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ABWR Corrective Action Program			
Quality	Non-Safety-Related	Usage: Referenced	Effective Date: 06/21/2012

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PREPARER	REVIEWER	USER	COGNIZANT DEPT.

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1.0 Purpose and Scope

1.1 This procedure provides both a Corrective Action and an Action Tracking mechanism to promptly identify, control, document, classify and correct Conditions for STP 3&4 licensing, engineering, procurement, and construction activities, until issuance of the 10 CFR 52.103(g) finding by the Nuclear Regulatory Commission.

2.0 Definitions

2.1 ACAP Condition Review Group (CRG) – A designated management group that provides oversight of the ACAP including performance monitoring and instituting changes as needed.

2.2 Corrective Actions - Actions that are directly related to correction or resolution of a Condition Adverse to Quality. A Corrective Action is any appropriate measure applied or taken to resolve the Condition, or reduce the probability of recurrence of the Condition.

2.3 Apparent Cause Evaluator – Any person assigned to perform an investigation of sufficient depth to enable identification of event specifics, the Apparent Cause and Corrective Actions that are to be applied to reduce the probability of, but not necessarily prevent, recurrence of the Condition.

2.4 Root Cause Evaluator – Any person assigned to perform a formal investigation of sufficient depth to enable identification of event specifics, the Root Cause and Corrective Actions that are to be applied to prevent recurrence

2.5 CAP Supervisor – Those individuals whose organizational responsibilities, leadership capabilities and experience warrant being assigned the CAP Supervisor Role within the ACAP.

2.6 Causes – The three categories of causes are:

2.6.1 Apparent Cause(s): – The most probable cause of an event or undesirable situation based upon the preponderance of evidence.

2.6.2 Root Cause(s) – The most basic reason or reasons for an event, deficiency or failure which, if corrected, will prevent recurrence.

2.6.3 Contributing Cause(s) – Factor(s) that increased the severity of an event, but did not have to be present for the event to occur.

2.7 Cause Determination

2.7.1 Apparent Cause Evaluation (ACE): - An investigation of sufficient depth to enable identification of event specifics, the Apparent Cause and Corrective Actions that are applied to reduce the probability of, but not necessarily prevent recurrence of the Condition.

2.7.2 Root Cause Evaluation / Investigation (RCE): - A formal investigation to identify the fundamental cause(s).

NOTE

- The terms "Condition" and "Problem" are used interchangeably within this procedure.
- For the purposes of this procedure, adverse conditions associated with regulated activities outside of the bounds of the STP 3&4 Quality Assurance Program Description (QAPD) (e.g. Other Parts from the Code of Federal Regulations (CFR), Environmental Protection Agency (EPA) regulations, Occupational Safety and Health Administration (OSHA) regulations etc) may be classified as Conditions Adverse to Quality (CAQ) or Significant Conditions Adverse to Quality (SCAQ) to ensure that they are resolved effectively.

2.8 Condition - A situation, issue, occurrence, observation, task, failure, malfunction, deficiency, defect or non-conformance related to an item or activity that requires further review, evaluation or monitoring. This includes items discovered by STP Units 3 & 4 Project personnel as part of their oversight of EPC company activities. Conditions are classified as:

2.8.1 Condition Adverse to Quality (CAQ) – This is an all inclusive term used in reference to any failure, malfunction, deficiency, defective item or a deficiency in characteristic, documentation, or procedure that renders the quality of the item or activity unacceptable or indeterminate.

- Condition Adverse to Quality-(no ACE required) - A Condition Adverse to Quality or other Condition with low risk to the safe construction or operation of the plant that warrants correcting and trending. These CAQ's are events that require documentation of action(s) taken to correct/remediate the Condition. (Unacceptable recurrences of CAQ (no ACE required) Conditions are identified by trending and addressed by a SCAQ CR).

- Condition Adverse to Quality (ACE required) - A Condition of sufficient Risk to the construction or safe, reliable operation of the plant that warrants a determination of the Apparent Cause, evaluation of Extent of Condition, and Corrective Actions. Corrective Actions are applied to reduce the probability of, but not necessarily prevent, recurrence of the Condition. (Unacceptable recurrences of CAQ (ACE required) Conditions are identified by trending and addressed by a SCAQ CR).

2.8.2 Significant Condition Adverse to Quality (SCAQ) - A significant condition adverse to quality is one which, if uncorrected, could have a serious effect on safety or operability.

2.8.3 Condition Not Adverse to Quality (CNAQ) - A Condition, problem or task associated with items and activities outside the scope of the QAPD that warrant evaluation, correction or monitoring to ensure completion.

2.9 Event Code – One of a predefined set of values to assist with categorizing and trending.

2.10 Foreign Ownership Control and Domination (FOCD) Event – An event or condition that involves a potential for a failure to comply with the requirements of 10CFR50.38, where decision making may need to be elevated to assure that U.S. control is exercised by appropriate levels of management in order to negate the potential for FOCD. (COLA, Part 2, Chapter 1.D)

3.0 Responsibilities

3.1 Originators are responsible for:

3.1.1 Documenting Conditions in ACAP or contacting a supervisor or other staff member with ACAP access for assistance in documenting the condition. If the documenting the condition is accomplished by someone other than the individual that identifies the condition the individual entering the condition enters the name of the individual identifying the condition comments or other suitable location.

3.1.2 Providing sufficient information in ACAP so the issue is clear to the reader/reviewer

3.1.3 Determining the initial Condition classification

3.1.4 Notifying his/her supervisor of Conditions which have potential for impact on STP Units 1 & 2

3.1.5 Identifying potentially reportable Conditions to supervision

3.1.6 Determining initial event codes

3.2 CAP Supervisors are responsible for the following:

3.2.1 Review of the Condition

3.2.2 Ensuring the Condition description accurately describes the condition identified

3.2.3 Validation of the Condition

3.2.4 Validation of the classification and event code

3.2.5 Determining the initial cause codes

3.2.6 Communication with STP 3&4 Regulatory Affairs personnel for any potentially reportable regulatory Condition that applies to STP 3 & 4

3.2.7 Communications with STP 3 & 4 regulatory Affairs personnel for any conditions that may impact STP Units 1 & 2

3.2.8 Determining the appropriate Condition Owner and requesting acceptance of ownership based on the identified condition

3.2.9 Determining if an evaluation is necessary

3.3 Condition Owners are responsible for the following:

3.3.1 Accepting ownership of Conditions identified in their area of authority.

3.3.2 Obtaining an understanding of the identified condition from the originator as necessary

3.3.3 Ensuring an Action or Actions, as necessary, is determined and assigned to resolve the Condition described and the action is entered in the database in a timely manner.

3.3.4 Ensuring Corrective Actions identified completely address the described Condition.

3.3.5 Validating Condition classifications and obtaining authorization from the CRG for downgrade of a Condition Adverse to Quality.

3.3.6 Providing Evaluators when necessary

3.3.7 Assigning individuals to perform ACE and RCE evaluations

3.3.8 Assigning Action Owners from within their organization and requesting Action Owner assignments outside of their organization

3.3.9 Timeliness of any investigation/evaluation and resulting corrective actions

3.3.10 Ensuring compensatory actions are in place to control the Condition Adverse to Quality as applicable and removals of such actions once permanent corrective actions are in place.

3.3.11 Initial review and approval of cause evaluations, as required

3.3.12 Ensuring actions are completed in a timely manner

3.3.13 Approving due date extensions for CAQ level conditions and obtaining CRG approval for due date extensions for SCAQ level conditions.

3.3.14 Determining final event and cause codes

3.4 Action Owners are responsible for the following:

3.4.1 Implementation of assigned actions

NOTE

Action Completion Date is the date the action is actually completed. It is NOT the date the electronic database is updated.

3.4.2 Completion of actions as assigned.

3.4.3 Ensuring the ACAP electronic record is updated in a timely manner following action completion; i.e., closing the action in the database as soon as practical after the action is complete.

3.4.4 Entering explanatory text in the "Owner Comments" or "General Comments" fields of the "Actions" page if the database is updated on a date different from the date the action is completed.

3.4.5 Ensuring that sufficient data is entered in the comments fields to ensure a clear understanding of how the action was completed.

3.4.6 Obtaining Condition Owner approval for any changes in the scope, intent or implementing date.

3.4.7 Entering explanatory text in the "Owner Comments" or "General Comments" fields of the "Actions" page if original due dates are extended.

3.5 Units 3 & 4 Regulatory Affairs is responsible for completion of reportability requirements.

3.6 Manager of Quality is responsible for authorizing changes to Condition Descriptions or classifications involving CRs identified by Quality

3.7 Managers of respective CR Owner's organization are responsible for:

3.7.1 Owning the Organization's SCAQ and CAQ-ACE CR's and ensuring the CAP Database CR Owner field contains his/her name

3.7.2 Ensuring personnel assigned to perform Apparent Cause Evaluations (ACE) or Root Cause Evaluations receive the appropriate indoctrination and training to perform the evaluations. (Forms 1 & 2)

3.7.3 Ensuring that Investigations/Evaluations of SCAQ/CAQ-ACE Conditions are performed, and the report is reviewed and approved.

3.7.4 Approving downgrades of CAQ CRs

3.7.5 Ensuring CAP Supervisors/Initial screeners within their organizations receive the required CAP Supervisor/Initial Screener indoctrination and training and document the indoctrination and training on Form 3.

3.7.6 Providing concurrence for due date extensions for CAQ CRs

3.8 ACAP Condition Review Group (CRG) is responsible for:

3.8.1 Providing oversight for implementation of the ACAP.

3.8.2 Directing upgrades/downgrades of Condition Reports as necessary

3.8.3 Determination of a Condition Owner when an Owner cannot be determined by a Supervisor or Manager.

3.8.4 Reviewing all completed Root Cause Evaluations and selected Apparent Cause Evaluations.

3.8.5 Authorizing due date extensions for SCAQ corrective actions and evaluations.

3.8.6 Review of Effectiveness Review assessments for SCAQ Corrective Actions.

3.8.7 Reviewing assessments and audits of the ABWR CAP.

3.9 Condition Review Group Chairman is responsible to ensure a quorum is present for all CRG meetings. A quorum consists of the Chairman or Acting Chairman with at least one half (1/2) of the membership. If the Chairman is unable to participate, then the Chairman designates another Member as Acting Chairman.

3.10 The Vice President of Oversight & Regulatory Affairs is responsible for formulation of the CRG.

4.0 Procedure

4.1 General Requirements

4.1.1 Safeguards Information and personal information (Employee number, SSN#, etc.) SHALL NOT be entered into the ACAP.

4.1.2 A Condition may be identified by any employee, including contract and sub-contract personnel.

NOTE

The ACAP is the preferred tool for documenting identified concerns; however, other methods for reporting concerns are open to the individual. These include notifying any member of supervision, contacting the Employee Concerns Program, or direct reporting to the Nuclear Regulatory Commission, if desired.

4.1.3 Originators and Action Owners should receive ACAP orientation training or be briefed on their roles and responsibilities prior to entering information into the ACAP as determined by their Management.

4.1.4 CAP Supervisors shall receive CAP Supervisor/Initial Screen indoctrination and training prior to performing CR screening for the first time. (Form 3)

4.1.5 Individuals assigned to perform an Apparent Cause Evaluation or Root Cause Evaluation must be certified by the Manager, Regulatory Affairs through a demonstration of proficiency in the area of Root or Apparent Cause evaluations as applicable by documenting the appropriate qualification requirements on Form1 or Form 2 as applicable.

4.1.6 Revision of this procedure requires review by individuals qualified as ACE, RCE and CAP Supervisor/Initial Screener.

4.2 The Originator:

4.2.1 Substantiates whether the identified issue warrants documentation in the ACAP using judgment, consultation with others who may have more knowledge of the issue, supervisor/management personnel input and this procedure

4.2.2 Consults with STP 3&4 Project Regulatory Affairs personnel as needed to determine whether the issue requires any prompt notification(s) and if so, make or assist in making the required notification(s)

4.2.3 Enters the Condition Description, Condition Code, Condition Type (ACAP, Condition Tab, PAGE 1) and the most applicable Event code(s) (ACAP, Condition Tab, PAGE 2). Cause Codes (if known) are entered on this page as well.

4.2.3.1 Events or conditions that have a potential to be caused by an Foreign Ownership Control and Domination (FOCD) event will assigned the appropriate Event, Cause, and Action Type codes and will be trended utilizing “EX4” Foreign Ownership Control and Domination (FOCD). (COLA, Part2, Chapter 1.D)

4.2.4 Consults with a CAP Supervisor to ensure the entered information is sufficient to provide an understanding of the identified issue and its potential scope.

4.2.5 Enters a statement in the ACAP for issues involving Safeguards Information that the issue involves Safeguards Information and will be addressed in accordance with reference 6.10

4.2.6 Requests CAP Supervisory review of the CR (Section 4.2.7.1).

4.2.7 Provides the following information to the CAP Supervisor if ACAP Database is unavailable:

- Discovery Date/Time.
- Description.
- Originator and Organization.
- Owner and Organization.

4.2.7.1 Enter the above identified conditions in the ACAP Database as soon as the system becomes available.

4.3 Condition Report (CR) Initial Screening/ CAP Supervisor Review

4.3.1 Review the CR and if needed enter insights and additional information related to the issue in the "Supervisor Comments" field on Page 1 of the electronic form.

4.3.2 Validate and update the Condition classification (Condition tab Page 1) and the event / cause codes (Condition tab Page 2) as needed based on discussion with the originator and consultation with others who may have more knowledge of the issue and its potential effect. If necessary, input from other management personnel may be used to ensure the CR classification is correct.

4.3.3 If the Condition is determined to be Invalid assign the appropriate "Condition Code" and close the CR with concurrence by the originator.

4.3.4 Notify the appropriate manager in the event that a Significant Condition Adverse to Quality is identified and document the notification in the comments field indicating the manager notified and the time and date of the notification.

4.3.5 Notify STP 3 & 4 Regulatory Affairs and assign an action for their evaluation and decision for any of the following:

4.3.5.1 Combined License (COL)/Final Safety Analysis Report (FSAR) discrepancies or inconsistencies

4.3.5.2 A deficiency that may need to be evaluated and reported (10CFR21, 10CFR50.55E, or others) (Reference 6.7)

4.3.5.3 A condition that may need to be evaluated for compliance with 10CFR50.38 and reported to senior management in order to assure that U.S. control negates any FOCD. (COLA, Part2, Chapter 1.D)

4.3.6 Assign the appropriate Condition Owner or request acceptance of ownership from outside the organization based on the identified condition

4.3.7 Indicate completion of your review of the CR by making a Review Date/Time entry.

4.4 Condition Owner

4.4.1 Accepts ownership of Conditions identified in their area of authority

4.4.2 Reviews the condition description and ensures the Condition description accurately describes the condition identified.

4.4.3 Review the classifications identified and validates the classification

4.4.4 Determine if a cause evaluation is necessary and obtains an ACE or RCE evaluator from individuals certified by the Manager, Regulatory Affairs (section 4.1.5)

4.4.5 If no ACE or RCE is required then determine the appropriate Action(s) needed to resolve the condition, obtain Action Owners and ensure the Action(s) are entered into the database in a timely fashion

4.4.6 If an ACE or RCE is required, Review the evaluation and ensure an Action or Actions are identified as necessary to resolve the Condition and is/are entered into the database in a timely manner.

4.4.7 Discuss the action with the proposed Action Owner and request acceptance of the action. Action Owners within your organization may be assigned by the Condition owner with appropriate notification to the assigned owner. Condition owners should request action ownership acceptance from Action Owners outside their organization.

4.4.8 Review the progress of any investigation/evaluation and resulting Corrective Actions and ensure they are completed in a timely manner.

4.4.9 Review the Actions identified and ensure Compensatory Actions are in place to control a Condition Adverse to Quality as applicable and remove those actions once permanent corrective actions are in place.

4.4.10 Ensure Actions are completed in a timely manner

4.4.11 Review the event and cause codes assigned and update them as necessary.

4.5 Action Owners

4.5.1 Consult with the CR owner, review the Action assigned, and accept ownership of the Actions you are responsible to complete.

4.5.2 Review the Action Due Date and ensure the due date represents the planned closure of the action. If the due date requires revision insert the appropriate due date. For CAQ actions extensions of the original due date require CR Owner approval. For SCAQ actions extension of the original due date requires CRG approval.

4.5.3 Complete the Actions and document a summary of the actions completed in the "Owner Comments" field.

4.5.4 When the appropriate comments have been entered close the Action by entering the Completion Date. The completion date is the date the action was completed or the date the information was entered into the database. If the completion date exceeds the due date appropriate information is required to document the reason for exceeding the due date.

4.5.5 If an Action can not be accomplished as written, then the Action Owner shall obtain approval from the CR Owner and other affected parties (e.g. QA) for an alternate course of action. This alternate Action and its approval must be documented in ACAP (typically via creation of a new Action) before it is accomplished.

4.5.6 When the actions have been completed and documented in the action comments field, close the Action by entering the Completion Date. The completion date is the date the action was completed or the date the information was entered into the database. If the completion date exceeds the due date appropriate information is required to document the reason for exceeding the due date.

4.6 Condition Evaluation

CAUTION

Do not attempt to enter any information into an Evaluation page prior to completion of the CAP Supervisor review. This will result in software error messages and creation of a non-evaluation action item in the database.

4.6.1 Root & Apparent Cause Evaluations

4.6.1.1 The CR Owner will assign qualified individuals for RCE and ACE evaluations.

4.6.1.2 RCE and ACE Evaluators should use the STP Cause analysis manuals (see references 6.5 and 6.6). Management approval is required to use other analysis manuals.

4.6.1.3 Root Cause Evaluation reports shall address, as a minimum, the following topics:

- Problem Statement
- Event Description
- Event Significance
- Reportability Aspects (if applicable)
- Cause(s)
- Corrective Actions
- Compensatory Actions if required
- Analysis
- Generic Implications:
  - Extent of Condition
  - Extent of Cause
- Related Construction and/or Operating Experience

4.6.1.4 All completed Root Cause Evaluation reports shall be reviewed by the CRG.

4.6.1.5 Apparent Cause Evaluation reports shall address, as a minimum, the following topics:

- Event Description & Problem Statement
- Event Significance
- Cause(s)
- Corrective Actions
- Compensatory Actions if required
- Analysis
- Extent of Condition

- Related Construction and/or Operating Experience

4.6.1.6 Selected completed Apparent Cause Evaluation reports shall be reviewed by the CRG.

4.6.1.7 Corrective actions shall be developed to address, correct or eliminate identified root causes as well as any other actions needed to preclude recurrence. Corrective actions selected to address apparent causes should minimize the likelihood of recurrence.

4.6.1.8 Each Root or Apparent Cause identified shall be assigned a corresponding corrective action.

4.6.1.9 Enhancement actions that are not required to resolve the Condition but are determined beneficial as a result of the investigation may be referenced in the apparent or root cause evaluation reports. These actions should be tracked under a separate CNAQ CR and these CNAQ CR numbers should be documented in the parent CR.

4.7 Effectiveness Review

4.7.1 Corrective Actions Effectiveness Reviews for SCAQs shall be performed as assigned. These reviews are:

- Documented in a CNAQ CR
- Performed after sufficient time has transpired to determine if implemented corrective actions have precluded recurrence of the same condition for the same reasons

4.7.2 If the Effectiveness Review determines the actions were not effective then a new CR shall be written to document the ineffective action(s).

4.8 Resolution of CNAQ – Tracking CRs

4.8.1 Each Tracking CNAQ shall have an Action assigned to document the due date and completion of the tracking CR

4.8.2 If the CNAQ – Tracking CR describes the need for some type of issue or topic evaluation, then the Evaluation page may be used to accomplish this evaluation without the need to create a separate action.

4.8.3 If the CNAQ was written to address conditions with respect to activities being performed by organizations other than STP 3 & 4 personnel (e.g. EPC Contractors), assign an Action to document the transfer of the condition to the other organization's corrective action program, including the other organizations corrective action number assigned and close the action.

4.9 Due Date Revisions:

4.9.1 For CAQ Corrective Actions that will not be completed by the assigned due date, the Action Owner contacts the condition owner and requests a revised due date or course of action.

4.9.2 The Condition Owner evaluates the consequences of revising the due date, and as necessary, ensures that adequate compensatory actions are in place to reduce the probability of a repeat event.

4.9.3 Upon concurrence, the Action Owner enters the revised due date and justification for the revision in the Action Comments field in ACAP.

4.9.4 For SCAQ Corrective Actions, the Condition Owner requests ABWR CRG approval to revise the due date. The request must be made sufficiently in advance to prevent the Action from becoming overdue.

4.9.5 Assigned due date revisions for CNAQ – Tracking Actions is at the discretion of the Action Owner.

4.9.6 Comments that briefly describe the actions actually taken shall be provided in the Owner Comments section for closure of Actions for CAQ and SCAQ CRs. Closure Comments should be included for CNAQ CR related Actions.

4.9.7 The Action Owner closes an action by entering a closure date and electronically signing the Action by entering a password (Oracle password) in the electronic signature pop-up box that is displayed when the save button is depressed.

4.10 Closing CRs

The Condition Owner shall ensure that actions taken adequately resolve the Condition and that documentation in ACAP is adequate to understand how the Condition was resolved.

4.10.1 Upon satisfactory completion of all Actions, the Condition Owner changes the Condition status to closed and electronically signs (authenticates) the report by entering a password (Oracle password) in the electronic signature pop-up box that is displayed when the save button is depressed.

4.11 Supplementing Conditions

4.11.1 If new information becomes available to the Condition Owner regarding the findings of a Condition investigation/evaluation or new Actions or changes to Actions are identified after the Condition is closed that should be included in the record for completeness, then the Condition Owner ensures the Condition is reopened and the information is entered in the appropriate field/Action attachment with annotation to allow the corrected/supplemental information to be easily identified and the date entered.

4.12 Trending

4.12.1 The CRG will periodically review the event and cause codes assigned CAQ and SCAQ Conditions within ACAP to determine if there any trends.

4.12.2 If and adverse trend of CAQ (no ACE required) Conditions is identified an appropriate CR, commensurate with the significance, will be issued SCAQ CR).

4.12.3 If an adverse trend of CAQ (ACE required) Conditions is identified a SCAQ CR).

5.0 Documentation

5.1 Condition Reports and related documentation entered in the ACAP Database are electronically transmitted to Records Management & Document Control upon completion.

5.2 Records of the proceedings of each CRG meeting shall be submitted to Records Management for retention. As a minimum, attendance records shall be maintained for quorum purposes.

5.3 Records designating the makeup of the CRG shall be submitted to Records Management for retention.

6.0 References

6.1 U7-P-QP01-AQAPM, ASME Quality Assurance Program Manual (AQAPM)

6.2 U7-P-QP01-QAPD, STP 3 & 4 Quality Assurance Program Description (QAPD)

6.3 U7-P-RM02-0001, STP 3&4 Records Management and Document Control

6.4 U7-P-AD02-0005, Units 3 & 4 Safeguards Information Program

6.5 STP SCAQ Investigator's Manual

6.6 STP Apparent Cause Evaluator's Manual

6.7 U7-P-LI02-0006, NRC Reporting

6.8 NEI 08-02 Corrective Action Processes for New Nuclear Power Plants during Construction

6.9 STP Units 3 & 4 COLA, Part 2, Chapter 1.D

7.0 Support Documents

- Addendum 1 CR Identification and Classification Examples
- Form 1 ACE Evaluator, Individual Qualification Record
- Form 2 RCE Evaluator, Individual Qualification Record
- Form 3 CAP Supervisor/Initial Screener, Individual Qualification Record

NOTE: The following table contains examples of conditions that may be identified during the licensing, design and construction phase. These example are intended to be used a guidance when classifying a Condition with respect to significance. The examples are intended to show the differences between those considered Conditions Adverse to Quality and those that may be considered Significant Conditions Adverse to Quality during certain circumstances. These examples are not all-inclusive, but are intended to guide the user of this document in determining the classifications of CRs.

The first question a Screener must ask is: who owns the problem, is it someone within the STP units 3 & 4 organizations or is it someone within the EPC organization? This is usually determined by where the problem occurs. If the problem occurs before it is being used by STP Units 3 & 4 for quality related activities then the condition should be documented in the EPC's Corrective Action program and STP Units 3 & 4 should track the condition in the ACAP and ensure the EPC has resolved the condition within their corrective action process. If the condition is owned by an STP Units 3 & 4 organization then the condition should be documented and resolved as specified in this procedure.

The examples listed in the "Other Areas Outside the Quality Assurance Program" column are for areas not related to the Quality Assurance Program and are those that require notification of appropriate management.

NINA Issued Documents	
Conditions Adverse to Quality	Significant Conditions Adverse to Quality
• Design errors or deficiencies found in design documents, (e.g. drawings, specifications, calculations, etc.) after release for use, procurement, or construction that would prevent the item, activity, or service from meeting its intended function or output.	
• Deviations from procurement documents or other quality-related conditions identified by the buyer in the supplier's shop prior to the delivery of the product to the purchaser	• A design deviation from performance specifications that: (1) requires extensive evaluation or redesign to establish the adequacy of the structure, system, or component to perform its intended function or (2) fails to meet Design Reliability Assurance or ITAAC/DAC requirements
• Procurement document errors (inadequate procurement requirements that affect the quality of the item or service) identified after issuance but prior to authorization of the supplier to perform work	• A design deficiency by which the capability to withstand a single failure is compromised, where required
• Procurement document errors (inadequate procurement requirements that affect the quality of the item or service) identified after the supplier has been given a notice to proceed with the affected activities	• Evidence of fraudulent activities by the supplier
• Inadequate environmental storage conditions that have potentially degraded stored items	• Procurement document errors (inadequate procurement requirements) that result in an item delivered by the supplier to be of insufficient quality for its intended purpose and it has been installed
• Programmatic procurement-related conditions	• An adverse trend in the procurement of items or services that indicates a significant program or process breakdown

NINA Issued Documents	
Conditions Adverse to Quality	Significant Conditions Adverse to Quality
• The loss of essential data required for activities or items subject to the QA program (QA Records)	• Inadequate environmental storage conditions that degrades a stored item that has been released for use and if installed couldn't perform its intended safety function
• Procedural or administrative control non-compliance	• A deviation, nonconformance, or failure to comply with regulations found to be reportable under 10 CFR Part 21 or 10 CFR 50.55(e)
• A condition is identified that indicates a problem exists within the controlling process as opposed to a hardware condition	• Deficiencies in the fabrication or construction of, or significant damage to, structures, systems or components that require extensive evaluation, re-design or repair in order to establish the adequacy of the structure, system or component to perform its intended function of assuring public health and safety
• Completed construction activities are not within the tolerances allowed by design documents or process controls	• Repetitive problems indicating programmatic failures or precursor of significant technical deficiencies
• Procedural adherence issue	• Falsification of QA Records
• Missing, incomplete or otherwise deficient QA Records	• A significant adverse trend related to an activity or item subject to the QA program
• Documentation required by NRC requirements such as 10 CFR 50.49 is unavailable or deficient	• Apparent sabotage or tampering
• Any adverse trend related to an activity or item subject to the QA program	• Incorrect vendor instructions identified after SSC turnover that significantly affects SSC safety function
• Individual performing activities does not have a valid qualification	• Significant Loss of Foreign Material Exclusion controls impacting safety-related systems
• Adverse condition found after licensee acceptance of the SSC for service, such as an SSC that fails to conform to one or more applicable codes or standards (e.g., the CFR, Combined License, Tech Specs, FSAR, and/or licensee commitments)	• Any condition or nonconformance that results in a Stop Work Order being imposed
• Ineffective corrective action	• Audit Deficiency indicating a programmatic breakdown
• A design deficiency that results in deviation from performance specifications that could fail to meet ITAAC/DAC requirements	• A design deviation from performance specifications that fails to meet ITAAC/DAC requirements
• Issuance of an ITAAC-Related Construction Finding (IRCF), i.e., a regulatory violation that is greater than minor associated with a specific ITAAC for which the licensee has not yet issued the ITAAC closure letter, and is material to the ITAAC acceptance criteria	• A test result that indicates an SSC that is the subject of a completed ITAAC no longer meets its ITAAC acceptance criterion (e.g., requires corrective maintenance)
• A programmatic QA/QC deficiencies that are not relevant to one or more aspects of a given ITAAC under review	• Reinspection or retest of an SSC, as a result of out of tolerance, lost, or damaged M&TE, has an unacceptable result that adversely affects a completed ITAAC

NINA Issued Documents	
Conditions Adverse to Quality	Significant Conditions Adverse to Quality
• Errors found by the NRC during inspection of the licensee's ITAAC closure package before the closure letter is sent	• Issuance of an ITAAC Finding, i.e., a regulatory violation that is greater than minor, and is associated with a specific ITAAC for which the licensee has issued the ITAAC closure letter
• A design deficiency that results in deviation from performance specifications that could fail to meet ITAAC/DAC requirements	• A QA/QC deficiency that is determined to be material to the ITAAC acceptance criteria, and is documented by the NRC as an ITAAC-Related Construction Finding (IRCF)
• Issuance of an ITAAC-Related Construction Finding (IRCF), i.e., a regulatory violation that is greater than minor associated with a specific ITAAC for which the licensee has not yet issued the ITAAC closure letter, and is material to the ITAAC acceptance criteria	• Errors related to component inspection or tests where it was impractical to be performed after installation in the plant, the ITAAC closure documentation (e.g., test or inspection record) that was generated at the vendor site and provided to the licensee that are found after the closure letter has been sent

Other Areas Outside the Quality Assurance Program	
ACAP Conditions Adverse to Quality	ACAP Significant Conditions Adverse to Quality
• Unattended Safeguards Information or loss of Safeguards Information	• Fire in the plant with significant impact on corporate assets
• NRC identified issues (Cited or non-cited violations)	• Significant security issues as defined by security procedures or reportability requirements
• A Physical Protection Program, Access Authorization/Control, Fitness for Duty breakdown	• Fatality, severe personal injury, or significant industrial hazard
• Foreign Material in any system/component important to plant generation with a high potential to affect system functionality or operations	• An event that results in a violation of non-radiological environmental release limits
• An individual who met denial criteria was granted access	• Information in the Environmental Report is found to be inaccurate or incomplete such that the safety evaluation for the Final Environmental Impact Statement (FEIS) conclusions are not characterized correctly
• Fire incident inside the Units 3 & 4 boundary with potential impact on personnel safety or SSCs	

Individual Qualification Record

Section 1 Employee Name: Department: Task or Function: ACE Evaluator	Employee ID
Section 2 **Complete the following formal course work (or attach documentation of prior completion):**	**Employee Initial/Date** (Initials and date indicate that an activity has been completed, not necessarily the actual date an activity was completed)
•	/
•	/
•	/
•	/
•	/
•	/
•	/
Section 3 **Read the current revision of the following project documents:**	
• U7-P-AD02-0003	/
• STP Apparent Cause Evaluator's Manual	/
•	/
•	/
•	/
Section 4 **Complete the following additional activities:**	
• Review 10CFR Part 21	/
• Review 10CFR 50.55E	/
•	/
•	/
•	/

Management Review and Approval:

The employee's experience history has been reviewed and found satisfactory and he/she has successfully completed the above listed steps. Based on the above, the above listed individual is certified to perform the above specified task or function.

Manager, Regulatory Affairs

(Print/Sign): _____ Date: _____

Individual Qualification Record	
Section 1 Employee Name: Department: Task or Function: RCE Evaluator	Employee ID
Section 2 **Complete the following formal course work (or attach documentation of prior completion):**	**Employee Initial/Date** (Initials and date indicate that an activity has been completed, not necessarily the actual date an activity was completed)
•	/
•	/
•	/
•	/
•	/
•	/
•	/
Section 3 **Read the current revision of the following project documents:**	
• U7-P-AD02-0003	/
• STP STP-SCAQ Investigator's Manual	/
•	/
•	/
•	/
Section 4 **Complete the following additional activities:**	
• Review 10CFR Part 21	/
• Review 10CFR 50.55E	/
•	/
•	/
•	/
Management Review and Approval:	
The employee's experience history has been reviewed and found satisfactory and he/she has successfully completed the above listed steps. Based on the above, the above listed individual is certified to perform the above specified task or function. Manager, Regulatory Affairs (Print/Sign): _____Date: _____	

Individual Qualification Record

Section 1 Employee Name: Department: Task or Function: CAP Supervisor/Initial Screener	Employee ID
Section 2 **Complete the following formal course work (or attach documentation of prior completion):**	**Employee Initial/Date** (Initials and date indicate that an activity has been completed, not necessarily the actual date an activity was completed)
• ACAP Orientation Training	/
•	/
•	/
•	/
•	/
•	/
•	/
Section 3 **Read the current revision of the following project documents:**	
• U7-P-AD02-0003	/
• U7-P-LI02-0006 •	/
•	/
•	/
•	/
Section 4 **Complete the following additional activities:**	
• Review 10CFR Part 21	/
• Review 10CFR 50.55E	/
• Discuss Cap Supervisor/Initial Screener Roles and Responsibilities	/
•	/
•	/

Management Review and Approval:

The employee's experience history has been reviewed and found satisfactory and he/she has successfully completed the above listed steps. Based on the above, the above listed individual is certified to perform the above specified task or function.

Department Manager (Print/Sign): _____ Date: _____