

July 27, 2011

Mr. James Mallon, Early Site Permit Manager  
PSEG Power, LLC  
244 Chestnut St.  
Salem, NJ 08079

SUBJECT: NRC INSPECTION REPORT NO. 05200043/2011-201 AND NOTICE OF VIOLATION

Dear Mr. Mallon:

On May 31-June 3, 2011, the U.S. Nuclear Regulatory Commission (NRC) staff conducted an inspection at the PSEG Power, LLC, and PSEG Nuclear, LLC, collectively referred to as PSEG, facility in Salem, NJ. The NRC staff informed PSEG, via telephone conference on June 10, 2011, that it was reopening the inspection to clarify one issue that was not fully resolved during the on-site inspection. The NRC staff concluded the reopened inspection and conducted a telephone conference exit meeting with PSEG on June 16, 2011. The purpose of the inspection was to perform a limited-scope inspection to assess PSEG's compliance with the provisions of Title 10 of the *Code of Federal Regulations* (10 CFR) Part 21, "Reporting of Defects and Noncompliance," and selected portions of Appendix B, "Quality Assurance Criteria for Nuclear Power Plants and Fuel Reprocessing Plants," to 10 CFR Part 50, "Domestic Licensing of Production and Utilization Facilities." The enclosed report presents the results of this inspection. This inspection report does not constitute NRC endorsement of your overall quality assurance or 10 CFR Part 21 programs.

Based on the results of this inspection, the NRC determined that a Severity Level IV violation of NRC requirements occurred. The NRC evaluated the violation in accordance with the agency's Enforcement Policy, which is available on the NRC's Web site at <http://www.nrc.gov/about-nrc/regulatory/enforcement/enforce-pol.html>.

This violation is cited in the enclosed Notice of Violation (Notice), and the circumstances surrounding it are described in detail in the subject inspection report. The violation is being cited in the Notice because the NRC inspection team identified examples in which PSEG Nuclear Development personnel performing safety-related receipt inspections in accordance with Appendix B to 10 CFR Part 50 were not trained and were not aware they were performing a safety-related activity.

You are required to respond to this letter and should follow the instructions specified in the enclosed Notice when preparing your response. If you have additional information that you believe the NRC should consider, you may provide it in your response to the Notice. The NRC review of your response to the Notice will also determine whether further enforcement action is necessary to ensure compliance with regulatory requirements.

In accordance with 10 CFR 2.390, "Public Inspections, Exemptions, Requests for Withholding," of the NRC's "Rules of Practice," a copy of this letter, its enclosures, and your response will be

made available electronically for public inspection in the NRC Public Document Room or from the NRC's Agencywide Documents Access and Management System, accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html>. To the extent possible, your response should not include any personal privacy, proprietary, or safeguards information so that it can be made available to the public without redaction. If personal privacy or proprietary information is necessary to provide an acceptable response, then please provide a bracketed copy of your response that identifies the information that should be protected and a redacted copy of your response that deletes such information. If you request that such material be withheld from public disclosure, you must specifically identify the portions of your response that you seek to have withheld and provide, in detail, the bases for your claim (e.g., explain why the disclosure of information will create an unwarranted invasion of personal privacy or provide the information required by 10 CFR 2.390(b) to support a request for withholding confidential commercial or financial information). If Safeguards Information is necessary to provide an acceptable response, please provide the level of protection described in 10 CFR 73.21, "Protection of Safeguards Information: Performance Requirements."

Sincerely,

*/RA/*

Richard A. Rasmussen, Chief  
Quality and Vendor Branch 2  
Division of Construction Inspection  
and Operational Programs  
Office of New Reactors

Docket No.: 05200043

Enclosures:

1. Notice of Violation
2. Inspection Report No. 05200043/2011-201 and Attachment

made available electronically for public inspection in the NRC Public Document Room or from the NRC's Agencywide Documents Access and Management System, accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html>. To the extent possible, your response should not include any personal privacy, proprietary, or safeguards information so that it can be made available to the public without redaction. If personal privacy or proprietary information is necessary to provide an acceptable response, then please provide a bracketed copy of your response that identifies the information that should be protected and a redacted copy of your response that deletes such information. If you request that such material be withheld from public disclosure, you must specifically identify the portions of your response that you seek to have withheld and provide, in detail, the bases for your claim (e.g., explain why the disclosure of information will create an unwarranted invasion of personal privacy or provide the information required by 10 CFR 2.390(b) to support a request for withholding confidential commercial or financial information). If Safeguards Information is necessary to provide an acceptable response, please provide the level of protection described in 10 CFR 73.21, "Protection of Safeguards Information: Performance Requirements."

Sincerely,

*/RA/*

Richard A. Rasmussen, Chief  
Quality and Vendor Branch 2  
Division of Construction Inspection  
and Operational Programs  
Office of New Reactors

Docket No.: 05200043

Enclosures:

- 1. Notice of Violation
- 2. Inspection Report No. 05200043/2011-201 and Attachment

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\*concurring via email

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## NOTICE OF VIOLATION

PSEG Power, LLC, and PSEG Nuclear, LLC  
244 Chestnut Street  
Salem, NJ 08079

Docket Number 05200043  
Inspection Report Number 2011-201

During a U.S. Nuclear Regulatory Commission (NRC) inspection conducted at the PSEG Power, LLC, and PSEG Nuclear, LLC, collectively referred to as PSEG, facility in Salem, NJ, on May 31-June 3, 2011, and, for additional document inspection, at NRC Headquarters on June 10-16, 2011, the NRC inspection team identified a violation of NRC requirements. In accordance with the NRC Enforcement Policy, the violation is listed below:

Criterion II, "Quality Assurance Program," of Appendix B, "Quality Assurance Criteria for Nuclear Power Plants and Fuel Reprocessing Plants," to Title 10 of the *Code of Federal Regulations* (10 CFR) Part 50, "Domestic Licensing of Production and Utilization Facilities," states, in part, that the quality assurance program shall provide for indoctrination and training of personnel performing activities affecting quality as necessary to assure that suitable proficiency is achieved and maintained.

TQ-ND-101, "Nuclear Development Training and Indoctrination Procedure," Revision 1, dated May 16, 2011, establishes the requirements for indoctrination and training for PSEG Nuclear Development (ND) personnel performing safety-related activities that affect the quality of the PSEG Site early site permit application (ESPA). Step 4.1 states, in part, that "required indoctrination and training shall be accomplished prior to performing activity governed by the implementing procedures."

Contrary to the above, as of June 3, 2011, PSEG ND personnel did not accomplish the required training before performing activities governed by implementing procedures. Specifically, PSEG ND personnel who had not received indoctrination and training per TQ-ND-101 performed receipt inspections, an activity governed by PSEG implementing procedures, for safety-related calculations provided by Sargent & Lundy (Calculation Numbers 2011-03075 and 2009-10130).

This issue has been identified as Violation 05200043/2011-201-01.

This is a Severity Level IV Violation (Section 6.5.d of the NRC Enforcement Policy).

In accordance with the provisions of 10 CFR 2.201, "Notice of Violation," PSEG is hereby required to submit a written statement or explanation to the U.S. Nuclear Regulatory Commission, ATTN: Document Control Desk, Washington, DC 20555-0001, with a copy to the Chief, Quality and Vendor Branch 2, Division of Construction Inspection and Operational Programs, Office of New Reactors, within 30 days of the date of the letter transmitting this Notice of Violation. This reply should be clearly marked as a "Reply to a Notice of Violation" and should include (1) the reason for the violation, or, if contested, the basis for disputing the violation or severity level, (2) the corrective steps that have been taken and the results achieved, (3) the corrective steps that will be taken to avoid further violations, and (4) the date when full compliance will be achieved. Your response may reference or include previous docketed correspondence, if the correspondence adequately addresses the required response. Where good cause is shown, consideration will be given to extending the response time.

Enclosure 1



If you contest this enforcement action, you should also provide a copy of your response, with the basis for your denial, to the Director, Office of Enforcement, U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001.

Because your response will be made available electronically for public inspection in the NRC Public Document Room or from the NRC Agencywide Documents Access and Management System, accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html>, to the extent possible, it should not include any personal privacy, proprietary, or safeguards information so that it can be made available to the public without redaction. If personal privacy or proprietary information is necessary to provide an acceptable response, then please provide a bracketed copy of your response that identifies the information that should be protected and a redacted copy that deletes such information. If you request withholding of such material, you must specifically identify the portions of your response that you seek to have withheld and provide in detail the bases for your claim of withholding (e.g., explain why the disclosure of information will create an unwarranted invasion of personal privacy or provide the information required by 10 CFR 2.390(b) to support a request for withholding confidential commercial or financial information). If Safeguards Information is necessary to provide an acceptable response, please provide the level of protection described in 10 CFR 73.21, "Protection of Safeguards Information: Performance Requirements."

In accordance with 10 CFR 19.11, "Postings of Notices to Workers," you may be required to post this notice within 2 working days of receipt.

Dated at Rockville, MD, this **xxth day of July 2011**

**U.S. NUCLEAR REGULATORY COMMISSION  
OFFICE OF NEW REACTORS  
DIVISION OF CONSTRUCTION INSPECTION AND OPERATIONAL PROGRAMS**

Docket No.: 05200043

Report No.: 05200043/2011-201

Applicant: PSEG Power, LLC, and PSEG Nuclear, LLC  
244 Chestnut Street  
Salem, NJ 08079

Applicant Contact: Mr. David Robillard  
Principal Nuclear Engineer  
david.robillard@pseg.com  
1-856-339-7914

Background: PSEG Power, LLC, and PSEG Nuclear, LLC, has submitted an application for an early site permit (ESP) to the U.S. Nuclear Regulatory Commission (NRC) in accordance with the requirements of Title 10 of the *Code of Federal Regulations* (10 CFR) Part 52, "Licenses, Certifications, and Approvals for Nuclear Power Plants," Subpart A, "Early Site Permits." The NRC routine inspection focused on quality activities affecting previous and future types of components that PSEG Power, LLC, and PSEG Nuclear, LLC, will implement in their future site plans for the ESP application.

Inspection Dates: May 31–June 3, 2011, and June 10–16, 2011

Inspectors: George Lipscomb NRO/DCIP/CQVB Team Leader  
Shavon Edmonds NRO/DCIP/CQVB  
Stacy Smith NRO/DCIP/CQVB

Project Manager: Prosanta Chowdhury NRO/DNRL/NAR1

Approved by: Richard A. Rasmussen, Chief  
Quality and Vendor Branch 2  
Division of Construction Inspection  
& Operational Programs  
Office of New Reactors

## EXECUTIVE SUMMARY

PSEG Power, LLC, and PSEG Nuclear, LLC  
Report Number 05200043/2011-201

The U.S. Nuclear Regulatory Commission (NRC) inspection focused on quality assurance (QA) policies and procedures implemented to support the early site permit (ESP), as described in NRC Inspection Manual Chapter 2501, "Construction Inspection Program: Early Site Permit (ESP)," dated October 3, 2007. The purpose of this inspection was to verify that PSEG Power, LLC, and PSEG Nuclear, LLC, collectively referred to as PSEG, had implemented an adequate QA program that complies with the requirements of Appendix B, "Quality Assurance Criteria for Nuclear Power Plants and Fuel Reprocessing Plants," to Title 10 of the *Code of Federal Regulations* (10 CFR) Part 50, "Domestic Licensing of Production and Utilization Facilities." The inspection also verified that PSEG had implemented a program under 10 CFR Part 21, "Reporting of Defects and Noncompliance," that meets NRC regulatory requirements.

The following served as the bases for the NRC inspection:

- Appendix B to 10 CFR Part 50
- 10 CFR Part 21

During this inspection, the NRC inspection team implemented Inspection Procedure (IP) 35017, "Quality Assurance Implementation Inspection," dated July 29, 2008, and IP 36100, "Inspection of 10 CFR Parts 21 and 50.55(e) Programs for Reporting Defects and Noncompliance," dated October 3, 2007.

The NRC had not performed any QA inspections at PSEG for the PSEG Site ESP before this inspection.

### 10 CFR Part 21

The NRC inspection team determined that the PSEG process for reporting of defects and nonconformances is consistent with the regulatory requirements of 10 CFR Part 21. Based on its review, the NRC inspection team was unable to verify effective process implementation because PSEG had not completed any Part 21 evaluations by the completion of the inspection. No findings of significance were identified.

### Organization

The NRC inspection team determined that the PSEG Nuclear Development (ND) organization is consistent with the regulatory requirements of Criterion I, "Organization," of Appendix B to 10 CFR Part 50. No findings of significance were identified.

### Quality Assurance Program

The NRC inspection team determined that PSEG ND failed to fully implement its QA program consistent with the requirements of Criterion II, "Quality Assurance Program," of Appendix B to 10 CFR Part 50. The NRC inspection team issued Violation 05200043/2011-201-01 for the failure of PSEG ND's QA programs to provide for indoctrination and training of personnel performing activities affecting quality as necessary to assure that suitable proficiency is achieved and maintained. Specifically, PSEG ND personnel who had not received

indoctrination and training per TQ-ND-101, "Nuclear Development Training and Indoctrination Procedure," Revision 1, dated May 16, 2011, performed receipt inspections for safety-related calculations provided by Sargent & Lundy, LLC (S&L) (Calculation Numbers 2011-03075 and 2009-10130).

#### Design Control

The NRC inspection team determined that the implementation of the PSEG ND design control process is consistent with the regulatory requirements of Criterion III, "Design Control," of Appendix B to 10 CFR Part 50. PSEG ND contracted for design control activities related to the ESP application (ESPA) with S&L through the ESP services contract and was not performing design control activities. Therefore, with the exception of the training violation discussed above, the NRC inspection team determined PSEG ND effectively implemented their process for oversight of contracted design control. No findings of significance were identified.

#### Procurement Document Control

The NRC inspection team determined that the implementation of the PSEG ND procurement document control process is consistent with the requirements of Criterion IV, "Procurement Document Control," of Appendix B to 10 CFR Part 50. Based on its review, the NRC inspection team determined that PSEG ND is effectively implementing its document control policies and procedures in support of the PSEG Site ESP. No findings of significance were identified.

#### Corrective Action

The NRC inspection team determined that the implementation of the PSEG ND corrective action process is consistent with the requirements of Criterion XVI, "Corrective Action," of Appendix B to 10 CFR Part 50. Based on the sample reviewed, the NRC inspection team determined that PSEG ND is effectively implementing its corrective action policies and procedures in support of the PSEG Site ESP. No findings of significance were identified.

#### Quality Assurance Records

The NRC inspection team determined that the implementation of the PSEG ND records management process is consistent with the requirements of Criterion XVII, "Quality Assurance Records," of Appendix B to 10 CFR Part 50. Based on the sample reviewed, the NRC inspection team determined that PSEG ND is effectively implementing its quality records policies and procedures in support of the PSEG Site ESP. No findings of significance were identified.

#### Audits

The NRC inspection team determined that the implementation of the PSEG ND audit process is consistent with the requirements of Criterion XVIII, "Audits," of Appendix B to 10 CFR Part 50. Based on its review, the NRC inspection team determined that PSEG ND is effectively implementing its audit policies and procedures in support of the PSEG Site ESP. No findings of significance were identified.

## REPORT DETAILS

### 1. 10 CFR Part 21 Program

#### a. Inspection Scope

The NRC inspection team reviewed PSEG ND's policies and implementing procedures that govern the 10 CFR Part 21 (Part 21) process to verify compliance with the requirements of 10 CFR Part 21. In addition, the NRC inspection team evaluated a sample of PSEG's purchase orders (POs) for compliance with the requirements of 10 CFR 21.31, "Procurement Documents," and reviewed PSEG's implementation of posting requirements in accordance with 10 CFR 21.6, "Posting Requirements." Specifically, the NRC inspection team reviewed the following PSEG policies, procedures, and supporting documentation:

- LS-ND-120, "Issue Identification and Screening Process," Revision 3, May 25, 2011
- QA-ND-10, "Nuclear Development Reporting of Defects and Noncompliances," Revision 0, March 25, 2011
- PO 4500490230, change order dated April 29, 2009, with S&L
- S&L Process Improvement Program (PIP) 2009-0637, "Client Purchase Order Not Classified for Safety," April 16, 2009

#### b. Observations and Findings

##### b.1. Postings

The NRC inspection team observed that PSEG ND had posted Part 21 information in the main photocopy room in the Nuclear Development group spaces. The posting included a copy of Section 206 of the Energy Reorganization Act of 1974, as amended; a copy of 10 CFR Part 21; and a copy of QA-ND-10.

##### b.2. 10 CFR Part 21 Procedure

The NRC inspection team reviewed LS-ND-120, which establishes roles, responsibilities, and requirements for identification, screening, and classification of identified issues discovered at the PSEG facility, and QA-ND-10, which describes the method for evaluating and notifying the NRC of potential defects and noncompliances under Part 21. In order to better understand PSEG ND's implementation of its Part 21 process, the NRC inspection team interviewed personnel responsible for the review of potential Part 21 issues. In these discussions, the NRC inspectors learned that the procedure described in LS-ND-120 provides initial screening procedures, responsibilities, and requirements for all issues from identification through review by the PSEG Ownership Committee. QA-ND-10 provides additional procedures, responsibilities, and requirements for issues specifically identified as potential defects or noncompliances. The NRC inspection team noted that the PSEG Ownership Committee was responsible for the

determination of reportability under Part 21, and that QA-ND-10 was used as the basis for determining reportability and addressed the 60-day evaluation time as required by 10 CFR 21.21(a)(1).

b.3. 10 CFR Part 21 Implementation

The NRC inspection team requested copies of records pertaining to all PSEG ND Part 21 evaluations. The NRC inspection team learned that PSEG had not performed any Part 21 evaluations as part of the PSEG Site ESP project. As a result, the NRC inspection team was unable to review a sample of Part 21 evaluations in order to verify appropriate Part 21 implementation, but did review a sample of corrective action reports to assess appropriate Part 21 screening.

b.4. Purchase Orders

The NRC inspection team noted that the PSEG ND procurement process imposes the requirements of Part 21 on its qualified suppliers by incorporating supplier quality requirements into all POs for nuclear safety-related materials, items, and services.

The NRC inspection team reviewed the only safety-related PSEG ND PO (PO 4500490230, change order dated April 29, 2009) with S&L, and verified that PSEG had implemented its 10 CFR Part 21 program in a manner consistent with the requirements described in 10 CFR 21.31 for basic components. The NRC inspection team found that PO 4500490230 was initially issued as nonsafety and was changed on April 29, 2009, to include the requirements of 10 CFR Part 50, Appendix B and 10 CFR Part 21. PSEG ND personnel explained that the original S&L PO, issued in November 2008, was nonsafety-related and was later changed to safety-related as the result of S&L PIP 2009-0637. The NRC inspection team learned that S&L noticed the error in the initial PO, treated activities under the initial PO as safety-related, and initiated a PIP to correct the condition. PSEG ND personnel informed the NRC inspection team that no safety-related documents were received from S&L before the reclassification of the PO.

c. Conclusions

The NRC inspection team found that PSEG ND's Part 21 process met the requirements of 10 CFR Part 21 but was unable to verify program implementation because no Part 21 evaluations had been completed by the completion of the inspection. No findings of significance were identified.

2. Organization

a. Inspection Scope

The NRC inspection team reviewed the PSEG ND policies governing its organization to ensure that the policies provided an adequate description of the implementation requirements of Criterion I of Appendix B to 10 CFR Part 50. Specifically, the NRC inspection team reviewed the organization program requirements that PSEG had in place for the ESPA. The NRC inspection team also reviewed PSEG ND's associated implementing procedures.

Specifically, the NRC Inspection team reviewed the following PSEG documents:

- PSEG Power, LLC, Topical Report, "Quality Assurance Program Description," Revision 0, May 3, 2010
- AD-ND-102, "Nuclear Development Quality Assurance Program Description Changes," Revision 0, January 21, 2011
- CC-ND-101, "Nuclear Development Design Control Interface Procedure," Revision 1, May 13, 2011
- TQ-ND-101, "Nuclear Development Training and Indoctrination Procedure," Revision 1, May 16, 2011
- QA-ND-101-1002, "Nuclear Development Quality Assurance Assessor/Auditor Certifications," Revision 0, April 12, 2011
- QA-ND-101-1003, "Nuclear Development Quality Assurance Technical Specialist Orientation," Revision 0, April 12, 2011
- LS-ND-1000, "Early Site Permit Project Quality Assurance Instructions," Revision 3, May 26, 2011
- Condition Report 2010-0010, "The QAPD Does Not Consistently Identify Responsibility Personnel for QA Program Elements," December 20, 2010
- Condition Report 2011-009, "Nuclear Development QA Specialist Lacks Required Independence," April 21, 2011
- Condition Report 2009-0001, "Early Site Permit Quality Assurance Program Document (QAPD) Recommendations," May 28, 2009
- Condition Report ND-2010-0006, "Conduct an Assessment of the Implementation of the Nuclear Development Quality Assurance Program Description," December 7, 2010

b. Observations and Findings

The NRC inspection team reviewed the PSEG ND policies and procedures that govern the QA organization to verify conformance with Criterion I of Appendix B to 10 CFR Part 50. The NRC inspection team verified that a program existed that defined the authority and duties of personnel and organizations performing activities affecting

safety-related functions of structures, systems, and components. The NRC inspection team also verified that the QA organization had appropriate lines of management and authority for reporting. The NRC inspection team noted that PSEG had self-identified and entered into the corrective action program prior to the inspection deficiencies with ESP QA program organizational independence. The NRC inspection team determined that PSEG was implementing appropriate immediate corrective actions, but was unable to assess the full implementation of the corrective actions, which were scheduled to be completed by June 30, 2011, by the conclusion of the inspection.

c. Conclusions

Based on a review of the QA program, implementing procedures, and interviews with PSEG ND personnel, the NRC inspection team determined that PSEG's organization compiled with the applicable requirements of Criterion I of Appendix B to 10 CFR Part 50. The NRC inspection team also determined that the use of the PSEG corrective action program was appropriate for resolution of the self-identified organizational deficiencies. No findings of significance were identified.

3. Quality Assurance Program

a. Inspection Scope

The NRC inspection team reviewed the PSEG ND policies that govern the QA program to ensure that those policies provide an adequate description of the implementation requirements of Criterion II, "Quality Assurance Program," of Appendix B to 10 CFR Part 50. Specifically, the NRC inspection team reviewed the QA program requirements that PSEG ND had implemented for the ESPA, along with the implementing procedures. In addition, the NRC inspection team reviewed procedures and records to verify that PSEG ND adequately implemented and maintained personnel training and qualification processes to ensure that it was achieved and maintained. Specifically, the NRC inspection team reviewed the following PSEG documents:

- PSEG Power, LLC, Topical Report, "Quality Assurance Program Description," Revision 0, May 3, 2010 (ML101540492)
- AD-ND-102, "Nuclear Development Quality Assurance Program Description Changes," Revision 0, January 21, 2011
- CC-ND-101, "Nuclear Development Design Control Interface Procedure," Revision 1, May 13, 2011
- LS-ND-100, "Early Site Permit Project Manual," Revision 1, May 25, 2011
- LS-ND-1000, "Early Site Permit Project Quality Assurance Instructions," Revision 3, May 26, 2011
- TQ-ND-101, "Nuclear Development Training and Indoctrination Procedure," Revision 1, May 16, 2011



- QA-ND-101-1002, “Nuclear Development Quality Assurance Assessor/Auditor Certifications,” Revision 0, April 12, 2011
- QA-ND-101-1003, “Nuclear Development Quality Assurance Technical Specialist Orientation,” Revision 0, April 12, 2011
- Condition Report 2011-0014, “Nuclear Development Has Not Implemented a QA Assessment Procedure as Required by QAPD,” April 25, 2011
- Condition Report 2011-015, “Audit-Finding-Independence Is Lacking in Implementation of Early Site Permit Quality Assurance Program,” April 22, 2011
- PO 4500490230
- Contract Number SCM-08-ND-613 between PSEG Power, LLC, and S&L, “Early Site Permit Application Services Contract,” November 6, 2008
- ND-2011-0021, “Indoctrination of NOS Audit Team Members,” April 25, 2011
- NO-AA-101-1002, “PSEG Record of Lead Auditor Certification,” Revision 2, April 13, 2008
- CC-ND-101, Attachment 1, “Design Control Document Review Form,” for Calculation Number 2011-03075, “Liquid-Containing Tank Failure Groundwater Analysis for H-3,” reviewed May 26, 2011
- CC-ND-101, Attachment 1, “Design Control Document Review Form,” for Calculation Number 2009-10130, “Radiological Impact Analysis of Liquid Effluents for PSEG ESPA,” reviewed May 26, 2011

b. Observations and Findings

The NRC inspection team reviewed PSEG ND’s QA program, which stated, in part, that the quality assurance program document (QAPD) is the top-level policy document that establishes the QA policy and assigns major functional responsibilities for ESP activities conducted by PSEG ND. The NRC inspection team verified that the scope of the QA program was consistent with the quality-related activities being performed in support of the ESP. In addition, the NRC inspection team verified that the QA program specified that management of those organizations implementing the QA program, or portions thereof, assess the adequacy of that part of the program for which they are responsible and ensure that its effective implementation is in accordance with established procedures.

TQ-ND-101 establishes the requirements for indoctrination and training for PSEG personnel performing safety-related activities that affect the quality of the PSEG Site

ESPA. Step 4.1 states, in part, that “required indoctrination and training shall be accomplished prior to performing activity governed by the implementing procedures.”

CC-ND-101 establishes design control interface measures necessary to ensure compliance with Federal and State regulatory requirements as they apply to safety-related design activities conducted for the development of the PSEG Site ESPA. Step 4.1 states, in part, that PSEG performs acceptance reviews and conducts oversight of the design activities performed by contractors. This review is documented in Attachment 1, “Design Control Document Review Form,” to CC-ND-101 and contains a signature block for the reviewer and approver.

The NRC inspection team discussed the receipt inspections, as documented in Attachment 1 to CC-ND-101, for two safety-related calculations procured from S&L with the QA manager and PSEG personnel. The NRC inspection team discovered that personnel performing the receipt inspections, as required by Criterion VII, “Control of Purchased Material, Equipment, and Services,” of Appendix B to 10 CFR Part 50, did not accomplish required training before performing activities governed by implementing procedures. Specifically PSEG ND personnel had not received indoctrination and training per TQ-ND-101 to document safety-related receipt inspections using Attachment 1 to CC-ND-101. Further, the NRC inspection team determined that PSEG personnel were not aware that the receipt inspection, documented in Attachment 1 to CC-ND-101, was a quality activity.

PSEG ND initiated CR-2011-0036 to address the deficiency with documenting nuclear development qualifications of personnel performing QA activities.

c. Conclusions

The NRC inspection team found that PSEG ND failed to fully implement its QA program consistent with the requirements of Criterion II of Appendix B to 10 CFR Part 50. The NRC inspection team issued Violation 05200043/2011-201-01 for PSEG’s failure to provide indoctrination and training of personnel performing activities affecting quality. Specifically, PSEG personnel who had not received indoctrination and training per TQ-ND-101 performed receipt inspections using the design control document review form for safety-related calculations provided by S&L (Calculation Numbers 2011-03075 and 2009-10130).

4. Design Control

a. Inspection Scope

The NRC inspection team reviewed the implementation of PSEG ND’s design control process in support of the ESPA for a site near Salem, NJ. Specifically, the NRC inspection team reviewed the policies and procedures governing the implementation of PSEG ND’s design control process to verify compliance with the regulatory requirements of Criterion III of Appendix B to 10 CFR Part 50.

Specifically, the NRC Inspection team reviewed the following PSEG documents:

- PSEG Power, LLC, Topical Report, "Quality Assurance Program Description," Revision 0, May 3, 2010 (ML101540492)
- CC-ND-101, "Nuclear Development Design Control Interface Procedure," Revision 1, May 13, 2011
- PO 4500490230
- Contract Number SCM-08-ND-613 between PSEG Power, LLC, and S&L, "Early Site Permit Application Services Contract," November 6, 2008
- PI-PSND-005, "Technical Owners Acceptance Review Process," Revision 0, December 17, 2008

b. Observations and Findings

The NRC inspection team reviewed the QAPD and verified that it contained the overall PSEG policies for design control. Specifically, the QAPD included provisions to control design inputs, outputs, changes, interfaces, records, and organizational interfaces within PSEG and with suppliers. The design control program included interface controls necessary to control the development, verification, approval, release, status, distribution, and revision of design inputs and outputs. The QAPD stated that the PSEG design process provides for design verification to ensure that items and activities subject to the provisions of the QAPD are suitable for their intended application, consistent with their effects on safety.

The NRC inspection team determined that PSEG ND is not currently performing design activities and, therefore, has not yet implemented design control procedures. PSEG personnel stated that they have contracted for design control activities with S&L through the ESP services contract. S&L had completed 45 safety-related calculations and technical reports to support the PSEG Site ESPA at the time of the NRC inspection. Although S&L provided design, engineering, and environmental services to PSEG, PSEG maintains responsibility for the quality and content of the design documents that comprise or are used as input to the ESPA.

c. Conclusions

The NRC inspection team concluded that the implementation of the PSEG design control process described in the QAPD was in compliance with the requirements of Criterion III of Appendix B to 10 CFR Part 50. PSEG contracted for design control activities related to the ESPA with S&L through the ESP services contract and was not performing design control activities. Therefore, with the exception of the training violation discussed in Section 3, the NRC inspection team determined PSEG ND effectively implemented their process for oversight of contracted design control. No findings of significance were identified

5. Procurement Document Control

a. Inspection Scope

The NRC inspection team reviewed the QA program commitments and the implementation of the controls for procurement of material, equipment, and services by PSEG, its primary contractor, S&L, and its subcontractor, MACTEC, for safety-related ESP activities to verify compliance with Criterion IV of Appendix B to 10 CFR Part 50. The NRC inspection team reviewed PSEG ND's applicable implementing procedures that govern the establishment of measures to assure that applicable regulatory, design-basis, and other requirements that are necessary to assure adequate quality are suitably included or referenced in the documents for procurements. In addition, the NRC inspection team reviewed purchase orders, work scope, contract services requirements, supplier QA program descriptions, and methods used by the purchasing organizations to qualify suppliers of safety-related items and services.

Within the scope of this area of the inspection, the NRC inspection team reviewed the following documents:

- PSEG Power, LLC, Topical Report, "Quality Assurance Program Description," Revision 0, May 3, 2010 (ML101540492)
- SM-ND-411, "Interface Procedure for Procurement of Materials and Services for Nuclear Development," Revision 0, January 21, 2011
- SCM-08-ND-613, PO 4500490230, "ESP Application Contract Between PSEG and Sargent & Lundy," November 6, 2008
- PO 4500490230, Line 290, contract change titled "Dose Assessment Calculation Revision," February 2010
- PO 4500490230, Line 30.20, contract change titled "Analysis of Meteorological Data," February 2010

b. Observations and Findings

b.1. Policy and Procedures of Procurement Documents

The NRC inspection team reviewed PSEG's policies and procedures to verify conformance with Criterion IV of Appendix B to 10 CFR Part 50. The NRC inspection team verified that PSEG's program had provisions to ensure that procurement documents include or incorporate applicable regulatory requirements, technical requirements, and QA program requirements. The team verified that PSEG Nuclear (operating reactors) was in charge of all PSEG ND procurement activities. It was confirmed that PSEG effectively implemented SM-ND-411, Revision 0, which clearly identifies requirements for reviewing, approving, and submitting requisitions for procurement of material, equipment, and services. It also details purchase class requirements for safety-related materials and services under Appendix B to 10 CFR Part 50 and invokes the provisions of 10 CFR Part 21 as required by 10 CFR 21.31.

## b.2. Implementation of Procurement Document Controls

The NRC inspection team reviewed procurement documents referenced below for the following suppliers, and services:

- SCM-08-ND-613, PO 4500490230, "ESP Application Contract Between PSEG and Sargent & Lundy," November 6, 2008
- PO 4500490230, Line 290, contract change titled "Dose Assessment Calculation Revision," February 2010
- PO 4500490230, Line 30.20, contract change titled "Analysis of Meteorological Data," February 2010

The NRC inspection team confirmed that procurement documents were reviewed and approved in accordance with SM-ND-411. The procurement documents included a detailed scope of work, appropriate technical requirements, identification of acceptance requirements, requirements for use of the audited and approved 10 CFR Part 50, Appendix B QA program, access to the supplier's facilities and records for inspection or audit, requirements for documentation submission, and requirements for reporting nonconformances. The inspection team also verified that provisions exist to ensure that changes to procurement documents are subject to the same degree of control, review, and approval as those used in the preparation of the original documents.

## c. Conclusions

The NRC inspection team found that implementation of the PSEG procurement document control process was in compliance with Criterion IV of Appendix B to 10 CFR Part 50 and was effectively implemented. No findings of significance were identified.

## 6. Corrective Actions

### a. Inspection Scope

The NRC inspection team reviewed PSEG ND's policies and procedures that govern the corrective action process to ensure that they adequately describe the process and implement the requirements of Criterion XVI of Appendix B to 10 CFR Part 50. The NRC inspection team reviewed a sample of corrective action reports (CARs) to determine whether they document and adequately describe conditions adverse to quality (CAQs), the cause of these conditions, and the corrective actions taken to prevent recurrence. The NRC inspection team discussed the corrective action process with PSEG staff to verify that applicable regulatory requirements are being effectively implemented. Additionally, the NRC inspection team reviewed a sample of NRC-initiated requests for additional information (RAIs) to assess if any CAQs required screening under the PSEG corrective action program.

Within the scope of this inspection, the NRC inspection team reviewed the following PSEG and contractor documents:

- PSEG Power, LLC, Topical Report, "Quality Assurance Program Description," Revision 0, May 3, 2010 (ML101540492)
- LS-ND-120, "Issue Identification and Screening Process," Revision 3, May 25, 2011
- LS-ND-125, "Corrective Action Program (CAP) Procedure," Revision 2, April 18, 2011
- CR 2010-0006, "Quality Assurance Program Focused Area Assessment," November 29, 2010
- CR 2010-0009, "ESP QAPD Implementing Procedures Have Not Been Implemented," December 20, 2010
- CR 2011-0010, "Performance of QA Specialist Responsibilities," April 21, 2011
- CR 2011-0011, "No Document Control Procedures Exist as Required by QAPD," April 21, 2011
- CR 2011-0016, "Essential Oversight Assessment Functions as Defined in QAPD Have Not Been Developed or Implemented," April 22, 2011
- CR 2011-0035, "Trending of Condition Reports," June 3, 2011
- RAI 8, "Stability of Subsurface Materials and Foundations," March 21, 2011
- RAI 13, "Accident Releases of Radioactive Effluents in Ground and Surface Water," March 31, 2011
- RAI 20, "Probable Maximum Tsunami Flooding," May 11, 2011
- S&L PIP 2011-0416, "MACTEC RFI Inconsistency," March 28, 2011
- MACTEC CR-PSEG-08, "Alluvium/Hydraulic Fill Strata Breaks," March 4, 2011

b. Observations and Findings

b.1. Implementing Procedures

The NRC inspection team reviewed LS-ND-120, which establishes roles, responsibilities, and requirements for identification, screening, and classification of identified issues discovered at the PSEG facility, and LS-ND-125, which provides procedures for the resolution of CAQs and significant conditions adverse to quality (SCAQs). In order to better understand PSEG's implementation of its corrective action process, the NRC inspection team interviewed personnel responsible for the review of CAQs. In these discussions, the NRC inspectors learned that the

procedure described in LS-ND-120 provides initial screening procedures, responsibilities, and requirements for all issues, from identification through review by the PSEG Ownership Committee. LS-ND-125 provides additional procedures, responsibilities, and requirements for issues identified as CAQs or SCAQs, as directed by the PSEG Ownership Committee. The NRC inspection team noted that the PSEG Ownership Committee was responsible for the determination of the significance and investigation class, and for additional investigation assignment under LS-ND-125. The NRC inspection team also learned that supplier condition reports were addressed through operating station procedures to provide consistency for supply chain oversight, and that no supplier condition reports had been entered for the PSEG Site ESP project. The NRC inspection team did not review operating station corrective action procedures.

#### b.2. Review of Corrective Action Reports

The NRC inspection team reviewed the focus area self-assessment (CR 2010-0006), for additional background information on supplier condition reports, and a sample of four CARs to assess corrective action program implementation. The NRC inspection team determined that the CARs were appropriately described, classified, and closed. For CARs requiring additional causal evaluation, the NRC inspection team also reviewed the apparent cause evaluation for appropriate assignment, completion, and closure.

The NRC inspection team noted that Attachment 1 to LS-ND-120 provided a section for trending data collection. The NRC inspection team discussed CAR trending with PSEG personnel and discovered that, because only a limited number of CARs had been initiated in the PSEG Site ESP program and almost all CARs were programmatic or tracking in nature (i.e., typically not replicated), PSEG ND had not completed CAR trending due to insufficient data. The NRC inspection team discovered that approximately 30 CARs had been entered into the PSEG ND tracking system (about half were initiated within the last 2 months) and that most CARs were entered for programmatic or tracking conditions. PSEG initiated CR 2011-0035 to evaluate current CAR trending practices.

#### b.3. Review of Requests for Additional Information

The NRC inspection team reviewed three RAIs to determine if any screening for CAQs was required. The NRC inspection team discovered that the PSEG issue resolution and corrective action program processes did not provide specific guidance for resolution of concerns discovered as the result of RAIs. PSEG personnel informed the NRC inspection team that the issue resolution/corrective action program process would apply to any issue identified as part of licensing, as needed. The NRC inspection team determined, as part of the sample of RAIs selected, that two discrepancies identified during of the RAI process required corrective action evaluation and that these concerns were appropriately entered into supplier corrective action programs.

c. Conclusions

Based on a review of a sample of corrective action reports, the issue resolution/corrective action implementing procedures, and interviews with PSEG personnel, the NRC inspection team determined that implementation of the PSEG ND corrective action process was in compliance with Criterion XVI of Appendix B to 10 CFR Part 50. The NRC inspection team accepted PSEG's conclusion that insufficient data currently existed for effective trending of condition reports and verified that the QAPD processes for issue resolution/corrective action were effectively implemented. No findings of significance were identified.

7. Quality Assurance Records

a. Inspection Scope

The NRC inspection team reviewed PSEG ND policies and procedures for control of QA records to verify compliance with Criterion XVII of Appendix B to 10 CFR Part 50. The NRC inspection team reviewed a sample of QA records for the PSEG Site ESP project and inspected the PSEG Site ESP records storage area. The NRC inspection team discussed the records process with responsible PSEG staff to confirm that applicable regulatory requirements are being effectively implemented.

Within the scope of this inspection, the NRC inspection team reviewed the following PSEG documents:

- PSEG Power, LLC, Topical Report, "Quality Assurance Program Description," Revision 0, May 3, 2010 (ML101540492)
- RM-ND-10, "Nuclear Development Records Management Process Description," Revision 1, May 10, 2011
- RM-ND-101, "Nuclear Development Records Management Program," Revision 1, January 21, 2011
- QA-ND-1022, "Nuclear Development QA Records Management," Revision 0, April 15, 2011
- "Annual Evaluation of Supplier Quality Program for Year 2009—Sargent & Lundy," February 23, 2010
- Calculation 0360-ESP-HY-246, "Probable Maximum Tsunami Flooding," May 11, 2011
- PO 4500570257, April 12, 2010, with K.L. Security Enterprises



b. Observations and Findings

b.1. Implementing Procedures

The NRC inspection team reviewed RM-ND-10, which establishes roles, responsibilities, and requirements for managing records and controlling documents at the PSEG ND facility; RM-ND-101, which provides more specific records control procedures; and QA-ND-1022, which provides specific records control procedures for QA departmental records. To better understand PSEG's implementation of its records management process, the NRC inspection team interviewed personnel responsible for records classification and records maintenance. In these discussions, the NRC inspectors learned that the procedure described in RM-ND-10 provides high-level records requirements, including retention times and storage requirements. The NRC inspection team also learned that RM-ND-101 provides detailed record procedures, responsibilities, and requirements, including classification requirements, while QA-ND-1022 is specific for QA departmental records. The NRC inspection team noted that the PSEG ND records procedures required storage and classification of records in accordance with American Society of Mechanical Engineers (ASME) NQA-1-1994, "Quality Assurance Program Requirements for Nuclear Facilities," Basic Requirements 17 and 17S-1.

b.2. Review of Quality Assurance Records

The NRC inspection team reviewed a sample of three QA records selected from the controlled document register to assess records management program implementation. The NRC inspection team determined that the records were appropriately retrievable, classified, and authenticated, and that minimum retention periods were met. The NRC inspection team also noted that the document index provided appropriate detail and was effective for record retrieval.

b.3. Inspection of Quality Assurance Records Storage

The NRC inspection team evaluated the records storage facility to ensure that records storage requirements were met. The NRC inspection team noted that PSEG only used paper records to meet regulatory requirements and followed the ASME NQA-1-1994 requirements for an "Alternate Single Storage Facility." The NRC inspection team learned that PSEG ND used two National Fire Protection Association (NFPA) 232-1986, "Standard for the Protection of Records," fire-compliant, 2-hour storage cabinets to meet ASME NQA-1-1994 requirements, and that room access was controlled by lock and key. The NRC inspection team also learned that PSEG Site ESP project records were all kept on site, except for procurement records, and that the project did not use temporary storage facilities.

c. Conclusions

Based on the sample reviewed, the NRC inspection team concluded that the PSEG staff was effectively implementing the process for the control of QA records, consistent with the requirements of Criterion XVII of Appendix B to 10 CFR Part 50. No findings of significance were identified.

## 8. Audits

### a. Inspection Scope

The NRC inspection team reviewed the PSEG QAPD, along with implementing policies and procedures that govern the audit process, to verify compliance with the requirements of Criterion XVIII of Appendix B to 10 CFR Part 50. The NRC inspection team also evaluated a sample of internal and external audit reports to verify compliance with program requirements and adequate implementation. Specifically, the NRC inspection team reviewed the following documents:

- PSEG Power, LLC, Topical Report, "Quality Assurance Program Description," Revision 0, May 3, 2010 (ML101540492)
- QA-ND-20, "Nuclear Development Audit Process Description," Revision 0, April 12, 2011
- QA-ND-200-002, "Nuclear Development Quality Assurance Audit Procedure," Revision 0, April 12, 2011
- ND-QA-11-01, "Quality Assurance Program Implementation Audit Report," April 18–26, 2011
- Audit Report No. 2010-086, MACTEC, January 2010
- NO-AA-101-1002, Revision 2, "PSEG Record of Lead Auditor Certification"
- ND QA Master Audit Schedule, January 2011–2012
- QA-ND-1024, "Nuclear Development Quality Assurance Documenting Objective Evidence," Revision 0, April 2011
- Audit Plan, UniStar Nuclear-S&L 2009-001, January 2009
- NUPIC Audit/Survey 20121, S&L, January 20, 2009
- CR 2011-0001, "Quality Assurance Program Implementation Audit ND-QA-11-01," April 14, 2011
- CR 2010-0012, "Internal Audits Not Being Performed," December 20, 2010
- CR 2011-0015, "Audit Finding," April 22, 2011
- CR 2011-0016, "Audit Finding," April 22, 2011

- SAE2010-044, "Annual Evaluation of Supplier Sargent & Lundy's Quality Program," February 23, 2010
- NO-AA-500, Revision 6, "Annual Evaluation of Supplier Sargent & Lundy's Quality Program," February 20, 2009
- NO-AA-500-1002, Revision 3, "Annual Evaluation of Supplier Sargent & Lundy's Quality Program," February 25, 2011

b. Observations and Findings

PSEG ND has established an internal and external audit program under Section 18 of the QAPD, as implemented by procedure QA-ND-200-002. The QAPD provides general timeliness requirements for the conduct of audits and identifies requirements for audit team composition and qualifications. Procedure QA-ND-200-002 provides guidance for preparing audit plans, making audit notifications, performing audits, reporting conditions, audit closeout, and documentation. The procedure also refers to procedure QA-ND-20 for guidance on implementation of the internal audit program. Procedure QA-ND-20 sets forth the expectations for quality activities, including internal audit planning, pre- and post-audit meetings, followup activities, and condition reporting if necessary.

Procedure QA-ND-200-002 states that deficiencies identified during internal audits are managed in accordance with the corrective action program, which for deficiencies (CAQs or SCAQs) are evaluated and tracked until they have been completely implemented. The NRC inspection team verified that internal audits of all elements being implemented at the time of the inspection were performed or scheduled to be performed within a 2-year period.

As of the date of this inspection, PSEG had completed one internal audit that covered the following: QA organization, QA program, design control, procurement document control, and other applicable areas. The NRC inspection team also noted that PSEG used an external audit performed by the Nuclear Procurement Issues Committee (NUPIC) in 2008 on their contractor, S&L, for supplier qualification and annual evaluations.

The NRC inspection team verified the following for the PSEG internal audit:

- (1) An audit plan was prepared and signed by the audit team leader and approved by responsible management.
- (2) An audit schedule was completed and identified the applicable PSEG quality requirement, source regulatory requirement or criteria, and current and future implementing document for each area audited.
- (3) An audit report was issued and sent to the audited organization, senior management, and the president and chief executive officer within 30 days of the post-audit conference.
- (4) The procedures in use for internal audits had been approved, and the personnel who led and conducted the audits held the appropriate qualifications.

The NRC inspection team verified that all required external audits were performed to confirm that activities affecting quality comply with the PSEG's QA program and have been implemented effectively. The NRC inspection team verified that PSEG ND was scheduled to be on the next NUPIC audit of S&L's QA programs in 2012. The NRC inspection team also verified that responsibilities and procedures for external auditing, documenting and reviewing audit results, and designating management levels to review and assess audit results were established.

Section 18, "Audits," of the QAPD states that external audits of suppliers of safety-related components and/or services are conducted as described in Section 7.1, "Acceptance of Item or Service," of the QAPD. Section 7.1 states that documented annual evaluations are performed for qualified suppliers to assure they continue to provide acceptable products and services. Industry programs, such as those applied by ASME, NUPIC, or other established utility groups, are used as input or the basis for supplier qualification whenever appropriate. The results of the reviews are promptly considered for effect on a supplier's continued qualification, and adjustments made as necessary (including corrective actions, adjustments of supplier audit plans, and input to third-party auditing entities, as warranted). In addition, results are reviewed periodically to determine if, as a whole, they constitute an SCAQ requiring additional action.

The NRC inspection team reviewed three S&L supplier annual evaluations performed by PSEG Nuclear (operating reactors) in the years 2009, 2010, and 2011. The inputs of the annual evaluations were based on the S&L NUPIC audit that was performed in 2008. The NRC inspection team also reviewed an S&L UniStar audit performed in 2009 and surveillance performed in 2010. The NRC inspection team learned that both the audit and surveillance reports were not considered as inputs into the annual evaluations. However, the NRC inspection team determined that, because the results from the UniStar audit were not of safety significance to the ESP application, including the audit results would not have changed the outcome of the annual evaluations.

The NRC inspection team verified that a 2011–2012 external and internal audit schedule had been established and that all functional areas currently being performed by PSEG were included in the schedule, along with the applicable quality criteria from Appendix B to 10 CFR Part 50. The NRC inspection team noted that the schedule met the frequency requirements delineated in the PSEG QAPD and implementing procedures.

c. Conclusions

The NRC inspection team found that implementation of the PSEG ND audit process compiled with the requirements of Criterion XVIII of Appendix B to 10 CFR Part 50, and that PSEG's QA policy and procedures for audits were being effectively implemented. No findings of significance were identified.

9. Entrance and Exit Meetings

On May 31, 2011, the NRC inspection team presented the inspection scope during an entrance meeting with Mr. David Lewis, PSEG ND Director, and with other PSEG and S&L personnel. On June 3, 2011, the NRC inspection team presented the inspection results during an exit meeting with Mr. David Lewis, PSEG ND Director, and with other PSEG and S&L personnel.

After consultation with NRC management, the inspection was reopened with PSEG via telephone on June 10, 2011, to request additional documentation from PSEG for inspection. On June 16, 2011, the NRC inspection team updated the inspection results and observations during an exit meeting via telephone with Mr. David Lewis, PSEG ND Director, and with other PSEG and S&L personnel. Lists of entrance and exit meeting attendees are included in the attachment to this report.

## ATTACHMENT

### 1. ENTRANCE/EXIT MEETING ATTENDEES

<u>Name</u>	<u>Title</u>	<u>Affiliation</u>	<u>Entrance</u>		<u>Exit</u>		<u>Contact</u>
			5/31 & 6/10	6/3 & 6/16	6/3 & 6/16		
David Lewis	Director, ND	PSEG Power	X	X	X	X	
David Robillard	ND QA Specialist	PSEG Power	X		X	X	X
James Mallon	ESP Project Manager	PSEG Power	X	X	X		X
Jeff DeFabo	Nuclear Oversight Audit Manager	PSEG Nuclear	X		X	X	X
Richard Buechler	Nuclear Oversight Auditor	PSEG Nuclear			X		
Gary Ruf	Engineering Manager	PSEG Power			X	X	
Mike Wiwel	Engineering Manager	PSEG Power			X	X	
Robin Rhea	Senior Administrative Assistant	PSEG Power					X
Ira Owens	Project Director	Sargent & Lundy	X	X	X	X	
Douglas FitzRandolph	QA Associate	Sargent & Lundy	X		X	X	
Edward Martin	Quality Services Manager	Sargent & Lundy	X		X		
Michael Shervin	Project Manager	Sargent & Lundy	X		X	X	X
Jim McIntyre	QA Manager	Sargent & Lundy				X	
George Lipscomb	Lead Inspector	NRC	X	X	X	X	
Shavon Edmonds	Inspector	NRC	X	X	X	X	
Stacy Smith	Inspector	NRC	X	X	X	X	
Prosanta Chowdhury	Project Manager	NRC	X	X		X	
Joe Colaccino	Branch Chief	NRC		X	X		
Phyllis Clark	Project Manager	NRC		X			

### 2. INSPECTION PROCEDURES USED

Inspection Procedure 35017, "Quality Assurance Implementation Inspection"

Inspection Procedure 36100, "Inspection of 10 CFR Parts 21 and 50.55(e) Programs for Reporting Defects and Noncompliance"

### 3. LIST OF ITEMS OPENED, CLOSED, AND DISCUSSED

No previous NRC inspections had been performed at PSEG's facility in Salem, NJ, for the PSEG Site ESP before this inspection.

<u>Item Number</u>	<u>Status</u>	<u>Type</u>	<u>Description</u>
05200043/2011-201-01	Open	NOV	Criterion II

4. LIST OF ACRONYMS USED

ASME	American Society of Mechanical Engineers
CAQ	Condition Adverse to Quality
CAR	Corrective Action Report
CFR	Code of Federal Regulations
ESP	Early Site Permit
ESPA	Early Site Permit Application
IP	Inspection Procedure
NRC	Nuclear Regulatory Commission
ND	Nuclear Development
NFPA	National Fire Protection Association
NUPIC	Nuclear Procurement Issues Committee
PIP	Process Improvement Program
PO	Purchase Order
QA	Quality Assurance
QAPD	Quality Assurance Program Document
RAI	Request for Additional Information
S&L	Sargent & Lundy, LLC
SCAQ	Significant Condition Adverse to Quality