

- A. DNQA or DME-EA shall perform an independent verification that corrective actions were implemented or adequately dispositioned for:
1. CAQRs determined to be significant.
 2. CAQRs which they initiated.
 3. Hardware CAQRs.
- B. The completed corrective action or final disposition of CAQRs for ASME Section III and Section XI Code-related CAQs shall be made available for verification of completion by the Representatives of the Authorized Inspection Agency (Authorized Nuclear Inspector or Authorized Nuclear Inservice Inspector).

2.16.2 Verification activities shall be documented and incorporated into or referenced by document number in the CAQR package. This documentation shall contain information as to what was verified and the results.

2.17 Approval To Extend Due Dates for Implementation of Corrective Action

- 2.17.1 When extensions to due dates are needed for implementation of corrective and preventive actions, the organization responsible for the action shall provide a justification in time to obtain approval before the due date. The justification shall address any interim actions which have been taken to ensure that the CAQR did not affect plant safety. The extension request shall reference the CAQR number.
- 2.17.2 The Responsible Organization shall:
- A. Obtain before the due date the approval of the extension request from the site or division director or staff chief for impacts to major milestones such as fuel loading, system transfers, and MRC commitments. Approvals for extensions where major site milestones are not impacted may be approved by a lower level manager as designated by the site or division director or staff chief.
 - B. Route the extension request through the CAQ coordinator.
- 2.17.3 A copy of the approved or disapproved extension request shall be sent by the Responsible Organization to the CAQ coordinator to update the due date in TROI, and the original approved or disapproved extension request shall be added to the CAQR package as supporting documentation.

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2.18. Reporting To Management

- 2.18.1 Management, including the Chairman of NSRB, shall be kept informed on a monthly basis by corrective action status reports.
- 2.18.2 Each site quality manager shall prepare a corrective action report for his or her site, DNE-EA shall prepare a report for Knoxville based organizations, and QSB shall prepare reports for other managers, including the Chairman of NSRB, and a summary report for the Manager of OMP's office.

2.19. Revising or Changing CAQRs

- 2.19.1 Whenever information on a CAQR is changed, the change shall be made by one of the following methods:
- A. Mark a single line through the incorrect information, add the correct information, and initial and date the correction. The change shall be legible.
 - B. Initiate a new CAQR sheet and indicate the changes with the use of a vertical line, preferably in the margin adjacent to the change.
- 2.19.2 All changes to a CAQR require re-approval (except a change in the supervisor designation within the Responsible Organization or very minor changes such as correction of typographical or spelling errors) by individuals holding the positions that made previous approvals of the changed information or subsequent approvals. Approvals of the changes shall be made by printing or typing name and initialing and dating beside the previous approval. Previous approval shall not be marked out. If the individual approving the change is the one who previously approved the change, initialing and dating next to the previously printed or typed name is sufficient. If the individual approving the changes is not the one who approved previously, his or her name shall also be printed or typed. Changes shall be made on the original CAQR.
- 2.19.3 The revision level of a CAQR shall be advanced for any of the following situations, and only those situations:
- A. Any change to Part A after the management review date.
 - B. Any change to Parts B, C, D, and E after all required approvals have been obtained on the part that was changed. Changes in scheduled completion dates do not require the CAQR to be revised; however, changes are required to be processed as extension requests.

C. Rewriting the CAQR because it has become illegible.

- 2.19.4 The original CAQR, in its entirety, shall be provided to the CAQ coordinator for revision provided the original CAQR has not been sent to RIMS. If the original CAQR has been sent to RIMS, a copy serving as the original or a new CAQR (containing the identical information) shall be sent to the CAQ coordinator.
- 2.19.5 The CAQ coordinator shall mark the new revision number on each sheet of the revised CAQR. All sheets of the CAQR shall have the same revision number. Revision bars in the right margin shall also be marked with the revision number associated with the change.
- 2.19.6 The CAQ coordinator shall submit the revised CAQR to RIMS with a new RIMS accession number.
- 2.19.7 The Responsible Organization shall further distribute the revised CAQR to all organizations affected by the revised information.
- 2.19.8 When appropriate, based on the extent of the change, the CAQ coordinator may designate new due dates, not to exceed the original timeframes, for affected actions as a result of a revision to the CAQR.

2.20 Trending of CAQRs

Trend analysis information on CAQRs shall be reviewed on an ongoing basis by DNQA and DNE EA. The Responsible Organization shall investigate any apparent adverse trends to the extent necessary to confirm or deny the existence of the adverse trend. Confirmed adverse trends shall be documented on a CAQR by the Responsible Organization. CAQR trend analysis reports, which shall be issued on a monthly basis, shall reflect the quality levels for key activities being trended. The CAQR trend analysis reports shall be tailored to the level of management to whom they are issued, and shall include an evaluation of the data.

- 2.20.1 Each site quality manager shall prepare a CAQR trend analysis report for his or her site. DNE-EA shall prepare a CAQR trend analysis report for CAQRs for which they are the CAQ coordinator, and DNQA shall prepare CAQR trend analysis reports for other managers including a summary report for the Manager of ONP's office.
- 2.20.2 Site QA, DNE-EA, and DNQA shall monitor timeliness performance to identify adverse trends associated with timeliness violations (not limited to CAQRs requiring escalations) and shall initiate CAQRs as needed.

2.20.3 Each organization preparing a CAQR trend analysis report shall notify the manager of their area of responsibility of any apparent adverse trends affecting the manager.

2.21 Transfer of Responsibility For CAQRs

2.21.1 Interorganizational

The transferring of responsibility for CAQRs and related actions between organizations served by different CAQ coordinators shall be accomplished as follows:

- A. A Responsible Organization may transfer responsibility for a CAQR with the concurrence of the receiving organization and the CAQ coordinator. Transfer of responsibility and concurrence of the receiving organization shall be documented on the CAQR and a copy of the CAQR sent to the CAQ coordinator for updating TROI. This change requires approval on the CAQR or a CAQR revision. The transferring organization shall indicate in the transmittal memorandum the extent to which it wishes to be involved in approval of the corrective action if different from approvals specified in subsection 2.15. If a CAQR number has been previously issued, the CAQR shall be administratively closed by the CAQ coordinator when a new CAQR number is assigned by the CAQ coordinator of the Responsible Organization. Required due dates and timeframes may change based upon the transfer.
- B. The Initiator's CAQ coordinator shall forward the CAQR to the CAQ coordinator of the Responsible Organization and obtain receipt acknowledgment.
- C. Normally, necessary inputs to a CAQR such as help in determining proposed corrective action and coordination of actions should be obtained by the Responsible Organization without transfer of responsibility unless the CAQR is found to be misassigned or sufficient expertise or authority to achieve corrective actions is lacking. The inputs can be obtained in any manner chosen by the Responsible Organization but it is preferred that the information be obtained informally such as by oral communication to minimize the time required to obtain inputs.

2.21.2 Interorganizational

The Responsible Organization may transfer responsibility for a CAQR with the concurrence of the receiving

organization and the CAQ coordinator. Transfer of responsibility and concurrence shall be documented on the CAQR by the manager of the receiving organization with a copy of the CAQR hand-carried to the CAQ coordinator for updating TROI.

3.0 RESPONSIBILITIES

- 3.1 The Initiator is responsible for documenting a CAQ on a CAQR-PRD form or on one of the appropriate administrative control program documents.
- 3.2 The management reviewer for the organization initiating the CAQR-PRD form is responsible for:
 - 3.2.1 Reviewing the CAQR-PRD form for legibility, clarity, completeness, validity, potential impact on operability, determining the Responsible Organization, determining if abnormal events reporting is required in accordance with Appendix G, and whether the CAQR documents a hardware CAQ or is an example of a previously documented CAQ.
 - 3.2.2 Ensuring that the CAQR is hand carried to the CAQ coordinator after management review.
- 3.3 The Responsible Organization is responsible for:
 - 3.3.1 Developing and gaining approval of the corrective action.
 - 3.3.2 Performing the root cause analysis.
 - 3.3.3 Ensuring that the CAQR is technically correct.
 - 3.3.4 Distributing the CAQR to affected organizations.
 - 3.3.5 Ensuring that TROI is updated as necessary.
 - 3.3.6 Hand-carrying the CAQR wherever possible to minimize handling time.
 - 3.3.7 Ensuring consideration and documentation of generic implications within their site or division.
 - 3.3.8 Ensuring, as applicable, completion of corrective action.
 - 3.3.9 Keeping the CAQ coordinator informed of status.
 - 3.3.10 Ensuring that the corrective action is completed, and submitting the CAQR to the verifying organization.
 - 3.3.11 Verifying the completion of CAQRs.

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3.3.12 Determining potential reportability.

3.4.1 Assigning the CAQR number and revision level.

[REDACTED] (The CAQ coordinator is the "Tracking Organization" per the TROI User's Guide.) Updating TROI, as necessary, to ensure that the database is accurate and current.

3.4.3 Hand-carrying the CAQR wherever possible to minimize handling time.

3.4.4 Initiating escalations for Levels 1, 2, and 3.

3.4.5 Distributing the CAQR.

3.4.6 Closing the CAQR based on completion of required actions.

3.4.7 Entering CAQR trend codes into TROI.

3.4.8 Reviewing the closed CAQR package for completeness and submitting it to RIMS as a QA record.

3.5 DNQA is responsible for:

3.5.1 Providing a CAQ coordinator from the site QA organization to service all site organizations.

3.5.2 Providing a CAQ coordinator from the Quality Systems Branch (QSB) in Chattanooga to service all organizations offsite other than those in the Knoxville area.

3.5.3 Approving proposed corrective action and verifying completion of corrective action as required by subsections 2.15 and 2.16. For CAQRs which affect an operating unit, the QA approval is accomplished by a member of QA who is also a member of PORC.

3.5.4 Tagging items identified on CAQRs in accordance with NQAM, Part I, Section 2.15; and removing those tags after verification of corrective action implementation.

3.5.5 Determining the trend codes including the apparent cause code.

3.5.6 Preparing corrective action status reports.

- 3.6 PORS is responsible for the following actions:
- 3.6.1 Determining whether the CAQR affects unit operability for an unit with an OL.
 - 3.6.2 For CAQRs affecting unit operability, ensuring expeditious development and implementation of corrective action.
- 3.7 DNE is responsible for approving "repair" and "accept-as-is" dispositions involving a deviation from engineering specified requirements.
- 3.8 DNE-EA is responsible for:
- 3.8.1 Providing a CAQ coordinator in Knoxville to service all organizations in the Knoxville area.
 - 3.8.2 Reviewing CAQRs for which DNE is the Responsible Organization for generic implications, distributing CAQRs to potentially affected organizations for review, and coordinating and tracking the reviews of these CAQRs by potentially affected organizations.
 - 3.8.3 Approving proposed corrective action and verifying completion of corrective action as required by subsections 2.15 and 2.16.
 - 3.8.4 Determining the trend codes including the apparent cause code.
 - 3.8.5 Preparing corrective action status reports.
- 3.9 DMLRA (Chattanooga - Nuclear Experience Review Group) is responsible for reviewing CAQRs, other than those reviewed by DNE, for generic implications, distributing CAQRs to potentially affected organizations for review, and coordinating and tracking the reviews of these CAQRs by potentially affected organizations.
- 3.10 TVA managers are responsible for ensuring that CAQs are promptly documented, reported, evaluated, corrected, tracked, and trended.
- 3.11 ONP personnel are responsible for:
- 3.11.1 Identifying and reporting CAQs.
 - 3.11.2 Hand-carrying the CAQR wherever possible to minimize handling time.
 - 3.11.3 Ensuring that CAQR entries, including names, are legible and meet the requirements of the procedure for control of QA records.

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3.12 Each site and division director is responsible for appointing appropriately qualified management personnel to perform the functions of the management reviewer described in this procedure.

4.0 RECORDS

- 4.1 Prior to closure, the CAQR shall be submitted to RIMS; however, it shall not be stamped as a "QA record."
- 4.2 The closed CAQR assembled into a package, including supporting documentation (i.e., documentation including, but not limited to, previous revisions [if any], Escalation Notices, Extension Request approvals or disapprovals, and CAQR Continuation Sheets), is a QA record. The closed CAQR shall have all pages numbered sequentially (i.e., page 1 of ___), shall be stamped (only first sheet) as a "QA Record", and stored as such in RIMS.
- 4.3 Working files such as the CAQR file maintained and controlled by the CAQ coordinators are classified as non-QA records.
- 4.4 The complete CAQR generic review package is a QA record. The closed CAQR generic review package shall have all pages numbered sequentially (i.e., page 1 of ___), and shall be stamped (only first sheet) as a "QA Record", and stored as such in RIMS.

APPENDIX A

REFERENCES

1.0 REQUIREMENTS DOCUMENTS

Following are the documents containing requirements which are incorporated or implemented.

1.1 Regulations

10 CFR 50, Appendix B, Criterion XV, "Nonconforming Materials, Parts, and Components," and Criterion XVI, "Corrective Action."

10 CFR 50.55(e), "Conditions of Construction Permits"

10 CFR 21, "Reporting of Defects and Noncompliance."

10 CFR 50.59, "Changes, Tests, and Experiments."

10 CFR 50.72, "Immediate Reporting Requirements for Operating Nuclear Power Reactors."

10 CFR 50.73, "License Event Report System."

10 CFR 73.55, "Reporting of Security Incidents."

1.2 National Codes and Standards

ANSI N18.7-1976/ANS 3.2, "Administrative Controls and Quality Assurance for the Operational Phase of Nuclear Power Plants," (Sections 5.2.11 and 5.2.14) as endorsed by Regulatory Guide 1.33, Revision 2, February 1978.

ANSI N45.2-1971, "Quality Assurance Program Requirements for Nuclear Power Plants," (Sections 16 and 17) as endorsed by Regulatory Guide 1.28, Revision 0, June 7, 1972.

American Society of Mechanical Engineers, Boiler and Pressure Vessel Code, Section III, Division 1, "Nuclear Power Plant Components," Subsection NCA, Article NCA-4000, "Quality Assurance." (Implemented through the Quality Assurance Manual for ASME Section III Nuclear Power Plant Components [NCA].)

American Society of Mechanical Engineers, Boiler and Pressure Vessel Code, Section XI, "Rules for Inservice Inspection of Nuclear Power Plant Components."

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1.3 TVA Licensing Submittal Documents

TVA Topical Report (TVA-TR75-1A), Sections 17.1.15 and 17.2.15, "Nonconforming Materials, Parts, or Components"; Section 17.1.16, "Corrective Action"; and Section 17.2.16, "Adverse Conditions and Corrective Action."

1.4 Technical Specifications

2.0 INTERFACE DOCUMENTS

2.1 NQAM, Part I, Section 2.15, "Nonconforming Materials, Parts, or Components"

2.2 NQAM, Part I, Section 2.16.1, "Stop Work"

2.3 NQAM, Part I, Section 2.16.2, "Root Cause Practice"

2.4 NQAM, Part I, Section 2.17, "QA Records"

2.5 NQAM, Part II, Section 2.1, "Plant Maintenance"

2.6 NQAM, Part II, Section 4.5, "Plant Surveillance Test Program"

2.7 NQAM, Part II, Section 4.9, "Handling of CSSC Test Deficiencies"

2.8 NQAM, Part II, Section 5.1, "In-Service Inspection - Nuclear Power Plant Components"

2.9 NQAM, Part II, Section 5.3, "Maintenance and Modification Inspection Program"

2.10 NQAM, Part III, Section 1.1, "Document Control"

2.11 NQAM, Part III, Section 5.1, "Audits"

2.12 NQAM, Part III, Section 7.2, "Corrective Action"

2.13 Program Manual Procedures 0604.04, "Evaluation of Changes, Tests, and Experiments"

APPENDIX B
DEFINITIONS

Accept-As-Is -

A hardware disposition which may be imposed for a CAQ when it can be established that the discrepancy will result in no adverse conditions and that the item under consideration will continue to meet all engineering functional requirements including performance, maintainability, fit, and safety even though the item does not conform to the original requirements.

Adverse Trend -

An undesirable change in a quality indicator statistic of such magnitude as to require increased management attention.

Apparent Adverse Trend -

A possible adverse trend which has not yet been verified.

Apparent Cause -

The broad problem area in which an incident occurred (e.g. personnel, procedures, training, design).

CAQ coordinator -

An individual designated by DMQA (for each site and Chattanooga) or DNE-EA (Knoxville) to number, track, and handle CAQRs.

Condition Adverse to Quality -

Adverse conditions include nonconforming material, parts, or components; failures; malfunctions; deficiencies; deviations; hardware problems involving noncompliance with licensing commitments, specifications, or drawing requirements; abnormal occurrences; and nonhardware problems such as failure to comply with the operating license, technical specifications, licensing commitments, procedures, instructions, or regulations.

Condition; Adverse to Quality Report -

A document which describes a CAQ that meets the criteria in subsection 2.1.

Corrective Action -

The action taken to correct a CAQ. As used in this procedure, corrective action includes interim measures and corrective and preventive actions.

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Generic -

A CAQ is generic when the same or similar condition exists in other TVA organizations, items, or facilities.

Item -

Any level of unit assembly, including structure, system, subsystem, subassembly, component, part, or material.

Management Reviewer -

An individual or group designated to review CAQRs for legibility, clarity, completeness, validity, whether it is an example of a previously identified CAQR, potential impact on operability, determination of Responsible Organization, and whether the CAQR documents a hardware CAQ.

Operable - Operability -

A system, subsystem, train, component, or device shall be operable or have operability when it is capable of performing its specified function. Implicit in this definition shall be the assumption that all necessary attendant instrumentation, controls, normal and emergency electrical power sources, cooling or seal water, lubrication or other auxiliary equipment that are required for the system, subsystem, train, component, or device to perform its function are also capable of performing their related support function (see Appendix F).

Origination Date -

The date that the CAQ coordinator signs the CAQR.

Plant/SAR Discrepancy -

A discrepancy between the as-built facility or its procedures and the applicable description in the SAR such that (1) the description in the SAR and the as-built facility or its procedures differ to the degree that the SAR statement is invalid, and (2) the difference was not introduced through a design change or procedure change control process that included a valid screening review or safety evaluation.

Potential CAQR -

A condition which has not been determined to be a valid CAQR.

Preventive Action -

Actions designed to prevent the CAQ from recurring.

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Problem Reporting Document -

A document which describes a CAQ that does not meet the criteria of subsection 2.1 or does not fit on one of the other reporting documents in the administrative control program which can be used for controlling CAQs.

QA Programmatic Deficiency -

1. A CAQ that has occurred with a frequency as to indicate that past recurrence action has been lacking or ineffective (this does not apply to deficiencies which are handled through normal, planned rework cycles [e.g., weld repair] when the frequency of failure is not deemed to be excessive), or
2. A CAQ which indicates gross or widespread noncompliance with procedural requirements which could negate the effectiveness of QA controls imposed by the ONP QA program. A CAQ falls in this category when it involves:
 - A. A widespread failure to address the requirements of procedures and instructions;
 - B. A widespread failure to train and instruct personnel in QA program requirements including safety-related work activities; or
 - C. A widespread or deliberate failure to manage or supervise personnel in carrying out their assigned duties and responsibilities as related to the QA program.

Repair -

The process of restoring a nonconforming characteristic of an item to a condition such that the capability of an item to function reliably and safely is unimpaired, even though the item still does not conform to the original requirement.

Responsible Organization -

The organizational unit with the lead responsibility for resolving the CAQ including evaluating the CAQR, developing the corrective action plan, implementing the corrective action plan, and providing periodic performance monitoring of the corrective actions. (Note that DNE should not be the Responsible Organization simply because the expected disposition is "repair" or "accept-as-is" and requires DNE approval.)

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Rework -

A process by which a nonconforming item is made to conform to prior specified requirements by completion, remachining, reassembling, or other acceptable corrective means.

Root Cause -

The underlying reason for the existence of a CAQ. The most basic reason for a CAQ which if corrected will prevent recurrence.

SAR -

The latest version of the Final Safety Analysis Report for a TVA nuclear plant, plus any additional submittals made by TVA which form the basis for the Facility Operating License and any amendments thereto (including Technical Specification amendments).

Scrap -

A disposition to discard the item and does not require engineering approval.

Significant CAQR -

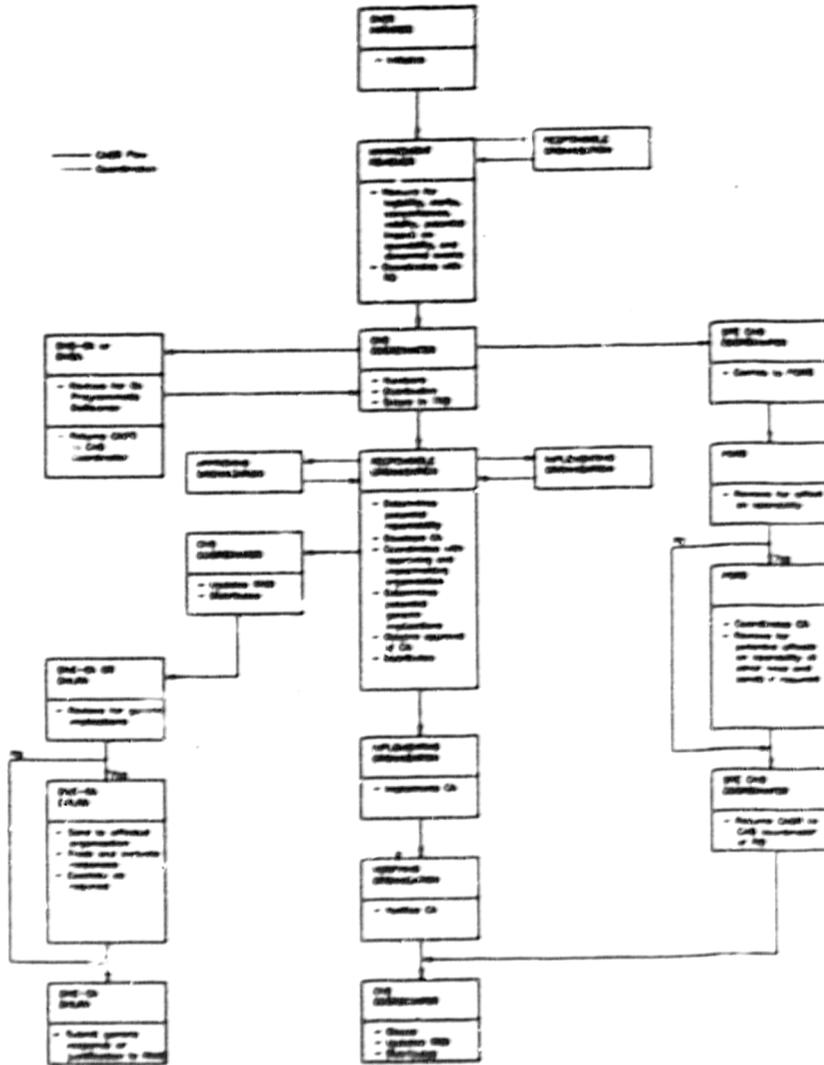
A CAQR which documents a CAQ which is potentially reportable or a QA Programmatic Deficiency.

Trend -

A trend is a sustained movement of an indicator in one direction over time used to measure quality.

APPENDIX C
CAQR FLOW DIAGRAM

Corrective Action Flow Chart



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APPENDIX D

CAQR-PRD FORM

CAQR

PRD

QA
 NON-QA

NO.

REV.

FORM NO.

| | | | | | | |
|---|------|--|------|-----------------------------------|-----|------|
| PLANT/SICL AFFECTED _____ | | TIA) UNIT _____ | | TIA) SYSTEM _____ | | |
| TIA) COMPONENT _____ | | TIA) VENDOR _____ | | TIA) CONTRACT _____ | | |
| TIA) REQUIREMENT VIOLATED _____ | | | | | | |
| TIA) SOURCE OF REQUIREMENT VIOLATE _____ | | | | TIA) REFERENCE _____ | | |
| TIA) DESCRIPTION OF CONDITION _____ | | | | | | |
| CAQR OR PRD INITIATED BY _____ | | DATE _____ | | INITIATOR'S ORG. _____ | | |
| DATE/TIME CAQ DISCOVERED _____ | | DATE OF CAQ OCCURRENCE, IF KNOWN _____ | | | | |
| (SA) POTENTIALLY AFFECTS OPERABILITY: YES <input type="checkbox"/> NO <input type="checkbox"/> | | SPECIFY PLANTS _____ | | | | |
| TIB) ABNORMAL EVENT? YES <input type="checkbox"/> NO <input type="checkbox"/> | | (TIA) HARDWARE CAQR YES <input type="checkbox"/> NO <input type="checkbox"/> | | POSSIBLE <input type="checkbox"/> | | |
| TIA) RESPONSIBLE ORGANIZATION _____ | | COORDINATED WITH _____ DATE _____ | | | | |
| TIA) MANAGEMENT REVIEWER _____ | | DATE _____ | | TITLE _____ | | |
| CAQ COORDINATOR _____ | | DATE RECEIVED _____ | | | | |
| (SB) TAGS REQUIRED (BY DIAGNOSIS) YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, NO. PLACED _____ PLACED BY: _____ | | | | | | |
| (SC) POTENTIALLY / REPORTABLE YES <input type="checkbox"/> NO <input type="checkbox"/> | | | | | | |
| (SD) INTERIM MEASURES REQUIRED: YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, DESCRIBE BELOW <input type="checkbox"/> OR PART D <input type="checkbox"/> | | | | | | |
| (SE) DISPOSITION: REWORK <input type="checkbox"/> REPAIR <input type="checkbox"/> ACCEPT-AS-IS <input type="checkbox"/> SCRAP <input type="checkbox"/> OTHER (DESCRIBE) <input type="checkbox"/> | | | | | | |
| (SF) REVIEW FOR POTENTIAL GENERIC IMPLICATIONS IS <input type="checkbox"/> IS NOT <input type="checkbox"/> REQUIRED. COPY SENT TO _____ ON _____ | | | | | | |
| (SG) ROOT CAUSE ANALYSIS REQUIRED: YES <input type="checkbox"/> NO <input type="checkbox"/> SPECIFY APPARENT CAUSE BELOW <input type="checkbox"/> OR PART D <input type="checkbox"/> | | | | | | |
| (SH) SAFETY EVALUATION REQUIRED: YES <input type="checkbox"/> NO <input type="checkbox"/> | | | | | | |
| (SI) ARMED YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, IS <input type="checkbox"/> OR XI <input type="checkbox"/> (S) HARDWARE CAQR YES <input type="checkbox"/> NO <input type="checkbox"/> | | | | | | |
| TIB) DESCRIPTION OF CORRECTIVE ACTION AND SCHEDULED COMPLETION DATE _____ | | | | | | |
| INDICATE IF PART D <input type="checkbox"/> PART E <input type="checkbox"/> OR A CONTINUATION SHEET IS ATTACHED. | | | | | | |
| APPROVAL | NAME | INT | DATE | NAME | INT | DATE |
| REP | | | | AN | | |
| REP | | | | PRD | | |
| | | | | AT USE | | |
| | | | | (initials) | | |
| | | | | FORM NO. | | |
| TIC) CORRECTIVE AND PREVENTIVE ACTION COMPLETE _____ | | DATE _____ | | | | |
| TIC) VERIFICATION _____ | | TIC) VERIFIED COMPLETED BY _____ | | DATE _____ | | |
| TIA) VERIFICATION _____ DATE _____ | | (IC) TAGS REMOVED BY _____ | | DATE _____ | | |
| TIA) COORDINATOR CLOSED _____ | | DATE _____ | | | | |

TVA FORM (79P 3-85)

FORM NO.

LINE ITEMS MARKED WITH AN ASTERISK * REQUIRE COMPLETION IF PRD BLOCK IS MARKED

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APPENDIX D
CAQR-PRD FORM

CAQR

NO.

REV. _____

FORM NO.

| | | | | | |
|--|------------------|--------|---|------|----------|
| DISPOSITION CONCLUDED: YES <input type="checkbox"/> NO <input type="checkbox"/> (IF NO, ALTERNATE RECOMMENDATION) (1) | | | | | |
| TECHNICAL JUSTIFICATION FOR DISPOSITION: REPAIR <input type="checkbox"/> OR ACCEPT-AS-IS <input type="checkbox"/> (INCLUDE ANY CUMULATIVE EFFECT ON DESIGN - ATTACH ANY INFORMATION WHICH SUPPORTS CONCLUSIONS) (2) | | | | | |
| INSPECTION OR TEST: IS <input type="checkbox"/> IS NOT <input type="checkbox"/> REQUIRED (SPECIFY REQUIREMENTS) (3) | | | | | |
| AFFECTED DOCUMENT NO. | TYPE | STATUS | AFFECTED DOCUMENT NO. | TYPE | STATUS |
| | | | | | |
| | | | | | |
| | | | | | |
| CI - CHANGE TO BE INCORPORATED NC - NO CHANGE (INFORMATION ONLY) | | | CN - CHANGE NOT TO BE INCORPORATED RL - RELATED DOCUMENT FOR REFERENCE | | |
| IS IMPACT REVERSIBLE? YES <input type="checkbox"/> NO <input type="checkbox"/> | APPROVED BY (NO) | DATE | | | |
| UNQD REQUIRED? Y/N <input type="checkbox"/> NO <input type="checkbox"/> | LEAD ENGINEER | DATE | | | |
| ENVIRONMENTAL? YES <input type="checkbox"/> NO <input type="checkbox"/> | OTHER | DATE | | | |
| SAFETY RELATED? YES <input type="checkbox"/> NO <input type="checkbox"/> | OTHER | DATE | WORK COMPLETE | | DATE |
| APPENDIX B IMPACT? YES <input type="checkbox"/> NO <input type="checkbox"/> | SA OR QA | DATE | REP. REPT. NO / SQ. | | DATE |
| SAR CHANGE? YES <input type="checkbox"/> NO <input type="checkbox"/> | PROJECT ENGINEER | DATE | FINAL WORK TRACKING CLOSURE | | DATE |
| | | | | | FORM NO. |

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APPENDIX D

(Back of Sheet 1 of CAQR)

1. General Instructions -

- A. CAQR and PRD numbers and revision levels are assigned and completed only by the CA coordinator. A PRD number will have a "P" designation in the last position of the number (e.g. - CHS880121P).
- B. "CAQR or PRD Initiated By," "Management Reviewer," "Corrective Action Complete," "Verified Complete," "Closure," and all approvals shall be noted by typed or printed name followed by signature or initials.
- C. Unused approval blanks shall be marked NA by the CAQ coordinator at closure.
- D. When more than one organization is required to sign the CAQR or PRD, the additional signatures and dates shall be recorded either in the extra approval blanks on the CAQR-PRD form or on a continuation sheet attached to the CAQR.

2. Specific Instructions for Numbered Blanks -

• Part A

Initiator

- 1A Identify whether the unit is 1, 2, 3, common, or all.
- 2A Use system designation (reference TROI User's Guide).
- 3A Identify the name of the unique identifier of the component.
- 4A To be completed where hardware or contractor services are involved. Especially important for trending vendor performance where the vendor is at fault.
- 5A Identify the requirement violated. Record the words from the procedure, instruction, regulation, etc.
- 6A Identify the source of the requirement violated. Record the document and section where the requirement is located.
- 7A Identify if the CAQR or PRD is initiated as a result of a walkdown, employee concern, DNE-EA or DMQA audit, NMRG finding, ASME survey, ISEG Report, OIG Report, corporate assessments, generic review, document review, INPO finding. If the CAQR is initiated as a result of a document review, reference the name and/or number of the document (e.g., generic CAQR). The reference may also include a work control identification number.

APPENDIX D (Continued)

(Back of Sheet 1 of CAQR)

8A Information shall be described in sufficient detail to determine the precise scope of impact on the plant. Information, if known, such as items affected, failure modes, and known consequences, shall be provided. Include, as appropriate, drawing numbers, specifications, report numbers, procedure numbers, or any other document providing information pertinent to the CAQR. The description of the CAQ may include the location, type of condition, quantity of items, and any special identification numbers such as heat, lot, mark, model, serial, drawing, or system. Attach applicable figures, tables, or other supporting information.

Management Reviewer

- 9A Indicate if operability is potentially affected. Identify the affected plants with an (P). Information copy of the CAQR may be sent to plants with a CP.
- 10A Indicate if the CAQ is an abnormal event identified in Appendix G. If "yes" process in accordance with Appendix G.
- 11A If the CAQR documents a hardware problem mark the "Yes" block. If the CAQR has the potential to affect hardware, mark the "possible" block; otherwise, mark the "no" block.
- 12A Designate the Responsible Organization by organization (e.g., SQM) and Group (e.g., MMG) using the TROI User's Guide.
- 13A Attests that the responsibilities of subsection 3.2 have been met.

• Part B

SQM's Organization

- 1B Where the hardware is affected, indicate if tagging is required.

Responsible Organization

- 2B Identify whether CAQR is potentially reportable in accordance with Appendix H. If potentially reportable, identify criterion from Appendix H on which evaluation was based and attach the Potential Reportability Evaluation sheet (last sheet to Appendix H) to the CAQR.
- 3B If repetitive occurrences of the CAQ occur or are likely to occur during the time the corrective action is being developed and approved, indicate the interim actions taken.

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APPENDIX D (Continued)

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- 4B If the item requires an "accept-as-is" or "repair" disposition from a design engineering specified requirement, DNE may complete Part E, Engineering Evaluation and Approval sheet, of the CAQR in accordance with the instructions contained in DNE procedures.
- 5B Indicate if a review for generic implications is required. If response is "yes," a root cause analysis is required. Indicate to whom the CAQR is sent to perform the generic review (i.e., DNE-EA [Knoxville] or DNLRA [Chattanooga], see subsection 2.9.4 C for additional requirements).
- 6B "Yes" response is required for all significant and nonsignificant CAQRs determined to be potentially generic and affect operability. If "yes", initiate Part D, "Cause Analysis and Corrective Action Continuation" sheet. Specify the apparent cause of the CAQ if a root cause analysis is not performed. (The QA organization shall assign an Apparent Cause Trend Code.)
- 7B For units with an OL, indicate if a safety evaluation is required. A safety evaluation is required if the CAQR identifies a Plant/SAR Discrepancy (see definition in Appendix B).
- 8B Indicate if the CAQ identifies an ASME Section III or Section XI Code Item or activity. If "yes", AIA exception and verification of the corrective action is required for closure.
- 9B If the CAQR is confirmed to affect hardware, mark the "yes" block. Otherwise, mark the "no" block.
- 10B As appropriate, include a full discussion of the design changes made, revision made to existing specifications, training (the target audience shall be delineated in the response), issuance of new specifications, and other similar information. Also address preventive actions.
- Responsible Organization
- 1C Indicate that the corrective and preventive action is complete.
- 2C "In-house" verification by a knowledgeable individual not responsible for implementing the corrective action. (Reference subsection 2.10.4.A)

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APPENDIX D (Continued)
(Back of Sheet 1 of CAQR)

3C Independent Verification

DNQA or DNE-EA shall perform an independent verification
(reference sub-section 2.16.1.A)

4C DNQA (SQM)

If block 1B indicates that nonconforming tags have been placed,
indicate that the tags have been removed.

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APPENDIX E

GUIDELINES FOR POTENTIAL OPERABILITY DETERMINATIONS

Operable - Operability is defined in Appendix B.

Generally, to determine potential effect on operability is to ascertain if the condition described in the CAQ affects the operability of a system or component required by the technical specifications such that it cannot perform its function. Note that this guideline requires that the deviation or deficiency is within the licensing basis of the plant and does not differ from applicable regulatory requirements committed to by TVA for the particular nuclear site in question. Implicit in this determination is a specific knowledge of the particular site's system and equipment, the determination should be based on first-hand experience, discussions with an experienced source familiar with the potentially affected site, or site specific design documents.

Design-related deficiencies are to be investigated through calculations, evaluations, communication with vendors, or other means to determine whether the deficiency renders the affected equipment inoperable.

Confirmed degradation, damage, failure, malfunction, or loss of plant equipment performing functions important to safety are conditions which may potentially affect unit operability.

Failure to follow or create standards to comply with 10 CFR 50, Appendix B, or TVA criteria is not in itself a condition potentially affecting unit operability.

Any CAQR citing a Plant/SAR Discrepancy (see Appendix B, Definitions) shall be reviewed for effect on operability.

A deficient design does not affect plant operability until that design has been implemented in the plant.

APPENDIX F
GENERIC APPLICABILITY

The following CAQRs generally do not warrant further consideration for multi-plant generic implications:

- CAQRs initiated as a result of previous generic reviews.
- CAQRs that list additional examples of previous CAQRs already reviewed for generic applicability.
- CAQRs for which the normal corrective action process will resolve generic implications for other sites or locations.
- CAQRs documenting a procedural deficiency that is known to be unique to a particular site.
- CAQRs documenting systems, hardware, or designs that are known to be unique at a particular site.
- CAQRs documenting damage from accidents for which the cause is known to have no significant potential of occurrence at other sites.
- CAQRs that describe isolated cases determined not to be batch, process, or design-related.

- NOTES:
1. CAQRs related to performance of operating activities or operating procedures are not applicable to units still under the construction permit, but may be sent to construction sites under the "information only" category of the experience review program. Obviously, this type of CAQR may be applicable at other operating units, however.
 2. The above nonapplicability criteria are not all-inclusive. All determinations concluding that a generic review is not applicable are required to be justified and documented as described in this procedure.
 3. Generic reviews of a CAQR are not required of the site originating the CAQR under this section of the procedure. Generic applicability for other units of the originating site is considered during development of the corrective action.

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ABNORMAL EVENTS

The following events require immediate notification to the Shift Supervisor of the affected plant who shall immediately notify the Plant Manager and/or Site Director. The Manager, ONP, and the Manager, DNLRA, shall be immediately notified of the event, the Plant Manager or Site Director. Should the event occur outside of normal working hours, notification shall be made no later than 8 a.m., the following day.

1. Any event (with the exception of the ENS phone inoperable) reportable under the requirements of 10 CFR 50.72 or 10 CFR Part 20.
2. Emergency transport of an individual offsite for medical treatment;
3. Any radioactive spill in excess of 100 gallons;
4. Any inadvertent or unplanned airborne radioactive release;
5. Unplanned loss of generating capabilities (turbine trip);
6. Any event reportable under the requirements of 10 CFR 73.71 for which a telephone notification to the NRC is required;
7. Any event which requires offsite response (i.e., fire).

APPENDIX H

GUIDANCE FOR THE DETERMINATION OF POTENTIAL REPORTABILITY
(I.E., SIGNIFICANT CAQR)

Responsible Organization has the responsibility to perform the preliminary evaluation to determine the potential reportability under the terms of 10 CFR Parts 20, 21, 50, 71, and 73. This preliminary evaluation is not a technical engineering evaluation, but should be based on specific knowledge of the potentially affected site. The intent is to assure that potentially reportable occurrences are brought to the attention of responsible organizations and management in a timely manner.

The information given below is intended to provide guidance in the performance of this preliminary evaluation. References are provided to assist the Responsible Organization in making determinations in difficult cases.

1. Part 20. Notification of Incidents

If the answer to "a" is YES, or the answer to "b" and any part of "c" is YES, the CAQR is to be evaluated POTENTIALLY REPORTABLE.

Reference: Part 20.101
Part 20.311
Part 20.402
Part 20.405

- a. Has notification of receipt for radioactive waste disposal not been received within 20 days after transfer?
- b. Did the incident involve by-product source or special nuclear material and
- c. Did the incident cause or threaten to cause:

1. Exposure of an individual in an unrestricted area or in a restricted area without a current MRC-4 form on file, in excess of:

| | 18 years or Older | Less than 18 years old |
|-----------------------------------|-------------------|------------------------|
| - whole body | 1.25 rem/quarter | 0.125 rem/quarter |
| - skin of the whole body | 7.5 rem/quarter | 0.75 rem/quarter |
| - feet, ankles, hands or forearms | 18.75 rem/quarter | 1.875 rem/quarter |

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APPENDIX H (Continued)

- ii. Exposure of an individual with a current NRC-4 form, in a restricted area, in excess of:
 - whole body 3 rem/quarter or
5 (N-18) rem lifetime where N is
the individual's age in years.
- iii. Exposure to an individual in excess of:
 - whole body 5 rem
 - skin of the whole body 30 rem
 - feet, ankles, hands or
forearms 75 rem
- iv. Release of radioactive material greater than 10X the limits given in 10 CFR 20, Appendix B, Table II.
- v. Exposure of an individual to radioactive material in excess of the applicable limits of 10 CFR 20.103 (a)(1), 20.103(a)(2), or 20.104(b).
- vi. Radiation levels in an unrestricted area which, if an individual were continuously present in the area, could result in their receiving a dose in excess of 20 millirems in any one hour or 1 rem in any seven consecutive days.
- vii. Levels of radiation or releases of radioactive material in excess of limits specified by 40 CFR 190.
 - The annual dose equivalent of any member of the public from exposures to planned discharges or radioactive materials does not exceed 25 millirems to the whole body, 75 millirems to the thyroid, or 25 millirems to any other organ.
 - The total quantity of radioactive materials entering the general environment from the entire uranium fuel cycle per gigawatt-year of electrical energy produced by the fuel cycle, does not exceed 0.5 millicuries combined of plutonium-239 and other alpha-emitting transuranic radionuclides with half-lives greater than one year, 50,000 curies of krypton-85; or 5 millicuries of iodine-129 per gigawatt-year.
- viii. Loss of operation of a facility for more than 1 day.
- ix. Damage in excess of \$2,000.

APPENDIX H (Continued)

2. Part 21 Reporting of Defects and Noncompliances

Reference: Part 21
Defect as defined in 10 CFR 21.3
Quality Classification List (QCL)
Regulatory Guide 1.29, Seismic Design Classification

For a CAQR to be potentially reportable under the terms of Part 21, it must either be:

- a defect in a "Basic Component" which could create a substantial safety hazard (radiological safety), or
- a noncompliance in design, inspection, testing, or consulting services associated with a Basic Component and relating to substantial safety hazards.

A Basic Component may be a component, structure, system, or a part thereof. See 10 CFR 21.3(a) for definition.

If the answer to any one question listed under "a" and any one question under "b" is YES, the CAQR is to be evaluated POTENTIALLY REPORTABLE.

a. Determination of "Basic Component"

- i. Does the Purchase Order specify 10 CFR 21 applicability?
- ii. Is the item a part of a system in the QCL?
- iii. Is the item part of a structure system or component classified Seismic Category I (Regulation Guide 1.29)?

b. Determination of Responsibility to Report

- i. Has the Basic Component been delivered and accepted?
- ii. Is the Basic Component installed or in use?
- iii. Is the Basic Component part of a facility offered for acceptance?
- iv. If commercial grade, has a dedicated safety-related end use been specified?
- v. If a security defect or noncompliance, is it contributory to a significant safety hazard? (e.g., Could a saboteur have gained access to any Basic Component?)

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- vi. If a noncompliance design, inspection, testing or consulting services could the noncompliance affect the function or reliability of the associated basic component?

3. Part 50.55(e) Conditions of Construction Permits

If the answer to a, b, c, or d is "yes," the CAQR is to be evaluated Potentially Reportable.

Reference: Part 50.55(e)

- a. Is there a significant breakdown in any portion of the QA program conducted in accordance with Appendix B to 10CFR50?
- b. Is there a significant deficiency in final design as approved and released for construction such that the design does not conform to the criteria and bases stated in the safety analysis report or construction permit?
- c. Is there a significant deficiency in construction of or significant damage to a structure, system, or component which will require extensive evaluation, extensive redesign, or extensive repair to meet the criteria and bases stated in the safety analysis report or construction permit or to otherwise establish the adequacy of the structure, system, or component to perform its intended safety function?
- d. Is there a significant deviation from performance specifications which will require extensive evaluation, extensive redesign, or extensive repair to establish the adequacy of a structure, system, or component to meet the criteria and bases stated in the safety analysis report or construction permit or to otherwise establish the adequacy of the structure, system, or component to perform its intended safety function?
4. Part 50.72, Immediate Notification Requirements for Operating Nuclear Power Reactors

If the answer to any one question under "a" or "b" is YES, the CAQR is to be evaluated POTENTIALLY REPORTABLE.

Reference: Part 50.72.

a. One-Hour Notification Requirements

1. The declaration of any of the Emergency Classes specified in the licensee's approved Emergency Plan.

APPENDIX K (Continued)

- ii. The initiation of any nuclear plant shutdown required by the plants Technical Specifications.
- iii. Any deviation from the plant's Technical Specifications authorized pursuant to subsection 50.54(x) of this part.
- iv. Any event or condition during operation that results in the condition of the nuclear power plant, including its principal safety barriers being seriously degraded or results in the nuclear power plant being:
 - (1) In an unanalyzed condition that significantly compromises plant safety;
 - (2) In a condition that is outside the design basis of the plant; or
 - (3) In a condition not covered by the plant's operating and emergency procedures.
- v. Any natural phenomenon or other external condition that poses an actual threat to the safety of the nuclear power plant or significantly hampers site personnel in the performance of duties necessary for the safe operation of the plant.
- vi. Any event that results or should have resulted in emergency core cooling system (ECCS) discharge into the reactor coolant system as a result of a valid signal.
- vii. Any event that results in a major loss of emergency assessment capability, offsite response capability, or communications capability (e.g., significant portion of control room indication, emergency notification system, or offsite notification system).
- viii. Any event that poses an actual threat to safety of the nuclear power plant or significantly hampers site personnel in the performance of duties necessary for the safe operation of the nuclear power plant including fires, toxic gas releases, or radioactive releases.

d. Four-Hour Notification Requirements

1. Any event, found while the reactor is shutdown, that, had it been found while the reactor was in operation, would have resulted in the nuclear power plant, including its principal safety barriers, being seriously degraded or being in an unanalyzed condition that significantly compromises plant safety.

APPENDIX H (Continued)

- ii. Any event or condition that results in manual or automatic actuation of any Engineered Safety Feature (ESF), including the Reactor Protection System (RPS). However, actuation of an ESF, including the RPS, that results from and is part of the preplanned sequence during testing or reactor operation need not be reported.
- iii. Any event or condition that alone could have prevented the fulfillment of the safety function of structures or systems that are needed to:
 - (1) shut down the reactor and maintain it in a safe shutdown condition,
 - (2) remove residual heat,
 - (3) control the release of radioactive material, or
 - (4) mitigate the consequences of an accident.
- iv. Any airborne radioactive release that exceeds 2 times the applicable concentrations of the limits specified in Appendix B, Table II of Part 20 in unrestricted areas, when averaged over a time period of one hour.
- v. Any liquid effluent release that exceeds 2 times the limiting combined maximum permissible concentration (MPC) (see Note 1 of Appendix B to Part 20) at the point of entry into the receiving water (i.e., unrestricted area) for all radionuclides except tritium and dissolved noble gases, when averaged over a time period of one hour (immediate notifications made under this paragraph also satisfy the requirements of paragraphs (A)(2) and (B)(2) of 20.403 of Part 20).
- vi. Any event requiring the transport of a radioactively contaminated person to an offsite medical facility for treatment.
- viii. Any event or situation, related to the health and safety of the public or onsite personnel or protection of the environment, for which a news release is planned or notification to other government agencies has been or will be made. Such an event may include an onsite fatality or inadvertent release of radioactively contaminated materials.

APPENDIX H (Continued)

5. Part 71, Packing of Radioactive Material for Transport

If the answer to question "a" is YES, the CAQR is to be evaluated POTENTIALLY REPORTABLE.

Reference: Part 71.61

A. Does the CAQR involve a substantial reduction in the effectiveness of an in use authorized package?

6. Licensing Event Reports

If the answer to any question is YES, the CAQR to be evaluated is POTENTIALLY REPORTABLE.

Reference: Part 50.73

- A.
- i. The completion of any nuclear plant shutdown required by the plant's Technical Specification; or
 - ii. Any operation or condition prohibited by the plant's Technical Specifications; or
 - iii. Any deviation from the plant's Technical Specification authorized pursuant to Part 50.54(x).
- B. Any event that resulted in the condition of the nuclear power plant, including its principal safety barriers, being seriously degraded, or that resulted in the nuclear power plant being:
- i. In an unanalyzed condition that significantly compromised plant safety;
 - ii. In a condition that was outside the design basis of the plant; or
 - iii. In a condition not covered by the plant's operating and emergency procedures.
- C. Any natural phenomenon or other external condition that posed an actual threat to the safety of the nuclear power plant or significantly hampered site personnel in the performance of duties necessary for the safe operation of the nuclear power plant.
- D. Any event or condition that resulted in manual or automatic actuation of any Engineered Safety Feature, except that a preplanned sequence during testing or reactor operation need not be reported.

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- E. Any event or condition that alone could have prevented the fulfillment of the safety function of structures or systems that are needed to:
- i. Shut down the reactor and maintain it in a safe shutdown condition;
 - ii. Remove residual heat;
 - iii. Control the releases of radioactive material; or
 - iv. Mitigate the consequences of an accident.
- F. Events covered in item e. may include one or more procedural errors, equipment failures, and, or discovery design, analysis, fabrication, construction, and; or procedural inadequacies. However, individual component failures need not be reported if redundant equipment in the same system was operable and available to perform the required safety function.
- G. Any event where a single cause or condition caused at least one independent train or channel to become inoperable in multiple systems or two independent trains or channels to become inoperable in a single system design to:
- i. Shut down the reactor and maintain it in a safe shutdown condition;
 - ii. Remove residual heat;
 - iii. Control the release of radioactive material; or
 - iv. Mitigate the consequences of an accident.
- H.
- i. Any airborne radioactivity release that exceeded 2 times the applicable concentrations of the limits specified in Appendix B Table II or Part 20 in unrestricted areas when averaged over a time period of one hour.
 - ii. Any liquid effluent release that exceeded 2 times the limiting combined Maximum Permissible Concentration at the point of entry into the receiving water, i.e., unrestricted area for all radionuclides except tritium and dissolved noble gases, when averaged over a time period of one hour.

APPENDIX H (Continued)

- I. Any event that posed an actual threat to the safety of the nuclear plant or significantly hampered site personnel in the performance of duties necessary for the safe operation of the nuclear power plant including fires, toxic gas releases or radioactive releases.
 - J. Each exposure of an individual to radiation in excess of the applicable limits ... Parts 20.101 or 20.104(a) or in the license.
 - K. Each exposure of an individual to radioactive material in excess of the applicable limits in Parts 20.103(a)(1), 20.103(a)(2), or 20.104(b) or in the license.
 - L. Levels of radiation or concentrations of radioactive material in a restricted area in excess of any other applicable limit in the license.
 - M. Any incident for which notification is required by Part 20.403.
 - N. Levels of radiation or concentration of radioactive material (whether or not involving excessive exposure of any individual) in an unrestricted area in excess of ten times any applicable limit set forth in Part 20 or in the license.
7. Part 73.71, Reports of Events Which Significantly Threaten or Lessen the Effectiveness of Safeguards.

If answers to any parts of "a" or "b" is YES, the CAQR is to be evaluated POTENTIALLY REPORTABLE.

A. Events to be reported within one hour of discovery.

- 1. Any event in which there is reason to believe that a person has committed or caused, or attempted to commit or cause, or has made a credible threat to commit or cause:
 - a. A theft or unlawful diversion of special nuclear material; or
 - b. Significant physical damage to any nuclear fuel or spent nuclear fuel a facility possesses; or
 - c. Interruption of normal operation of a licensed nuclear power reactor through the unauthorized use of or tampering with its machinery, components, or controls including the security system.

APPENDIX H (Continued)

- ii. Any failure of a safeguards system or discovered noninherent vulnerability in a system that could allow unauthorized or undetected access to a protected area, material access area, controlled access area, vital area, or transport for which proper compensatory measures have not been established. A "proper compensatory measure" for a particular safeguards event as used in this Appendix means a measure that is specified in a security or contingency plan or security procedure. If the particular safeguards event is not described in a plan or procedure, then a "proper compensatory measure" means a measure implemented within 10 minutes of an event's discovery that provides a level of security essentially equivalent to that existing before the event.
 - iii. Any unauthorized entries through a required barrier (whether or not the event is properly compensated).
- B. Events to be recorded in a safeguards event log within 24 hours and submitted in a quarterly log.
- i. Any failure of a safeguards system or discovered vulnerability in a system that could allow unauthorized or undetected access to a protected area, material access area, controlled access area, vital area, or transport for which proper compensatory measures have been established.
 - ii. Any other failure of a safeguards system not included in paragraph b.i if the failure degrades the effectiveness of the system.

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APPENDIX H (Continued)
POTENTIAL REPORTABILITY EVALUATION

| Potentially Reportable: | If Yes, Specify Applicable | | | Evaluated for Reportability By: |
|-------------------------|----------------------------|-------------|----|---------------------------------|
| | Yes | Item Number | No | |
| 10CFR20 | | | | SLM or PORS |
| 10CFR21 | | | | SLM, DMLRA (Chatt) or PORS |
| 10CFR50.72 | | | | PORS |
| 10CFR71 | | | | SLM or PORS |
| 10CFR73.71 | | | | SLM or PORS |
| 10CFR50.73 | | | | PORS |
| 10CFR50.55(e) | | | | SLM or DMLRA (Chatt) |

CAQR No. _____ Evaluator _____ Date _____

APPENDIX I

PROCESSING OF PROBLEM REPORTING DOCUMENT

1.0 RESPONSIBILITIES

- 1.1 The initiator is responsible for recording the identified CAQ on a CAQR-PRD form.
- 1.2 The management reviewer is responsible for:
 - 1.2.1 Reviewing the CAQR-PRD form for legibility, clarity, and completeness.
 - 1.2.2 Reviewing the CAQR-PRD form to determine if it documents a CAQ.
 - 1.2.3 Determining the organization, if other than the identifying organization, responsible for correcting the CAQ (i.e., Responsible Organization).
- 1.3 The Responsible Organization is responsible for:
 - 1.3.1 Developing, approving, implementing, and verifying the implementation of the corrective action.
 - 1.3.2 Specifying the apparent cause of the CAQ.
- 1.4 CAQ coordinator is responsible for the following:
 - 1.4.1 Assigning the PRD number and revision level.
 - 1.4.2 Tracking PRDs in TROI.
 - 1.4.3 Updating TROI, as necessary, to ensure that the database is accurate and current.
 - 1.4.4 Distributing the PRD.
 - 1.4.5 Closing the PRD based on completion of required actions.
 - 1.4.6 Entering the trend codes into TROI.
 - 1.4.7 Reviewing the closed PRD package for completeness and submitting it to RIMS as a QA record.
- 1.5 TVA managers are responsible for assuring that CAQs documented on a PRD are reviewed, corrected, tracked, and trended.

APPENDIX I (Continued)

5.0 TRENDING OF PRDs

The requirements for trending PRDs shall be handled as required for CAQRs in this procedure.

6.0 TRANSFER OF RESPONSIBILITY FOR PRDS

The requirements for transferring responsibility for PRDs shall be handled as required for CAQRs in this procedure.

7.0 RECORDS

The closed PRD, including supporting documentation, is a QA record. The closed PRD shall have all pages numbered sequentially, and shall be stamped (first page) as a "QA RECORD", and stored as such in RIMS.

UNITED STATES GOVERNMENT

Memorandum

TENNESSEE VALLEY AUTHORITY

TO : Those listed

880801U0184

(54)

FROM : G. W. Killian, Chief, Quality Systems Branch, LP 4N 40A-C

DATE : JUL 20 1988

SUBJECT: STATUS OF CORRECTIVE ACTION REPORTS (CARs), CONDITION ADVERSE TO QUALITY REPORTS (CAQRs), DISCREPANCY REPORTS (DRs), AND DIVISION OF NUCLEAR QUALITY ASSURANCE (DNQA) AUDIT DEFICIENCIES AGAINST CHATTANOOGA CENTRAL OFFICE ORGANIZATIONS - JUNE 1988

Reference: Nuclear Quality Assurance Manual (NQAM), Part I, Section 2.16, "Corrective Action"

The following summarizes the current status of CARs, CAQRs, DRs, and DNQA audit deficiencies cited against Central Office organizations as of July 1, 1988. The details of the opened and closed conditions adverse to quality (CAQs) are on an attached computer printout.

| Responsible Organizations | No. CAQs Opened | No. CAQs Closed | No. CAQs Remaining | Average Age Months | | Actions | | |
|----------------------------|-----------------|-----------------|--------------------|--------------------|--------|---------|------|------------------|
| | | | | Open | Closed | On Time | Late | Open Escalations |
| Nuclear Services (DMS) | 1 | 0 | 29 | 12.0 | - | 20 | 4 | 1 |
| Nuclear Training (DMT) | 4 | 2 | 8 | 2.6 | 2.0 | 12 | 0 | 0 |
| Nuclear Engineering (DNE) | 1 | 0 | 4 | 5.0 | - | 7 | 0 | 0 |
| Nuc. Quality Assur. (DNQA) | 2 | 8 | 9 | 6.3 | 4.6 | 40 | 0 | 0 |
| Nuclear Personnel | 0 | 1 | 0 | - | 58.0 | 0 | 0 | 0 |
| Nuc Lic & Reg Aff. (DMLRA) | 0 | 0 | 7 | 7.7 | - | 10 | 11 | 0 |
| Nuclear Staffs (MSRB, ECP) | 0 | 0 | 1 | 15.0 | - | 0 | 0 | 0 |
| Nuc Bus Operations | 0 | 1 | 3 | 4.3 | 2.0 | 3 | 1 | 1 |
| POWER OP SPT | 0 | 0 | 3 | 14.3 | - | 0 | 0 | 0 |
| Nuclear Maintenance Staff | 0 | 1 | 2 | 5.0 | 9.0 | 1 | 0 | 0 |
| SQM Plant Site* | - | - | 1 | 16.0 | - | 0 | 0 | 0 |
| Totals | 8 | 13 | 67 | 9.3 | 8.5 | 98 | 16 | 2 |

* Generic CAQ processed by the Quality Systems Branch (QSB).

ESCALATIONS

WBAB60014D01 - The CAQ was escalated to the Manager of Support Operations on January 21, 1988. Satisfactory resolution of the issue causing the first-level escalation was not reached, and the CAQ was escalated to the Director of Nuclear Services on May 26, 1988. Resolution to remove this CAQ from escalation status was approved by the Nuclear Quality Audit and Evaluation Branch on June 24, 1988; subsequently, the CAQ was deescalated.

