



UNITED STATES
NUCLEAR REGULATORY COMMISSION

REGION II
SAM NUNN ATLANTA FEDERAL CENTER
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ATLANTA, GEORGIA 30303-8931

April 17, 2008

Mr. J. Art Stall
Senior Vice President Nuclear and Chief Nuclear Officer
Florida Power and Light Company
Turkey Point Nuclear Plant
P.O. Box 14000
Juno Beach, FL 33408-0420

SUBJECT: TURKEY POINT NUCLEAR PLANT - NRC FOLLOW-UP PROBLEM
IDENTIFICATION AND RESOLUTION INSPECTION REPORT
05000250/2008007 AND 05000251/2008007

Dear Mr. Stall:

On March 21, 2008, the U. S. Nuclear Regulatory Commission (NRC) completed a team inspection at your Turkey Point Nuclear Plant, Units 3 and 4. The enclosed inspection report documents the inspection findings, which were discussed on March 21, 2008 with Mr. W. Jefferson and other members of your staff.

The inspection was a focused examination of activities conducted under your license as they relate to the identification and resolution of problems addressing a substantive cross-cutting issue last documented in 2007 End of Cycle Performance Review and Inspection Plan Letter dated March 3, 2008. Within these areas, the inspection involved examination of selected procedures and representative records, observations of activities, and interviews with personnel.

On the basis of the samples selected for review, there were no findings of significance identified during this inspection. The inspectors concluded that problems were properly identified, evaluated, and resolved within the site corrective action program. However, during the inspection, the inspectors identified some examples of minor deficiencies associated with the corrective actions to prevent recurrence of the substantive cross-cutting issue from 2006.

In accordance with 10 CFR 2.790 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 the NRC's document system (ADAMS). ADAMS is accessible from the NRC Web-site at <http://www.nrc.gov/reading-rm/adams.html> (the Public Electronic Reading Room).

Sincerely,

/RA/

Steven J. Vias, Chief
Reactor Projects Branch 7
Division of Reactor Projects

Docket Nos.: 50-250 and 50-251
License Nos.: DPR-31 and DPR-41

Enclosure: Inspection Report 05000250/2008007 and 05000251/2008007
w/Attachment: Supplemental Information

cc w/encl: (See page 3)

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DATE	04/16/2008	04/16/2008	04/16/2008			04/17/2008	04/17/2008
E-MAIL COPY?	YES NO						

cc w/encl.:

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FP&L

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Report to J. A. Stall from Steven J. Vias dated April 17, 2008

SUBJECT: TURKEY POINT NUCLEAR PLANT - NRC FOLLOW-UP PROBLEM
IDENTIFICATION AND RESOLUTION INSPECTION REPORT
05000250/2008007 AND 05000251/2008007

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B. Mozafari, NRR

NRC Resident Inspector
U.S. Nuclear Regulatory Commission
9760 SW 344th St.
Florida City, FL 33035

U. S. NUCLEAR REGULATORY COMMISSION

REGION II

Docket Nos.: 05000250, 05000251

License Nos.: DPR-31, DPR-41

Report Nos.: 05000250/2008007 and 05000251/2008007

Licensee: Florida Power & Light Company (FPL)

Facility: Turkey Point Nuclear Plant, Units 3 & 4

Location: 9760 S. W. 344th Street
Florida City, FL 33035

Dates: March 17- March 21, 2008

Inspectors: R. Taylor, Senior Project Inspector, Region II, Lead Inspector
M. Barilias, Resident Inspector, Turkey Point
S. Rose, Senior Reactor Inspector, Region II
R. Reyes, Resident Inspector, Crystal River

Approved by: Steven J. Vias, Chief
Technical Support Branch
Division of Reactor Projects

Enclosure

SUMMARY OF ISSUES

IR 05000250/2008-007, 05000251/2008-007; 3/17/2008 - 3/21/2008; Turkey Point Nuclear Plant, Units 3 & 4; follow-up inspection of substantive cross-cutting issue in the area of identification and resolution of problems.

The inspection was conducted by two senior inspectors, and one resident inspector. No findings of significance were identified during this inspection.

Identification and Resolution of Problems Summary

The licensee was generally effective at identifying problems and initiating condition reports (CR) as required by program procedures. The inspectors determined that the licensee utilized their corrective action program to evaluate, assign corrective actions, and identify adverse trends, including low level issues. The inspectors reviewed the licensee's corrective action program improvement plan and actions to address evaluation quality, timeliness, and overall corrective action program (CAP) effectiveness. In general, the inspectors found the evaluations to be adequate with notable reductions in the CR backlog and evaluation timeliness since the last problem identification and resolution (PI&R) inspection completed in December 2007. The inspectors identified some minor deficiencies associated with corrective actions to prevent recurrence (CAPR) put in place to address the substantive PI&R cross-cutting issue, first identified in 2006 but overall, corrective actions were effective.

On the basis of interviews conducted during the inspection, a review of the Employee Concerns Program, and the results of the licensee's safety conscious work environment (SCWE) surveys, the inspectors determined that employees felt free to raise concerns without fear of retaliation.

A. NRC-Identified and Self-Revealing Findings

None

B. Licensee-Identified Violations

None

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REPORT DETAILS

4 OTHER ACTIVITIES (OA)

4OA2 Problem Identification and Resolution

The purpose of this inspection was to conduct a focused assessment of the licensee's problem identification and resolution (PI&R) program and evaluate the licensee's effectiveness in addressing a continuing substantive cross-cutting issue in the PI&R area that was initially identified and documented in the NRC's mid-cycle 2006 assessment letter dated August 31, 2006, as well as in the NRC's end-of-cycle 2006 assessment letter dated March 1, 2007, the mid-cycle 2007 assessment letter dated August 31, 2007, and the end-of-cycle 2007 letter dated March 3, 2008. The assessments were based, in part, on issues identified and evaluated during the period June 1, 2007 (the last routine problem identification and resolution team inspection) to December 21, 2007. Also, as part of this focused inspection, the effectiveness of the licensee's efforts to improve weaknesses previously identified in the station's safety conscious work environment (SCWE) was assessed to determine if the program promotes a willingness to raise safety concerns without fear of retaliation, fear of criticism, or fear of increasing the condition reporting (CR) backlog.

a. Focused Assessment of the Corrective Action Program (CAP)

(1) Inspection Scope

The inspectors assessed the effectiveness of the licensee's actions in addressing the substantive cross-cutting issue in the PI&R area by conducting the following activities and reviews:

- Reviewed corrective actions to prevent recurrence (CAPR) which were initiated for the substantive crosscutting issues identified in 2006 and documented in CR 2006-35531;
- Reviewed condition reports and corrective actions from the December focused PI&R inspection;
- Interviewed a cross section of plant staff to better understand the SCWE at Turkey Point. (Security 6 – Maintenance 6 – Engineering 5 – Operations 6);
- Evaluated the independent review process for activities important to nuclear safety, including recent condition reports;
- Reviewed recent CAP process improvement initiatives, including the Six Sigma Process; and
- Attended Initial Screening and Management Review Committee (MRC) meetings to review the adequacy of management oversight, safety leadership, and work prioritization.

Documents reviewed are listed in the Attachment to this report.

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(2) Assessment

Corrective Action Program Meetings

The inspectors observed that Initial Screening and MRC meetings were well attended and members were prepared to discuss the issues. Generally, the assignment of significance level and investigation types were in accordance with the licensee's CAP procedures and guidance.

In general, there was good discussion and interaction among the group members with a proper focus on safety.

Identification of Issues

The inspectors determined that the licensee was generally effective in identifying problems and entering the issues into their corrective action program. Condition reports reviewed by the inspectors were written in a timely manner, provided enough detail to understand the problem, and were entered in the licensee's CAP database. The inspectors noted a large number of Condition Reports (CRs) generated over the last year and the increased effort and resources required to manage the CAP database. During the last two years, the licensee had averaged over ten-thousand CRs per year.

Prioritization and Evaluation of Issues

The inspectors determined that problems were generally prioritized and evaluated in accordance with the licensee's CAP procedures and NRC requirements. The team noted that the Turkey Point "Road to Excellence Plan" has aided in the reduction of the backlog as well as improvements in timeliness and quality of condition reports. This has been accomplished through funding of temporary staff to assist in corrective action program improvement initiatives. The inspectors found that new processes for evaluating condition reports provided immediate results in improving the timeliness of the backlog and generally improved the quality of the evaluations.

In November 2007, the licensee implemented a pilot process improvement initiative, based on Six Sigma, to aid in reducing the backlog and improving the timeliness of CR evaluations. This process allowed selected "corrective only" ('C') condition reports to be addressed without a formal evaluation. Specifically, for conditions that did not require a causal analysis and where appropriate corrective actions could be readily identified by the Initial Screening Team or a technical expert during the screening process, corrective actions could be determined without a formal evaluation. This pilot process also placed stricter controls on the timeliness requirements for completion of formal evaluations. The inspectors observed that the average age of open CR evaluations had decreased significantly since the pilot process was implemented. As of March 2008, the licensee had incorporated this pilot process into permanent plant guidance. The team also noted that while the majority of the temporary staff is no longer onsite, the licensee's incorporation of Six Sigma initiatives are meant to sustain and prevent reoccurrence of the CR backlog.

Effectiveness of Corrective Actions

In general, corrective actions developed and implemented for problems were timely and effective, commensurate with the safety significance of the issues. For significant conditions adverse to quality, the corrective actions addressed the cause and prevented recurrence. The inspectors concluded that the licensee had been generally effective and focused on correcting problems identified in their CAP. The inspectors reviewed a number of trend charts being used to track open condition report corrective actions and noticed a significant decrease in the number of open actions since the previous PI&R inspections completed in June and December 2007. This reduction was a direct result of hiring of temporary staff to reduce the CR backlog.

The inspection team reviewed the corrective actions associated with the June 2006 substantive cross-cutting issue and determined that the licensee has taken appropriate actions to address previously identified deficiencies. However, the team identified several minor deficiencies associated with these corrective actions. These deficiencies have been documented in the following condition reports.

- CR 2008-9318: The inspectors noted that the Engineering Corrective Action Review Board (CARB) was using condition reports to document the outcome of their CARB meetings. The inspectors questioned the standard expectation for documenting CARB products. This condition report was written to determine if there is a need to standardize the outcome of department CARB.
- CR 2008-9316: The inspectors noted that there was not a clear link between the departmental CARBs and specific site guidance that governs them. Procedure 0-ADM-533 provides guidance for Department Performance Monitoring Groups, however, it does not clearly identify the CARBs. Therefore, there did not appear to be a specific site guidance which governed the CARBs. This deficiency could lead to inconsistencies in CARB implementation.
- CR 2008-9345: The inspectors questioned the Management Review Committee (MRC) quorum requirements as delineated in NAP-204 Enclosure 6. Specifically, there was an individual who attended MRC meetings to fill a required position who was not listed in CR 2008-3059 (PID/CROG Actions for 2008). Additionally, designated persons were used to fulfill primary roles. Upon further review inspectors found that this was acceptable per NAP-204. Inspectors questioned the reason behind the requirement to have four primary members present as it conflicts with having other individuals designated to fulfill primary roles.

(3) Findings

No findings of significance were identified.

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b. Assessment of Safety-Conscious Work Environment

(1) Inspection Scope

The inspectors formally interviewed 23 working-level plant employees and first-line supervisors to gather their perspectives on the safety-conscious work environment (SCWE) at Turkey Point. The inspectors also selected and reviewed employee concerns that appeared to be related to SCWE, and interviewed the employee concerns representative to verify that these concerns had been reviewed and processed in accordance with procedure NP-800, Employee Concerns Program (ECP). Furthermore, the inspectors compared and contrasted the information gathered, evaluated, and reported in the most recent licensee self-assessment of the ECP, CR 2007-37715, "Turkey Point Employee Concerns Program Self Assessment."

(2) Assessment

The inspectors found that licensee personnel were willing to identify safety issues, and that most were confident that identified issues would be properly addressed and resolved. All personnel interviewed were aware of the avenues to raise safety concerns. In most cases, raising the concern to their immediate supervisor was the first course of action that the individual would take. However, information gathered during this inspection included the following observations that some plant employees may be more reluctant than others to report such issues:

- Some operations personnel stated their work group was understaffed. Consequently, they had been working relatively high amounts of overtime. The inspectors considered that inadequate staffing which resulted in an increased use of overtime was a potential underlying factor that could produce a reluctance to report safety issues.
- Some operations personnel stated that although management spoke often of the importance of SCWE, their actions were not convincing. Some of the operations personnel provided examples of a supervisor trying to prevent Condition Reports (CRs) from being written in the past, but acknowledged upper management's action to remove the supervisor.
- Several staff interviewed were not very familiar with the Employees Concern Program (ECP) and how it worked. Some stated that they did not see the ECP as an avenue that could resolve issues that they had already raised. Most identified the ECP process with the new upper management at Turkey Point. Most interviewees stated that the licensee management supported the ECP and SCWE, in both words and actions.
- Most interviewees recognized improvements in the Corrective Action Program (CAP) over the past six months. However, most individuals believed the licensee had "a way to go" before full confidence in the system would be restored. When questioned

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further, they stated that they were not confident that the CR answers would address the root of the problem, rather than the symptoms (no recent examples could be specifically provided). However, all stated that their lack of confidence would not stop them from generating a CR.

(3) Findings

No findings of significance were identified.

4OA6 Management Meetings

On March 21, 2008, the inspectors presented the inspection results to Mr. W. Jefferson, and other members of his staff who acknowledged the findings. The inspectors informed the licensee that proprietary information that was examined during the inspection will not be included in the report.

ATTACHMENT: SUPPLEMENTAL INFORMATION

SUPPLEMENTARY INFORMATION

KEY POINTS OF CONTACT

Licensee Personnel

W. Jefferson, Site Vice-President
M. Kiley, Plant General Manager
O. Hanek, Licensing
K. O'Hare, Performance Improvement
R. Flynn, Performance Improvement
M. Downs, Employee Concerns
R. Leckey, Employee Concerns
J. Mowbray, Engineering
M. Coen, Operations

NRC Personnel

S. Stewart, Senior Resident Inspector, Turkey Point
M. Barillas, Resident Inspector, Turkey Point

LIST OF ITEMS OPENED, CLOSED, AND DISCUSSED

Opened and Closed

None

LIST OF DOCUMENTS REVIEWED

Procedures

ECP-1	Employee Concerns Program
EDI-SE-005	System Health Reports
NAP-201	Human Performance
NAP-202	Self Assessments
NAP-204	Condition Reporting
NAP-424	Employee Concerns Program
0-ADM-533	Corrective Action Program Performance Monitoring and Trending Analysis
NP-809	Safety Conscious Work Environment

Self Assessments and Audits

2007-15205	Turkey Point Corrective Action Program Self-Assessment and Effectiveness Review for Condition Report 2006-25531
2007-41804	Turkey Point SCWE Survey Results Self-Assessment and Effectiveness Review for Condition Report 2007-11428

Miscellaneous Documents

Department Performance Improvement Health Reports
Department CARB Meeting Review Materials
Six Sigma Green Belt Project: Condition Report Evaluation Life Cycle Implementation Guideline, Rev. 0, 10/19/2007

Condition Reports

2008-1172
2008-7157
2008-4491
2008-6703
2008-7368
2008-8018
2008-2248
2008-8142
2008-8145
2008-8146
2008-8148
2008-8150
2008-8151
2008-8153