Nuclear Operating Company

South Texas Project Electric Generating Station P.O. Box 289 Wadsworth, Texas 77483

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U. S. Nuclear Regulatory Commission
Attention: Document Control Desk
Washington, DC 20555-0001

South Texas Project
Units 1 and 2
Docket Nos. STN 50-498 and STN 50-499
Submittal of Operations Quality Assurance Plan Change QA-079

The STP Nuclear Operating Company (STPNOC) submits the attached change to revision 20 of the Operations Quality Assurance Plan (OQAP). These changes provide the necessary revision to the applicable chapters of the OQAP to incorporate an organizational realignment and correct an incorrect reference in Chapter 20.0.

This change therefore does not represent a reduction in commitment and does not require NRC approval prior to implementation in accordance with the provisions of 10CFR50.54(a)(3).

There are no commitments in this letter.

If there are any questions regarding this matter, please contact Mr. T. F. Walker at (361) 972-7392 or John Savage at (361) 972-7765.

Dennis L. Koehl
President and CEO

Attachment: Operations Quality Assurance Plan change QA-079

Q004
NRR

cc:
(paper copy)

Regional Administrator, Region IV
U. S. Nuclear Regulatory Commission
1600 East Lamar Boulevard
Arlington, TX 76011-4511

Balwant K. Singal
Senior Project Manager
U.S. Nuclear Regulatory Commission
One White Flint North (MS 8 B1)
11555 Rockville Pike
Rockville, MD 20852

Senior Resident Inspector
U. S. Nuclear Regulatory Commission
P. O. Box 289, Mail Code: MN116
Wadsworth, TX 77483

C. M. Canady
City of Austin
Electric Utility Department
721 Barton Springs Road
Austin, TX 78704

(electronic copy)

A. H. Gutterman, Esquire
Morgan, Lewis & Bockius LLP

Balwant K. Singal
U. S. Nuclear Regulatory Commission

John Ragan
Chris O'Hara
Jim von Suskil
NRG South Texas LP

Kevin Pollo
Richard Pena
City Public Service

Peter Nemeth
Crain Caton & James, P.C.

C. Mele
City of Austin

Richard A. Ratliff
Texas Department of State Health Services

Robert Free
Texas Department of State Health Services

1.0 PURPOSE

1.1 The purpose of this chapter is to describe the organizational structure as related to quality assurance and to establish the responsibilities of organizations for the South Texas Project (STP).

2.0 SCOPE

2.1 STP Nuclear Operating Company (STPNOC), as licensee, has the Quality responsibility for design, engineering, procurement, fabrication, modification, maintenance, repair, in-service inspection, refueling, testing, and operation of the STP Units 1 & 2, Dry Cask Storage System (DCSS), and Independent Spent Fuel Storage Installation (ISFSI). QA-075

3.0 DEFINITIONS

3.1 None

4.0 REFERENCES

4.1 None

5.0 RESPONSIBILITIES

5.1 The STPNOC organization includes the Senior Vice President, Operations and the Vice President, Corporate Services. The senior management of these groups report to the President and Chief Executive Officer. QA-074, 079

5.2 The President and Chief Executive Officer has overall responsibility for the implementation of the Operations Quality Assurance Program and approving the Operations Quality Assurance Plan (OQAP) and revisions thereto. The President and Chief Executive Officer shall designate those members of senior management to function as the Senior Management Team. QA-074

5.3 The Senior Vice President, Operations is responsible for implementing quality program requirements applicable to operations, regulatory affairs, plant protection (emergency response, plant protection support, security, access authorization), projects, and nuclear oversight. The senior management of these functions report to the Senior Vice President, Operations. QA-074, 079

5.3.1 The Site Vice President is responsible for implementing quality program requirements applicable to staffing STP with qualified personnel and acquiring and coordinating the assistance of internal and external organizations for the following functions including: plant general management, engineering, and training. The senior management of these functions report to the Site Vice President. QA-074, 079

5.3.1.1 The Plant General Manager has prime responsibility for the safe operations of the units. The plant staff, under the direction of the Plant General Manager, develops detailed procedures and instructions for testing, operation, modification, and maintenance of the STP.

5.3.1.2 The Plant General Manager is responsible for implementing quality program requirements applicable to the following functions including: operations, maintenance, chemistry, health physics, and work control. The management of these functions report to the Plant General Manager.

5.3.1.3 The General Manager, Engineering is responsible for implementing quality program requirements applicable to the following functions: design engineering, testing/program engineering, systems engineering, maintenance engineering, special projects, and nuclear fuel & analysis (includes risk management). The management of these functions report to the General Manager, Engineering. QA-074, 079

5.3.1.3.1 The Manager, Nuclear Fuel & Analysis is responsible for implementing quality program requirements applicable to the following functions: reactor engineering, core design, reload safety analysis, nuclear fuel performance and supply, risk management (probabilistic risk assessment and risk-informed applications).

Activities related to the Comprehensive Risk Management Program include oversight of Probabilistic Safety Assessment activities. The Comprehensive Risk Management Expert Panel guides the implementation of the Comprehensive Risk Management Program and is composed of a Chairman and additional senior level management

designated by the President and Chief Executive Officer.

5.3.2 The Manager, Nuclear Oversight is responsible for implementing quality program requirements applicable to organizational effectiveness and quality assurance. The management of these functions report to the Manager, Nuclear Oversight. QA-079

5.3.2.1 The Manager, Quality Assurance has the independence to conduct Quality activities without undue pressure of cost or schedule and is responsible for the following:

Development, maintenance, and independent verification of implementation of the STP Quality Program; making periodic reports on its effectiveness; review of selected documents which control activities within its scope; and preparation, control, and approval of the OQAP and revisions thereto;

Identify, initiate, recommend, or provide solutions to quality-related problems and verify the implementation and effectiveness of the solutions; and

Independent oversight activities, including audits, independent assessments, evaluations, surveillances, performance monitoring, inspections, independent oversight of NDE examinations, vendor oversight, and administration of organizational unit independent review activities.

5.3.2.2 The Manager, Nuclear Oversight and the Manager, Quality Assurance, at their discretion, have unfettered access to the President and Chief Executive Officer and the Board of Directors. QA-074, 079

5.3.2.3 The Manager, Nuclear Oversight and the Manager, Quality Assurance have the authority to stop work for cause. This authority has been granted by the President and Chief Executive Officer. The Quality organization, including the inspection staff, is based upon the anticipated Quality involvement in operations, modification, and maintenance activities.

5.3.3 The General Manager, Projects (Outage/PIP/PMPI) is responsible for implementing quality program requirements applicable to the following functions: strategic projects, projects, outage management, independent spent fuel storage installation and dry cask storage system, and major projects. The management of these functions report to the General Manager, Projects (Outage/PIP/PMPI).

5.4 The Vice President, Corporate Services is responsible for implementing quality program requirements applicable to the following functions: fitness for duty program, contracts & procurement, information technology, support & technology, and records management system. The senior management of these functions report to the Vice President, Corporate Services.

5.4.1 The General Manager, Support & Information Technology is responsible for implementing quality program requirements applicable to the following functions: information technology, support & technology, cyber security, and records management. The management of these functions report to the General Manager, Support & Information Technology.

QA-074, 075, 079

5.4.2 The General Manager, Financial Services is responsible for implementing quality program requirements applicable to contracts & procurement. The management of this function report to the General Manager, Financial Services.

5.4.3 The General Manager, Human Resources, Knowledge Transfer & Organizational Development is responsible for implementing quality program requirements applicable to fitness for duty. The management of this function reports to the General Manager, Human Resources, Knowledge Transfer & Organizational Development.

6.0 REQUIREMENTS

6.1 The fundamental responsibility for implementing quality program requirements is assigned to all personnel performing activities affecting the safe and reliable operation of STP. These personnel and their management are responsible for implementing through approved procedures and other work documents, the quality assurance program controls described in the OQAP. Line organizational details and responsibilities for Units 1 & 2 are further described in STP UFSAR Chapter 13.1.

7.0 DOCUMENTATION

7.1 None

8.0 ATTACHMENTS

8.1 None

1.0 PURPOSE

1.1 The purpose of this chapter is to define criteria and establish administrative controls for implementation of the Quality Assurance (QA) Program for the South Texas Project (STP).

2.0 SCOPE

2.1 The QA Program is implemented and controlled in accordance with the Operations Quality Assurance Plan (OQAP) and is applicable to structures, systems, and components (SSCs) to an extent consistent with their importance to safety, and complies with the requirements of 10CFR50, Appendix B and other program commitments as appropriate. QA-075

2.2 The QA Program will also extend, as applicable and/or determined by STP management, to programs including 10CFR71, Subpart H (except design and fabrication of NRC certified radioactive waste shipping casks), 10CFR72, Subpart G (those features, activities, and SSCs of an Independent Spent Fuel Storage Installation (ISFSI), Dry Cask Storage System (DCSS), or a transportation package important to safety that maintain the conditions required to prevent damage to a container during handling and storage, or provide reasonable assurance that radioactive material can be received, handled, stored, and retrieved without undue risk to the health and safety of the public), ASME Boiler and Pressure Vessel Code, Sections III, V, IX, and XI; and to quality-related areas as defined herein including the Fire Protection Program, Emergency Plan, Radiological Environmental Monitoring Program, Radwaste Management Program, Computer Program Verification and Control, Seismic and Environmental Equipment Qualification Programs, Radiation Protection Program, and Station Blackout (SBO) systems and equipment. OA-075

2.3 Additional quality requirements specific to ISFSI and DCSS are located in Reference 4.9. QA-075

3.0 DEFINITIONS

3.1 Comprehensive Risk Management - A process by which the change in risk to station personnel, the public's health and safety are evaluated as a result of changes in commitments, processes, activities, and human and equipment performance.

3.2 Graded Quality Assurance - The process by which risk-based methodology [i.e., Probabilistic Safety Assessment (PSA)] and deterministic and performance-based information analyses are combined to establish appropriate levels of programmatic controls for SSCs and appropriate levels of first line and independent oversight needed to provide the necessary assurance that SSCs will operate safely.

3.3 Full program controls - The highest levels of controls and oversight applied to safety-related SSCs categorized as High Safety Significant (HSS), as prescribed in Table I to this chapter and throughout individual OQAP chapters.

3.4 Basic program controls - Levels of control and oversight, lower than in the Full Program, applied to safety-related SSCs categorized as Medium Safety Significant (MSS), as prescribed in Table I to this chapter and throughout individual OQAP chapters.

3.5 Targeted program controls - Selected program controls applied to certain non-safety-related SSCs categorized as either HSS or MSS.

3.6 Limited program controls – Limited controls applied to safety-related SSCs categorized as either Low Safety Significant (LSS) or Non-Risk Significant (NRS).

3.7 Graded Approach to Quality – Used as required by 10CFR72 to apply to all activities affecting the important to safety functions of those SSCs of the ISFSI or DCSS that prevent or mitigate the consequences of postulated accidents that could cause undue risk to the health and safety of the public. The identification of important to safety SSCs for each type of DCSS used at STP is contained within its own unique 10CFR72 (Certificate Holder's) Final Safety Analysis Report (FSAR) (as updated), and Certificate of Complicance (C of C).

QA-075

4.0 REFERENCES

4.1 10CFR50, Appendix B

4.2 10CFR71, Subpart H

4.3 ASME B&PV Code

4.4 OQAP Chapter 14.0, Records Control

4.5 10CFR50.63, Loss of All Alternating Current Power

4.6 10CFR50.54(a)

4.7 Updated Final Safety Analysis Report

4.8 Safety Evaluation on Exemption Requests from Special Treatment Requirements of 10 CFR Parts 21, 50, and 100 (TAC NOS. MA6057 AND MA6058)

4.9 OQAP Chapter 20.0, Dry Cask Storage System and Independent Spent Fuel Storage Installation QA-075

4.10 10CFR72, Subpart G

5.0 REQUIREMENTS

5.1 General Program Requirements

5.1.1 The OQAP shall be prepared and maintained to prescribe the STP QA Program. The OQAP reflects the quality program policies to be implemented. The OQAP describes the organization and responsibilities for attainment of quality objectives and verification of conformance to established requirements. The QA Program shall be in effect throughout the operating life of the STP (Units 1 & 2) and the ISFSI. QA-075

5.1.2 The President and Chief Executive Officer has overall responsibility for quality assurance. The Manager, Nuclear Oversight is responsible for the development and maintenance of the OQAP. QA-074, 079

5.1.3 The operations phase of the STP includes design, procurement, fabrication, repair, testing, operation, maintenance, refueling, inspection, independent oversight, modification, and other activities as discussed Table I to this chapter and throughout the OQAP. STP and its vendors are required, as appropriate, to comply with the criteria established by 10CFR50, Section 50.55a; 10CFR50, Appendix A, General Design Criterion (GDC) 1; 10CFR50, Appendix B, 10CFR72, Subpart G, and 10CFR71, Sub-Part H (except design and fabrication of NRC certified radioactive waste shipping casks). These regulations are not applicable to LSS and NRS safety-related components, to the extent that the Nuclear Regulatory Commission has granted STP an exemption from the regulations as described in Reference 4.8. QA-075

STP will implement, as specified, the Regulatory Guides (RG) and implementing American National Standards Institute (ANSI) standards contained in Table I of this chapter.

5.1.4 STP shall maintain the OQAP as an effective and meaningful document to provide programmatic direction for the station. Changes to the OQAP shall be accomplished as prescribed by 10CFR50.54(a).

5.2 Organizational Independence

5.2.1 The reporting arrangement utilized by the Quality organization ensures that those personnel performing independent oversight have the organizational freedom to:

5.2.1.1 Identify quality problems.

5.2.1.2 Initiate, recommend, or provide solutions.

5.2.1.3 Verify implementation of solutions.

5.2.2 Personnel verifying compliance with quality requirements do not have direct responsibility for the performance of or directly supervise the activity being verified.

5.3 Graded Quality Assurance

5.3.1 Graded Quality Assurance (GQA) is fundamental to the STP QA Program. It is described in more detail in the implementing procedure for the STP Comprehensive Risk Management (CRM) Program.

5.3.2 GQA is a process by which risk-based methodology [i.e., Probabilistic Safety Assessment (PSA)], deterministic insights, and performance-based information are combined and analyzed to determine what levels of programmatic controls are needed for structures, systems, and components (SSCs) and what levels of first line and independent oversight are needed to provide assurance that items will operate safely and activities are accomplished as prescribed.

5.3.3 Selected systems are evaluated, at the component level, by a cross-discipline Expert Panel comprised of high level station management. Initial evaluations are performed by the Working Group.

5.3.4 These recommendations are developed in consideration of the risk significance of system functions, components' contribution to core damage frequency and large early release frequency, components' critical attributes (needed to support risk significant system functions), performance, regulatory/QA requirements, and other deterministic considerations as prescribed in the Comprehensive Risk Management procedures.

5.3.5 Program control recommendations are developed by the Working Group and ultimately approved by the Expert Panel and forwarded to the site for implementation. Controls are implemented in four graded applications (i.e., "Full", "Basic", "Targeted", and "Limited").

5.3.6 "Full" program controls are applied to safety-related SSCs categorized as HSS. These "Full" levels of controls and oversight are designed to provide a high degree of confidence that SSCs perform safely and activities are performed as expected. Table I to the OQAP chapter prescribes the program commitments applicable to "Full" program activities.

5.3.7 "Basic" program controls are applied to safety- related SSCs categorized as MSS. These are lower levels of control and oversight, designed to maintain/preserve those identified critical attributes of SSCs needed to support risk significant system functions. These controls are intended to reflect economical and efficient business practices. Table I to this OQAP chapter prescribes the program commitments applicable to "Basic" program activities.

5.3.8 "Limited" program controls are applied to safety-related SSCs categorized as either LSS or NRS. Only specific program controls related to the activities listed in the following subparagraphs are applicable to these SSCs. The other chapters of the OQAP are not applicable to safety-related LSS and NRS SSCs. Instead, the treatment processes applicable to these SSCs are described in the Updated Final Safety Analysis Report Section 13.7.3.3 and implementing procedures:

5.3.8.1 Those elements in Chapter 1.0 that are needed to implement and control activities described above;

5.3.8.2 Applicable requirements in this Chapter;

5.3.8.3 Modification/design activities as described in Chapter 6.0; and

5.3.8.4 Corrective action as described in Chapter 13.0.

5.3.9 "Targeted" program controls are applied to non-safety related SSCs, for which 10CFR50, Appendix B is not applicable, categorized as HSS or MSS . Specific program controls consistent with applicable portions of the "full" and "basic" program controls are applied to those items in a selected manner, "targeted" at those characteristics or critical attributes that render the SSC risk significant.

5.3.10 Safety-related components that are highly reliable, yet whose failure would result in a significant increase in risk, will receive Full program coverage, or will be evaluated based on their risk significance to ensure that Full program controls are applied to their critical attributes.

5.3.11 SSCs governed by the OQAP shall retain their current program coverage until such time as prescribed risk-informed, performance-based analyses are completed and approved, and they are placed into the graded program categories (i.e., "Full", "Basic", "Targeted", or "Limited") as appropriate.

5.3.12 A vital element of the GQA program is the "feedback" loop. On a periodic basis, and as prescribed in the Comprehensive Risk Management procedure, the GQA Working Group and Expert Panel shall review any changes to the PSA information and performance/operating experience that could result in recategorization of an SSC. These reviews are also used to assess the effectiveness and appropriateness of in-place quality program controls. Adjustments shall be made as determined necessary.

5.4 Delegation of QA Functions

5.4.1 The OQAP may be executed in whole or part by subcontract personnel. However, STP will retain responsibility for the total quality assurance program, and Quality organization personnel will perform appropriate oversight activities of subcontracted activities.

5.5 Identification of Safety Significant Structures, Systems, and Components

5.5.1 The program described herein is applied to activities affecting the safety functions of those structures, systems, and components which prevent, or mitigate the consequences of postulated accidents that could cause undue risk to the health and safety of the public. The structures, systems, and components controlled are listed in UFSAR Section 3.2, along with their associated fire protection systems. UFSAR Section 3.2 also identifies those structures, systems, and components which may not represent a safety significant/risk important concern but to which the STP OQAP is applied.

5.5.2 The fire protection QA Program is part of the overall STP Operations QA Program. Fire protection QA Program criteria are implemented as part of the Operations QA Program.

5.5.3 Expendable or consumable items necessary for the functional performance of structures, systems, and components are subjected to quality assurance requirements as specified in written procedures. These procedures include provisions for review and control in accordance with industry standards and specifications.

5.6 QA Program Documents

5.6.1 The QA Program shall be implemented with documented instructions, procedures, and drawings which include appropriate quantitative and qualitative acceptance criteria for determining that prescribed activities have been satisfactorily accomplished. Procedures shall include the control of the sequence of required inspections, tests, and other operations when important to quality. To change these controls, the individual procedure must be changed and shall require the same level of review and approval given to the original procedure. Such instructions, procedures, and drawings are reviewed and approved for compliance with requirements appropriate to their safety significance by individuals qualified to do so.

5.7 Personnel Indoctrination and Training

5.7.1 General indoctrination and training programs shall be provided for site personnel to assure that they are knowledgeable regarding quality programs and requirements. The training requirements for STP personnel are described in UFSAR Section 13.2. Personnel performing complex, unusual, or potentially hazardous work shall be instructed in special indoctrination or briefing sessions. Emphasis shall be on special requirements for safety of personnel, radiation control and protection, unique features of equipment and systems, operating constraints, and control requirements in effect during performance of work. Where required by codes and standards, personnel are trained, qualified, and certified according to written procedures in the principles and techniques of performing specific activities.

5.8 Policies and Goals

5.8.1 STP policy is to assure that the design, procurement, construction, testing, and operation of the STP are in conformance with specifications, procedures, codes, commitments and Nuclear Regulatory Commission (NRC) regulations to the extent not exempted. The responsibility of each organization supporting the STP is to ensure that the requirements stated in this QA Program are incorporated into procedures. Adherence to those procedures is mandatory for all STP organizations and contractors or vendors providing items or services covered by the QA Program.

5.8.2 The OQAP identifies activities and establishes requirements for procedures which identify, report, and verify the resolution of quality problems. The implementing procedures call for the resolution of quality problems at the lowest possible authorized level. However, if a dispute is encountered in the resolution of a quality problem which cannot be resolved at lower levels, the Manager, Nuclear Oversight or Manager, Quality Assurance shall present the problem to the President and Chief Executive Officer for resolution.

QA-074, 079

5.9 Control of Activities

5.9.1 The OQAP requires Quality department review and/or approval of procedures which control selected activities. These procedures shall require the use of the proper equipment, completion of prerequisites for starting an activity, and suitable environment for performing the activity. Procedures will comply with the appropriate standards.

5.9.2 STP personnel attend planning, scheduling, and status meetings as necessary to assure adequate quality coverage and program application exists.

5.10 Management Review

5.10.1 The implementation of both line and OQAP requirements shall be verified through independent oversight activities. The Quality organization shall conduct independent oversight activities of the operating plant, DCSS, ISFSI and of the interfacing organizations' activities. QA-075

5.10.2 Independent oversight of the implementation of the OQAP is conducted under the cognizance of the Senior Management Team and results are transmitted to appropriate line and senior management, including the President and Chief Executive Officer for review and/or action. QA-074, 079

5.10.3 STP may use the services of architect-engineer firms, Nuclear Steam Supply System (NSSS) suppliers, fuel fabricators, constructors, and others which provide or augment STP efforts during operations. As applicable, the QA programs of such contractors or consultants shall be subject to review, evaluation, and acceptance by the Quality organization before initiation of activities affected by the program.

5.11 Computer Code Programs

5.11.1 The development, maintenance, and use of computer code programs will be controlled. Prior to use of a computer code program, the appropriateness of the program shall be verified. In addition, all such programs shall be appropriately certified for use.

6.0 DOCUMENTATION

6.1 Procedures which are generated as required by this chapter shall identify the records which are required to implement and document those activities. The records shall be controlled in accordance with Reference 4.4.

7.0 ATTACHMENTS

7.1 Table I - Program Commitments

TABLE I

PROGRAM COMMITMENTS

R.G./ANSI STANDARD	FULL PROGRAM	BASIC PROGRAM
R.G. 1.8, rev. 1 (9/75)	No exceptions taken.	No exceptions taken.
ANSI N18.1, 1971	4.2.2-The Operations Manager requirements regarding holding a Senior Reactor Operator license are met by the Unit Operations Managers.	Same as full.
R.G. 1.28, rev. 0 (6/72)	This R.G. is not applicable to operations phase activities.	Same as full.
ANSI N45.2, 1971	This standard is not applicable to operations phase activities.	Same as full.
R.G. 1.33, rev. 2 (2/78)	C.2 - the specific revisions of the listed standards to which STP is committed are in this table and are not necessarily the "latest" revision. C.4 – Chapter 15.0 of the STP OQAP describes the audit program at STP that meets the intent of R.G. 1.33, rev. 2, position C.4 regarding frequency of audits C.4.a.b.c – STP performs these audits in accordance with a nominal biennial frequency.	Same as full. Same as full. Same as full.
ANSI NI8.7 – 1976/ANS 3.2	3.4.2 – refer to R.G. 1.8 regarding Operations Manager holding a Senior Reactor Operator license. 4.5 – refer to R.G. 1.33 coverage regarding audit frequency. 5.2.6 (5th paragraph) – independent verification may be concurrent with (same time as) work performance.	Same as full. 3.4.2 refer to R.G. 1.58 regarding use of personnel not qualified in accordance with ANSI N45.2.6. Same as full. Same as full.

TABLE I

PROGRAM COMMITMENTS

R.G./ANSI STANDARD	FULL PROGRAM	BASIC PROGRAM
ANSI N18.7/ANS 3.2 (cont'd)	5.2.7 (1st paragraph) – STP will use current approved design bases as opposed to original design bases.	Same as full.
		5.2.7 – STP will perform inspection as deemed necessary, based on the relative complexity of the work.
	5.2.7.1 (5th paragraph) – STP takes exception to use of the word "promptly" with regard to determining, evaluating and recording the causes of malfunctions. The STP Corrective Action Program includes the elements with regard to timeliness of action associated with causal analyses.	Same as full.
		5.2.7.2 – refer to table coverage of ANSI N45.2.11, 1974.
		5.2.13 (1st paragraph) – refer to table coverage of ANSI N45.2.13, 1976.
		5.2.13.1 (1st paragraph) – refer to table coverage of ANSI N45.2, 1971.
		5.2.13.4 (5th paragraph) – refer to table coverage of ANSI N45.2.2, 1972.
	5.2.15 (4th paragraph) – Chapter 8.0 of the OQAP describes the requirements for control and issuance of documents, which meets the intent of R.G. 1.33, rev. 2. The intent of the biennial review is accomplished by other controls that assure that procedures are appropriately reviewed and revised to incorporate information based on plant operations, design changes, regulatory requirements, industry experience and other conditions that may impact plant procedures.	Same as full.

TABLE I

PROGRAM COMMITMENTS

R.G./ANSI STANDARD	FULL PROGRAM	BASIC PROGRAM
ANSI N18.7/ANS 3.2 (cont'd)		5.2.17 (3rd paragraph) – STP may not implement the requirement for conduct of inspections in a manner similar to that associated with construction phase activities (i.e., regarding use of personnel not qualified to ANSI N45.2.6)
R.G. 1.38, rev. 2 (5/77)	No exceptions taken.	No exceptions taken.
ANSI N45.2.2, 1972	2.4 – Audit personnel are qualified in accordance with STP's commitment to R.G. 1.146/ANSI 45.2.23.	Same as full.
		2.4 – Offsite oversight of vendors of items in the Basic category will only be performed as deemed necessary.
	5.2.1 - These activities do not constitute an "inspection" as defined in ANSI/ASME NQA-1, 1983, Supplement S-1, Terms and Definitions. Therefore, the requirements for qualification to ANSI N45.2.6 as stated in Section 2.4 do not apply to personnel performing these activities.	Same as Full
R.G. 1.58, rev. 1 (9/80)	C.2 – STP is committed to ASNT-TC-1A, 1980. STP treats the recommendation ("should") of the 1980 edition as requirements ("shall").	Same as full.
ANSI N45.2.6, 1978		1.2 (1st paragraph) – with the exception of receipt inspection, personnel may perform inspections, examinations and tests provided they are experienced, task qualified journeymen, or supervisors, who did not perform or directly supervised the activity being inspected, examined or

TABLE I

PROGRAM COMMITMENTS

R.G./ANSI STANDARD	FULL PROGRAM	BASIC PROGRAM
ANSI N45.2.6, 1978 (cont'd)		tested. These individuals shall also receive training to the applicable inspection procedure, processes, methods in accordance with a Quality approved training program; and Quality will provide periodic oversight of the inspection activities.
	1.2 (3rd paragraph) – refer to table coverage of R.G. 1.28.	Same as full.
	1.4.4 – refer to table coverage of R.G. 1.74/ANSI N45.2.10.	Same as full.
	Personnel performing the activities stated in ANSI N45.2.2, Section 5.2.1 do not require qualification to this Standard. (see exception to ANSI N45.2.2)	Same as Full
R.G. 1.64, rev. 2 (6/76)	No exceptions taken.	C.2 – STP may implement the requirement regarding design verification as prescribed in ANSI N45.2.11, 1974, 6.1, second paragraph/second sentence, as opposed to R.G. wording.
ASNI N45.2.11, 1974	No exceptions taken.	3.2 (1st paragraph) – STP will require personnel to consider items 1 through 28, but a documented checklist may not be required.

TABLE I

PROGRAM COMMITMENTS

R.G./ANSI STANDARD	FULL PROGRAM	BASIC PROGRAM
ANSI N45.2.11, 1974 (Con't.)		6.3 – Verification and checking of design may be accomplished through supervisory or management review/approval as provided for in 6.1. Personnel will be required to consider items 1 through 19, but a documented checklist may not be required.
R.G. 1.74 (2/74)	Not applicable to STP. STP uses ANSI/ASME NQA-1-1983 for Quality Assurance Terms and Definitions.	Same as full.
ANSI N45.2.10, 1973	Same as R.G. 1.74 above.	Same as full.
R.G. 1.88, rev. 2 (10/76)	No exceptions taken.	Same as full.
ANSI N45.2.9, 1974	Section 5.6 – supplement the provisions of this section by providing for alternate temporary storage of records. Allow the use of 1-hour fire rated cabinets to store records that are awaiting processing (e.g., processing into Optical Disk Storage). Storage of these records in 1-hour fire rated cabinets will be controlled by procedure which specify a maximum allowable time limit. Cabinets housing these records shall be controlled for access and shall be located in an area protected by sprinklers.	Same as full.
R.G. 1.123, rev. 1 (7/77)	C.6.b.and e. – The referenced section of ANSI N45.2.13 will be implemented as written.	
ANSI N45.2.13, 1976	Various sections refer to ANSI N45.2. Refer to table coverage of R.G. 1.28 and ANSI N45.2.	Same as full.

TABLE I

PROGRAM COMMITMENTS

R.G./ANSI STANDARD	FULL PROGRAM	BASIC PROGRAM
ANSI N45.2.13, 1976 (cont'd)	3.2.3 – When purchasing commercial-grade calibration services from calibration laboratories accredited by a nationally-recognized accrediting body, the procurement documents are not required to impose a quality assurance program consistent with 10CFR50, Appendix B. In such cases, accreditation may be accepted in lieu of the Purchaser imposing a QA Program consistent with 10CFR50, Appendix B, provided all of the following are met: 1) The accreditation is to ANSI/ISO/IEC 17025 2) The accrediting body is either the National Voluntary Laboratory Accrediting Program (NVLAP) administered by the National Institute of Standards and Technology (NIST) or American Association for Laboratory Accreditation (A2LA). The A2LA accreditation is recognized by NVLAP through the International Laboratory Accreditation Cooperation (ILAC) Mutual Recognition Arrangement (MRA). 3) The published scope of accreditation for the calibration laboratory covers the needed measurement parameters, ranges, and uncertainties. This requires the supplier to provide a measurement of collective uncertainty and obviates the need to impose the four-to-one ratio requirement discussed in NIST Information Report (NISTIR) 6989. 4) The purchase documents impose additional technical and administrative requirements, as necessary, to satisfy STPNOC QA Program and technical requirements. This requires the calibration certificate/report include identification of the laboratory equipment/standards used. 5) Purchase documents require reporting as-found calibration data when calibrated items are found to be out-of-tolerance. 6) The alternative method is limited to the domestic calibration service suppliers. 7) The alternative method is applicable to sub-suppliers of calibration service suppliers, provided the above conditions are met.	Same as full
	5.3 and 5.4 – Provision are established for, in special cases and with management approval, completion of these activities after award of contract.	Same as full.

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PROGRAM COMMITMENTS

R.G./ANSI STANDARD	FULL PROGRAM	BASIC PROGRAM
ANSI N45.2.13, 1976 (cont'd)	9.0 – This section will be implemented based on the scope, complexity and safety significance of the items being procured.	Same as full.
		10.3.1 – This section will only be implemented as deemed necessary.
		12 – This section will only be implemented as deemed necessary for audits of suppliers.
R.G. 1.144, rev. 1 (9/80)	C.1 – refer to table coverage of R.G. 1.28 and ANSI N45.2.	Same as full.
	C.3a(1) – refer to table coverage of R.G. 1.33 regarding audit frequency.	Same as full.

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PROGRAM COMMITMENTS

R.G./ANSI STANDARD	FULL PROGRAM	BASIC PROGRAM
R.G. 1.144, rev. 1 (9/80) (cont'd)	C.3.b(2) – When purchasing commercial-grade calibration services from calibration laboratories accredited by a nationally-recognized accrediting body, the accreditation process and accrediting body may be credited with carrying out a portion of the Purchaser's duties of verifying acceptability and effective implementation of the calibration service supplier's quality assurance program. In lieu of performing an audit, accepting an audit by another licensee, or performing a commercial-grade survey, a documented review of the supplier's accreditation shall be performed by the Purchaser. This review shall include, at a minimum, verification of the following: 1)The accreditation is to ANSI/ISO/IEC 17025 2) The accrediting body is either NVLAP or A2LA. The A2LA accreditation is recognized by NVLAP through the ILAC MRA. 3) The published scope of accreditation for the calibration laboratory covers the needed measurement parameters, ranges, and uncertainties. This requires the supplier to provide a measurement of collective uncertainty and obviates the need to impose the four-to-one ratio requirements discussed in NISTIR 6989. 4) The purchase documents impose additional technical and administrative requirements, as necessary, to satisfy STPNOC QA Program and technical requirements. This requires the calibration certificate/report include the identification of the laboratory equipment/standards used. 5) Purchase documents require reporting as-found calibration data when calibrated items are found to be out-of-tolerance. 6) The alternative method is limited to the domestic calibration service suppliers. 7) The alternative method is applicable to sub-suppliers of calibration service suppliers, provided the above conditions are met. The licensee is responsible for ensuring that the procured services are within the accredited scope of the NVLAP and A2LA certificates.	Same as full for commercial-grade calibration services STP will audit vendors only as deemed necessary. STP will perform biennial evaluations.

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PROGRAM COMMITMENTS

R.G./ANSI STANDARD	FULL PROGRAM	BASIC PROGRAM
ANSI N45.2.12, 1977	No exceptions taken.	STP will audit vendors only as deemed necessary. These audits will be conducted as unplanned/unscheduled audits.
R.G. 1.146, rev. 0 (8/80)	C.1 – refer to table coverage of R.G. 1.28 and ANSI N45.2. Refer to table coverage of R.G. 1.74 and ANSI N45.2.10	Same as full.
ANSI N45.2.23, 1978	1.2 – refer to table coverage of R.G. 1.28.	Same as full.
	1.4 – refer to table coverage of R.G. 1.74.	Same as full.
	2.21 – refer to table coverage of R.G. 1.28.	Same as full.
	2.3.3.1 – refer to table coverage of R.G 1.28.	Same as full.
	2.3.4 - In lieu of the requirements of section 2.3.4 of ANSI N45.2.23-1978 the following alternative is acceptable: Prospective lead auditors shall demonstrate their ability to properly implement the audit process and effectively lead an audit team. This demonstration process will be described in implementing procedures and will include the evaluation and documentation of the results of the demonstration. Regardless of the methods used for the demonstration, the prospective lead auditor is required to participate in at least one nuclear quality assurance audit within the year preceding the individual's effective date of qualification. Upon successful demonstration of the ability to effectively implement the audit process and effectively lead audits, and having met the other provisions of Section 2.3 of ANSI N45.2.23-1978, the individual may be certified as being qualified to lead audits.	Same as full

TABLE I

PROGRAM COMMITMENTS

For Regulatory Guides addressed by the table, and unless specific clarification or exception is indicated, STP will implement the Regulatory Guide positions, including recommendations.

For ANSI Standards addressed by this table, and unless specific clarification or exception is indicated, STP will treat ANSI requirements (i.e., "shall") as such – except in instances where the standard itself provides options or requires a graded approach – this notwithstanding the general applicability statements found in many standards (i.e., section 1.0)

1.0 PURPOSE

1.1 The purpose of this chapter is to establish the requirements for procurement of items and services for the South Texas Project (STP).

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2.0 SCOPE

2.1 This chapter applies to the procurement of items and services for use at STP which are subject to the controls of this Quality program. These activities include procurement document control, bid evaluation, vendor evaluation, verification of vendor activities and receiving inspection.

3.0 DEFINITIONS

3.1 None

4.0 REFERENCES

4.1 10CFR50, Appendix B

4.2 10CFR21, Reporting of Defects and Noncompliance

4.3 OQAP Chapter 2.0, Table I

4.4 EPRI NP-5652 (NCIG-07), Guideline for the Utilization of Commercial Grade Items in Nuclear Safety Related Application

4.5 OQAP Chapter 4.0, Qualification, Training and Certification of Personnel

4.6 OQAP Chapter 13.0, Control of Conditions Adverse to Quality

4.7 OQAP Chapter 14.0, Records Control

4.8 Generic Letter 89-02, Actions to Improve the Detection of Counterfeit and Fraudulent Marketed Products

5.0 REQUIREMENTS

5.1 Procurement Document Preparation, Review and Control

5.1.1 Responsibility for procurement is a joint effort of all the departments within the STP Nuclear Operating Company (STPNOC). The department requesting the material or service provides technical content and quality requirements. Engineering/Contracts & Procurement is responsible to provide input to the requesting department on technical content and quality requirements, as requested. Quality will concur with all changes to quality requirements.

5.1.2 The sequence of preparation, review, approval, and issuance of procurement documents is generally as follows:

5.1.2.1 Purchase Requisitions

- Purchase requisition forms shall be used to initiate the procurement of materials, parts, components, and services. Procurement may be initiated by any STPNOC personnel.

- Purchase requisitions shall include material and component identification requirements, drawings, specifications, standards, inspection and test requirements, and special process instructions as appropriate.

- Purchase requisitions for materials, parts, components, or services shall be reviewed by the cognizant technical organization to verify that adequate technical and quality requirements have been specified.

- The reviews for technical and quality requirements shall be performed by someone other than the originator of the requisition. Quality will concur with all changes to quality requirements.

5.1.2.2 Purchase Orders and Contracts

- Purchase orders and contracts are prepared and issued by Contracts & Procurement and establish for the suppliers the technical and quality requirements which must be met.

- Purchase orders and contracts shall accurately reflect the technical and quality requirements established by the purchase requisition. If, during the bid negotiations with the supplier, it becomes necessary or commercially desirable to change the technical or quality requirements, such changes shall be presented for approval to the cognizant technical organization which approved the original requirements.

5.1.2.3 Change Controls

- Changes to procurement document quality and technical requirements shall require a review and approval equivalent to that of the original document. Commercial consideration changes not affecting the technical or quality requirements do not require review and concurrence by the originator.

5.1.3 For the procurement of spare or replacement parts, equipment, materials, and services, the quality and technical requirements shall be equal to or greater than the design basis requirements for the original part, equipment, materials or services; except where less stringent quality or technical requirements may be established based on specific evaluations and justification. The cognizant technical organization shall document such justification.

5.1.3.1 Items may be procured as Commercial Grade Items (CGIs) if a documented engineering evaluation indicates the CGI will provide equivalent performance. CGI dedication will comply with established procedures designed to satisfy the requirements of References 4.2 and 4.8.

5.1.3.2 The cognizant technical organization shall verify that quality requirements are correctly stated, verifiable, and controllable; that acceptance/rejection criteria are included; and that the documents have been prepared, reviewed, and approved in accordance with STP Quality Program requirements.

5.2 Procurement Document Content

5.2.1 Procurement document control measures shall assure that appropriate regulatory requirements, design bases, and other requirements are included in the procurement process. The following shall be included or invoked by reference in procurement documents as appropriate:

5.2.1.1 Applicable regulatory, code, and design requirements, including material and component identification requirements, drawings, specifications, standards, inspection and test requirements, special process instructions and handling, preservation, cleaning, storage, packaging and shipping requirements. These requirements shall equal or exceed the original requirements (unless changed by established design control processes).

5.2.1.2 Extent that supplier QA program shall comply with 10CFR50, Appendix B or the QA program requirements of other nationally recognized codes and standards, as applicable; or for CGIs to be dedicated for safety related use by STPNOC based on the results of a survey of the vendor's controls, the vendor's STPNOC approved and/or surveyed program.

5.2.1.3 Requirements for supplier documents, such as instructions, procedures, drawings, specifications, inspection and test records, and suppliers' QA records to be prepared, submitted, or be made available for review and/or approval by STP personnel.

5.2.1.4 Requirements for suppliers to maintain the status of required inspections or tests throughout the manufacturing process to preclude inadvertent bypassing of inspections and tests.

5.2.1.5 Requirements for STPNOC's right of access to suppliers' facilities and work documents for inspection and audit.

5.2.1.6 Requirements for extending applicable STP procurement requirements to lower-tier suppliers and subcontractors, including STPNOC's access to facilities and records.

5.2.1.7 Requirements for supplier reporting to STP nonconformances to procurement document requirements and conditions for their disposition.

5.2.1.8 Requirements for the retention, control, and maintenance of supplier QA records that are not maintained by STPNOC. Supplier-furnished records shall include:

- Documentation (e.g., certification) that identifies the purchased item and the specific procurement requirements (e.g., codes, standards, and specifications) met by the item.
- Documentation identifying any procurement requirements that have not been met.
- A description of those nonconformances from procurement requirements dispositioned "accept-as-is" or "repair".

5.2.1.9 Requirement for the supplier to submit a copy of its QA program description (does not apply for CGIs).

5.2.1.10 Requirements for the performance of maintenance and receipt inspection checks where applicable.

5.2.1.11 Applicability of 10CFR21 reporting requirements.

- The reporting requirements of 10CFR21 do not apply to vendors of CGIs to be dedicated for use by STPNOC.
- The reporting requirements of 10CFR21 do not apply to suppliers of commercial-grade calibration services.

5.2.2 When purchasing commercial-grade calibration services from calibration laboratories accredited by a nationally-recognized accrediting body, the procurement documents are not required to impose a quality assurance program consistent with 10CFR50, Appendix B.

5.2.2.1 In such cases, accreditation may be accepted in lieu of imposing a QA Program consistent with 10CFR50, Appendix B, provided all of the following are met:

- The accreditation is to ANSI/ISO/IEC 17025

- The accreditation body is either the National Voluntary Laboratory Accrediting Program (NVLAP) administered by National Institute of Standards and Technology (NIST) or American Association for Laboratory Accreditation (A2LA). The A2LA accreditation is recognized by NVLAP through the International Laboratory Accreditation Cooperation (ILAC) Mutual Recognition Arrangement (MRA).

- The published scope of accreditation for the calibration laboratory covers the needed measurement parameters, ranges, and uncertainties. This requires the supplier to provide a measurement of collective uncertainty and obviates the need to impose the four-to-one ratio requirement discussed in NIST Information Report (NISTIR) 6989.

- The purchase documents impose additional technical and administrative requirements, as necessary, to satisfy STPNOC QA Program and technical requirements. This requires the calibration certificate/report include identification of the laboratory equipment/standards used.

- Purchase documents require reporting as-found calibration data when calibrated items are found to be out-of-tolerance.

- The alternative method is limited to the domestic calibration service suppliers.

- The alternative method is applicable to sub-suppliers of calibration service suppliers, provided the above conditions are met.

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5.3 Bid Evaluation

5.3.1 Bid Evaluations shall be performed to evaluate adherence to technical and quality assurance requirements.

5.4 Supplier Selection

5.4.1 Suppliers of items (for CGIs, when basis for dedication includes commercial grade survey) or services shall be required to submit copies of their QA program description for evaluation prior to the issuance of a purchase order or execution of a contract, and acceptability shall be documented. The process by which suppliers are judged as being a capable procurement source is described as follows:

5.4.1.1 Procurement source evaluation and selection involves Engineering, Quality, Contracts & Procurement, and STP plant personnel, as appropriate. These organizations participate in the qualification evaluation of suppliers in accordance with written procedures.

5.4.1.2 Measures for the evaluation and selection of procurement sources shall be specified in procedures and may vary depending upon the complexity and risk significance of the item or service. When procurement source evaluations are performed, the information to be considered shall include one or more of the following:

- Experience of users of identical or similar products of the prospective supplier, other utility or approved contractor audits/evaluations, audits/evaluations by cooperative utility groups, American Society of Mechanical Engineers (ASME) Certificates of Authorization, STP records accumulated in previous procurement actions, and STP product operating experience may be used in this evaluation. When other utility, contractor or cooperative utility audits/evaluations are used, the documentation will be obtained and reviewed. Supplier history shall reflect recent capability. Previous favorable experience with suppliers may be an adequate basis for judgments attesting to suppliers' capability.

- An evaluation of the suppliers' current quality records supported by documented qualitative and quantitative information which can be objectively evaluated. This may include review and evaluation of the suppliers' QA Program Manual, procedures, and responses to questionnaires, as appropriate.

- A source evaluation of the suppliers' technical and quality capability as determined by a direct evaluation of facilities and personnel (audit, survey, or surveillance) and quality program implementation. Resolution or a commitment to resolve unacceptable technical or quality requirements identified by the bid evaluation or vendor evaluation shall be obtained prior to the award of a purchase order or contract.

5.4.1.3 Procurement source evaluations involve a review of technical and quality considerations to an extent considered appropriate by each participant. Technical considerations include the design or manufacturing capability and technical ability of suppliers to produce or provide the design, service, item or component. Quality considerations include one of the previously stated methods of supplier evaluation and a consideration of a suppliers' current quality program or capabilities.

5.4.1.4 A documented quality assurance evaluation of a vendor's quality program shall be performed to assure it meets the appropriate requirements of 10CFR50 Appendix B, or where applicable, other nationally recognized codes and standards, or, for CGIs, to assure the program provides adequate control over established critical characteristics.

5.4.1.5 Vendors may be placed on the Approved Vendors List after passing this evaluation.

5.4.1.6 A vendor shall not be issued a purchase order or contract unless they have been accepted for placement on the Approved Vendors List or an exception has been approved by the Manager, Nuclear Oversight or the Manager, Quality Assurance.

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5.4.1.7 Service organizations which will supply only manpower and no other service are not required to be on the Approved Vendors List or have an STP approved quality assurance program as long as the supplied personnel are trained and work under the auspices of the STP Operations Quality Assurance Plan.

5.4.2 Each vendor on the Approved Vendors List shall be periodically evaluated by Quality as provided by Reference 4.3 (i.e., annually for "Full" program, biennially for "Basic" program).

5.4.2.1 A vendor may be removed from the Approved Vendors List if evaluation determines the vendor is unacceptable, the vendor requests removal or by direction of the Manager, Nuclear Oversight or the Manager, Quality Assurance. QA-074, 079

5.4.3 Planning of verification activities to be employed for item or service acceptance shall begin during the purchase requisition or contract preparation and review stage. The extent of the verification activities will vary and be a function of the relative safety significance, complexity of the purchased item or service, and the supplier's past performance. The verification activities may include vendor surveillance, receipt inspection, or post-installation testing. Verification activities are planned to assure conformance to procurement document requirements. Procedures shall establish the organizational responsibilities for identifying required verifications and methods, performing and documenting the verification activities.

5.4.3.1 Verification activities shall be performed using plans developed in accordance with procedures with appropriate input from the cognizant technical organization. The plan shall specify the characteristics or processes to be witnessed, inspected or verified.

5.4.3.2 Specified source inspections may be waived by Manager, Nuclear Oversight or the Manager, Quality Assurance. QA-074, 079

5.4.3.3 Vendor related reports shall be evaluated to determine the effectiveness of the vendor's quality assurance program.

5.5 Receiving Activities

5.5.1 Received purchased items shall be observed for shipping damage and the requirements of ANSI N45.2.2 Section 5.2.1. (This activity does not constitute an inspection and does not require qualification in accordance with Reference 4.5).

5.5.2 Receiving inspection shall be coordinated with verification activities. If source inspection is not performed or did not address all applicable attributes, receipt inspection shall be performed and shall include the applicable additional attributes listed in ANSI N45.2.2 Section 5.2.2, except for commercial grade items dedicated by survey which shall be receipt inspected as required by the procurement document.

5.5.3 Receiving inspection checklists shall be developed using the requirements specified in the procurement documents and applicable attributes of ANSI N45.2.2.

5.5.4 Statistical sampling methods may be used for groups of similar items. Sampling shall comply with nationally recognized methods or approved engineering alternates.

5.5.5 Receiving inspections shall be performed by personnel trained and qualified in accordance with Reference 4.5. Technical assistance shall be provided by Contracts & Procurement or Engineering as applicable.

5.5.6 Receiving inspection activities shall include:

5.5.6.1 Identifying materials, parts, and components and their status upon receipt by tagging or other acceptable means of identification, or segregating and controlling items in receiving hold areas separate from the storage facilities for acceptable items. Identification of items shall correspond to the identification required by procurement documents and be noted on receiving documentation.

5.5.6.2 Verification of items for acceptance includes correctness of identification and specified quality documentation.

5.5.6.3 Inspecting or testing using approved procedures and calibrated tools, gauges, and measuring equipment for verification acceptance of items, including off-the-shelf items.

5.5.6.4 Items determined to be acceptable for use shall be identified with an "accept" tag or other acceptable means of identification prior to release for storage or use.

5.5.6.5 Received items which do not conform to procurement documents are controlled and segregated (if practical) and processed in accordance with Reference 4.6.

5.5.7 Acceptance by post-installation test may be utilized following one of the preceding verification methods. Post-installation testing may be used for acceptance verification when it is difficult to verify item quality characteristics, the item requires an integrated system checkout or test, or the item cannot demonstrate its ability to perform when not in use. Engineering specifications shall be used for developing post-installation test instruction requirements and acceptance documentation. Post-installation testing is the responsibility of the Plant General Manager and is witnessed by Engineering or Quality personnel at specified hold points.

5.5.8 Acceptance of Procured Items and Services

5.5.8.1 Acceptance of items and services shall be based on one or more of the following:

Written certifications
(Note: This shall not be the sole method of acceptance for items in the "Basic" program)

Surveillance/Audit of procured service

Source verification

Receiving inspection/testing

Commercial Grade Item dedication

Vendor surveillance

Post-installation test

5.5.9 Documented evidence from the supplier that procured items meet procurement quality requirements, when required, such as codes, standards, or specifications will be maintained at the plant site. Such evidence shall be provided by the supplier, at the time of source or receipt inspection, for review and verification before acceptance. The documented evidence will be retrievable and available at the plant site prior to installation or use of the procured item, unless otherwise controlled in accordance with Reference 4.6.

5.6 Vendor Surveys, Surveillance and Audit

5.6.1 For items in the Full Program, Suppliers Certificates of Conformance shall be periodically evaluated by audits, independent inspections, surveys, or tests to assure that they are valid and results are documented. When acceptance is based upon source inspection, documented evidence shall be furnished to the plant receiving organization.

5.6.1.1 Acceptance by source inspection may be considered when the item or service is vital to plant safety; or the quality characteristics are difficult to verify after receipt; or the item or service is complex in design, manufacture, inspection, or test. Vendor surveillance/source inspection involves a physical presence to monitor, by observation, designated activities for the purpose of evaluating supplier performance and product acceptance (source inspection only).

5.6.2 The STP survey and audit program provide for periodic scheduled audits or surveys of suppliers, the site procurement program, contractors, subcontractors, and others performing work. The audit and survey schedule is prepared and updated by Quality. Frequency of these surveys and audits is based upon the safety, complexity, and quality requirements, and as a minimum shall be in compliance with Reference 4.3.

5.6.3 When purchasing commercial-grade calibration services from calibration laboratories accredited by a nationally-recognized accrediting body, the accreditation process and accrediting body may be credited with carrying out a portion of the STPNOC's duties of verifying acceptability and effective implementation of the calibration service supplier's quality assurance program.

In lieu of performing an audit, accepting an audit by another licensee, or performing a commercial-grade survey, a documented review of the supplier's accreditation shall be performed by STPNOC. This review shall include, at a minimum, verification of the following:

- The accreditation is to ANSI/ISO/IEC 17025
- The accrediting body is either NVLAP or A2LA. The A2LA accreditation is recognized by NVLAP through the ILAC MRA.

- The published scope of accreditation for the calibration laboratory covers the needed measurement parameters, ranges, and uncertainties. This requires the supplier to provide a measurement of collective uncertainty and obviates the need to impose the four-to-one ratio requirement discussed in NISTIR 6989.

- The purchase documents impose additional technical and administrative requirements, as necessary, to satisfy STPNOC QA Program and technical requirements. This requires the calibration certificate/report include the identification of the laboratory equipment/standards used.

- Purchase documents require reporting as-found calibration data when calibrated items are found to be out-of-tolerance.

- The alternative method is limited to the domestic calibration service suppliers.

- The alternative method is applicable to sub-suppliers of calibration service suppliers, provided the above conditions are met.

- STPNOC is responsible for ensuring that the procured services are within the accredited scope of the NVLAP and A2LA certificates.

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6.0 DOCUMENTATION

6.1 Procedures which are generated as required by this chapter shall identify the records which are required to implement and document those activities. The records shall be controlled in accordance with Reference 4.7.

7.0 ATTACHMENTS

7.1 None

1.0 PURPOSE

1.1 The purpose of this chapter is to establish requirements and responsibilities for the identification, documentation, evaluation, resolution, control and reporting of conditions adverse to quality at the South Texas Project (STP). QA-078

2.0 SCOPE

2.1 This chapter applies to conditions adverse to quality discovered in items, services and activities under the scope of the Operations Quality Assurance Plan and the reporting of items to the Nuclear Regulatory Commission (NRC) in accordance with Title 10 Code of Federal Regulations.

3.0 DEFINITIONS

3.1 None

4.0 REFERENCES

4.1 10CFR50, Appendix B

4.2 10CFR21, Reporting of Defects and Noncompliance

4.3 10CFR50.72, Immediate Notification Requirements for Operating Nuclear Power Reactors

4.4 10CFR50.73, Licensee Event Report System

4.5 STP Technical Specifications QA-078

4.6 OQAP Chapter 14.0, Records Control

4.7 OQAP Chapter 2.0, Table I

4.8 NRC Regulatory Issue Summary 2005-20

4.9 STP Reporting Manual QA-078

5.0 REQUIREMENTS

5.1 All personnel working under the jurisdiction of the Operations Quality Assurance Plan are responsible for reporting conditions adverse to quality to appropriate management for resolution in accordance with approved procedures.

5.2 Procedures shall be developed for the control of items, services or activities which do not conform to established requirements. These procedures shall provide for the following:

5.2.1 Identification and documentation of conditions adverse to quality.

5.2.2 Identification of the requirements, source, or reference information being violated.

5.2.3 Notification of responsible management.

5.2.4 Control of conditions adverse to quality by tagging, segregation, administrative controls, or other appropriate means to prevent inadvertent installation, use, or continuation of the activity and removal of such controls when returned to service or availability.

5.2.5 Resolution and/or disposition approved by authorized personnel prior to closing out the documentation and restoring to normal service.

5.2.5.1 Material conditions adverse to quality disposition categories are:

- o "Use-as-is"
- o "Reject"
- o "Rework" in accordance with documented procedures
- o "Repair" in accordance with documented procedures

5.2.5.2 "Use-as-is" and "repair" dispositions shall be approved and justified in writing by Engineering.

5.2.5.3 Evaluations shall be performed to ascertain recurrence control measures.

5.2.6 Documentation of the corrective action taken.

5.2.7 Review and/or verification of the corrective action by the Quality organization, as appropriate.

5.2.8 Repaired and reworked items shall be reinspected in accordance with applicable procedures. Reinspection results are documented on inspection reports or other work process control documents.

5.2.9 Installation of nonconforming material, parts, and components may be performed after the effect of their installation has been evaluated and the installation approved by Plant Management, Quality, and Engineering. Nonconforming items which may not be installed are those which, because of their makeup and intended use, cannot be repaired or reworked after being installed and those which, if installed and later removed, would degrade that system, structure, or component. Once installed, nonconforming items are not energized, used, or placed in service until the action required by the disposition, including reinspection, has been completed or an engineering evaluation has been prepared to justify the intended use of the nonconforming item.

5.2.10 Conditions adverse to quality identified on installed items will be evaluated for operability and functionality. QA-078

5.2.11 Disputes over corrective action are normally resolved by Plant Management. Should this resolution not be satisfactory, the parties may elevate the matter to higher management for resolution.

5.3 Procedures shall provide the following administrative controls:

5.3.1 Unique identification and numbering of conditions adverse to quality.

5.3.2 Preparing and maintaining status reporting of conditions adverse to quality.

5.3.3 Actions to be taken to assure timely corrective action on conditions adverse to quality.

5.4 Procedures which identify and track conditions adverse to quality shall require management review of each report to determine if the condition is significant. For significant conditions adverse to quality, the cause of the condition and the corrective action taken to preclude repetition shall be documented and reported to appropriate levels of management.

5.5 Measures shall be established for review and evaluation of conditions adverse to quality for reportability to the NRC as required by References 4.2 (to the extent not exempted), 4.3, and 4.4, as appropriate.

5.6 The authority to stop work has been assigned to Manager, Nuclear Oversight or Manager, Quality Assurance for any activity being performed by company personnel or contractors which do not conform to established requirements.

5.7 Measures shall be established for the evaluation and trending of conditions adverse to quality. The results of these reviews and analyses are reported to the affected organization and executive management, and are audited by the Quality organization. Adverse trends shall be evaluated and processed in accordance with controlling procedures.

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6.0 DOCUMENTATION

6.1 Procedures which are generated as required by this chapter shall identify the records which are required to implement and document those activities. The records shall be controlled in accordance with Reference 4.6.

7.0 ATTACHMENTS

7.1 None

1.0 PURPOSE

1.1 The purpose of this chapter is to establish requirements for a system of independent oversight activities of quality assurance programs for the South Texas Project (STP).

2.0 SCOPE

2.1 This chapter provides for implementing a program of independent oversight activities which includes audits, assessments, evaluations, performance monitoring, and surveillances to ensure the requirements of the Operations Quality Assurance Program are being properly implemented.

3.0 DEFINITIONS

3.1 None

4.0 REFERENCES

4.1 OQAP Chapter 2.0, Table I

4.2 OQAP Chapter 4.0, Qualification, Training and Certification of Personnel

4.3 OQAP Chapter 7.0, Procurement

4.4 OQAP Chapter 13.0, Control of Conditions Adverse to Quality

4.5 OQAP Chapter 14.0, Records Control

5.0 REQUIREMENTS

5.1 Independent Oversight Activities

5.1.1 Procedures shall be developed to control independent oversight activities. These activities include, but are not limited to, audits, assessments, evaluations, performance monitoring, and surveillances. These activities shall be used to observe and verify that activities are accomplished in accordance with prescribed requirements.

5.2 Audits

5.2.1 A comprehensive audit program in compliance with Reference 4.1 shall be established and implemented by STP Nuclear Operating Company (STPNOC) to verify internal and external quality activity compliance with the Quality Program. The audit program shall assure that applicable elements of the program have been developed, documented, and are effectively implemented and shall provide for reporting and reviewing audit results by appropriate levels of management. These audits shall encompass:

5.2.1.1 The conformance of unit operation to provisions contained within the Technical Specifications and applicable license conditions;

5.2.1.2 The training and qualification of the unit staff;

5.2.1.3 Actions taken to correct deficiencies occurring in equipment, structures, systems, components, or method of operation that affect nuclear safety;

5.2.1.4 The performance of activities required by the Operational Quality Assurance Program to meet the criteria of Appendix B, 10CFR50;

5.2.1.5 The fire protection programmatic controls including the implementing procedures;

5.2.1.6 The fire protection equipment and program implementation utilizing either a qualified offsite licensee fire protection engineer or an outside independent fire protection consultant;

5.2.1.7 The Radiological Environmental Monitoring Program and the results thereof;

5.2.1.8 The OFFSITE DOSE CALCULATION MANUAL and implementing procedures;

5.2.1.9 The PROCESS CONTROL PROGRAM and implementing procedures for processing and packaging of radioactive wastes;

5.2.1.10 The performance of activities required by the Quality Assurance Program for effluent and environmental monitoring; and

5.2.1.11 Other activities and documents as requested by the Senior Management Team or the President and Chief Executive Officer. QA-074, 079

5.2.2 Qualified personnel assigned auditing responsibilities shall be independent of any direct responsibility for the performance of the activities which they audit; shall be experienced or trained commensurate with the scope, complexity, or special nature of the activities to be audited; and shall be qualified in accordance with the requirements of Reference 4.2.

5.2.2.1 An audit team consists of one (or more) qualified person(s). A qualified lead auditor shall be appointed as the audit team leader. The audit team leader shall be responsible for the written plans, checklists, team orientation, audit notification, pre-audit conference, audit performance, post-audit conference, reporting, and follow-up activity to assure corrective action. The audit team leader shall promptly report conditions requiring immediate corrective action to the appropriate management of the audited organization. Other audit findings will be identified to the audited organization at the post-audit conference.

5.2.2.2 Other qualified personnel may assist in the conduct of audits, such as technical specialists or management representatives.

5.2.3 Internal Audits

5.2.3.1 Internal audits shall be conducted by the Quality Department and performed with a frequency commensurate with their safety significance, past performance and regulatory requirements. Audits are scheduled on a nominal biennial frequency, except those audits whose frequency is specifically governed by regulation.

If a decision is made to extend an audit beyond that nominal frequency, the basis for that decision shall be documented. Decisions shall be approved by the Manager, Quality Assurance and notifications made to the President and Chief Executive Officer and the Senior Management Team. QA-074, 079

5.2.3.2 Review of the audit program shall be performed at least semiannually by the Senior Management Team or by a management representative to verify that audits are being accomplished in accordance with the requirements of the Quality Program.

5.2.3.3 Audit results shall be reviewed periodically by the Quality organization for quality trends and overall audit program effectiveness. The results of these reviews shall be reported to appropriate management in periodic summary reports.

5.2.3.4 Audited organizations are responsible for providing timely corrective action including action to prevent recurrence for programmatic problems identified by an audit.

5.2.4 Supplemental audits shall be conducted when:

5.2.4.1 Significant changes are made to the quality assurance program.

5.2.4.2 It is necessary to determine the root cause of problem areas which may impact the effectiveness of the quality assurance program.

5.2.4.3 A systematic, independent assessment of program effectiveness is necessary.

5.2.4.4 Requested by appropriate management.

5.2.5 Audit implementation shall include the following:

5.2.5.1 Written notification to the audited organization of the audit, if an announced audit.

5.2.5.2 Development of an individual audit plan/scope. The audit plan and any necessary reference documents shall be available to the audit team members.

5.2.5.3 A pre-audit and post-audit conference with responsible organizational management.

5.2.5.4 Use of a checklist or procedure as a guide during the performance of the audit.

5.2.5.5 Identifying and documenting conditions adverse to quality.

5.2.5.6 Audit reports shall be prepared and submitted to the audited organization, Senior Management Team, and the President and Chief Executive Officer within thirty days after the post-audit conference. The audit report shall address those items required by Reference 4.1. QA-074, 079

5.2.5.7 Audited organizations provide timely and thorough corrective action and recurrence control to discrepancies identified during the audit. In the event that corrective action cannot be completed within thirty days, the audited organization's response shall include a scheduled date for the corrective action. Earlier dates for corrective action may be established if circumstances dictate.

5.2.5.8 Evaluation of corrective action for conditions adverse to quality and follow-up verification as appropriate.

5.3 Surveillance/Quality Performance Monitoring

5.3.1 Procedures and/or instructions shall be developed to control surveillance/quality performance monitoring activities. Surveillance/quality performance monitoring activities shall be used to observe and verify that activities are accomplished in accordance with prescribed procedures.

5.3.2 Surveillance/quality performance monitoring activities will be performed during refueling outages, startup activities, and normal and off-normal operational activities. Areas to be monitored will be determined based on safety significance, past performance, regulatory requirements, and customer request.

5.3.3 The frequency of surveillance/quality performance monitoring activities is based upon the complexity of the activity, importance of the activity, and severity level of conditions noted during previous oversight activities.

5.3.4 Surveillance/quality performance monitoring results shall be documented and a summary shall be prepared and transmitted to responsible management.

5.4 Assessments/Evaluations

5.4.1 Assessments are conducted on a nominal biennial frequency in accordance with written procedures to assess the Quality organization's implementation of the Operations Quality Assurance Plan.

5.4.1.1 These assessments will be conducted by organizations independent of the activities performed to assure the STPNOC OQAP is being properly implemented.

5.4.1.2 The Senior Management Team shall review the scope and schedule of the assessment.

5.4.1.3 The results of these assessments will be transmitted to the President and Chief Executive Officer and the Senior Management Team.

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5.4.2 Other assessments/evaluations may be performed to verify activities are accomplished in accordance with applicable requirements and prescribed procedures.

5.4.2.1 These assessments/evaluations will be performed on areas based on their safety significance, past performance, regulatory requirements, and customer request.

5.4.2.2 Assessment/evaluation results shall be documented and transmitted to appropriate management.

5.5 An approved oversight plan shall be issued annually to include:

5.5.1 Activities/organizations to receive independent oversight.

5.5.2 Time frame in which the oversight activity will be conducted.

5.6 Conditions adverse to quality identified during an independent oversight activity shall be documented in accordance with Reference 4.4.

5.7 Personnel performing independent oversight activities shall be trained and qualified in accordance with Reference 4.2.

6.0 DOCUMENTATION

6.1 Procedures which are generated as required by this chapter shall identify the records which are required to implement and document those activities. The records shall be controlled in accordance with Reference 4.5.

7.0 ATTACHMENTS

7.1 None

1.0 PURPOSE

1.1 The purpose of this chapter is to prescribe requirements and responsibilities for repair and replacement activities governed by ASME Boiler and Pressure Vessel Code, Section XI, Rules for Inservice Inspection of Nuclear Power Plant Components.

2.0 SCOPE

2.1 This chapter is applicable to examination, repair and replacement activities performed on ASME Class 1, 2, 3, CC, and MC components.

3.0 DEFINITIONS

3.1 None

4.0 REFERENCES

4.1 ASME Code Section XI, Rules for Inservice Inspection of Nuclear Power Plant Components

4.2 OQAP Chapter 14.0, Records Control

4.3 Generic Letter 89-009, ASME Section III Component Replacements

4.4 10CFR50.55a, Codes and Standards

5.0 RESPONSIBILITIES

5.1 The Plant General Manager is responsible for the planning, management, and control of the performance of repairs, replacements and tests.

5.2 The General Manager, Engineering is responsible for developing the repair and replacement program including specifications for design, fabrication, testing, and examination. The General Manager, Engineering is responsible for providing qualified personnel to perform examinations of component repairs and replacements and verifying the requirements of this chapter are implemented.

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6.0 REQUIREMENTS

6.1 Repair and replacement activities required by Reference 4.1 shall be conducted in accordance with written and approved procedures or instructions.

Areas to be addressed include:

6.1.1 Accessibility for component examination, repair or replacement.

6.1.2 Identification of system boundaries and code class for each component.

6.1.3 The method for interfacing with the authorized nuclear inspection agency.

6.1.4 Qualification of nondestructive examination methods.

6.1.5 Qualification requirements for nondestructive examination personnel.

6.1.6 Qualification requirements for welders and welding operators.

6.1.7 Qualification of welding procedures.

6.1.8 Conduct of examinations and inspections.

6.1.9 A component repair or replacement package including installation and test procedures and quality assurance requirements.

6.1.10 Conduct of system pressure and functional tests.

6.1.11 A component replacement package including specifications for design, fabrication and examination as applicable for the replacements.

6.1.12 Preparation, submittal and retention of required records and reports.

6.1.13 Procurement, in accordance with Reference 4.3, of component replacements not available in full compliance with ASME code stamping and documentation requirements.

7.0 DOCUMENTATION

7.1 Procedures which are generated as required by this chapter shall identify the records which are required to implement and document those activities. The records shall be controlled in accordance with Reference 4.2.

8.0 ATTACHMENTS

8.1 None

1.0 PURPOSE

1.1 The purpose of this chapter is to prescribe requirements and responsibilities for the in-service examination and testing programs at the South Texas Project (STP).

2.0 SCOPE

2.1 This chapter applies to the inservice examination and testing of Class 1, 2, 3, CC, and MC pressure retaining components and component supports as specified in Section XI of the ASME Boiler and Pressure Vessel Code, the ASME OM Code, and additional ISI commitments as specified in the UFSAR.

3.0 DEFINITIONS

3.1 None

4.0 REFERENCES

4.1 ASME Code Section XI, Rules for Inservice Inspection of Nuclear Power Plant Components

4.2 10CFR50.55a, Codes and Standards

4.3 OQAP Chapter 4.0, Qualification, Training and Certification of Personnel

4.4 OQAP Chapter 14.0, Records Control

4.5 ASME OM Code

5.0 RESPONSIBILITIES

5.1 The General Manager, Engineering is responsible for developing and implementing the inservice examination and testing programs as required by ASME Code Section XI and ASME OM Code. The General Manager, Engineering is responsible for verifying the implementation of the inservice examination and testing programs through appropriate quality oversight activities, interfacing with the Authorized Inspection Agency, and performance of nondestructive examinations as requested.

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6.0 REQUIREMENTS

6.1 The inservice examination and testing programs consist of plans and implementing procedures for the examination and testing of Class 1, 2, 3, CC, and MC pressure retaining components and their supports and the inservice testing of Class 1, 2, and 3 pumps and valves.

6.1.1 Examination and Testing of Pressure Retaining Components and Component Supports

6.1.1.1 Engineering shall develop plans for examination and testing of Class 1, 2, 3, CC, and MC components and their supports. These plans shall prescribe the requirements for nondestructive examinations and tests and the schedule for their performance.

6.1.1.2 Inspection plans (e.g., specifications, vendor documents, etc.) shall be developed which identify the nature and extent of examination and testing activities including the acceptance criteria which must be met.

6.1.1.3 Procedures shall be developed which provide measures for the performance of activities identified in the plans.

6.1.2 In-service Testing of Pumps and Valves and System Pressure Testing

6.1.2.1 Engineering shall develop the Inservice Testing Program for pumps and valves and the System Pressure Testing Program. These programs shall include the requirements and the schedule for their performance.

6.1.3 Examination and test results shall be evaluated by specified personnel and verified by the Authorized Nuclear Inservice Inspector.

6.1.4 Coordination of involved STP Nuclear Operating Company (STPNOC) departments, including the use of contractors for the performance, documentation and evaluation of inservice inspection activities, shall be controlled by approved procedures.

6.1.5 When contractors are used to perform activities within the scope of this section, their quality assurance program shall be approved by STPNOC.

6.1.6 Exceptions to code examination and testing requirements shall be documented in accordance with Reference 4.2.

6.1.7 Personnel performing examinations and tests shall be qualified as required by Reference 4.1 and Reference 4.3.

6.1.8 Plans and reports for inservice examinations and tests shall be submitted to the appropriate regulatory and enforcement authorities as required by Section XI.

7.0 DOCUMENTATION

7.1 Procedures which are generated as required by this chapter shall identify the records which are required to implement and document those activities. The records shall be controlled in accordance with Reference 4.4.

8.0 ATTACHMENTS

8.1 None

1.0 PURPOSE

1.1 The purpose of this chapter is to describe the administrative controls (as previously documented in the Technical Specifications) as related to quality assurance for the South Texas Project (STP).

2.0 SCOPE

2.1 STP Nuclear Operating Company (STPNOC), as licensee, has the Quality responsibility for administrative controls of the STP.

3.0 DEFINITIONS

3.1 None

4.0 REFERENCES

4.1 OQAP Chapter 2.0, Table I

4.2 STP Technical Specifications

4.3 Updated Final Safety Analysis Report

4.4 OQAP Chapter 8, Control and Issuance of Documents

4.5 OQAP Chapter 14, Records Control

4.6 OQAP Chapter 15, Quality Oversight Activities

4.7 10CFR72, Licensing Requirements for the Independent Storage of Spent Nuclear Fuel, High-Level Radioactive Waste, and Reactor-Related Greater Than Class C Waste

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5.0 REQUIREMENTS

5.1 The Plant Operations Review Committee (PORC) shall function to advise the Plant General Manager on all matters related to nuclear safety.

5.1.1 The PORC shall be composed of six members, who shall be appointed in writing by the Plant General Manager from senior experienced onsite individuals, at the manager level or equivalent, representing each of the following disciplines: engineering, operations, chemistry, health physics, quality assurance/quality control and maintenance. The quality assurance/quality control representatives shall not be appointed as PORC Chairman.

5.1.2 The PORC Chairman shall be appointed in writing from among those members by the Plant General Manager. One of the members shall meet the requirements of Regulatory Guide 1.8 (Personnel Selection and Training – Revision 1-R), Radiation Protection Manager.

5.1.3 All alternate members shall be appointed in writing by the Plant General Manager to serve on a temporary basis; however, no more than two alternates shall participate as voting members in PORC activities at any one time.

5.1.4 The PORC shall meet at least once per calendar month and as convened by the PORC Chairman or his designated alternate.

5.1.5 The quorum of the PORC necessary for the performance of the PORC responsibility and authority provisions shall consist of the Chairman or his designated alternate and three other members including alternates.

5.1.6 The PORC shall be responsible for:

5.1.6.1 Review of all safety-related station administrative procedures and changes thereto.

5.1.6.2 Review of safety evaluations for (1) procedures, (2) changes to procedures, structures, components, or systems, and (3) tests or experiments completed under the provisions of 10CFR50.59 to verify that such actions did not require prior Nuclear Regulatory Commission (NRC) approval.

5.1.6.3 Review of proposed (1) procedures, (2) changes to procedures, structures, components, or systems, and (3) tests or experiments completed under the provisions of 10CFR50.59 which may require prior NRC approval.

5.1.6.4 Review of all required programs by Technical Specification 6.8 and the Technical Requirements Manual 6.8 and changes thereto.

5.1.6.5 Review of all proposed changes to the Technical Specifications or the Operating License.

5.1.6.6 Review of all REPORTABLE EVENTS.

5.1.6.7 Review of reports of significant operating abnormalities or deviations from normal and expected performance of plant equipment or systems that affect nuclear safety.

5.1.6.8 Review of reports of unanticipated deficiencies in the design or operation of structures, systems, or components that affect nuclear safety.

5.1.6.9 Review of the Security Plan and implementing procedures and changes thereto.

5.1.6.10 Review of the Emergency Plan and implementing procedures and changes thereto.

5.1.6.11 Review of the PROCESS CONTROL PROGRAM and implementing procedures and changes thereto.

5.1.6.12 Review of the OFFSITE DOSE CALCULATION MANUAL and implementing procedures and changes thereto.

5.1.6.13 Performance of special reviews, investigations, or analyses and reports thereon as requested by the Plant General Manager or the Senior Management Team (SMT).

5.1.6.14 Review of any accidental, unplanned, or uncontrolled release of liquid or gaseous radioactive effluents to the offsite environment and groundwater contamination events resulting in offsite notifications. The review shall include the preparation of reports covering evaluation, recommendations, and disposition of the corrective action(s) to prevent recurrence and the forwarding of these reports to the Plant General Manager and to the SMT.

5.1.6.15 Reports of violations of codes, regulations, orders, Technical Specifications, or Operating License requirements having nuclear safety significance or reports of abnormal degradation of systems designed to contain radioactive material.

5.1.6.16 Review of the Fire Protection Program, quality-related implementing procedures and changes thereto.

5.1.6.17 Review of activities related to the Independent Spent Fuel Storage Installation and the Dry Cask Storage System pursuant to the provisions of 10CFR72.

5.1.7 The PORC shall recommend in writing to the Plant General Manager approval or disapproval of items considered under section 5.1.6.1 through 5.1.6.5 prior to their implementation, and items considered under sections 5.1.6.9 through 5.1.6.12 and 5.1.6.17. QA-075

5.1.8 The PORC shall render determinations in writing with regard to whether or not each item considered under sections 5.1.6.1 through 5.1.6.5 and 5.1.6.15 may require prior NRC approval under the provisions of 10CFR50.59.

5.1.9 The PORC shall provide written notification within 24 hours to the President and Chief Executive Officer and the Senior Management Team of disagreement between the PORC and the Plant General Manager; however, the Plant General Manager shall have the responsibility for resolution of such disagreements pursuant to Technical Specification 6.1.1. QA-074, 079

5.1.10 The PORC shall maintain written minutes of each PORC meeting that, at a minimum, document the results of all PORC activities performed under the responsibility provisions of this chapter. Copies shall be provided to the President and Chief Executive Officer and the appropriate organizational unit. QA-074, 079

5.2 Appropriate organizational units shall function to provide independent review of designated activities as required by ANSI N18.7-1976/ANS-3.2, Sections 4.3, 4.3.1, 4.3.3, and 4.3.4.

5.2.1 Staff personnel required to perform these independent reviews shall collectively have the experience and competence to review operational activities in the following areas:

5.2.1.1 Nuclear power plant operations;

5.2.1.2 Nuclear engineering;

5.2.1.3 Chemistry and radiochemistry;

5.2.1.4 Metallurgy;

5.2.1.5 Instrumentation and control;

5.2.1.6 Radiological safety;

5.2.1.7 Mechanical and electrical engineering;

5.2.1.8 Civil engineering;

5.2.1.9 Training;

5.2.1.10 Nuclear assurance;

5.2.1.11 Nuclear licensing;

5.2.1.12 Plant security, and;

5.2.1.13 Environmental impact

Note: If sufficient expertise is not available from within the STPNOC for the areas noted above, appropriate expertise shall be brought to bear in the independent reviews through the use of outside consultants.

5.2.2 The Senior Management Team shall functionally report to and advise the President and Chief Executive Officer on those areas of responsibility specified in sections 5.2.3 and 5.2.4.

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5.2.3 Appropriate organizational units shall be responsible for the review of:

5.2.3.1 The safety evaluations for: (1) changes to procedures, equipment, or systems; and (2) tests or experiments completed under the provision of 10CFR50.59, to verify that such actions did not require prior NRC approval;

5.2.3.2 Proposed changes to procedures, equipment, or systems which require prior NRC approval under the provisions of 10CFR50.59;

5.2.3.3 Proposed tests or experiments which require prior NRC approval under the provisions of 10CFR50.59;

5.2.3.4 Proposed changes to Technical Specifications or the Operating License;

5.2.3.5 Violations of Codes, regulations, orders, Technical Specifications, license requirements, or of internal procedures or instructions having nuclear safety significance;

5.2.3.6 Significant operating abnormalities or deviations from normal and expected performance of unit equipment that affect nuclear safety;

5.2.3.7 All REPORTABLE EVENTS;

5.2.3.8 All recognized indications of an unanticipated deficiency in some aspect of design or operation of structures, systems, or components that could affect nuclear safety; and

5.2.3.9 Reports and meeting minutes of the PORC.

5.2.3.10 Review of activities related to the Independent Spent Fuel Storage Installation and the Dry Cask Storage System pursuant to the provisions of 10CFR72. QA-075

5.2.4 Reports of audits of unit activities shall be reviewed by the Senior Management Team.

5.2.5 Records of organizational unit independent review activities shall be prepared, approved, and distributed as indicated below:

5.2.5.1 Reports of organizational unit independent reviews encompassed by sections 5.2.3 and 5.2.4 shall be prepared, approved, and forwarded to the President and Chief Executive Officer and the Senior Management Team. QA-074, 079

5.3 Technical Review and Control

5.3.1 Activities that affect nuclear safety shall be conducted as follows:

5.3.1.1 Procedures required by Technical Specification 6.8 and Technical Requirements Manual 6.8, and other procedures that affect nuclear safety, and changes thereto, shall be prepared, reviewed, and approved. Each such procedure, or change thereto, shall be reviewed by an individual/group other than the individual/group who prepared the procedure, or change thereto, but who may be from the same organization as the individual/group who prepared the procedure, or change thereto. Procedures other than station administrative procedures shall be approved by the Plant General Manager or the head of the responsible department prior to implementation. The Plant General Manager shall approve station administrative procedures, security plan implementing procedures, and emergency plan implementing procedures. Temporary changes to procedures, which clearly do not change the intent of the approved procedures, shall be approved prior to implementation by two members of the plant staff, at least one of whom holds a Senior Reactor Operator's License. Changes to procedures that may involve a change to the intent of the original procedure shall be approved by the individual authorized to approve the procedure prior to implementation of the change.

5.3.1.2 Proposed changes or modifications to safety-related structures, systems, and components shall be reviewed as designated by the Plant General Manager. Each such modification shall be reviewed by an individual/group other than the individual/group who designed the modification, but who may be from the same organization as the individual/group who designed the modification. Proposed modifications to safety-related structures, systems, and components shall be approved by the Plant General Manager prior to implementation.

5.3.1.3 Proposed tests and experiments that affect nuclear safety and that are not addressed in the Final Safety Analysis Report shall be prepared, reviewed, and approved prior to implementation. Each such test or experiment shall be reviewed by an individual/group other than the individual/group who prepared the test or experiment but who may be from the same organization as the individual/group who prepared the test or experiment. Proposed tests and experiments shall be approved by the Plant General Manager.

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5.3.1.4 Individuals responsible for reviews performed in accordance with sections 5.3.1.1, 5.3.1.2, and 5.3.1.3 shall be members of the plant management staff previously designated by the Plant General Manager. Each review shall include a determination of whether or not additional, cross-disciplinary review is necessary. If deemed necessary, such review shall be performed by qualified personnel of the appropriate discipline.

5.3.1.5 Each review will include a determination of whether or not prior NRC approval is involved pursuant to 10CFR50.59. NRC approval of items will be obtained prior to Plant General Manager approval for implementation. QA-074

5.3.2 Records of the above activities shall be provided to the Plant General Manager, PORC, and/or the appropriate organizational unit as necessary for required reviews.

6.0 DOCUMENTATION

6.1 Procedures which are generated as required by this chapter shall identify the records which are required to implement and document those activities. The records shall be controlled in accordance with the requirements of this chapter and Reference 4.4.

7.0 ATTACHMENTS

7.1 None

1.0 PURPOSE

1.1 The purpose of this chapter is to supplement the basic policies established and documented as stated in the previously approved 10CFR50, Appendix B Operations Quality Assurance Plan (OQAP) to include specific requirements applicable to the design, construction, and operation of the Independent Spent Fuel Storage Installation (ISFSI) and Dry Cask Storage System (DCSS) at the South Texas Project (STP).

1.2 The objective of this chapter is to maintain administrative control over activities relative to the important to safety structures, systems, equipment, and components regulated by 10 CFR Part 72.

2.0 SCOPE

2.1 The policies and procedures identified within this chapter regarding the ISFSI will form the basis for plant-life operation of the STP ISFSI. The responsibility and authority for the establishment and execution of the ISFSI Quality Plan for the operation of the STP ISFSI will be retained by STP Nuclear Operating Company (STPNOC) and described in the OQAP.

2.2 This program is designed to meet the requirements of 10 CFR Part 72, Subpart G for a quality assurance program.

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3.0 DEFINITIONS

3.1 Important to Safety (ITS) Structures, Systems, and Components (SSCs) - those features of the ISFSI whose functions are:

3.1.1 to maintain the conditions required to store spent fuel safely;

3.1.2 to prevent damage to the spent fuel container during handling and storage; and

3.1.3 to provide reasonable assurance that spent fuel can be received, handled, packaged, stored, and retrieved without undue risk to the health and safety of the public.

3.2 Dry Cask Storage Quality Categories - Regulatory Guide 7.10 presents a method of classification of various components in transportation packaging (10CFR71) and dry cask storage systems (10CFR72). Each component is first identified as either Important to Safety (ITS) or Not Important to Safety" (NITS). Then, components that are considered ITS are further categorized into one of three classification categories (A, B, or C), depending on that component's importance to safety.

3.3 Category A, Category B, and Category C - as described below:

Classification Category	Importance to Safety	Description
A	Critical to Safe Operation	Category A items include structures, components, and systems whose failure could directly result in a condition adversely affecting public health and safety. The failure of a single item could cause loss of primary containment leading to release of radioactive material, loss of shielding, or unsafe geometry compromising criticality control.
B	Major Impact on Safety	Category B items include structures, components, and systems whose failure or malfunction could indirectly result in a condition adversely affecting public health and safety. The failure of a Category B item, in conjunction with the failure of an additional item, could result in an unsafe condition.
C	Minor Impact on Safety	Category C items include structures, components, and systems whose failure or malfunction would not significantly reduce the packaging effectiveness and would not be likely to create a situation adversely affecting public health and safety.

3.4 Basic, or Fundamental, Safety Criteria - the following are considered to be the basic nuclear safety criteria for design of the ISFSI (NUREG-1567):

3.4.1 Maintain sub-criticality,

3.4.2 Prevent release of radioactive material above acceptable amounts,

3.4.3 Ensure radiation rates and doses do not exceed acceptable levels,

3.4.4 Maintain retrievability of the stored radioactive materials.

3.5 Certificate of Compliance (C of C) - the certificate issued by the Commission that approves the design of a spent fuel storage cask in accordance with the provisions of 10CFR72, Subpart L.

4.0 REFERENCES

4.1 10CFR72, Licensing Requirements For The Independent Storage of Spent Nuclear Fuel And High-Level Radioactive Waste, and Reactor Related Greater Than Class C Waste - Subpart G, Quality Assurance.

4.2 ASME B&PV Code, Sections III, V, and IX (as required by DCSS Certificate of Compliance/FSAR)

4.3 Regulatory Guide 7.10, Establishing Quality Assurance Programs for Packaging used in Transport of Radioactive Material

4.4 10CFR50.55a, Codes and Standards

4.5 10CFR20, Appendix G.

4.6 10CFR72.48, Changes, Tests and Experiments

4.7 SNT-TC-1A, American Society for Nondestructive Testing; Recommended Practice

4.8 ANSI/ASNT CP-189, ANST Standard for Qualification and Certification of Nondestructive Testing Personnel

4.9 NUREG/CR-6407, Classification of Transportation Packaging and Dry Spent Fuel Storage System Components According to Importance to Safety

4.10 NOC-AE-12002873, Independent Spent Fuel Storage Installation (STI # 33563580)

4.11 NUREG 1567, Standard Review Plan for Spent Fuel Dry Storage Facilities

5.0 REQUIREMENTS

5.1 DCSS/ISFSI Organization

5.1.1 The responsibility for implementing quality program requirements for activities associated with the ISFSI and DCSS is described in the OQAP Chapter 1.0, Organization.

5.2 DCSS/ISFSI Quality Program

5.2.1 The requirements described in the OQAP Chapter 2.0, Program Description apply to all DCSS and ISFSI construction and operation activity and as specified below.

5.2.2 The determination of the ISFSI and dry storage and transport systems, structures, and components important to safety is in accordance with 10CFR71 Subpart H and 10CFR72 Subpart G, and includes those:

5.2.2.1 Which comprise or are necessary to maintain the conditions required to store spent fuel or high-level radioactive waste safely,

5.2.2.2 Which are necessary to prevent damage to the spent fuel or the high-level radioactive waste container during handling, storage, or transport, or

5.2.2.3 Which comprise or are necessary to provide reasonable assurance that spent fuel can be received, handled, packaged, stored, and retrieved without undue risk to the health and safety of the public.

5.2.3 Quality assurance requirements apply to design, purchase, fabrication, handling, shipping, storing, cleaning, assembly, inspection, testing, operation, maintenance, repair, modification of structures, systems, and components, and decommissioning activities that are important to safety as defined by the DCSS Certificate of Compliance (C of C) and the DCSS Final Safety Analysis Report (FSAR).

5.2.4 The OQAP will provide the required control over activities affecting the quality of the identified structures, systems, and components to an extent commensurate with the importance to safety and, as necessary, to ensure conformance with the approved design of the ISFSI and DCSS.

5.2.5 STP will ensure that activities affecting quality are accomplished under suitably controlled conditions which include the use of appropriate equipment; suitable environmental conditions for accomplishing the activity, and assurance that pre-requisites for a given activity have been satisfied.

5.2.6 The need for special controls, processes, test equipment, tools and skills will be evaluated and resources will be provided to attain the required quality and the need for verification of quality by inspection and test.

5.2.7 The degree of application of requirements and procedures will be based on the following considerations concerning the complexity and proposed use of the structures, systems, or components.

5.2.7.1 The impact of malfunction or failure of the item on safety;

5.2.7.2 The design and fabrication complexity or uniqueness of the item;

5.2.7.3 The need for special controls and surveillance over processes and equipment;

5.2.7.4 The degree to which functional compliance can be demonstrated by inspection or test; and

5.2.7.5 The quality history and degree of standardization of the item.

5.2.8 Category A items are those items that are critical to safe operation and include structures, components, and systems whose failure could directly result in a condition adversely affecting public health and safety. The failure of a single item could cause loss of primary containment leading to release of radioactive material, loss of shielding, or unsafe geometry compromising criticality control.

5.2.9 Category B items have a major impact on safety and include structures, components, and systems whose failure or malfunction could indirectly result in a condition adversely affecting public health and safety. The failure of a Category B item, in conjunction with the failure of an additional item, could result in an unsafe condition.

5.2.10 Category C items have a minor impact on safety and include structures, components, and systems whose failure or malfunction would not significantly reduce the packaging effectiveness and would not be likely to create a situation adversely affecting public health and safety.

5.3 Design Control

5.3.1 Design Control activities are performed in accordance with OQAP Chapter 6.0, Design and Modification Control and as specified below.

5.3.2 STP will control DCSS and ISFSI design bases documents received from vendors and developed internally.

5.3.3 Design changes, tests and experiments must be reviewed pursuant to the requirements 10CFR72.48. The C of C holder may initiate 10CFR72.48 activities independent of station activities.

5.3.4 Design basis documents applicable to the ISFSI and DCSS will be included in the STP document control system, Master Equipment Database (MED), and Master Parts List (MPL) as applicable.

5.4 Procurement Document Control

5.4.1 Procurement Control activities are performed in accordance with OQAP Chapter 7.0, Procurement and as specified below.

5.4.2 Procurement Document Control applies to documents employed to procure important to safety materials, parts, components, and services required to modify, maintain, repair, test, inspect, or operate as a result of, or in support of, the 10CFR72 licensed facilities at the STP relating to the ISFSI and DCSS. STPNOC controls procurement documents by written procedures that establish requirements and assign responsibility for measures to ensure that applicable regulatory requirements, design bases, and other requirements necessary to ensure quality are included in or invoked by reference in documents employed for the procurement of important to safety materials, parts, components, and services.

5.4.3 Procurement of SSCs applicable to the ISFSI and DCSS will meet requirements of 10CFR72 Subpart G. The graded approach to quality will be used in the quality classification of SSCs for use on the dry cask storage systems.

5.4.4 Originating and reviewing organizations shall require that the following be included or invoked by reference in procurement documents for important to safety items or services, as appropriate:

5.4.4.1 The supplier shall provide a description of a 10CFR72, Subpart G quality assurance program, or;

5.4.4.2 A 10CFR50, Appendix B or a 10CFR71, Subpart H quality assurance program that meets 10CFR72, Subpart G requirements and the recordkeeping requirements of 10CFR72.174.

5.4.4.3 10CFR21 is applicable to Category A.

5.4.5 Vendors supplying important to safety materials, parts, components, and services required to modify, maintain, repair, test, inspect, or operate as a result of, or in support of, the 10CFR72 licensed facilities at the STP will be evaluated for inclusion on the Approved Vendor List as required by OQAP Chapter 7.0, Procurement.

5.4.6 Vendors supplying important to safety materials, parts, components, and services required to modify, maintain, repair, test, inspect, or operate as a result of, or in support of, the 10CFR72 licensed facilities at the STP will be evaluated by Quality on an annual basis.

5.4.7 Vendors supplying important to safety materials, parts, components, and services required to modify, maintain, repair, test, inspect, or operate as a result of, or in support of, the 10CFR72 licensed facilities at the STP will be audited on a triennial basis.

5.5 Instructions, Procedures, and Drawings

5.5.1 Document control activities are performed in accordance with OQAP Chapter 8.0, Control and Issuance of Documents and as specified below.

5.5.2 Where the OQAP addresses control of Safety Related documents, Important to Safety Category A & B documents are to be included.

5.5.3 These requirements are applicable to documents, which control activities Important to Safety for design, licensing, construction, operation, testing, maintenance, and modification of the ISFSI and DCSS. These documents include, but are not limited to, instructions, procedures, specifications, drawings, vendor manuals, status registers (such as drawing lists, equipment list), procurement documents, design documents, design change requests, as-built documents, non-conformance and deficiency reports, and Certificate Holder's Final Safety Analysis Report.

5.6 Control of Purchased Materials, Equipment, and Services

5.6.1 Purchased Materials, Equipment and Service control activities are performed in accordance with OQAP Chapter 7.0, Procurement. Capability to comply with the requirements of 10CFR72, Subpart G will be maintained.

5.7 Identification and Control of Materials, Parts and Components

5.7.1 Material, Part and Component control activities are performed in accordance with OQAP Chapter 9.0, Control of Material. Capability to comply with the requirements of 10CFR72, Subpart G will be maintained.

5.8 Control of Special Processes

5.8.1 Special Processes are controlled in accordance with OQAP Chapter 5.0, Maintenance, Installation of Modifications, and Related Activities, Section 5.5. Capability to comply with the requirements of 10CFR72, Subpart G will be maintained.

5.8.2 Nondestructive examinations associated with DCS activities will be evaluated by Engineering Department personnel independent of the activity. When ASME Section V is referenced personnel will be qualified in accordance with SNT-TC-1A and ANSI/ASNT CP-189.

5.9 Inspection

5.9.1 Inspection is controlled in accordance with OQAP Chapter 10.0, Inspection. Capability to comply with the requirements of 10CFR72, Subpart G will be maintained.

5.9.2 Inspections related to DCSS/ISFSI activities shall be in accordance with the DCSS C of C and 10CFR72, Subpart G requirements.

5.9.3 NDE performed on DCSS shall be in compliance with referenced ASME Boiler & Pressure Vessel Code, Sections III and Section V, Articles 6, 9 and 10 or as specified in the applicable C of C and FSAR.

5.10 Inspection, Test and Operating Status

5.10.1 Inspection, Test and Operating Status is controlled in accordance with OQAP Chapters 3.0, Conduct of Operations, 5.0, Maintenance, Installation of Modifications, and Related Activities, 10.0, Inspection, and 11.0, Test Control. Capability to comply with the requirements of 10CFR72, Subpart G will be maintained.

5.10.2 Measures shall be established to ensure that necessary inspections of items meet the requirements and acceptance limits contained in the DCSS (C of C/FSAR) and have not been inadvertently bypassed or that SSC are not inadvertently operated outside of specified requirements.

5.10.3 Personnel performing examinations and tests shall be qualified as required by OQAP, Chapter 4.0 Qualification, Training and Certification of personnel.

5.10.4 The 10CFR72 C of C, for the storage systems in use at the STP ISFSI establishes technical specifications that ensure the systems are loaded, transferred, and maintained functional for safe storage.

5.10.5 Sequence Change Control - Procedures will include the control of the sequence of required tests, inspections, and other operations when important to safety. To change these controls, the individual procedure must be changed, which requires the same review and approval cycle as that which authorized the original procedure.

5.11 Test Control

5.11.1 Tests are controlled in accordance with OQAP Chapter 11.0, Test Control. Capability to comply with the requirements of 10CFR72, Subpart G will be maintained.

5.11.2 Provisions will be established for the performance of DCS and ISFSI surveillance testing to ensure that the necessary quality of systems and components is maintained, that facility operations are within the safety limits, and that limiting conditions of operation can be met.

5.11.3 The testing frequency will be at least as frequent as prescribed in the Technical Specifications for the 10CFR72 C of C for DCSS used at the STPEGS.

5.12 Control of Measuring and Test Equipment

5.12.1 M&TE is controlled in accordance with OQAP Chapter 12.0, Instrument and Calibration Control. Capability to comply with the requirements of 10CFR72, Subpart G will be maintained.

5.13 Handling, Storage, and Shipping

5.13.1 Handling, Storage, and Shipping is controlled in accordance with OQAP Chapter 9.0, Control of Material. Capability to comply with the requirements of 10CFR72, Subpart G will be maintained.

5.13.2 Measures will be established to control the handling of licensed radioactive materials in accordance with 10CFR72.

5.13.3 This program includes the storage of spent fuel, high level radioactive waste, and reactor-related Greater than Class C waste. When this material is stored in the facility licensed under 10CFR50, the OQAP applies. When this material is stored in the portion of the facility licensed under 10CFR72 (the ISFSI), 10CFR72, Subpart G quality assurance requirements apply.

5.14 Records

5.14.1 Record control is in accordance with OQAP Chapter 14.0, Records Control. Capability to comply with the requirements of 10CFR72, Subpart G will be maintained.

5.14.2 Records include, but are not limited to, those pertaining to the design, fabrication, erection, testing, maintenance, and use of structures, systems, and components important to safety and are required to be maintained by or under the control of the licensee or certificate holder until the NRC terminates the license or C of C as required by 10CFR72.174.

5.14.3 The term lifetime record is applicable to both the 10CFR50 and 10CFR72 licensed facilities at the STPEGS. In the case where lifetime records are applicable to both license types, the record will be maintained until the termination of the last license.

5.14.4 Records of the following activities performed in support of or as required for the ISFSI and/or DCSS shall be retained for the duration of the 10CFR72 licensed facility.

5.14.4.1 Record and drawing changes reflecting facility design modifications made to systems and equipment described in the Final Safety Analysis Report.

5.14.4.2 Records of new and irradiated fuel inventory, fuel transfers and assembly burnup histories.

5.14.4.3 Records of facility radiation and contamination surveys.

5.14.4.4 Records of radiation exposure for all individuals for whom monitoring was required.

5.14.4.5 Records of gaseous and liquid radioactive material released to the environment.

5.14.4.6 Records of training and qualification for members of the plant staff.

5.14.4.7 Records of in-service inspections performed pursuant to the Technical Specifications.

5.14.4.8 Records of Quality Assurance activities required by the OQAP.

5.14.4.9 Records of reviews performed for changes made to procedures or equipment or reviews for tests and experiments pursuant to 10CFR72.48.

5.14.4.10 Records of reviews performed pursuant to 10CFR72.212.

5.14.4.11 Records of meetings of the PORC.

5.14.4.12 Records of results of analyses required by the radiological environmental monitoring program.

5.14.4.13 Records of reviews performed for changes made to the Offsite Dose Assessment Manual and the Process Control Program.

5.14.4.14 Licensed radioactive waste disposal records.

5.15 Nonconforming Items

5.15.1 Control of conditions adverse to quality is covered in OQAP Chapter 13.0, Control of Conditions Adverse to Quality. Capability to comply with the requirements of 10CFR72, Subpart G will be maintained.

5.15.2 The Certificate Holder shall address any fabrication nonconformances identified that require NRC approval.

5.16 Corrective Action

5.16.1 Corrective Action is covered throughout the OQAP, in Chapter 13.0, Control of Conditions Adverse to Quality and others. Capability to comply with the requirements of 10CFR72, Subpart G will be maintained.

5.17 Audits

5.17.1 Audits are covered in OQAP Chapter 15.0, Quality Oversight Activities and as specified below.

5.17.2 Audits of DCSS/ISFSI important to safety functions will be performed on a nominal biennial frequency to ensure the requirements of the 10CFR72 licensed ISFSI operation provisions contained within the DCSS Certificate of Compliance for the storage system(s) in use and applicable license conditions are maintained.

6.0 DOCUMENTATION

6.1 Procedures which are generated as required by this procedure shall identify the records which are required to implement and document those activities. The records shall be controlled in accordance with this Chapter 20.0, Dry Cask Storage System and Independent Spent Fuel Storage Installation, Section 5.14 and Chapter 14.0, Records Control.

7.0 ATTACHMENTS

7.1 None