



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION II
SAM NUNN ATLANTA FEDERAL CENTER
61 FORSYTH STREET, SW, SUITE 23T85
ATLANTA, GEORGIA 30303-8931

July 28, 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 PROBLEM IDENTIFICATION AND
RESOLUTION INSPECTION REPORT 05000250/2008008 AND
05000251/2008008

Dear Mr. Stall:

On June 27, 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 June 27 and July 23, 2008 with Mr. M. Kiley and other members of your staff.

The inspection was an examination of activities conducted under your license as they relate to the identification and resolution of problems, and compliance with the Commission's rules and regulations and with the conditions of your operating license. Within these areas, the inspection involved examination of selected procedures and representative records, observations of plant equipment and 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 team concluded that in general, your corrective action program processes and procedures were effective; thresholds for identifying issues were appropriately low; and problems were properly evaluated and corrected within the problem identification and resolution program (PI&R). However, several examples of minor problems were identified where corrective actions have not been entirely effective, or potential adverse trends had not been identified and entered into the Corrective Action Program.

Enclosure

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 05000250/2008008 and 05000251/2008008

w/Attachments: 1. Supplemental Information
2. Turkey Point PI&R Inspection 2008 Information Request

cc w/encl: (See page 3)

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cc w/encl: (See page 3)

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SIGNATURE	DXM2	RCT1	JHW2	DLM4	MCB	SJV	
NAME	DMerzke	RTaylor	JWallo	DMas-Peneranda	MBarillas	SVias	
DATE	07/23/2008	07/24/2008	07/23/2008	07/23/2008	07/17/2008	07/28/2008	
E-MAIL COPY?	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	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 July 28 2008

SUBJECT: TURKEY POINT NUCLEAR PLANT - NRC PROBLEM IDENTIFICATION AND
RESOLUTION INSPECTION REPORT 05000250/2008008 AND
05000251/2008008

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U. S. NUCLEAR REGULATORY COMMISSION

REGION II

Docket Nos.: 05000250, 05000251

License Nos.: DPR-31, DPR-41

Report Nos.: 05000250/2008008 and 05000251/2008008

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: June 9 - 13, 2008
June 23 - 27, 2008

Inspectors: D. Merzke, Senior Project Engineer, Lead Inspector
R. Taylor, Senior Project Inspector
D. Mas-Peñaranda, Reactor Inspector
J. Wallo, Senior Physical Security Inspector
M. Barillas, Resident Inspector, Turkey Point
K. Ellis, Resident Inspector Development Candidate

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

Enclosure

SUMMARY OF ISSUES

IR 05000250/2008-008, 05000251/2008-008; 06/09/2008 – 06/27/2008; Turkey Point Nuclear Plant, Units 3 & 4; Identification and Resolution of Problems.

The inspection was conducted by a senior project engineer, two senior inspectors, one reactor inspector, and one resident inspector. No findings of significance were identified. The NRC's program for overseeing the safe operation of commercial nuclear power reactors is described in NUREG-1649, "Reactor Oversight Process," Revision 4, dated December 2006.

Identification and Resolution of Problems Summary

The team concluded that in general, problems were properly identified, evaluated, prioritized, and corrected within the licensee's corrective action program (CAP). Evaluation of issues was generally comprehensive and technically adequate. Formal root cause evaluations for issues classified as significant adverse conditions were comprehensive and detailed. The team reviewed the licensee's corrective action program improvement plan and actions to address evaluation quality, timeliness, and overall CAP effectiveness. The team determined that progress has been made in improving all areas addressed by the improvement plan. Overall, corrective actions developed and implemented for issues were effective in correcting the problems. However, the team identified examples where corrective actions have not been entirely effective, or potential adverse trends had not been identified and entered into the CAP.

The team determined that thresholds for identifying issues were appropriately low. Nuclear Assessment Section audits and departmental self-assessments were effective in identifying issues and directing attention to areas that needed improvement. Licensee identified weaknesses and issues in self-assessments were appropriately entered into the CAP and addressed.

Based on discussions and interviews conducted with plant employees from various departments, the inspectors did not identify any reluctance to report safety concerns.

A. NRC-Identified and Self-Revealing Findings

No findings of significance were identified.

B. Licensee-Identified Violations

No findings of significance were identified.

Enclosure

REPORT DETAILS

.4 OTHER ACTIVITIES (OA)

4OA2 Problem Identification and Resolution

The team based the following conclusions, in part, on issues identified during the period, July 1, 2007 (the last biennial problem identification and resolution inspection) to the end of the inspection on June 27, 2008. In addition, the team reviewed problems for selected systems, which were identified outside this assessment period whose significance may be age-dependent.

a. Assessment of the Corrective Action Program (CAP)

(1) Inspection Scope

The inspectors reviewed the licensee's corrective action program (CAP) procedures which described the administrative process for initiating and resolving problems primarily through the use of condition reports (CRs). The inspectors reviewed selected CRs, and attended meetings where CRs were screened for significance to determine whether the licensee was identifying, accurately characterizing, and entering problems into the CAP at an appropriate threshold.

The inspectors selected CRs for review which involved issues covering the seven cornerstones of safety identified in the NRC's Reactor Oversight Process (ROP). The selected samples involved various licensee classified severity levels and site departments. The inspectors also conducted a detailed review of CRs for risk significant systems which were selected based on risk insights from the licensee's probabilistic safety assessment and discussions with the Senior Resident Inspector. The systems selected for review were the Auxiliary Feedwater system and Containment Isolation. The inspectors reviewed CRs, maintenance history, completed work orders (WOs) for the systems, and reviewed associated system health reports. These reviews were performed to verify that problems were being properly identified, appropriately characterized, and entered into the CAP. Items reviewed generally covered a two-year period of time; however, in accordance with the inspection procedure, a five-year review was performed for selected systems for age-dependent issues.

The inspectors conducted plant walkdowns of equipment associated with the selected systems to assess the material condition and to look for any deficiencies that had not been entered into the CAP. Control Room walkdowns were also performed to assess the main control room (MCR) deficiency list and to ascertain if deficiencies were entered into the CAP. Operator Workarounds and Operator Burdens screenings were reviewed and the inspectors verified compensatory measures for deficient equipment were being implemented in the field.

The inspectors reviewed CRs, including root and apparent cause evaluations, site and department trend reports, and observed other activities to verify that the licensee appropriately prioritized and evaluated problems in accordance with their risk significance. The inspection was intended to verify that the licensee adequately determined the cause of the problems, including root cause analysis where appropriate,

and adequately addressed operability, reportability, common cause, generic concerns, and extent of condition.

The review included the appropriateness of the assigned significance, the timeliness of resolutions, the level of effort in the investigation, and the scope and depth of the causal analysis. The review was also performed to verify that the licensee appropriately identified corrective actions to prevent recurrence and that those actions had been appropriately prioritized.

The inspectors reviewed a sample of selected licensee effectiveness reviews and work orders initiated to resolve CRs to verify the licensee had identified and implemented timely and appropriate corrective actions to address problems. The inspectors verified that the corrective actions were properly assigned, documented, and tracked to ensure completion. The review was also conducted to verify the adequacy of corrective actions to address equipment deficiencies and maintenance rule (MR) functional failures of risk significant plant safety systems.

The inspectors attended various plant meetings to observe management oversight functions of the corrective action process. These included initial screening team (IST) meetings, as well as Management Review Committee (MRC) meetings.

Furthermore, the inspectors verified that issues identified by internal and external operating experience, licensee audits and self-assessments, and the employee concerns program were entered into and dispositioned by the CAP, as appropriate. The team also reviewed corrective action packages related to previously issued enforcement issues and licensee event reports.

Documents reviewed are listed in the Attachment.

(2) Assessment

Identification of Issues

The team determined that the licensee was generally effective in identifying problems and entering them into the CAP. There was no threshold for entering issues into the CAP and employees were encouraged to initiate CRs for any reason. Trending was generally effective in monitoring equipment performance. However, the team did identify a potential area for improvement in the identification of adverse trends. Procedure 0-ADM-533, CAP Performance Monitoring and Trend Analysis, states that identifying a trend should consider an increase in or undesirable number of events or trend codes over the period of time under analysis. The procedure specifies a new CR should be written when a trend is increasing in significance. The inspection team determined a trend CR was not initiated in accordance with plant procedure 0-ADM-533, for the undesirable performance of FCV-4-6278C, the 4C steam generator blowdown flow control valve, despite its impact on reactivity management, and a history of 15 CRs generated on the performance of the valve since January 2007. Also, CR 2008-20629 was recently written as a result of a site QA audit of the Chemistry department, identifying a weakness in the department's ability to identify and evaluate adverse trends. Additionally, a site QA audit on corrective actions and self-assessments completed in January 2008 stated that "emerging negative trends impacting plant performance are not being promptly identified, reported, and corrected."

The team also conducted plant and system walkdowns and identified two deficiencies: a trash can was found in a marked non-combustibles area, and discrepancies were noted between the Control Room Deficiency Log and the actual condition of the control room boards. The licensee initiated condition reports 2008-19636 and 2008-20895 to address these issues.

Prioritization and Evaluation of Issues

The team concluded that problems were generally prioritized and evaluated in accordance with the licensee's CAP procedures and NRC requirements. Each CR written was assigned a priority level at the Initial Screening Team (IST) meeting, which was chaired by the Plant Improvement Department. Management reviews of CRs conducted by the Management Review Committee (MRC) were thorough, and adequate consideration was given to system or component operability and associated plant risks. Additionally, feedback from the MRC was communicated to the IST for comments on specific CRs, as well as CRs where the MRC changed the initial priority level. The team found that in the sample of root cause and apparent cause evaluations reviewed, the licensee was generally self-critical and thorough in evaluating the causes of the conditions adverse to quality. The team noted two examples of evaluations that could have been more thorough:

- In CR 2007-32279, the extent of condition for identification of incorrect ASTM bolting material extended only to isophase bus links, where the original deficiency was identified. Consideration should have been given to include other systems and components where specific ASTM bolting material is required to be installed by procedure, and where there may be a possibility of installing the incorrect bolting material due to the inability of workers to identify the proper material.
- In CR 2008-9728, a recommendation to evaluate the 3B Main Steam Isolation Valve backup nitrogen system for leaks due to frequent nitrogen bottle changeouts was listed in the CR description. The concern was not addressed in the evaluation, nor was a corrective action generated to address the concern.

Effectiveness of Corrective Actions

The team determined that overall, corrective actions were effective in correcting plant problems, and that most corrective actions implemented by the licensee were appropriate for the severity and risk significance of the problem identified. For significant conditions adverse to quality, the corrective actions directly addressed the cause and effectively prevented recurrence. However, one example was found of inadequate and untimely corrective actions. CR 2005-27299 was written as a result of the failure of a chain operator for valve 3-712B, the Component Cooling Water (CCW) Heat Exchanger 3B Inlet Isolation Valve. A corrective action was identified that all chain operators were to be "evaluated and, if required, modified to prevent future failures leading to handwheel/operator falling." On May 21, 2008, the chain operating mechanism for valve 4-50-371, the 4A CCW Inlet Valve, failed. This valve had not been evaluated, nor modified, in accordance with the corrective action. The team determined this was not a violation of NRC regulations in that the original deficiency was not a significant condition adverse to quality, and as such, the licensee was not required to perform an extent of condition review. The licensee entered this issue into their corrective action program as CR 2008-21025. Additionally, the team noted that audits of the Security department conducted in 2006, 2007, and 2008 identified CRs that were closed out without clearly demonstrating that the corrective actions addressed the issues identified.

(3) Findings

No findings of significance were identified.

b. Assessment of the Use of Operating Experience

(1) Inspection Scope

The team examined licensee programs for reviewing industry operating experience, reviewed the licensee's operating experience database, and interviewed the Operating Experience Coordinator, to assess the effectiveness of how external and internal operating experience data was handled at the plant. In addition, the team selected operating experience documents (e.g., NRC generic communications, 10 CFR Part 21 reports, licensee event reports, vendor notifications, and plant internal operating experience items, etc.), which had been issued since July 1, 2007, to verify whether the licensee had appropriately evaluated each notification for applicability to the Turkey Point plant and whether issues identified through these reviews were entered into the CAP. Documents reviewed are listed in the Attachment.

(2) Assessment

The team determined that the licensee was effective in screening operating experience for applicability to the plant. The inspectors verified that the licensee had entered those items determined to be applicable into the CAP and taken adequate corrective actions to address the issues. Operating experience was adequately utilized and considered as part of formal root cause evaluations for supporting the development of lessons learned and corrective actions for CAP issues.

(3) Findings

No findings of significance were identified.

c. Assessment of Self-Assessments and Audits

(1) Inspection Scope

The inspectors reviewed licensee Quality Assurance (QA) audits conducted by the Nuclear Assurance Department, and department self-assessments, including those which focused on problem identification and resolution, to verify that findings were entered into the CAP and to verify that these findings were consistent with the NRC's assessment of the licensee's CAP.

(2) Assessment

QA audits and departmental self-assessments were effective in identifying issues and directing attention to areas that needed improvement. Licensee identified weaknesses and issues in self-assessments were appropriately entered into the corrective action program and addressed. The team determined that the self-assessments and audits were critical, insightful, and persistent at identifying issues and entering them into the corrective action program. Based on the weaknesses and recommendations identified by the licensee, the team determined the self-assessments were thorough and

comprehensive.

(3) Findings

No findings of significance were identified.

d. Assessment of Safety-Conscious Work Environment

(1) Inspection Scope

The team randomly interviewed 41 on-site workers regarding their knowledge of the corrective action program at Turkey Point and their willingness to write CRs or raise safety concerns. During technical discussions with members of the plant staff, the inspectors conducted interviews to develop a general perspective of the safety-conscious work environment at the site. The interviews were also conducted to determine if any conditions existed that would cause employees to be reluctant to raise safety concerns. The inspectors reviewed the licensee's employee concerns program (ECP) and interviewed the ECP manager. Additionally, the inspectors reviewed a sample of completed ECP reports to verify that concerns were being properly reviewed and identified deficiencies were being resolved and entered into the CAP when appropriate.

(2) Assessment

Based on this inspection and the CR reviews, the team determined that licensee management emphasized the need for all employees to identify and report problems using the appropriate methods established within the administrative programs, including the CAP and ECP. These methods were readily accessible to all employees. Based on discussions conducted with a sample of plant employees from various departments, the inspectors determined that employees felt free to raise issues and felt that management encouraged employees to place issues into the CAP for resolution. The inspectors did not identify any reluctance on the part of the licensee staff to report safety concerns.

(3) No findings of significance were identified.

4OA6 Exit Meeting

On June 27 and July 23, 2008, the inspectors presented the inspection results to Mr. M. Kiley and other members of his staff who acknowledged the results. The inspectors confirmed that proprietary information was not provided or retained following the inspection.

ATTACHMENT: SUPPLEMENTAL INFORMATION

SUPPLEMENTARY INFORMATION

KEY POINTS OF CONTACT

Licensee Personnel

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

NRC Personnel

S. Vias, Branch Chief, Division of Reactor Projects, Region II
S. Stewart, Senior Resident Inspector, Turkey Point

ITEMS OPENED, CLOSED, AND DISCUSSED

Opened and Closed

None

LIST OF DOCUMENTS REVIEWED

Procedures

0-ADM-533	Corrective Action Program Performance Monitoring and Trend Analysis 04/11/2008
0-ADM-710	Control of Preventive Maintenance – 07/12/2007
EDI-ENG-020	Determination of SSC's Within Scope of MR
EDI-ENG-023	Establishing (a)(1) Corrective Actions and Goals
EDI-ENG-024	Monitoring Performance of SSCs Within Scope of MR to Performance Criteria and Goals
ENG-QI 2.3	Operability Determinations, Rev. 8
ENG-QI 2.5	Condition Reports, Rev. 22
NAP-201	Human Performance, Rev. 5
NAP-202	Self-Assessment, Rev. 11
NAP-204	Condition Reporting, Rev. 19
NAP-414	Operating Experience Program, Rev. 4
NAP-424	Employee Concerns Program, Rev. 2
ODI-CO-040	Operator Workarounds and Operator Burdens

Condition Reports

2003-3634	2004-2183	2004-14206	2004-15302	2005-12764	2005-27299
2005-31579	2005-34466	2006-5723	2006-6291	2006-8893	2006-10961
2006-13427	2006-18766	2006-18900	2006-29298	2006-32220	2006-34059
2006-35814	2007-043	2007-139	2007-1314	2007-1443	2007-1480
2007-1578	2007-3075	2007-3319	2007-3393	2007-3756	2007-3760
2007-4073	2007-4216	2007-5893	2007-6294	2007-6420	2007-6534
2007-6555	2007-8527	2007-9521	2007-9974	2007-10191	2007-11440
2007-11632	2007-12002	2007-15763	2007-16269	2007-16900	2007-17324
2007-17399	2007-17534	2007-17569	2007-17570	2007-17571	2007-17680
2007-17682	2007-17825	2007-17841	2007-18294	2007-18518	2007-18584
2007-18791	2007-20248	2007-21655	2007-22526	2007-22674	2007-22953
2007-23041	2007-23471	2007-24141	2007-24802	2007-25033	2007-25216
2007-26229	2007-26431	2007-27303	2007-27546	2007-27693	2007-28178
2007-28544	2007-29155	2007-29248	2007-30281	2007-30461	2007-30485
2007-31493	2007-31666	2007-31703	2007-31860	2007-31898	2007-32108
2007-32279	2007-32286	2007-33246	2007-33340	2007-33454	2007-33571
2007-33857	2007-34059	2007-34439	2007-34832	2007-35228	2007-35464
2007-36573	2007-36812	2007-36887	2007-37638	2007-37742	2007-38110
2007-38465	2007-38825	2007-39027	2007-42881	2007-42868	2007-42886
2007-42970	2008-2311	2008-3019	2008-3139	2008-3649	2008-4241
2008-4325	2008-4336	2008-5574	2008-5579	2008-7157	2008-7337
2008-8040	2008-8142	2008-8145	2008-8146	2008-8148	2008-8150
2008-8153	2008-8207	2008-8913	2008-9041	2008-9836	2008-10040
2008-11271	2008-11288	2008-11584	2008-12514	2008-13097	2008-13347
2008-15431	2008-15668	2008-15837	2008-16717	2008-17419	2008-17546
2008-17557	2008-18110	2008-18837	2008-21109		

Work Orders

31007667	Isolation valve for Intake Cooling Water, B HDR to lube water system, replace valves 3-50-409 and 3-50-410, 10/29/04
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37014438 Replace Thermowell TE-3-420A, 09/26/07
 37027863 Repair FCV-4-6278C, 4C Steam Generator Blowdown Flow Control Valve

Self-Assessments

2007-1010 On-Line Work Management Process
 2007-10850 Radioactive Material Program
 2007-15205 Corrective Action Program Self-Assessment and Effectiveness Review of CR 2006-15531
 2007-37715 Employee Concerns Program Self-Assessment
 2008-10311 CAP Program: Problem Identification, Reviews of Conditions and Action Requests
 2008-11090 Operations Work Controls Group
 QAO PTN-07-06 Corrective Action & Self-Assessment Functional Area Audit, Feb 7, 2008
 QAO PTN-06-001 Security Functional Area Audit, February 14, 2006
 QAO PTN-07-001 Security Functional Area Audit, February 9, 2007
 QAO PTN-08-001 Security Functional Area Audit, March 25, 2008
 Operator Workarounds/Burdens Audit, 03/11/08
 Operator Workarounds/Burdens Audit, 05/29/08
 Safety Conscious Work Environment (SCWE) Review of Top Five Questions for Disagreement, 10/11/07

Other Documents

Control Room Deficiency Log, Units 3 and 4
 Corrective Action Program Expectations Handbook, 01/20/07
 Engineering Performance Improvement Health Report 1st Quarter 2008
 FP&L Turkey Point Nuclear Plant Apparent Cause Evaluation (ACE) Handbook
 FP&L Turkey Point Nuclear Plant Root Cause Evaluation Handbook
 Maintenance Department Performance Improvement Health Report 1st Quarter 2008
 Maintenance Rule (a)(1) Action Plan systems status chart
 Maintenance Rule Expert Panel Meeting Agenda for Thursday, June 12, 2008
 Maintenance Rule Report for Condensate System
 Maintenance Rule Report for Steam System
 Operations Department Performance Improvement Health Report 1st Quarter 2008
 Operations Shift Turnover Report
 Operator Burdens List
 Operator Workarounds List
 Operator Workarounds/Operator Burdens Screening Checklist
 Security Administrative Directive 5002, Training Review Committee, Revision 1
 Security Equipment Maintenance Tracking Reports, June 11 & 12, 2008
 Turkey Point Power Plant Self-Assessment Guide, Rev. 1
 Work Control Department Performance Improvement Health Report 1st Quarter 2008

TURKEY POINT PI&R INSPECTION 2008 INFORMATION REQUEST

The following information request was provided to the licensee to support the PI&R team preparation week beginning 06/02/08:

Meetings

1. A list of corrective action program routine meetings with times and location;
2. A list of work management meetings that discuss prioritization of equipment malfunctions.

Procedures

3. Procedures and sub-tier procedures associated with the corrective action program. This should include procedures related to:
 - a. corrective action process
 - b. operating experience program
 - c. employee concerns program
 - d. self-assessment program
 - e. maintenance rule program and implementing procedures
 - f. Operability Determination process
 - g. Degraded/non-conforming condition process (e.g., RIS 2005-20)
 - h. System health process or equivalent Equipment Reliability Improvement Programs
 - i. PM deferral and CR extension process
 - j. Top plant equipment problem list or equivalent characterized document.

CR Lists

4. List of all CRs initiated since January 1, 2007, sorted by the following initiating plant department. In each department grouping, please provide the following information sorted by CR # - a) CR #, b) Priority, and c) CR Title.
 - a. Operations
 - b. Engineering
5. List of all CRs initiated since January 1, 2007, sorted by Priority, with the following information - a) CR #, b) Priority, and c) CR Title;
6. List of all CRs initiated since January 1, 2007, involving or associated with the below listed systems. Please sort by the system, and within each system provide the following information sorted by CR # - a) CR #, b) Priority, and c) CR Title.
 - a. Auxiliary Feedwater (AFW) system
 - b. Containment Isolation
7. List of all CR's which had evaluations and/or actions closed out as a result of contracted support personnel activities from September 2007 through January 2008 sorted by CR # a) CR #, b) Priority, and c) CR Title;
8. List of all currently OPEN CRs and Work Orders for the two systems described above regardless of when initiated. Please sort by system, with the following information - a) CR # or Work Order #, b) date initiated, and c) title or brief description of the problem;.
9. List of all CRs that have been voided or cancelled since January 1, 2007. Please sort by CR #, with title or description of problem, and reason voided or cancelled.

Deferrals and Extensions

10. List of all deferred PMs for the two systems described above. Please sort by system, with the following information - a) original date due, b) frequency, and c) title or brief description of the problem. Also, include the associated PM deferral justification.
11. List of all currently extended CRs or overdue, sorted by initiation date, with the following information - a) CR #, b) Priority, and c) CR Title

Violation and Event Report Closeout

12. Corrective action closeout packages for all NRC findings and Licensee identified violations since January 1, 2007;
13. Corrective action closeout packages for all LERs issued since January 1, 2007.

Equipment Performance

14. List of all structures, systems, and components (SSC) or performance monitoring groups which were classified as (a) (1) in accordance with the Maintenance Rule since January 1, 2007. Include applicable procedures for classifying systems or components as (a)(1), date and reason for being placed in (a) (1), and actions completed and current status. Also, provide copy of any self-assessment of the Maintenance Rule program conducted since January 1, 2007.
15. List of Maintenance Preventable Functional Failures (MPFF) of risk significant systems since January 1, 2007. Include actions completed and current status.
16. List of Maintenance Preventable Functional Failures affecting the systems listed in item 4 above since January 1, 2007. Include actions completed and current status.
17. Copies of latest System Health Reports for systems listed in item 4. Copies of system design basis documents, system description information, PI&Ds, etc., associated with these systems
18. A list of test failures (IST or Technical Specifications surveillances) since January 1, 2007 with a brief description of component/system which failed, CR # and/or WO #

Operator Challenges

19. A list of control room deficiencies with a brief description and corresponding CR # and/or WO #;
20. A list of issues that challenge operator performance and the associated CR # and/or WO #;

Operating Experience

21. List of all industry operating experience documents (i.e., Part 21 reports, vendor information letters, information from other sites, etc.,) evaluated by the site for applicability to the station, regardless of the determination of applicability, since January 1, 2007;
22. Copy of industry operating experience documents (i.e., Part 21 reports, vendor information letters, information from other sites, etc.,) affecting the systems listed in item 4. above, since January 1, 2007. If documented in CRs, please sort by CR # with the following information - a) CR #, b) priority, and c) CR Title or brief description of the issue.

Audits and Self Assessments

23. Copies all Quality Assurance Audits and surveillances issued since January 1, 2007, including the last two audits of the corrective action program;
24. Copies of all department self-assessments since January 1, 2007;
25. Copy of the most recent integrated plant trend report, departmental trend report(s), and corrective action trend report, including any human performance and equipment reliability trends;
26. Copy of the latest Corrective Action Program statistics (if exists) such as the number initiated by department, human performance errors by department, and others as may be available;
27. Copies of any minutes of meetings by the offsite safety review boards/groups since January 1, 2007

Employee Concerns

28. List of corrective action documents that have resulted from the Employee Concerns Program since January 1, 2007. (Note: This should be provided by the ECP Coordinator during an onsite interview with the PI&R team leader).
29. List of all anonymous CRs since January 1, 2007, sorted by CR# with the following information - a) CR #, b) priority, and c) CR Title

Equipment Aging

30. List of CRs related to equipment aging issues of risk significant systems since January 1, 2003 (e.g., system erosion and/or corrosion problems; electronic component aging or obsolescence of circuit boards, power supplies, relays, etc.; environmental qualification). Please sort by CR# with the following information - a) CR #, b) priority, and c) CR Title.