.23 PIR 97-0464 - "Inadequate Interface Among Organizations" Letter # ET 97-0044
- 3.2.24 PIR 97-0229 "Auxiliary Feedwater Recirculation Line Snubber not meeting ASME requirements"
- 3.2.25 PDR QA 91-0427, "Identification and Root Cause Analysis of Significant PDRs"
- 3.2.26 QPV 12/91-115, "Identifying Corrective Actions and Commitments from PIRs"

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- 3.2.27 RCMS 96-156, "WCNOC's Response to Enforcement Action 96-124"
- 3.2.28 PIR 99-1994 and PIR 99-1996, "INPO Evaluation of Wolf Creek Generating Station", Interim Report, March 1999, Finding
- 3.2.29 PIR 96-1212, "Procedure Not Matching USAR Requirements for Independent Effectiveness Follow-up"

#### 4.0 DEFINITIONS

##### 4.1 Non-PIR Condition

4.1.1 Non-PIR Conditions are recommendations or proposed enhancements that should receive consideration and some level of gap or benefit analysis. When Non-PIR Conditions are documented on Condition Reports in PILOT they become "Address Management" Condition Reports.

##### 4.2 PIR Condition

4.2.1 PIR Conditions are performance issues, programmatic issues, or events that need to be corrected. PIR Conditions are documented on Condition Reports in PILOT and they may be referred to as PIR CRs, PIR conditions, or PIRs. [3.2.16]

##### 4.3 Corrective Action

4.3.1 Measures taken to correct the consequences of errors and when appropriate, prevent or minimize recurrence of similar events. Corrective Action is taken to:

1. **Restore compliance;** This is Remedial Action and takes place immediately and/or following evaluation. Remedial Action includes, for example, correcting a deficient procedure and/or paperwork and if applicable, addressing the consequences of implementing the incorrect procedure (i.e. doing the work again correctly). Remedial Action also includes restoring compliance to any other areas discovered to be out of compliance during the review for Extent of Condition.
2. **Provide interim or compensatory measures until the conditions are corrected;** This is Interim Action and takes place immediately and/or following evaluation and remains in effect until permanent actions are complete.

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3. **Correct Causes**; this is preventive action and includes correcting root and contributing causes as appropriate. Preventive action includes changes needed to prevent the event from happening again, such as physical barriers, changed work practices, or improved knowledge and skills.

4.4 Extent of Cause

4.4.1 The extent to which the cause(s) of an identified event have impacted other plant processes, equipment, or human performance. (Note: previously this was imprecisely referred to as "GENERIC IMPLICATION". That term was vague and often misunderstood. [3.2.4, 3.2.12, 3.2.11])

4.5 Extent of Condition

4.5.1 The extent to which the actual condition exists with other plant processes, equipment, or human performance.

4.6 MPFF

4.6.1 Maintenance Preventable Functional Failures as described in AP 23M-001. [3.2.22]

4.7 Performance Deficiency

4.7.1 A functional area or cross-functional problem that is narrow in scope and/or has low consequence to existing performance and requires corrective action.

4.8 Responsible Manager

4.8.1 The division-level manager responsible for ensuring that appropriate evaluation and actions are performed. The authority for addressing non-significant PIR Conditions and Non-PIR Conditions is assigned to the Superintendent or Supervisor. However, the responsibility for the adequacy of evaluation and action remains with the Responsible Manager.

4.9 Superintendent or Supervisor

4.9.1 The Superintendent or Supervisor with the authority for ensuring that appropriate non-significant PIR evaluations, Non-PIR Conditions, Action Plans, and Actions are performed.

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#### 4.10 Significance Level

4.10.1 The significance of the PIR Condition with respect to the consequences or potential consequences to personnel or nuclear safety, radiological safety or environmental stewardship. The purpose of classifying PIR Conditions by significance level is to identify Significant Conditions that warrant the resources necessary for performing an in-depth root cause investigation and non-Significant Condition which only require remedial action. The two significance levels are:

##### 1. Significant

a. Conditions screened in accordance with Attachment D that require a root cause investigation to determine the extent of corrective actions needed to prevent recurrence. The cause evaluation is conducted as required by AI 28A-001. Significant PIR Conditions include but are not limited to significant conditions adverse to quality.

##### 2. Non-Significant

a. Conditions that warrant a review to ensure that the condition is understood, remedial actions, and in some cases limited preventive actions, are taken. Some non-significant PIR Conditions, as determined by the Screening Review Team using the guidance in Attachment F, undergo Apparent Cause Evaluation.

#### 4.11 Significant Hardware Failure

4.11.1 A failure of a structure, system or component (SSC) that meets the significance criteria contained in Attachment D. [3.2.7]

#### 4.12 Trend of Significance

4.12.1 A validated decline in performance that impacts the ability of an SSC to perform its specified safety function; or impacts personnel, nuclear, or radiological safety; or impacts environmental stewardship.

### 5.0 RESPONSIBILITIES

#### 5.1 All Personnel

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5.1.1 Promptly notify the Shift Manager if a condition has the potential to impact the ability of a structure, system, or component (SSC) to perform its specified function. [3.2.18, 3.2.19]

5.1.2 Initiate Condition Reports in PILOT when issues or events are identified.

5.1.3 Provide sufficient information to understand the condition.

5.1.4 Identify any immediate actions taken to correct the condition and mitigate its consequences.

5.2 Screening Authority/Screening Review Team

5.2.1 The Screening Authority is responsible for the initial screening of all Condition Reports.

5.2.2 The Screening Review Team (SRT) is responsible for screening Condition Reports as directed by Step 6.2.2 and Attachment B.

5.3 Corrective Action Group personnel

5.3.1 Maintain PILOT for tracking and trending of Condition Reports. [3.2.3]

5.3.2 Facilitate the Screening Review Team (SRT) meetings.

5.4 Condition Report Evaluators

5.4.1 Comply with the requirements of this procedure when performing evaluations and developing actions.

5.4.2 If additional information is identified during the evaluation that affects the ability of a structure, system, or component (SSC) to perform its intended function, reportability, potential functional failure, significance or scope of the PIR Condition, the evaluator shall contact the Shift Manager or other management as applicable, and shall document the information in the PIR Condition Report. [3.2.18, 3.2.19]

5.5 Superintendent or Supervisor

5.5.1 Assign Condition Reports to work group members for evaluation.

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- 5.5.2 Review and approve non-significant PIR Condition Report evaluations.
- 5.5.3 Review and accept Action Plans and Condition Actions for Condition Reports.
- 5.5.4 Review and acknowledge completed Condition Actions.
- 5.5.5 Review and implement Action Plans.
- 5.5.6 Approve due date extensions for accepted Condition Actions.

5.6 Responsible Manager

**NOTE**

**The Superintendent or Supervisor has the authority for addressing non-significant PIR Conditions and Non-PIR Condition Reports. However, the responsibility for addressing Significant PIR Conditions remains with the Responsible Manager.**

- 5.6.1 Assign resources to ensure evaluations, actions and other activities required by this procedure are approved, prioritized, and completed in a timely manner consistent with their significance. Ensure that immediate actions are sufficient, and that interim actions are appropriate.
- 5.6.2 Review and approve evaluations and actions for Significant PIR Condition Reports. The approval function of the Responsible Manager for Significant PIR Conditions is not a function that can be delegated except when the manager is absent. [3.2.11]
- 5.6.3 Ensure that the evaluation and actions for PIR Condition Reports identified as violations of Technical Specification Section 5 are presented to the PSRC. This is to be a presentation with representation from the Responsible Manager (not simply "forwarding" a copy) that occurs promptly after the actions are developed. This will allow the PSRC to fulfill its responsibility for investigation and resolution of all violations of Technical Specifications.
- 5.6.4 Schedule the performance and approve the completion of effectiveness follow-ups. [3.2.2]
- 5.6.5 Approve due date extensions for PIR Condition Reports and accepted Condition Actions.

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5.7 Corrective Action Review Board (CARB)

5.7.1 Review and accept the evaluation and action plans for all Significant PIR Condition Reports, except for Significance Category 16, "Other Significant Events as Determined by Management", using guidelines contained in ATTACHMENT E. [3.2.10, 3.2.11, 3.2.13, 3.2.14]

5.8 Manager System Engineering/Supervisor NSSS/RX

5.8.1 Review PIR Condition Reports which document reactivity or potential reactivity control issues to determine if additional actions are necessary in accordance with AP 19E-002. [3.2.6]

5.9 Manager Chemistry/Radiation Protection

5.9.1 Approve preventive actions for Significant PIR Condition Reports dealing with radiological occurrences.

5.10 Manager Regulatory Affairs

5.10.1 Oversee the maintenance and implementation of this program.

5.10.2 Approve the assignment of Screening Authorities in accordance with Attachment A.

5.10.3 Based on Attachment B, establish the initial and continuing mentoring needed for Screening Review Team members and ensure participation in the Screening Review Team is adequate to perform the duties of the team.

5.10.4 Ensure that information from Condition Reports containing underlying potential or actual personnel safety issues is forwarded to the Industrial Hygienist for review. Any further action will be discussed with the appropriate manager and Industrial Hygienist. [3.2.28]

5.11 Applicable Vice President

5.11.1 Review and accept evaluations and action plans for PIR Condition Reports classified as Significance Category 16, "Other Significant Events as Determined by Management" using the guidance of ATTACHMENT E.

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5.12 Manager Quality & Performance Improvement

5.12.1 Evaluate data from Condition Reports to identify trends.

5.13 Plant Safety Review Committee (PSRC)

5.13.1 Review PIR Condition Reports which document violations of Technical Specifications (T/S) Section 5 to determine if additional actions are necessary in accordance with AP 20B-001.

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## 6.0 PROCEDURE

### 6.1 Condition Identification

- 6.1.1 All personnel, including supplemental, shall promptly notify the Shift Manager when they have information they believe impacts the ability of a structure, system, or component (SSC) to perform its specified function(s). [3.2.18, 3.2.19]
- 6.1.2 When information concerning the ability of an SSC to perform its specified function(s) is less conclusive or the condition is still in the discovery phase, personnel will notify the Screening Authority or Shift Manager. A listing of Screening Authorities is maintained in PAPERLESS ENVIRONMENT under the icons of PIRs/PIR Information. The Screening Authority, as applicable, will in turn keep the Shift Manager informed of ongoing investigations and the potential impact to plant SSCs. [3.2.18, 3.2.19]
- 6.1.3 Promptly write Condition Reports in PILOT:
- by choosing "Condition Report - Initiate Condition Report" from the menu. Select "Yes" to the question "Does Condition Require a PIR?" on the PILOT Initiate Condition Report screen when it is known that the CR is documenting a problem to be corrected. If in doubt, select "?" and the CR will be routed to the Screening Authority to make the determination. -OR-
  - by seeking out a computer enabled individual to assist in creating a Condition Report in PILOT and selecting "Yes" or "?" to the question "Does Condition Require a PIR?"
- 6.1.4 If the initiator wishes to remain anonymous, sign in as "ANON" and use "WCNOC" as the password.
- 6.1.5 If PILOT is not available, Form APF 28A-100-01, available in hard copy in the News Centers or electronically in CURATOR, may be used for initiating Condition Reports and taken to the Screening Authority (a listing of Screening Authorities is maintained in PAPERLESS ENVIRONMENT under the icons of PIRs/PIR Information) during normal work hours, or the Shift Manager during off hours.

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6.1.6 It is not desirable to write "spin-off" or "daisy-chain" Condition Reports. The concept here is to ensure that all related items identified during the evaluation are addressed within that evaluation. Rather than writing additional Condition Reports, assign and resolve related items by individual action items, or document the acceptability of taking no action in the evaluation text. If there is a pressing need to initiate a new Condition Report for a related item, then the original Condition Report must include a specific action to review closure of the "spin-off" Condition Report for adequacy prior to closing the original Condition Report.

6.1.7 Condition Report descriptions should include a concise statement of the undesirable condition. A good description would include the "who, what, when and where" or describe the gap between what should be and the current condition, including any requirement not being met. Provide sufficient information so the Condition Report can be accurately screened and routed to the responsible group. If the initiator does not have adequate information, the initiator should discuss the issue with a knowledgeable individual such as a supervisor or subject matter expert. [3.2.19]

## 6.2 Screening

### 6.2.1 Screening Authority

1. Review the condition to determine if the ability of a Structure, System or Component (SSC) to perform its specified safety function(s) is potentially impacted. [3.2.19]
  - If the Screening Authority cannot determine whether the ability of an SSC to perform its specified safety function(s) is potentially impacted, then contact the appropriate support groups as necessary to assist in this determination.
  - If the condition identified does potentially impact the ability of an SSC to perform its specified safety function(s), then immediately notify the Shift Manager to determine operability and if Technical Specification or Technical Requirements Manual conditions are related. Document the Shift Manager's name, date and time notified.

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2. Review the condition to determine if it is potentially reportable.
3. Review the condition and determine if the condition is a PIR Condition or a Non-PIR Condition.
4. Review the condition to recommend its significance. ATTACHMENT D provides the criteria for Significant PIR Conditions. Document the significance and provide any comments relative to the significance.
5. Recommend if a root cause rapid response team is needed.
6. Review the condition to determine if it is a potential violation of Technical Specifications Section 5. For the purposes of this procedure, a violation of Technical Specifications Section 5 is: (3.1.5)
  - a. A single important administratively controlled activity was omitted or not done correctly resulting in one of the T/S 5.4.1 or 5.5 programs being jeopardized, or
  - b. Several lesser administratively controlled activities came together at the same time where the net result was that one of the T/S 5.4.1 or 5.5 programs was jeopardized.
7. Review the condition to ensure the immediate actions (if any) were sufficient. If immediate actions were not sufficient, then contact appropriate personnel to make suitable arrangements.
8. If additional information is obtained during screening, or if the Condition Report contains confidential and/or proprietary information that needs editing, the nature of the changed and/or additional information shall be documented. Seek concurrence of the initiator (when available) for the removal of the confidential and/or proprietary information. However, even if initiator concurrence is not obtained, the information shall be edited without diminishing details vital to understanding the condition.
9. Review the condition to recommend an assigned responsible organization.

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6.2.2 Screening Review Team, using the guidance of Attachment B:

1. Determine if the Condition Report information should be provided to the Industrial Hygienist because it describes a safety issue. [3.2.28]
2. Determine if the Condition Report should be flagged as "Rework".
3. Determine if the Condition Report should be flagged as a potential Training Issue.
4. Determine if the Condition Report should be flagged as Potential Outgoing O.E. "Yes" or "No".
5. Determine the analysis type for the Condition Report.
6. Confirm, or change as appropriate, all screening attributes except "Operability" and "Reportability".
7. Determine if actions taken and the Extent of Condition is sufficiently addressed to allow closing the Condition Report during screening.
8. Determine if the Condition Report should be flagged as a Site Clock Reset.
9. Determine if the Condition Report should be flagged as a Potential Reactivity issue.

6.3 Evaluation

6.3.1 Analysis Type: Analysis types for Condition Reports are:

1. Root Cause Analysis is required for Significant PIR Conditions. AI 28A-001 provides the administrative instructions for this analysis type.
2. Common Cause Analysis may be requested for selected non-significant PIR Conditions. AI 28A-005 provides the administrative instructions for this analysis type.
3. Apparent Cause Evaluation (ACE) may be required for selected non-significant PIR Conditions. AI 28A-006 provides the administrative instructions for this analysis type.

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4. Basic Evaluations (Broke-Fix) determine the extent of condition and remedial actions for Non-ACE, non-significant PIR Conditions.

5. Evaluations (Other) of Non-PIR Conditions should establish a basis for whether or not enhancement actions will be taken. This can be a simple decision, gap analysis, cost/benefit assessment, or trend analysis.

6.3.2 The Responsible Manager ensures that PIR Condition Reports identified as potential violations of Technical Specification Section 5 are presented to the PSRC following the completion of the evaluation. This is to be a formal presentation (not simply "forwarding" a copy) that occurs promptly after the actions are developed. This will allow the PSRC to fulfill their responsibility for investigation and resolution of all violations of Technical Specifications.

6.3.3 All personnel, including supplemental, shall promptly notify the Shift Manager when they have information they believe impacts the ability of a structure, system, or component (SSC) to perform its specified function(s). [3.2.18, 3.2.19]

1. When information concerning the ability of an SSC to perform its specified function(s) is less conclusive or the condition is still in the discovery phase, personnel will notify the Screening Authority or Shift Manager. The Screening Authority as applicable will in turn keep the Shift Manager informed of ongoing investigations and the potential impact to plant SSCs. [3.2.18, 3.2.19]

6.3.4 The responsible organization may request changes of classifications from what was initially assigned in the screening if available information warrants such a change. Changes from Significant to non-Significant shall be made in compliance with ATTACHMENT D. Changes from "Apparent Cause - Yes" to "Apparent Cause - No" shall be made with Screening Review Team (SRT) concurrence.

1. Reroute the PIR Condition Report to the applicable processing step and include reroute notes documenting the requested change and basis for change.

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- 6.3.5 Significant PIR Condition Reports are assigned to qualified individuals for evaluation and action plan development. (Refer to Paperless Environment, Qualified Personnel, Qualification Tool) [3.2.5, 3.2.21, 3.2.27]
- 6.3.6 For significant events that are complex in nature, involve several groups or for other reasons could benefit from a multi-disciplined approach towards the investigation, the Responsible Manager should consult with the management of other affected organizations to ensure the appropriate resources are applied to the investigation. The Responsible Manager may also want to consult with executive management and Plant Manager, to determine if an Incident Investigation Team (IIT) should be created. AI 28A-004 provides guidance for the activities of an IIT. [3.2.23, 3.2.24]
- 6.3.7 The level of detail required in PIR Condition evaluations is consistent with the significance level.
1. Significant PIR Conditions require Root Cause Analysis, Independent Review, Responsible Manager approval, and Corrective Action Review Board (CARB) acceptance. Vice President acceptance is required in place of CARB for Significant PIR Conditions classified as "Other Significant Events as Determined by Management" (Category 16).
  2. Non-significant PIR Conditions require evaluation to the extent necessary to determine adequate remedial action, and appropriate approval. Some are selected to undergo an Apparent Cause Evaluation (ACE).
- 6.3.8 If the PIR Condition Report is addressing ineffective corrective action from a previous Significant PIR Condition, then two distinct root cause objectives apply:
1. re-investigate and correct the initial condition, and;
  2. determine why the corrective action process was ineffective. Areas to evaluate include:
    - a. Identification of the Condition - Was the condition incorrectly identified, resulting in an incorrect Root Cause Analysis?

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b. Cause Determination - Were analysis or evaluation techniques used incorrectly or not at all, resulting in an incorrect cause determination?

c. Preventive Actions - Did the actions address each cause?

d. Preventive Action Implementation - Were the actions properly implemented?

6.3.9 Ownership of Condition Reports requiring evaluation assistance and/or actions by other groups should remain with the Responsible Organization. The assigned individual in the Responsible Organization should coordinate with the other groups as necessary to facilitate the evaluation and/or action. The responsibility to document the evaluation results, and acknowledge that the actions taken are sufficient remains, with the Responsible Organization.

6.3.10 Evaluators can use any of a host of available tools within the evaluation. However, it is important to understand that these tools are a means to assist in the evaluation and should not be used as an action plan item. As an example, if a tool such as a Training Needs Analysis is used, it needs to be used within the evaluation, and not subsequent to it. The point here is that before the evaluation can be considered complete, the question of a knowledge or skill deficiency needs to be answered. In summary, any time one proposes a TNA as an action, a flag should be raised: If I have not yet concluded if there is a knowledge or skill deficiency, then I have not yet completed my evaluation.

6.3.11 Specific Evaluation Steps:

1. The assigned evaluator should contact the initiator, to validate the condition description and obtain clarification or additional information prior to performing the evaluation.
2. For PIR Conditions addressing personnel injuries, the evaluator shall also contact Health Services and Safety to assist in understanding the nature of immediate treatment and industrial safety issues.

3. Maintain awareness that the significance level assigned to the PIR Condition Report is appropriate.
4. As Condition Reports are evaluated, document and address all identified issues within the evaluation.
5. It is not desirable to write "spin-off" or "daisy-chain" Condition Reports. The concept here is to ensure that all related items identified during the evaluation are resolved within the same evaluation or related actions. Rather than writing an additional Condition Report, assign and resolve related items by individual actions, or document the acceptability of taking no action in the evaluation text for the Condition Report. If there is a pressing need to initiate a new Condition Report for a related item, then create an action for the original Condition Report to review closure of the "spin-off" Condition Report and/or action for adequacy.
6. LERs and NOV responses are methods for communicating to the NRC activities taking place within the corrective action program (i.e., description of condition, root cause and corrective actions). All corrective actions in LERs or violation responses shall be contained in a PIR Condition Report and/or action, either prior to or following submittal.
7. Some PIR Conditions and non-PIR Conditions are closed without additional actions. Document the justification for no further actions in the evaluation.
8. If a Condition Report is a duplicate:
  - a. Verify the Condition Report to be closed is truly a duplicated reporting of same condition and not another occurrence of a similar condition.
  - b. Reference the Condition Report number that addresses the condition in the Condition Report being closed as a duplicate.

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9. Requirements for Tracking PIR Condition Actions  
(3.1.6)

- a. PIR Conditions that rely on Work Requests and/or Work Orders to implement remedial action(s) do not require an Action to confirm completion provided the WR/WO has been documented in the PIR evaluation.
- b. PIR Conditions that rely on Work Requests and/or Work Orders to implement preventive action(s) require an Action(s) to confirm that the work was satisfactorily completed.
- c. PIR Conditions that rely on any work scheduling or tracking system other than Work Requests and/or Work Orders to implement remedial or preventive action(s) require an Action(s) to confirm that the work was satisfactorily completed.

6.3.12 Additional Requirements for Significant PIR Conditions

1. The Root Cause Analysis and actions for Significant PIR Conditions require an independent review.
  - An individual who is not directly responsible for the deficient activity, or involved in developing the actions, and who has received the same level of training as required for the investigator, shall perform the independent review. [3.2.2, 3.2.5, 3.2.27]
  - The independent reviewer reviews the evaluation and actions to ensure all requirements of this procedure and AI 28A-001, ROOT CAUSE ANALYSIS are met. This includes ensuring the actions address the identified causes. [3.2.11]
2. The evaluation and planned actions are due to CARB within 30 days of initiation. Extensions of that date are processed in accordance with Section 6.6.

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3. The Responsible Manager shall attend the Corrective Action Review Board (CARB) meeting when the evaluation and actions are presented. For Significance Category 16, "Other Significant Events as Determined by Management", this presentation is made to the applicable Vice President. Where subsequent procedure steps refer to CARB, the applicable Vice President performs the oversight function for Significant Management Discretion PIR Conditions.
4. The CARB shall review the evaluation and planned actions using the guidelines contained in ATTACHMENT E and provide feedback to the manager.
5. Following the review, CARB will determine if the evaluation and planned actions are:
  - a. Accepted - continue with PILOT processing.
  - b. Accepted with Comments - Incorporate any necessary changes based on CARB feedback. Return the evaluation and actions for comment resolution as directed by the CARB Chairman, and then continue with PILOT processing.
  - c. Rejected - Return the evaluation and planned actions to the CARB within 30 days of the reject with any necessary changes. Process an extension in accordance with Section 6.6.
6. Any changes to evaluations or actions subsequent to acceptance by CARB are to be re-reviewed and re-accepted by CARB prior to implementation of the change.

#### 6.4 Action Plans

- 6.4.1 In determining the type and extent of the actions to be implemented, it is important to consider their cost-effectiveness. Comparisons between various administrative controls may need to be considered, or consideration between administrative controls and a design change be given.
- 6.4.2 If a procedure or other document is created or revised as part of the preventive actions, or if existing procedure steps or other documents are used as part of preventive actions, the procedure or other document shall be listed in the actions and the procedure or document change shall meet the following requirements:

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1. Organizational, Programmatic or Hardware changes to prevent recurrence of Significant PIR Conditions must be "institutionalized". That is, the actions must be incorporated into procedures or other controlled documents so that the improved way of doing business, or the hardware improvement, can be adequately "flagged" to prevent future inadvertent nullification. [3.2.25]
2. Documents or procedure steps that are used for or created as actions to prevent recurrence for Significant PIR Conditions shall identify the PIR Condition Report and/or action as a commitment. [3.2.15, 3.2.25, 3.2.26]
3. Procedures that incorporate preventive actions for non-significant PIR Conditions should identify the PIR Condition Report and/or action as a reference.
4. Procedures that incorporate actions that are not intended to prevent recurrence of an event do not need to reference the PIR Condition Report and/or action.
5. If an implemented action identified as a commitment is to be subsequently changed, the person revising the procedure or document is responsible for:
  - a. Reviewing the PIR Condition Report and/or action.
  - b. Ensuring additional actions are developed, approved by CARB, and implemented to compensate for the changed action implementation method.
  - c. Supplementing the original PIR Condition Report and/or action to document the changed action, the approval of the original Responsible Organization, and CARB.

6.4.3 For actions that include formal training of personnel, contact the Training Organization to establish a Training Identification Number (TIN) in accordance with AP 30E-003.

6.4.4 For each action:

- indicate if the action is required to be completed prior to or during a refueling outage and enter the refuel outage number.

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- indicate if the action is a commitment to any regulatory agency. Agencies include NRC, EPA, INPO, KDEM, KS Bureau of Water, etc.
- establish a due date. Action dates are to be set for the first available opportunity for implementation commensurate with their safety significance.

6.4.5 For Significant PIR Conditions, an Effectiveness Follow-up action is required. [3.2.2]

1. PILOT generates a Condition Action to perform the Effectiveness Follow-up when a Significant PIR Condition is closed by the Responsible Manager.

## 6.5 Action Implementation

6.5.1 Implement actions as written

1. Any proposed changes to actions must be approved by the Responsible Organization prior to implementing the change.
2. Additionally, any changes to preventive actions that were reviewed and/or approved by an additional level of oversight such as CARB, PSRC, or Manager Chemistry/Radiation Protection must be re-reviewed and/or re-approved by that oversight function prior to implementing the change.
3. The organization responsible for the Condition Report reviews the completed actions to ensure that the work done addresses the conditions to the satisfaction of the Responsible Manager.
4. Documentation shall be at a level adequate to demonstrate that specific actions have occurred. [3.2.15]
5. If the documentation to support implementation of actions is not recorded in PILOT, then include reference to the location of the documentation. [3.2.15]

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## 6.6 Due Dates

### NOTE

USNRC Inspection Manual Part 9900 address the importance of correcting degraded conditions and nonconforming conditions at the first available opportunity, and that action time frames longer than the next refueling outage are to be explicitly justified. Although this regulatory expectation is limited to degraded conditions and nonconforming conditions subject to the inspection module, this concept is to be applied to all Condition Report actions commensurate with their safety significance. All extensions of due dates are to include justification. Action dates are to be set for the first available opportunity for implementation.

- 6.6.1 State why the extension is acceptable. Describe any hazard associated with delaying the resolution of the issue(s) and why it is acceptable to delay. Identify any interim or compensatory measures put in place to mitigate the risk in delaying completion.
- 6.6.2 Be aware that, although the Responsible Manager, Superintendent, or Supervisor approves due date extensions, the requirement to coordinate changes to preventive actions with any applicable oversight function per Step 6.5 also applies to changes to the implementation schedule.

## 6.7 Effectiveness Follow-up

- 6.7.1 The Responsible Manager ensures the effectiveness follow-up for Significant PIR Conditions is performed, within the established planned completion date, by an individual that was not responsible for developing the Evaluation or actions, or implementation of the actions. [3.2.2, 3.2.29]
- 6.7.2 When selecting individuals to perform Follow-Up Evaluations, the Responsible Manager should consider:
- Would the evaluation be best served if the Evaluator was a Subject Matter Expert or totally independent?
  - Would the evaluation be best served if the Evaluator were Root Cause Trained?
  - Would the evaluation be best served by an individual or a team approach to the evaluation?

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- What level of interface would be preferred with owners of site wide process when the Follow-Up Evaluation results might impact a site wide process?

- 6.7.3 The Follow-up Evaluator is responsible for collecting, analyzing and documenting data used to support the conclusion as to the effectiveness of actions taken to prevent recurrence.
- 6.7.4 Because conclusions may be subjective, the Evaluator is responsible for ensuring that the basis for the conclusions are well documented.
- 6.7.5 The assigned individual shall review the PIR Condition Report and actions. Evaluate the effectiveness of the actions at preventing similar conditions from occurring by performing the following (as a minimum):
1. Confirming that preventive actions have been implemented. Not all actions must be implemented or effective for the preventive actions to be effective. The EFU is to focus on the effectiveness of the actions taken to prevent recurrence.
  2. Review previous PIRs, PIR Condition Reports, and/or equipment performance data to determine if similar events have occurred (Corrective Action personnel may be contacted to assist in identifying events).
    - Describe the techniques used to query data sources to determine if similar events have occurred.
    - Determine if there have been recurrences of the event.
  3. Interview those who perform tasks similar to the event or work in the areas where preventive actions were taken.
    - Determine if those interviewed were adequately prepared to avoid repeating the event.
    - Quantify the extent of the interviews, including the number of individuals interviewed and their positions.
- 6.7.6 The Evaluator shall discuss the Follow-Up conclusions with the Responsible Manager.

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- 6.7.7 The Responsible Manager is responsible for challenging the conclusions of the Follow-Up Evaluator. Conclusions that preventive actions were effective should be challenged just as rigorously as conclusions that actions were ineffective.
- 6.7.8 After the Responsible Manager has sufficiently challenged the conclusions; the Evaluator and Responsible Manager will co-develop a summary describing why the preventive actions taken were judged to be effective or not effective. In addition to the data discovered in Step 6.7.3 above, the basis summary for the conclusions will be documented.
- 6.7.9 If it is determined that the actions have not been, or would not be, effective at preventing similar problems, write a new PIR Condition Report and identify the new Condition Report number in the EFU text.
- 6.7.10 The Responsible Manager presents the conclusion of the follow-up to CARB if notified to do so.

## 7.0 RECORDS

- 7.1 The QA Record of the activities required by this procedure is the report of information generated from the PILOT data fields that is electronically processed to CURATOR.
- 7.2 Records resulting from this procedure involving radioactive spills/spread of contamination in and around the facility, equipment, or site, that have significant contamination remaining after any cleanup or that may have spread to inaccessible areas shall be retained or referenced in the Decommissioning File in accordance with AP 15A-003.

## 8.0 FORMS

### NOTE

The following forms are provided to establish form control and be available for use if PILOT is unavailable. If any of these forms are used to temporarily record data while PILOT is unavailable, the completed forms may be discarded after the data has been transferred into PILOT when it becomes available.

- 8.1 APF 28A-100-01, "Condition Report"
- 8.2 APF 28A-100-02, "Condition Report Screening"
- 8.3 APF 28A-100-03, "SRT Condition Report Screening"

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8.4 APF 28A-100-04, "Condition Report Evaluation"

8.5 APF 28A-100-05, "Condition Action Plan"

8.6 APF 28A-100-06, "Condition Action"

8.7 APF 28A-100-07, "Due Date Extension"

- END -

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ATTACHMENT A  
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PIR SCREENING AUTHORITY

The Manager Regulatory Affairs ensures that candidates for assignment to the listing of approved Screening Authorities possess the needed knowledge and skills to perform the screening duties. The following items provide a reasonable basis for that assignment:

- A.1.1 Existing or previous WCNOG SRO License or Certification
- A.1.2 Reportability Training
- A.1.3 Have an understanding of applicable procedures

- END -

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ATTACHMENT B  
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SCREENING REVIEW TEAM

- B.1 Screening Review Team Proficiency: The Manager Regulatory Affairs ensures that candidates for assignment to the Screening Review Team possess the needed knowledge and skills to perform the team duties.
- B.2 Screening Review Team Composition: The SRT includes representatives from Chemistry or Health Physics, Corrective Action, Engineering, Integrated Plant Scheduling, Licensing, Maintenance, Operations, and Training. There is no minimum number of members that must be present to conduct business. During Refueling/Forced outages, Outage Control Center (OCC) representatives may function as the SRT.
- B.3 Meeting Preparation and Participation: The members should come to the meeting ready to discuss and screen new Condition Reports. Related information that would assist in screening should be gathered and brought to the meetings. Members that do not possess or bring additional information about Condition Reports to the meeting can best serve as sounding boards to ensure the basis for team determinations are shared during the meeting so that consensus can be reached.
- B.4 Meeting Output: The determinations of the SRT are provided to the Corrective Action Group and are incorporated into PILOT.
- B.5 Guidelines for Screening Review Team Determinations: SRT determinations are made by majority rule. A Screening Authority vote must be used to break a tie vote.
- B.5.1 Personnel Safety Issue: By having information from CRs addressing potential personnel safety issues forwarded to the Industrial Hygienist, the Industrial Hygienist will be able to identify issues that he should monitor for resolution.
- B.5.2 Rework: AI 16C-001 provides the criteria for "rework" determination.
- B.5.3 Training Issue: If the subject appears to indicate that the situation may have been caused by a lack of knowledge or skills, this would be a potential Training Issue.

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SCREENING REVIEW TEAM

- B.5.4 Closed Based on Actions Taken: If a PIR Condition is non-Significant, Apparent Cause is not selected, the actions taken remedy the problem and consequences, AND extent of condition is addressed, then the Screening Review Team is authorized to close the PIR during screening.
- B.5.5 Analysis Type: An analysis shall be determined for each non-significant condition report. For non-significant PIRs, only remedial actions are typically needed.
1. Apparent Cause: However, when it may make good business sense to consider preventive actions, specifying Apparent Cause Required is appropriate. Refer to Attachment F for apparent cause guidance. Capture the basis for concluding an ACE should be required.
  2. Broke/Fix: When evaluation is necessary to determine the extent of condition and remedial actions, specifying Broke/Fix analysis is appropriate.
  3. Common Cause: When evaluation to identify common factors not previously identified or corrected by individual evaluations is desired, specifying Common Cause analysis is appropriate.
  4. Trend: When a general pattern of condition report subjects is observed, specifying a Trend analysis is appropriate.
- B.5.6 Outgoing Operating Experience: Sharing of selected WCNOE events and learning can benefit the Industry as a whole. See Attachment C for additional thoughts on how to make this initial determination.
- B.5.7 Assigned Organization: Based on the aggregate knowledge of the team, confirm, or change the initial call made by the Screening Authority.
- B.5.8 Significance determination: Using attachment D, and based on the aggregate knowledge of the team, confirm, or change the initial call made by the Screening Authority.

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SCREENING REVIEW TEAM

B.5.9 Immediate Actions: Within the constraint of the limited preparation time afforded SRT members, assess whether immediate actions documented at the time of CR initiation seem reasonable for the condition described. If supplemental information is available and appropriate, ensure this is documented as an SRT comment.

B.5.10 Site Clock Reset Events: Using the current operational cycle Site Clock Reset criteria, determine whether the condition presents a challenge to:

1. Nuclear Safety
2. Radiological Safety
3. Industrial Safety
4. Facility Operation
5. Regulatory Action

If a Site Clock Reset is determined, provide a basis and identify the applicable reset code on the Condition Report.

.- END -

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ATTACHMENT C

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DETERMINING OUTGOING OPERATING EXPERIENCE

- C.1 Sharing in-house operating experience (OE) information with the industry is an integral part of the plant OE program. The foremost criterion for reporting in-house operating experiences to the industry is that the information shared would be useful to other stations in preventing similar events. Many in-house events are also reported as licensee event reports (LERs). Typically, stations do not screen LERs from other stations, except those for which plant design is nearly identical. It would be beneficial to the industry to post a separate Nuclear Network OE message in addition to an LER for an event that contains useful operating experience information. It is not intended that a Network message be posted for each LER.
- C.2 The decision to share information is best determined by asking the questions **"If this event had occurred at another station, would I want to know about it?"**
- C.3 AI 20E-001 provides the details of administering Outgoing Operating Experience.

- END -

ATTACHMENT D  
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SIGNIFICANCE CRITERIA

<u>Significance Category</u>	<u>Criteria</u>
1. Unplanned Reactor Trip or Forced Outage	<ul style="list-style-type: none"> <li>• Unplanned Reactor Trip or Forced Outage</li> </ul>
2. Reactivity Challenges [3.2.6]	<p>Any reactivity occurrence that is uncontrolled and/or unplanned and that is consistent with the following bounds:</p> <ul style="list-style-type: none"> <li>• An unplanned reactivity change equivalent to a 1% power change.</li> <li>• Loss of required Shutdown Margin</li> <li>• Estimated Critical Position missed by greater than or equal to 500 pcm</li> <li>• Mispositioned Fuel assembly</li> <li>• Miscalibration of nuclear instrumentation or instrumentation that affects the power program resulting in a non conservative error in indicated power</li> <li>• Shutdown or control rod banks below the bank insertion limit</li> </ul>
3. Reduced Core or Fuel Pool Cooling Capability	<ul style="list-style-type: none"> <li>• Failure of one RHR pump when the affected RHR pump/train is supplying in shutdown cooling mode (Loss of two pumps is covered in Criteria 9)</li> <li>• Inadvertent or uncontrolled draining of RCS, CVCS, RFP, RHR inventory, which is greater than or equal to 100 gpm when above the Reactor vessel flange OR greater than or equal to 10 gpm when below the Reactor vessel flange.</li> <li>• Inadvertent or uncontrolled draining of SFP inventory, which is greater than or equal to 100 gpm.</li> <li>• Failure of both SFP cooling pumps while core is off loaded</li> <li>• Loss of both SFP cooling pumps if time to boil is &lt;3 hours during normal operations</li> </ul>
4. Work Related Accident of Immediate Danger to Life or Health	<ul style="list-style-type: none"> <li>• Fatality</li> <li>• Injury requiring in-patient hospitalization</li> </ul>
5. Radiological Occurrence	<ul style="list-style-type: none"> <li>• Exposure in excess of station administrative guidelines without authorization or exposure in excess of 10CFR20 limits.</li> <li>• Entry into a HRA or LHRA without proper authorization (no RWP), dosimetry, or HP survey and coverage, as required.</li> <li>• A high radiation area is found not properly controlled, posted, guarded, or, if required, locked.</li> <li>• Unplanned exposure of <math>\geq 100</math> mR to an individual.</li> <li>• Uncontrolled radioactive material found outside the RCA or outside a posted radioactive materials storage area.</li> <li>• Manager Chemistry/Radiation Protection issuing a stop work order.</li> <li>• Tampering with a dosimetry device or record that affects the recorded dose.</li> </ul>
6. (deleted)	<ul style="list-style-type: none"> <li>• N/A</li> </ul>
7. (deleted)	<ul style="list-style-type: none"> <li>• N/A</li> </ul>

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ATTACHMENT D (Page 2 of 4) SIGNIFICANCE CRITERIA	
8. Unplanned, Uncontrolled or Unmonitored Radioactive Release	<ul style="list-style-type: none"> <li>Any unplanned, uncontrolled or unmonitored release of radioactive material to areas accessible to the public.</li> </ul>
9. Failure of Equipment to Perform on Demand or as Expected. [3.2.7, 3.2.22]	<ul style="list-style-type: none"> <li>Loss or inability of both trains of a safety-related system to perform their specified safety function(s).</li> <li>A repetitive maintenance preventable functional failure.</li> <li>A Maintenance Rule performance monitoring goal was not met. [3.2.17]</li> </ul>
10. Plant Equipment Control Issues [3.2.7, 3.2.22]	<ul style="list-style-type: none"> <li>Equipment status/control challenges personnel safety because no engineered or administrative barriers remain</li> <li>Unplanned Change in Equipment or Component availability resulting in: <ul style="list-style-type: none"> <li>If the Instantaneous CDF or Instantaneous LERF goes into the red as determined by the PSA Group.</li> <li>Result in the loss of the ability of a maintenance rule risk significant system or train to perform its specified safety function(s)</li> </ul> </li> </ul>
11. Non-routine Events reportable to the NRC	<ul style="list-style-type: none"> <li>Fitness for duty events per 10CFR26.73(a)(1) and (2)</li> <li>Incomplete/inaccurate information provided to the NRC per 10CFR50.9</li> <li>Licensee Event Reports (LERs) [3.2.9]</li> <li>Events involving for cause permanent reassignment or termination of Licensed Operators per 10CFR55 and 10CFR50.74</li> <li>Reduction in effectiveness of any approved Type B, or fissile, packaging per 10CFR71.95</li> <li>Security safeguards events per 10CFR73.71</li> </ul>
12. NRC Notice of Violation [3.2.9]	<ul style="list-style-type: none"> <li>Cited NRC violations</li> <li>Cited NRC Weaknesses or Deficiencies (E-Plan)</li> </ul>
13. Trend of Significance	<ul style="list-style-type: none"> <li>A validated decline in performance that impacts the ability of an SSC to perform its specified safety function(s); or impacts personnel, nuclear, or radiological safety; or impacts environmental stewardship.</li> </ul>
14. Ineffective Corrective Action	<ul style="list-style-type: none"> <li>Ineffective Corrective Actions for previous Significant PIRs</li> </ul>
15. Major Quality Program Breakdown	<ul style="list-style-type: none"> <li>A breakdown of the Quality Program such that the objective of one of the criteria of Appendix B of 10CFR50 will not be met to a substantial degree</li> </ul>
16. Other Significant Events as Determined by Management	<ul style="list-style-type: none"> <li>Other as determined by Management.</li> </ul>
17. (deleted)	N/A
18. Lost Generation [3.2.7]	<ul style="list-style-type: none"> <li>Unscheduled forced reduction in power resulting in lost generation in excess of 3000 MWhr electrical.</li> </ul>
19. (deleted)	N/A

ATTACHMENT D  
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SIGNIFICANCE CRITERIA

20. Environmental Reportable Events.	<ul style="list-style-type: none"> <li>• Non-radiological releases to the environment exceeding a regulatory or permit reporting threshold that require submittal of a corrective action plan to the regulator.</li> <li>• Wastewater discharge, regulatory or permit noncompliance that requires submittal of a corrective action plan to the regulator.</li> </ul>
21. Radiography Reportable Events.	<ul style="list-style-type: none"> <li>• Events and incidents reportable to the State of Kansas as required by Kansas Administrative Requirement (KAR) 28-35-290.</li> </ul>

INSTRUCTIONS FOR APPLYING AND RECONSIDERING  
SIGNIFICANCE CRITERIA FOR PIR CONDITIONS

- D.1 The PIR Screening Authority and Screening Review Team (SRT) will apply the above criteria when initially screening PIR Condition Reports.
- D.2 Following SRT assignment of Significant, the Responsible Manager may present differing views to the SRT for PIR significance reconsideration.
- D.3 The minimum SRT attendance at SRT meeting when the Responsible Manager presents a reconsideration of significance is:
- D.3.1 Operations, Engineering, Oversight, and Licensing representatives for all PIR Conditions.
- D.3.2 In addition to the above, a representative of the Responsible Manager for the procedure governing categories Activities shall attend and provide input into the reconsideration:
- Reactivity Challenge
  - Personnel Safety
  - Radiological Occurrence
  - Unplanned, Uncontrolled, or Unmonitored Radioactive Release
  - Trend of Significance
  - Ineffective Corrective Action
  - Major Quality Program Breakdown

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SIGNIFICANCE CRITERIA

- Environmental Reportable Event
- Radiography Reportable Event

- D.4 When asked to reconsider a classification of significant, the SRT will render a determination that:
- D.4.1 The condition does not meet the criteria and the assigned Significance may be changed. This is accomplished by rerouting the PIR Condition Report to SRT.
- D.4.2 The condition meets the criteria and will remain Significant.
- D.5 PIR Condition Reports initially screened as Non-Routine Events reportable to the NRC may be downgraded without returning to SRT if the approved Reportability Evaluation Request (RER) determines the issue is not reportable.
- D.6 PIR Condition Reports initially screened as NRC notice of violation may be downgraded without return to SRT if the USNRC subsequently determines that the issue does not meet their criteria for a cited violation.
- D.7 Line management determines which PIR Conditions are Significance Category 16, "Other Significant Events as Determined by Management",. For these conditions, the applicable Vice President performs the oversight function for reclassification from Significant.

- END -

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ATTACHMENT E  
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CARB

E.1 CARB CHARTER [3.2.10, 3.2.11, 3.2.13, 3.2.14, 3.2.11]

E.1.1 The purpose of the Corrective Action Review Board (CARB) is to review all Significant PIR Condition Reports following completion of the root cause analysis and development of the actions. The CARB will:

- Verify the evaluation and actions meet the requirements contained in this procedure and AI 28A-001 "Root Cause Analysis".
- Ensure management's expectations for excellence are met.
- Provide feedback to the organization responsible for the root cause analysis and development of the actions.
- Recommend improvements to the Corrective Action Program.
- As a sub-committee of the PSRC, review all significant conditions adverse to quality and recommend corrective action for significant conditions adverse to safety regarding operating procedures as described in USAR Section 17.2.16.1

E.1.2 To facilitate continuous improvement, CARB will also selectively review; self-assessment results, PIR Condition Reports resulting in Apparent Cause Evaluations or Common Cause Analysis, and Condition Reports performing analysis of trends.

E.1.3 Regular Members -

- Vice President Oversight (CARB Chairperson)
- Vice President Operations and Plant Manager
- Vice President Engineering
- Manager Regulatory Affairs
- Manager Training

E.1.4 Responsibilities -

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CARB

- Manager Regulatory Affairs: Appoints a CARB Chairperson and retains overall responsibility for the CARB.
- CARB Chairperson: Maintains CARB membership at a minimum of five active members (Chairperson plus four regular members) and provides for an alternate as designated by the permanent member when necessary.

E.1.5 Meetings

1. The CARB meets as needed to review evaluations and actions for Significant PIR Condition Reports in a timely manner. Meetings should consist of the CARB Chairperson and two regular members plus the responsible manager of the PIR Condition Report being reviewed. As a minimum, a quorum exists with one vice president acting as Chairperson, and designates from each of the other two vice presidents. The Responsible Manager cannot participate as a member of CARB while presenting items for CARB review.

E.1.6 Meeting Minutes:

1. The CARB logkeeper documents meeting minutes recording those in attendance, the PIR Condition reviewed, and the CARB disposition.
2. The meeting agenda and minutes will be vaulted in Records file K01-033A.

E.2 CARB Review Implementation

E.2.1 All evaluations and actions for Significant PIR Conditions, with the exception of Significance Category 16, "Other Significant Events as Determined by Management", are to be reviewed by the CARB following completion of the root cause analysis and development of the actions.

E.2.2 Evaluations and actions for Significant PIR Condition Reports should be dispositioned as:

- accepted
- accepted with comments

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CARB

- rejected

E.3 CARB Review Attributes

E.3.1 **Issue Description:** The goal of a good issue description is to provide the needed information to the evaluator or those reviewing the evaluation.

1. The description is easily understood by someone with a general knowledge of the subject.
2. Consequences or potential consequences are clearly stated.
3. The applicability to other groups or activities (i.e., extent of condition) is identified.
4. Reference documents are listed, as appropriate, to improve understanding of the issue.
5. The description clearly states if the issue affects operability or is potentially reportable. If yes, the control room has been notified or an RER has been initiated.
6. Appropriate immediate actions have been taken.

E.3.2 **Root Cause Analysis:** The goal of the Root Cause Analysis is to determine a root cause that, when eliminated, will prevent recurrence of the issue. Complete documentation of the Root Cause Analysis is important in that it allows internal and external groups reviewing the issue to gain confidence in our ability to identify root causes by using a structured approach that has considered all relevant information.

1. Relevant data obtained during the investigation is described, attached or referenced.
2. Individuals involved in the event or knowledgeable of the event were interviewed.
3. The information obtained during the interview is described.
4. Various root cause techniques were used or considered during the investigation.

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CARB

5. The conclusions reached by applying the root cause technique(s) are described.
6. An Event and Causal Factor or timeline chart is included and clearly shows the sequence of events.

E.3.4 **Corrective Action Plan:** The goal of the actions are to implement corrective actions that will address the root causes and will prevent issue recurrence.

1. Each root cause is clearly addressed by an action.
2. Contributing causes are addressed by an action, or an explanation is provided as to why an action is not needed.
3. The actions are appropriate relative to the safety significance of the issue.
4. It is clear that if the actions had been in place, the event or a similar event would not have occurred.
5. Actions are planned to be implemented in a timely manner. "Timely" varies depending on the safety significance, plant conditions, complexity of the actions and resources required to implement them.

- END -

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ATTACHMENT F  
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APPARENT CAUSE GUIDELINES

- F.1 Apparent Cause Evaluation (ACE) should be selected by SRT when:
- The risks of a condition or event were understood and manageable and the consequences were tolerable but clearly undesirable, AND we want to learn from the condition or event to improve performance and reduce the likelihood it might happen again.
- F.2 Selecting when to perform an ACE should be driven by the desire to determine if preventive action is appropriate to reduce vulnerability to conditions such as:
- Personnel or plant risk.
  - Unplanned equipment TSEOs or system unavailability.
  - Cost or inconvenience of repair.
  - Avoidable and unplanned major diversion or expenditure of company resources.
  - Lost generation more than 1000 MWhr electrical.
- F.3 Some practical examples of conditions warranting an ACE could include:
- Maintenance preventable functional failures of risk-significant SSCs.
  - Emergent work or other events of commercial consequence such as unplanned reduced production capability.
  - Work related accident that requires significant medical treatment but does not meet the injury criterion of Significance Category 4, "Work Related Accident or Immediate Danger to Life or Health".
  - Site Event Clock resets not tied to a significant PIR Condition.
  - Eroded stakeholder confidence (e.g., loss of regulatory margin, performance shortfalls found unacceptable by other oversight agencies or insurers, or diminished community goodwill).

- END -

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ATTACHMENT G

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TOPICS FOR PIR AND NON-PIR CONDITION REPORTS

This attachment illustrates the range of topics that should be screened as a PIR CR or a Non-PIR CR. This list is not inclusive.

G.1 PIR Condition Reports

- NRC Finding (3.1.4)
- Area for Improvement (AFI), Performance Deficiency, or Finding identified by an INPO or WANO plant evaluation, peer review, or assist visit or by an internal assessment
- Other External Oversight Agency-Identified Issue. For example:
  - ANI
  - KDHE
  - FEMA
- QA Finding
- Condition Adverse to Quality
- Significant Condition Adverse to Quality
- Performance Deficiency
- Trend
- Work activity, equipment operation, program or procedure implementation, or action that results in a:
  - Fault
  - Failure to achieve intended results
  - Malfunction
  - Nonconformance
  - Noncompliance
  - Deviation
  - Defective material or equipment
  - Procedure, instruction, or document that is incorrect or inadequate
  - Criterion or value that is missing or inadequate and results in an activity failing to meet established acceptance criteria

G.2 Non-PIR (Address Management) Condition Reports

All Personnel are encouraged to use judgment and write Condition Reports when appropriate for conditions such as:

- Internal or External Assessment Recommendation, Observation or Good Practice
- Benchmarking Recommendation
- Complaint with no safety implications

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TOPICS FOR PIR AND NON-PIR CONDITION REPORTS

- Suggestion for Consideration
- Differing Opinion
- Gap Analysis of Industry Information

- END -