

# UNITED STATES NUCLEAR REGULATORY COMMISSION

REGION III 2443 WARRENVILLE RD. SUITE 210 LISLE, IL 60532-4352

December 16, 2014

Mr. Raymond Lieb Site Vice President FirstEnergy Nuclear Operating Co. Davis-Besse Nuclear Power Station 5501 N. State Rte. 2, Mail Stop A–DB–3080 Oak Harbor, OH 43449-9760

SUBJECT: INFORMATION REQUEST TO SUPPORT UPCOMING PROBLEM

IDENTIFICATION AND RESOLUTION INSPECTION AT DAVIS-BESSE

**NUCLEAR POWER STATION** 

Dear Mr. Lieb:

This letter is to request information to support our scheduled Problem Identification and Resolution (PI&R) inspection beginning March 23, 2015, at Davis-Besse Nuclear Power Station. This inspection will be performed in accordance with the NRC baseline Inspection Procedure 71152.

Experience has shown that these inspections are extremely resource intensive both for the NRC inspectors and the utility staff. In order to minimize the impact that the inspection has on the site and to ensure a productive inspection, we have enclosed a list of documents required for the inspection.

The documents requested are copies of condition reports and lists of information necessary to ensure the inspection team is adequately prepared for the inspection. The information requested prior to the inspection may be provided in either CD-ROM/DVD/Thumb Drive (preferred) or hard copy format and should be ready for NRC review by March 3, 2015. Mr. John Rutkowski, the Lead Inspector, will contact your staff to determine the best method of providing the requested information.

If there are any questions about the material requested, or the inspection in general, please contact Mr. Rutkowski at 630–829–9730 or <a href="mailto:john.rutkowski@nrc.gov">john.rutkowski@nrc.gov</a>.

This letter does not contain new or amended information collection requirements subject to the Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.). Existing information collection requirements were approved by the Office of Management and Budget, Control Number 3150–0011.

R. Lieb -2-

The NRC may not conduct or sponsor, and a person is not required to respond to, a request for information or an information collection requirement unless the requesting document displays a currently valid Office of Management and Budget control number.

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter and its enclosure will be available electronically for public inspection in the NRC Public Document Room or from the Publicly Available Records (PARS) component of NRC's document system (ADAMS). ADAMS is accessible from the NRC Web site at <a href="http://www.nrc.gov/reading-rm/adams.html">http://www.nrc.gov/reading-rm/adams.html</a> (the Public Electronic Reading Room).

Sincerely,

/RA/

Jamnes L. Cameron, Chief Branch 4 Division of Reactor Projects

Docket No. 50–346 License No. NPF–3

Enclosure:

Requested Information to Support PI&R Inspection

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# **Requested Information to Support**

# **Problem Identification and Resolution Inspection**

# Inspection Report 05000237-05000249/2015007

Please provide the information on a compact disc or thumb drive (one for the team lead, one for the Resident Inspector Office, and one for each of the two other scheduled inspectors), if possible. Unless otherwise specified, the timeframe for requested information is for the period of July 1, 2013, through the time the data request is answered. For requested lists, please provide the information, if possible, in a "sortable" Excel spreadsheet format.

In addition, inspectors will require computer access to the corrective action program (CAP) database while on site.

#### PROGRAM DOCUMENTS

- A current copy of administrative procedure(s) for the CAP, quality assurance audit program, self-assessment program, corrective action effectiveness review program, trending program, industry experience review program, and top-level documents for the work control and work scheduling programs.
- 2. A current copy of the Employee Concerns Program/Ombudsman administrative procedure(s).
- Description of any substantive changes made to the corrective action program since the last PI&R Inspection. Please include with each listed change the effective date of the change.

## ASSESSMENTS

- 4. A copy of Quality Assurance (QA) audits of the CAP and, if done, audits of the QA program.
- 5. A list of all other QA audits completed with a brief description of areas where findings requiring corrective action were identified.
- 6. The plan for future self-assessments of the CAP and QA program and a copy of your schedule for future assessments, out to no more than 2 years.
- 7. A copy of completed self-assessments of the CAP and the QA program.
- 8. A list of all other self-assessments completed with a brief description. Indicate which assessments resulted in CRs for adverse findings.
- 9. A list of issue reports (IRs)/condition reports (CRs) written for findings or concerns identified in self-assessments and audits that required follow-up action. Include a short description of the finding, its status, and include a cross-reference to the audit or self-assessment number.

## **CORRECTIVE ACTION DOCUMENTS**

- 10. A list of completed root cause evaluations completed with a brief description of the issue. Provide status of any actions developed as part of the evaluations and a reference, if not part of the root cause package, to the documents and/or IRs/CRs directing and tracking the actions.
- 11. A list of completed apparent cause evaluations completed with a brief description of the issue. Provide status of any actions developed as part of the evaluations and a reference, and if not part of the apparent cause package, to the documents and/or IRs/CRs directing and tracking the actions. Please identify if the apparent cause evaluations were full or limited evaluations.
- 12. A list of all open IRs/CRs sorted by significance level and then initiation date. Include each report's identification number, the date initiated, a brief description/title of the issue, system affected if any, significance level, priority level, assigned organization, and anticipated completion date, if available.
- 13. A list of IRs/CRs closed, sorted by significance level and then initiation date. Include each document's identification number, a brief description/title, the significance level, the priority level, the date initiated and closed, assigned organization, system affected, cause codes assigned, and whether there was an associated operability evaluation.
- 14. A list of condition reports generated by the corporate office that involve or affect Davis-Besse's operation, sorted by significance level. Include the date initiated, a brief description/title of the issue, other site(s) affected, system affected, significance level, status, assigned organization, and closure date or anticipated completion date, if available.
- 15. A list of completed effectiveness reviews of IR/CR-developed remedial and corrective actions with a brief description of the results of those reviews. Include a cross-reference to the IR/CR or IRs/CRs for which the effectiveness review was conducted and, if applicable, IR/CR numbers documenting any additional follow-up actions.
- A list of IRs/CRs initiated for identified inadequate or ineffective corrective or remedial actions. Include the date initiated, a brief description, status, significance level of the issue, system affected, assigned organization, priority level to correct, completion/closure date or, if applicable, anticipated completion date, if available. Include a cross-reference to the IR/CR, IRs/CRs, or evaluation that generated the original corrective action.
- 17. A copy of any performance reports or indicators used to track the corrective action program effectiveness since July 1, 2013. The most recent data and end-of-year and end-of-second quarter data will suffice; monthly reports are not required.
- 18. A list of IRs/CRs issued during the last refueling outage sorted by system and component, including a brief description, status, significance level, priority level for each item, identifying and assigned organization(s), and actual or anticipated closure date.

## **TRENDS**

- 19. A list of initiated IRs/CRs that identify trends of conditions adverse to quality. Include the date initiated, a brief description, significance level, priority level for each item, and date closed or anticipated closure date.
- 20. Copies of any completed CAP trend reports.

# **OPERATING EXPERIENCE**

- 21. A copy of the most recent operating experience program effectiveness review and/or assessment.
- 22. A list of operating experience documents reviewed (after initial preliminary screening) and any associated condition reports. Please provide identification of the originating organization, the initiating organization's document/reference number, your identification number if different than the originators, a brief description/title of the issue, and status of the review and any developed follow-up actions. Indicate the initiation date and the closure date or the anticipated closure date if available.

## SYSTEMS AND COMPONENTS

- 23. A list of the top ten risk significant systems and top ten risk significant components.
- 24. A list of operability determinations/evaluations. Include a brief description/title of the issue, date initiated, date closed or date anticipated to be closed. Include any operability evaluations that are still open and that were initiated prior to July 1, 2013.
- 25. Cause analysis, corrective actions documents, health reports, and trend analysis for systems and components considered Maintenance Rule (a)(1) at any time since July 1, 2013. Provide this information starting 6 months earlier from when the system or component entered (a)(1) status. Include dates when system/components entered (a)(1) status and, if applicable, returned to (a)(2) status. For recurring reports, a report from every 6 months of the (a)(1) classification period is sufficient; quarterly and monthly reports are not required.
- 26. A list of test failures (IST or Technical Specifications surveillances) with a brief description of component/system failed. Indicate if the failure was a maintenance preventable failure. Please include any failures of test equipment calibrations that necessitated a review of past surveillances and/or tests.
- 27. A list of temporary modifications with a brief description of the modification, installation date, and date closed or anticipated closure date. Include any open temporary modifications that were installed prior to July 1, 2013.
- 28. A list of rework items and repeat failures. Include cross-references to applicable Work Orders and IRs/CRs.
- 29. A list of plant trips, downpowers (greater than 20 percent), LCO entries (not scheduled), and LERs, including dates of these events.

- 30. A list of open work orders/equipment work requests with a brief description. Identify the work order as outage or non-outage, the date of initiation and scheduled or anticipated closure date, if available. Also, provide the classification of the work orders with the recent industry classification scheme. Provide an explanation of the classification scheme and the procedure governing the classification. Work requests/work orders not associated with an equipment condition (e.g., work orders for voluntary plant upgrades) do not have to be included in the list.
- 31. Any trend reports for work orders. Trend reports that existed at the end of the second calendar quarter and end of year are acceptable; copies of all monthly reports are not required. Include a copy of a recent (within 2 months of the data submittal) graph or document showing the status of workweek planning of work activities.

# SCWE

- 32. Results of safety culture/safety conscious work environment (SCWE) surveys or self-assessments completed since January 1, 2013. Include any organizational effectiveness surveys conducted by internal or external organizations. Also, a list of action(s) resulting from the survey(s) and the status of the action(s).
- 33. SCWE issues identified through alternate avenues, such as the employee concerns programs. If issue(s) are considered sensitive, in lieu of describing issue in the data package, provide a paper copy to the lead inspector at the start of the inspection.

# **REGULATORY ISSUES**

- 34. Copies of all apparent, common and/or root cause evaluations related to identified adverse human performance trends.
- 35. Copies of IRs/CRs, investigations, and corrective actions taken for issues identified in NRC findings since March 1, 2013. Identify the status of the corrective actions and any effectiveness reviews completed or scheduled. Include a copy of effectiveness reviews that were done.

## ADMIN

- 36. A copy of the latest Davis-Besse organizational chart and phone listing.
- 37. A list of the dates, times, and location for all scheduled meetings associated with the implementation of the CAP. Include any work order screening meetings.

# 5-YEAR REVIEW

38. An excel sortable list of condition reports associated with your Auxiliary Feedwater System going back to March 1, 2010. Please indicate in the list the status of the IR/CR (e.g., open, closed, working, etc.), initiation date, closure date, number of developed corrective actions and indication if any remain open, the classification/priority, and a descriptive title of the CR, and the actual system or subsystem of the plant's Auxiliary Feedwater System.

- 39. A copy of site performance indicators (PIs), if any, associated with the Auxiliary Feedwater System going back to March 1, 2010. Only need to provide a copy of recurring PIs for every 6 months (i.e., end of year and middle of year documents for 2014, 2013, etc.). Also include a copy of the latest PI data
- 40. A copy of the System Health report sections, or equivalent documents, for the Auxiliary Feedwater System, as they were presented in the second and fourth quarter reports of each year starting in 2010 until the current date.
- 41. A copy of any Maintenance Rule Action plans (a)(1) action plans with completion status for the Auxiliary Feedwater System that were developed since March 1, 2010.

<u>Documents requested to be available on-site during the inspection in either paper or electronic, with search capability, (preferred) format:</u>

- a. Updated Final Safety Analysis Report.
- b. Technical Specifications.
- c. Procedures and procedure index.
- d. Copies of any self-assessments and associated IRs/CRs generated in preparation for the inspection.
- e. A copy of the QA manual.
- f. A list of issues brought to the ECP/ombudsman and the actions taken for resolution.
- g. A list of the codes used in the CAP and Work Orders system(s).
- h. A copy of the most recent monthly performance indicator document and the system health report or the equivalent documents from the end of the fourth quarter of 2014 and 2013.
- A copy of the latest independent/offsite organization review of safety culture/safety conscious work environment and internal equivalent assessments if not provided as part of the requested data package.

## Other:

On the first day of the inspection, or early on the second day, please provide the inspection team a briefing of your CAP. Include your expectations for personnel using the program and how the work order system fits into the overall scheme for addressing identified issues. Also, please demonstrate how to use a computer to access CAP data.

The lead inspector will also request to talk to/interview approximately 30 to 40 personnel, in groups of 4 to 6 individuals, to seek information about the plant's SCWE. The lead inspector will randomly choose, from your furnished organization charts, people he would like to interview and provide those names and groupings to you and ask you to set up times and locations. For this, the inspector will need access to organizations charts showing position titles and names. The inspector will provide his selections at least one day prior to a suggested interview date. Each

interview session will last about 40 to 70 minutes; the inspector will ask you to schedule the interview sessions at least 90 minutes apart.

The inspector will ask you to refrain from debriefing personnel after the interviews; your briefing of personnel prior to the sessions is acceptable but not required. Also, other team members may be talking to personnel about your people's perception of the site's SCWE.

R. Lieb -2-

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Sincerely,

/RA/

Jamnes L. Cameron, Chief Branch 4 Division of Reactor Projects

Docket No. 50–346 License No. NPF–3

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