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Our ref: HEM-12-30
Date: March 6, 2012

Subject: SUPPLEMENTAL REPLY TO A NOTICE OF VIOLATION ISSUED
JANUARY 20, 2012, WELL LOCKING (LICENSE NO. SNM-00033, DOCKET
NO. 070-00036)

- Reference 1) NRC (C. A. Lipa) letter to Westinghouse (R. D. Copp), dated January 20, 2012,
"NRC Inspection Report 07000036/11-002(DNMS) and Notice of Violation -
Westinghouse Electric Company (Hematite)"
2) Westinghouse letter (R. D. Copp) to NRC (Document Control Desk), HEM-12-
17, dated February 13, 2012, "Reply to a Notice of Violation Issued January 20,
2012, Well Locking"

Pursuant to the provisions of 10 CFR 2.201 and Reference (1), this letter provides supplemental information to the Reference 2 response from Westinghouse Electric Company LLC (Westinghouse) on a Notice of Violation (NOV) that was transmitted by Reference 1.

During a phone conversation between the U.S. Nuclear Regulatory Commission (NRC) (McCraw, Michalak, Hayes) and Westinghouse (Copp, Smetanka, Davis) on February 21, 2012, NRC requested additional information concerning how Westinghouse has determined it has adequate Hematite resources to begin soil excavation given the contributing cause to the NOV of inadequate resources. During a phone conversation between NRC (LaFranzo) and Westinghouse (Davis), NRC also requested explanation on the nature of the root cause of the lack of understanding of verbatim compliance.

The attachment to this letter provides the additional supplemental information as requested, and includes additional information regarding the nature of each of the causes. The attachment is a revision to the attachment to Reference 2, with the supplemental information indicated by sidebars.

Please contact Kevin Davis of my staff at 314-810-3348 should you have questions or need any additional information.

Respectfully,

A handwritten signature in black ink that reads "Robert D. Copp".

Robert D. Copp
Director, Hematite Decommissioning Project

Attachment: Westinghouse Supplemental Response to Notice of Violation Issued by NRC on
January 20, 2012, on Well Locking

cc: C. D. Pederson, NRC Region III
A. T. Boland, NRC Region III/DNMS
P. Michalak, NRC/FSME/DWMEP/DURLD/MD
J. J. Hayes, NRC/FSME/DWMEP/DURLD/MD
A. T. McCraw, NRC Region III/DNMS/MIB
M. M. LaFranzo, NRC Region III/DNMS/MCID
J. W. Smetanka, Westinghouse

WESTINGHOUSE SUPPLEMENTAL RESPONSE TO NOTICE OF VIOLATION ISSUED BY NRC ON JANUARY 20, 2012, ON WELL LOCKING

VIOLATION

During the U.S. Nuclear Regulatory Commission (NRC) site inspections conducted on November 1 - 4, 2011, and November 28 - December 2, 2011, a violation of NRC requirements was identified. In accordance with the NRC Enforcement Policy, the violation is listed below:

Condition 16 of License SNM-33, Amendment 56 dated December 29, 2010, states that the licensee shall conduct its program in accordance with the statements, representations, and procedures contained in application dated October 5, 2004. This Amendment was effective until October 13, 2011.

Section 6 of Application dated October 5, 2004 states, in part, that effluent samples are collected in accordance with site procedures.

Condition 16 of License SNM-33, Amendment 57 dated October 13, 2011, and Amendment 58 dated October 27, 2011, states, in part, that the licensee shall conduct its program in accordance with the statements, representations, and procedures contained in Documents identified in Chapter 1 of NRC Decommissioning Plan Safety Evaluation Report (SER) (M1112101630).

Section 1.1 of the Documents identified in Chapter 1 of NRC Decommissioning Plan SER (M1112101630), titled Background, states, in part, that Westinghouse submitted an Effluent and Environmental Monitoring Plan (ML110330371) in support of the Decommissioning Plan.

Section 8.7 of the Effluent and Environmental Monitoring Plan (ML110330371) in support of the Decommissioning Plan states, in part, that effluent samples are collected and analyzed in accordance with site procedures.

Section 8.2.7 of Effluent Monitoring Procedure HDP-PR-EM-011, Rev. 1, "Low Flow Well Sampling," effective December 4, 2009, and Rev. 2, effective October 27, 2011, states, in part, that "upon completion of sampling, disconnect the flexible tubing, remove non-dedicated sampling tubing, if used, and close and lock well cap."

Contrary to the above, on November 1, 2011, the licensee tested the locking mechanism for wells BD-02, BD-03, BD-04, BD-06, BD-08, LF-09, NB-54 and NB-57A and identified that the well caps were not locked. Additionally, these well caps had not been locked for the ten month period proceeding November 1, 2011.

This is a Severity Level IV violation (Section 6.3).

Westinghouse accepts this violation.

1 REASON FOR THE VIOLATION

Westinghouse has conducted a root cause analysis of this failure to lock the flush mount wells as described in the procedure for well sampling. Monitoring wells BD-02, BD-03,

BD-04, BD-06, BD-08, LF-09, NB-54 and NB-57A have surface structure that is flush to the ground surface (“flush mount”). These flush mount wells do not have the space for a traditional padlock used on wells that have above ground structure (“standpipe”).

The procedure for sampling monitoring wells had the same instruction for ‘locking’ both types of wells, even though the two well types required different steps. This difference in steps was rationalized and allowed to exist due to insufficient understanding of verbatim compliance. In addition, rubber components of the flush mount well caps for both the well riser and the flush mount assembly had degraded and they no longer performed as intended.

The root cause analysis has identified the following causes:

<p>Root Causes</p>	<p>Lack of understanding of verbatim compliance.</p> <p>Multiple staff members were involved in well sampling over the several month period cited in the NOV. Interviews with these personnel indicated they did not recognize that the methods used in practice for the flush mount wells were inconsistent with the procedure’s words to “close and lock well cap.”</p> <p>Review by the RCA team of a QA surveillance for well sampling by indicated the QA inspector did not identify a potential lapse in verbatim compliance, specifically with regard to the step to lock wells. During the QA surveillance, the QA inspector asked the sampling personnel how the step for closing and locking the wells was satisfied. The sampling personnel indicated the wells were closed and locked for above-ground wells, and closed for flush-mount wells. On the QA surveillance report, the QA inspector indicated the implementation of this procedural step was completed satisfactorily. Additionally, the QA inspector commented on the procedure step, indicating the above-ground wells were closed and locked, and the flush mount wells were closed. The step for locking wells was accepted as not applicable for flush mount wells by both the QA inspector and sampling personnel, indicating a lack of understanding of how to apply verbatim compliance under actual work conditions.</p> <p>An understanding of verbatim compliance would have prevented the rationalization that occurred when the work step to “close and lock well cap” was attempted and when supervisory and quality assurance oversight was involved with this procedure.</p> <hr/> <p>No requirements exist at HDP for field validation of work steps or associated training modules when a procedure is created or changed.</p> <p>HDP procedures did not direct HDP personnel to verify or validate procedure steps for regulatory requirement fulfillment prior to release when a new procedure was written or when an existing procedure was revised.</p> <p>How or why the step “to close and lock well cap” was added to revision 2 of well sampling procedure PR-EO-004 could not be explained. The procedure revision history does not document why the step was added, and the individual who was responsible for drafting the procedure is no longer employed on the project. Also, the procedure did not mention unlocking the wells at the beginning of a sampling activity.</p>
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	<p>In addition, CAPs Issue Report 08-289-W003 contained a commitment for the EH&S Manager who was the owner of the HDP-PR-EM-011, to update the EH&S policies and procedures to reflect current site conditions. This provided an opportunity to identify that locking well caps required different work steps for standpipe wells and flush mount wells. However, the procedure language concerning locking the cap was not changed.</p> <p>Validation of procedures using step by step verification of verbatim compliance requirements would have uncovered the need for additional details in the well sampling procedures with respect to unlocking or sealing the well caps at the beginning of the process, locking or unsealing the wells at the end of the process, and differentiated how these tasks are completed for the various above ground and flush mount well types.</p> <p>Similarly, the training module and hands-on practice did not communicate via step by step verification of verbatim compliance on how to “close and lock well cap” for both types of well configurations. Interviews with staff indicated that this training did not include following the procedure verbatim during the well sampling process or what to do if the procedure could not be followed verbatim.</p> <p>Field validation of work steps when creating or revising procedural work steps would have identified that the flush mount wells required different work steps from the standpipe wells for locking.</p> <p>HDP does not have a Preventative Maintenance program for well components.</p> <p>Staff was able to remove well plugs without the need for the locking tool due to ineffective seals of worn plugs. When worn plugs were replaced with new ones, the technicians needed the required tool in order to open and close the wells supporting that the plugs could be locked with the locking tool.</p> <p>A preventative maintenance program associated with monitoring well components did not exist, nor was it communicated to staff to assess condition of well components during sampling processes or on any regular scheduled interval.</p> <p>A preventative maintenance program for well components would have prevented the failure of the rubber components to effectively “lock” the well cap in place.</p>
<p>Contributing Causes</p>	<p>Form utilized for peer observations has a limited scope focused on safety and not verbatim adherence to procedure compliance.</p> <p>Review of Procedure HDP-PR-GM-012, Work Oversight, revealed that the observations as dictated in the procedure and associated oversight form did not focus on HP technician verbatim adherence to procedures. The card does not require the observer to witness verbatim compliance by the operator or consider whether the procedure is adequately written to describe the processes being performed.</p> <p>The work oversight forms used by Operations, Health Physics, and Environmental Health and Safety staffs did not remind the observers to assess verbatim compliance as part of the safety evaluation. If these forms had contained such a reminder, the increased attention may have identified the issue with the step to “close and lock well cap.”</p>

	<p>HDP Management did not adhere to Procedure HDP-PR-GM-022 in conducting Human Performance Management Observations due to inadequate project resources.</p> <p>The RCA team did not detect completion of any Human Performance observation reports by HDP management. Interviews with HDP personnel revealed that it was a conscious decision to bypass the requirements of performing observation based upon a mistaken belief that the other observations/oversight being performed at the site, such as QA audits and oversight would be sufficient for all purposes. However, the RCA team determined that the QA audits and oversight per procedure HDP-PR-GM-012 did not adequately review procedural adherence. Only the observation cards required for use in Procedure HDP-PR-GM-022 would have provided oversight and Human Performance reinforcement of the staff during well sampling activities.</p> <p>Management time spent with the workforce promoting and coaching work would have helped understanding of verbatim compliance, and the increased attention may have identified the issue with the step to “close and lock well cap.”</p> <p>HDP project resources are inadequate.</p> <p>To place this contributing cause into context, please recognize that Westinghouse defines the term ‘contributing cause’ to mean: “a fundamental condition that increased the severity of the event, but did not have to be present for the event to occur.” By this definition, this event would have occurred regardless of resources, but enabling resources to conduct observations for procedural adherence is expected to have resulted in detection by HDP earlier than it was.</p> <p>This contributing cause was identified as a result of management resources having limited availability to complete Human Performance Management Observations per HDP-PR-GM-022. The RCA team determined that had additional staff been available to assist with doing observations and reinforcing Human Performance tools at HDP, the issues with procedure HDP-PR-EM-011 and the well sampling processes would have been identified by Westinghouse before the regulator observed the activity and questioned HDP staff, lessening the consequences.</p> <p>Interviews with staff revealed that communications between Corporate Management and HDP Management were conducted on regular intervals. Interviews also suggested that the current work load and need for additional resources may not have been adequately explained during those communications.</p> <p>Several managers are acting in many roles that are in addition to their regular roles for which they were hired, and that some have been in an acting role for well over a year’s time. The overextended management staff bypassed the requirements of performing management observation per HDP-PR-GM-022 due to other observations/oversight being performed at the site. However, as discussed above, other observations/oversight programs were not effective in evaluating procedural adherence. If additional management staff had been available, management would have had time to perform the intended observations, and the increased attention may have identified the issue with the step to “close and lock well cap.”</p>
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2 CORRECTIVE ACTION TAKEN AND RESULTS ACHIEVED

The caps on the flush mount wells have been replaced with new caps that have been tested to perform as intended. The monitoring well procedures were revised to provide work steps specific to flush mount wells and to standpipe wells with respect to locking. These actions were completed on November 18, 2011.

The results achieved are that the specific problem areas identified in the notice of violation have been corrected. As stated in Reference (1), “on November 30, 2011, the inspectors verified that the licensee had installed new locking mechanisms and that the mechanisms were functioning as appropriate. The inspectors interviewed several technicians and determined that each had adequate knowledge and equipment to lock the wells in accordance with the procedure.”

Corrective Actions for the Violation	Due Date
Replace well caps and plugs on flush mount wells BD-02, BD-03, BD-04, BD-06, BD-08, NB-57A, NB-54, and LF-09.	Complete Nov. 18, 2011
Review and update Procedure HDP-PR-EM-011 ‘Low Flow Well Sampling’ to verify that it clearly states how to unlock above ground and flush mount wells and how to lock the same once sample has been collected. Refer to Corrective Actions Process (CAPs) Commitment 11-307-W004.02.	Complete Nov. 18, 2011
Review and update Procedure HDP-PR-EM-017 ‘Groundwater Monitoring Well Leachate Collection’ to verify that it clearly states how to unlock above ground and flush mount wells and how to lock the same once sample has been collected. Refer to CAPs Commitment 11-307-W004.03.	Complete Nov. 18, 2011
Incorporate the changes to HDP-PR-EM-011 and HDP-PR-EM-017 into Practical Evaluation and On-the-Job Training Guide – Environmental Radiological Sample Training EHS-DS-ERSAMP with regard to opening and securing above ground and flush mount wells during sampling collection. Refer to CAPs Commitment 11-307-W004.05.	Complete Nov. 18, 2011

3 CORRECTIVE STEPS THAT WILL BE TAKEN

Section 2 above contains all of the corrective actions specific to the violation, and those actions are complete.

In addition, Westinghouse’s analysis has identified corrective actions that will be applied to address underlying factors. The following corrective actions have been or will be taken to address the underlying factors listed in Section 1 above for root and contributing causes.

Corrective Actions for Underlying Factors	Due Date
Administer training to all previously trained personnel on Environmental Radiological Sample Training EM-DS-ERSAMP Rev. 2 as modified per CAPs commitment 11-307-W004.05. Refer to CAPs Commitment 11-307-W004.08.	Complete Dec. 2, 2011

Corrective Actions for Underlying Factors	Due Date
Held an all hands meeting to discuss the failure to follow a procedural work step for well locking, including the importance of verbatim compliance in preventing such events.	Complete Dec. 8, 2011
Conduct site-wide training on expectations for verbatim compliance to procedures.	Complete Feb. 14, 2012 Due: Feb. 14, 2012
Update Human Performance Programs to include activities that reinforce verbatim compliance expectations to entire HDP staff and contractors on a routine basis.	Due: Jul. 18, 2012 Target to complete at same time as next action: Apr. 10, 2012
Revise HDP-PR-GM-022 to require all HDP departments to perform and submit Human Performance Management Observations to Human Performance Lead on a weekly basis. Procedure will also require observations be reported to the site management team for review and action on no less than a bi-weekly (every 2 weeks) timeframe in a face-to-face meeting.	Due: Apr. 10, 2012
Corporate Human Performance management will also provide Human Performance tools, observation cards, and training as requested by the HDP site to ensure compliance and a proactive approach to preventing human performance issues.	Due: Mar. 22, 2012
Distribute Human Performance handbooks and memory cards to all HDP staff.	Due: Apr. 10, 2012
Project Director shall perform an on-site assessment of HDP project resources and determine which resources are needed. Once identified, the Project Director will create a commitment to obtain these resources.	Complete: Feb. 27, 2012 Due: Mar. 8, 2012
The Project Director completed an assessment of HDP resources and identified additional, recommended resources (11-307-W004.21). The purpose of this commitment is to obtain the authorized resources.	Due: Aug. 30, 2012 Target to complete by: Jun. 29, 2012
Revise procedure and the associated oversight forms in HDP-PR-GM-012 to include an evaluation of verbatim procedural compliance with the work activity being performed.	Due: Mar. 7, 2012

Corrective Actions for Underlying Factors	Due Date
Revise the well sampling and leachate collection procedures (i.e., HDP-PR-EM-011 and HDP-PR-EM-017) to include an inspection of the well components during well sampling and leachate collection activities. Include a list of specific well components that should be checked for degradation during the well sampling and leachate collection activities. Add a checklist to the sampling/leachate collection forms to ensure these well components are checked during these activities and are used as a reporting mechanism for any adverse situations. Mark changes as Corrective Actions to Prevent Recurrence (CATPRs) in accordance with WEC 16.2, including those that have already been completed per 11-307-W004.02 and 11-307-W004.03.	Due: Mar. 14, 2012
Update training module EHS-DS-ERSAMP to include performing sampling activities verbatim in a step-by-step manner in the field (hands-on) using the applicable procedure. Module shall also cover what protocol to follow should a discrepancy be found in either the procedure or the process where verbatim compliance cannot be sustained. Train all technicians assigned to well sampling on the updated training module. Mark changes as CATPRs in accordance with WEC 16.2, including those that have already been completed per 11-307-W004.05.	Due: Mar. 28, 2012
Revise HDP-PR-GM-009, Requesting Procurements, to ensure that any new equipment purchased implements a Preventative Maintenance program if applicable. Mark procedure as a CATPR in accordance with WEC 16.2.	Due: Apr. 24, 2012
Review all types of equipment that may exist at the HDP site that may require preventive maintenance to ensure performance and adherence to regulatory requirements. If any equipment requiring Preventive Maintenance is identified that is not already addressed in a procedure, create a commitment to revise any applicable procedures to ensure equipment gets added to the Preventive Maintenance program.	Due: Mar. 22, 2012
Revise HDP-PR-GM-010 Rev. 11 Document Requirements to include validating new and revised procedures to include step-by-step confirmation by field personnel that work can be performed as specified. Mark changes in HDP-PR-GM-010 as CATPRs in accordance with WEC 16.2.	Due: Mar. 7, 2012
Develop plan to identify all procedures/work packages that need to be validated by field personnel. Upon completion of plan development, create commitments to validate all procedures identified in plan.	Due: Apr. 5, 2012
Review Commitment 11-307-W004.04 to determine if action taken to close commitment was adequate to meet the intent of the commitment.	Complete Jan. 25, 2012
Note: The following six entries are based on initial reviews of compliance with MDNR regulations for monitoring wells. The initial reviews resulted in reconfiguration of identified wells that needed to meet MDNR regulations for being in flood prone areas and repair to two flush mount well assemblies so surface water would not enter.	
Perform a comprehensive review of operational (not abandoned) wells to determine if they are in compliance with Missouri Department of Natural Resources (MDNR) regulations 10 CSR 23-4.020 and 10 CSR 23-4.060.	Revised Due: Apr. 30, 2012 Due: Mar. 7, 2012

Corrective Actions for Underlying Factors	Due Date
Review all above ground wells in the identified flood prone regions of the site and replace any riser plugs that are not configured to maintain a watertight seal with a new plug configuration identified that will seal and also manage the dedicated tubing requirement for the Interim Groundwater Monitoring Plan (IGMP) protocol. Refer to IR 11-356-W001.	Complete: Feb. 16, 2012 Due: Mar. 7, 2012
Locate monitoring well records and place in electronic records organized by well number. These records should include MDNR Well Certification Record Forms, MDNR issued well certification numbers, well boring logs, and any other supporting documents.	Revised Due: Apr. 30, 2012 Due: Mar. 7, 2012
Ensure Procedure EO-06-003 references and incorporates the appropriate regulatory MDNR standards. Refer to CAPs Commitment 11-307-W004.06.	Due: Jun. 6, 2012
Add a comment to 11-307-W004.04 to clarify the task was for locking provisions of MDNR well regulations and that further evaluation for other regulations is in 11-307-W004.07.	Revised Due: Apr. 30, 2012 Due: Feb. 16, 2012
Add comment to 11-307-W004.07 to clarify that IR 11-356-W001 contains resolution of issues related to flood prone areas.	Revised Due: Apr. 30, 2012 Due: Feb. 16, 2012
<p>Perform a final effectiveness review. The corrective action plan will be considered effective if all of the following criteria are met:</p> <ul style="list-style-type: none"> - Actions successfully prevented a consequential recurrence of the event, as indicated by the absence of Medium or High Significant CAPs Issues identical in nature to this event. - CATPRs were implemented in a manner that satisfied their intent, unless otherwise approved by the Corrective Action Review Board Chairperson. - Implemented CATPRs were verified still in place at the time of the Effectiveness Review, unless otherwise approved by the Corrective Action Review Board Chairperson. - The CATPRs worked as intended when challenged to prevent recurrence. - Changes made to any documents to implement a CATPR are clearly denoted as CATPR-related per WEC 16.2, in order to prevent their inadvertent deletion. In cases where an entirely new document is created in response to a CATPR, the intent of this provision can be met by applying the CATPR flag only on key provisions of the document that are actually establishing the needed defense. 	<p>Kickoff by: Feb. 10, 2013 Complete by: Feb. 25, 2013</p> <p>Target to complete by: Oct. 26, 2012</p>

4 DATE WHEN FULL COMPLIANCE WILL BE ACHIEVED

As described in Section 2 above, full compliance with respect to the specific issues in the violation was achieved on November 18, 2011.

As noted in Section 3 above, HDP is continuing to take corrective actions that will be applied to address underlying factors.

5 Basis for Adequate Hematite Resources to Begin Soil Excavation

Background: Promptly after the NRC inspector identified in the first week of November 2011 that the compliance with “close and lock well cap” was an issue, Westinghouse took two main actions: (1) to correct the requirements in the procedure to reflect the proper actions for securing monitoring wells; (2) to investigate what led to this condition and it not being self-identified.

The first main action corrected the violation, as discussed in section 3 above. Westinghouse recognized that the second main action was important to project-wide success with remediation and to self assurance that we were ready to begin remediation.

Action on the second issue began on November 3, 2011, with an apparent cause analysis. When the draft results of the apparent cause analysis were reviewed the third week of November 2011, HDP management concluded that a root cause analysis was required, and that an analyst independent of HDP should lead the root cause analysis.

Since the root cause analyst was not immediately available, an independent HDP staff member with previous experience investigating such matters was assigned to gather more information and to analyze that information to enable HDP to take appropriate actions in advance of the Root Cause Analysis. The independent review was completed on December 6, 2011. The Root Cause Analysis was completed on February 13, 2012. The results of the Root Cause Analysis related to the contributing cause involving management resources are summarized in section 2 above.

Discussion: The basis described in section 2 above for the contributing cause related to resources is relatively narrow. The scope is related to why managers were not performing Human Performance Observations as planned. The answer was two-fold: (1) a misunderstanding that other measures did not adequately provide oversight of procedural compliance, and (2) insufficient time available to managers. Based on HDP’s recent history of self-identifying issues (this is the first NOV in two years), Westinghouse does not consider this contributing cause to be an indication of inadequate resources in other areas of the project.

Based on the scope of this contributing cause, HDP considers excavation work can begin in light of the following actions with respect to resources.

- A. Redirect management priorities to field observations with the winding down of the amount of effort required to plan the work activities, obtain regulatory agreements, and negotiate contracts.

HDP management and senior staff have been conducting Human Performance observations with feedback from those observations being discussed and acted upon. Several enhancements to the Project’s Human Performance program have been made since the issue was identified. Emphasis has shifted from a primarily reactive approach to identifying weaknesses through event investigations to a proactive approach of field observations with the objective of recognizing and correcting weaknesses before they contribute to significant events.

On January 25, 2012, HDP began administering advanced training of managers and senior staff on the roles and responsibilities of management personnel for successfully implement a meaningful Human Performance Program. The training includes emphasis on proactively soliciting feedback for improvement through Human Performance Management Observations. To date 26 individuals have successfully completed the necessary training to perform HuP Management Observations. This increase will provide the needed resources to ensure management observation and coaching sessions are completed as expected.

In the past two (2) months, twenty-seven (27) independent Management Observations have been completed in the following areas:

- Daily Safety tailgate Briefing 4
- On-the-Job Training 2
- Pre-Job Briefing 0
- Post-Job Briefing Lessons Learned 3
- Procedure Improvement and Compliance 2
- Procedure Use and Adherence 12
- Workplace Safety 7

As the Project approaches the beginning of active burial pit work, our focus will be directed toward assuring each newly started task has resources assigned specifically to perform management observation and coaching. The focus of assigned management observation and coaching sessions is to ensure project Leadership is present on the worksite to validate the expected standards of performance are being satisfied.

B. Enhance the understanding of all personnel on how to react when work conditions are not consistent with the work document.

All hands training on December 8, 2011, discussed the procedural compliance aspects of this event, including how to recognize when a procedural step cannot be followed and what to do in that case, i.e., stop and notify.

Since that all hands meeting, Westinghouse has continued to reinforce procedural compliance at the morning safety meeting. As encouragement to others, specific examples have been discussed where staff recognized issues with how to comply with a work step.

Such encouragement is a change in the approach to communicating the commitment for verbatim compliance. Previously, emphasis was primarily on the adverse impact of not complying in a verbatim manner. HDP is now promoting the verbatim compliance as a Human Performance Tool to ensure safety, to identify issues, and to provide consistency. Emphasis is provided in training and at daily meetings that the “verbatim compliance” tool should be used to provide immediate feedback to HDP leadership whenever an activity cannot be performed as directed within work documents.

Stopping work whenever an activity cannot be performed exactly as directed within work documents is being emphasized as a Human Performance Tool. Procedure HDP-PR-EHS-004, Stop Work Authority, was revised on February 23, 2012, to clearly state that when a “perceived” verbatim compliance issue is encountered (no imminent danger to health or the environment) workers have the authority to utilize HuP tools such as the “Time out” to cease work, obtain a better situational awareness by discussing the issue with a supervisor and/or manager. This improvement is intended to remove the undue stress of needing to immediately determine if the issue is significant enough to declare a formal Stop Work. If the improved situational awareness resolves the perceived issue, a formal Stop Work need not be issued. This graded approach to stopping work is intended to encourage ceasing work when workers are uncomfortable with procedural compliance so supervision and management can become involved.

C. Enhance field observations by non-management personnel.

The inclusion of senior staff with managers in the Human Performance training discussed in section 5.A above broadens the base of personnel available to perform field observations and ensure that work activities are consistent with the work documents.

D. Reschedule to better reflect available resources.

The HDP schedule as of the first week of November 2011, which is when the inspector identified the compliance issue, identified December 15, 2011, as the start of excavation in the burial pit area. This schedule has been revised to provide management additional time to oversee contractor and HDP preparations for excavation of the burial pit area. The current schedule date for the start of excavation in the burial pit area is March 19, 2012.

During this three month period, HDP and its remediation contractor have been improving the work documents to more clearly describe for the worker the work steps, the interactions among the various staff and work documents, and controls from a chemical standpoint. In addition, a limited scope of remediation was completed with the loading of above ground limestone and soil piles into railcars for shipment. This enabled focus on a portion of the overall work with relatively low risk so that HDP could complete the ‘learning curve’ for this portion of the work before adding the rest of the work activities.

HDP will be conducting a final readiness review during the week of March 5, 2012. This readiness review will encompass all aspects of the work, including staffing, training, work documents, equipment, consumables, oversight, contingency plans, regulatory requirements, and security.

If the readiness review identifies the need for additional time to before HDP is ready to start, then HDP will reschedule the start of excavation so we can complete the actions needed to safely and competently start excavation in full compliance with requirements.