

Group K

FOIA/PA NO: 2014-0217

RECORDS BEING RELEASED IN PART

The following types of information are being withheld:

- Ex. 1: Records properly classified pursuant to Executive Order 13526
- Ex. 2: Records regarding personnel rules and/or human capital administration
- Ex. 3: Information about the design, manufacture, or utilization of nuclear weapons
 Information about the protection or security of reactors and nuclear materials
 Contractor proposals not incorporated into a final contract with the NRC
 Other _____
- Ex. 4: Proprietary information provided by a submitter to the NRC
 Other _____
- Ex. 5: Draft documents or other pre-decisional deliberative documents (D.P. Privilege)
 Records prepared by counsel in anticipation of litigation (A.W.P. Privilege)
 Privileged communications between counsel and a client (A.C. Privilege)
 Other _____
- Ex. 6: Agency employee PII, including SSN, contact information, birthdates, etc.
 Third party PII, including names, phone numbers, or other personal information
- Ex. 7(A): Copies of ongoing investigation case files, exhibits, notes, ROI's, etc.
 Records that reference or are related to a separate ongoing investigation(s)
- Ex. 7(C): Special Agent or other law enforcement PII
 PII of third parties referenced in records compiled for law enforcement purposes
- Ex. 7(D): Witnesses' and Allegers' PII in law enforcement records
 Confidential Informant or law enforcement information provided by other entity
- Ex. 7(E): Law Enforcement Technique/Procedure used for criminal investigations
 Technique or procedure used for security or prevention of criminal activity
- Ex. 7(F): Information that could aid a terrorist or compromise security

Other/Comments: _____



UNITED STATES
NUCLEAR REGULATORY COMMISSION
WASHINGTON, D.C. 20555-0001

July 3, 2012

CHAIRMAN

The Honorable Fred Upton
Chairman, Committee on Energy and Commerce
United States House of Representatives
Washington, D.C. 20515

Dear Mr. Chairman:

On behalf of the U.S. Nuclear Regulatory Commission (NRC), I am responding to your letter of April 27, 2012, regarding the work environment at the NRC. Responses to your specific questions and requests for information are enclosed with this letter. Please note that, as described in the enclosure, certain documents being provided are considered sensitive NRC internal information. I request that they be held in confidence with access limited to Members and Committee staff.

If you need any additional information, please contact me or Ms. Rebecca Schmidt, Director of the Office of Congressional Affairs, at (301) 415-1776.

Sincerely,

A handwritten signature in black ink, appearing to read "G. B. Jaczko".

Gregory B. Jaczko

Enclosure:
As stated

cc: Representative Henry A. Waxman

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**Responses to Inquiries from Representative Fred Upton and Others
Letter of April 27, 2012**

1. Are there specific requirements and guidance within the NRC that prohibit behaviors that may have a chilling effect on the work environment outside of those enumerated by the Equal Employment Opportunity Commission (e.g., race, gender, religion)? If so, please provide them. If not, please explain why not.

The agency's expectations for an Open, Collaborative Work Environment (OCWE) encourage all employees and contractors to promptly speak up and share concerns and differing views without fear of negative consequences. In addition, the agency adheres to a set of organizational values – integrity, service, openness, commitment, cooperation, excellence, and respect. These values guide the actions we take — from decisions on safety, security, and environmental issues; to how we perform administrative tasks; to how we interact with our fellow employees and other stakeholders. Expectations for OCWE related to raising concerns and these organizational values are routinely communicated by managers and supervisors in a variety of formats (e.g., web pages, staff meetings, newsletters, postings throughout agency buildings, etc.) and included in orientation and training activities for newer employees.

Retaliation against individuals who engage in the Open Door Policy, Non-Concurrence Process, and Differing Professional Opinions Programs is specifically prohibited as described in the Management Directives (i.e., agency-level procedures) for those processes. These specific Management Directives are easily accessible to all NRC employees and are posted publicly on NRC's Web site at <http://www.nrc.gov/about-nrc/values.html#open>.

Additionally, the agency requires biennial training to all employees on the Notification and Federal Employee Anti-Discrimination and Retaliation Act of 2002 (No FEAR Act). This training explains the provisions of the No FEAR Act concerning Federal employees' rights, protections, and remedies under anti-discrimination and whistleblower protection laws. Ninety-nine percent of NRC staff completed the training by February 29, 2012. The Office of Personnel Management (OPM) has recommended that this NRC-developed course be used as a model across all of the Federal government.

2. Should Commissioners be subject to much the same requirements with regard to ensuring a Safety Conscious Work Environment as NRC licensees? If not, please explain why not.

All NRC licensees and contractors are expected, although not required by regulation, to establish and maintain a safety conscious work environment (SCWE). A SCWE is defined by the NRC as an environment in which "employees feel free to raise safety concerns, both to their management and to the NRC, without fear of retaliation." Such a work environment contributes to safe operation of NRC-regulated facilities and is identified as one of the traits of a strong safety culture in the NRC's June 2011 Safety Culture Policy Statement.

As the regulator, the NRC has the responsibility for independently assuring that regulated activities are safely executed. The Organization for Economic Co-Operation and Development's Nuclear Energy Agency, a multinational forum for the exchange of information and experience among the governments of its participating countries, described the regulator's safety culture role as follows: "In promoting safety culture, a regulatory body should set a good example in its

Enclosure

own performance."¹ The NRC agrees with this approach. As the NRC's most recent Strategic Plan states, "[t]he NRC's organizational culture is another key element of operational excellence. The agency intends to focus on the same underlying tenets [of the Safety Culture Policy Statement] that it has communicated externally by continuously improving its own safety culture to ensure that the agency's mission is at the forefront of all work activities." We have done this through OCWE, which encourages all employees and contractors to promptly speak up and share concerns and differing views without fear of negative consequences. Over the years, Commissioners have similarly taken opportunities to individually indicate support for OCWE as the way of doing business at the NRC.

3. Should the fact that a licensee executive is "passionate" about his particular view on nuclear safety be a mitigating factor in licensee cases where agency staff has evidence that a chilled work environment may exist?

The agency does not, nor would it be appropriate for us to oversee or regulate licensee management behavior per se. As described in the answer to Question 2 above regarding the SCWE, however, it is appropriate for the NRC to ensure the work environment is conducive to raising safety concerns without fear of retaliation. It is the impact of a licensee manager's behaviors on the environment for raising concerns that is of interest to the agency, not the behaviors themselves.

4. If an employee wanted to raise a concern about the Chairman's or another Commissioner's behavior, what options are available outside of actively having to invoke NRC's Open Door Policy process or filing a Differing Professional Opinion?

NRC employees have several options by which they may raise issues concerning any agency official's behaviors, including members of the Commission. The appropriate avenue depends on the nature of the concern, and whether the employee is in the bargaining unit (i.e., is represented by the Union and covered by the collective bargaining agreements). NRC employees may file a grievance under either the NRC negotiated grievance procedure or the administrative grievance procedure (if they are represented by the Union). The employee may also file a complaint under our Policy for Preventing and Eliminating Harassing Conduct in the Workplace. This program is intended to prevent sexual harassment and other forms of harassing conduct based on race, color, religion, sex, national origin, age, disability, sexual orientation, and retaliation for engaging in protected EEO activity in the workplace. Additionally, employees may raise their concerns to the NRC Inspector General (this can be done anonymously, if an employee prefers) or to the U.S. Office of the Special Counsel. NRC employees are protected from retaliation for raising a concern under any of these processes.

5. Please provide all reports issued within the past two years to any office director, the Executive Director for Operations, or the Commission, that assess safety culture within the NRC.

The responsive documents are attached. Please note that some of the documents have not been released to the public and have been marked "not for public release." We respectfully ask that the Committee honor these markings.

¹ T. E. Murley, et. al., "The Role of the Nuclear Regulator in Promoting and Evaluating Safety Culture," June 1999.

6. Are you provided with a report listing which agency staff has met with your fellow Commissioners and the topics of their discussions? If so, please provide all copies of these reports and explain why this action does not have a chilling effect on the willingness of staff to raise issues and discuss them freely and directly with the Commissioners.

Since March 5, 2012, (with the exception of the week of March 19), all members of the Commission have received a brief weekly report that lists the topics raised by senior managers in periodic meetings with individual members of the Commission during the preceding week. Copies of those reports are attached (Attachment 15). The meetings included are limited to those held with senior managers and are generally regularly scheduled meetings between Commissioners and senior managers. This report is an additional tool for sharing information with the Commission, informing Commissioners at a high level about current topics being briefed to other members of the Commission so that they can request similar briefings if so desired. Neither the topics raised by individual Commissioners nor the details of the conversations between senior managers and Commissioners are included in the report.

These reports are considered sensitive NRC internal information; the agency requests that they be held in confidence with access limited to Members and Committee staff.

7. On January 26, 2010, the Commission was provided with an Internal Safety Culture Update. This report indicated "...that there are continuing questions on effectiveness of the differing views processes..." and "...continued perception of potential negative consequences for engaging in these processes...." Please explain how your decisions to commend some staff for raising Differing Professional Opinions and ignore those brought by others would not exacerbate the perception of negative consequences and further discourage staff from raising perspectives they perceive you to disagree with, thereby contributing to a chilled environment.

In meetings with staff, Commission meetings, and other forums, I have routinely voiced my support of all staff who are willing to raise concerns and differing views and for the processes available to raise these. For example, in my vote sheet involving the Tennessee Valley Authority's request for reinstating the Construction Permits for Bellefonte 1 and 2 in which the Non-Concurrence Process was used, I noted "[t]he Commission is always best served when healthy debate surrounding the staff's decisionmaking is relayed to the Commission transparently."

The NRC understands the ongoing need to reinforce the value of raising concerns and differing views as a way of overcoming perceptions that engaging in differing views processes could result in negative consequences. For example, all employees who engage in the Differing Professional Opinions Program are recognized with a Certificate of Appreciation from the Executive Director for Operations (EDO), regardless of whether the differing opinion was adopted. Additionally, the NRC Team Player award recognizes individuals who have supported an open, collaborative work environment by exhibiting positive behaviors in promptly raising differing views, fairly considering differing views, and respecting differing views. Recipients are nominated by fellow employees, presented with the award, and recognized with a Certificate of Appreciation from the EDO; recipients' stories are also featured on the NRC's internal Web site.

Enclosure

Identical letters sent to:

The Honorable Fred Upton
Chairman, Committee on Energy and Commerce
United States House of Representatives
Washington, D.C. 20515
cc: Representative Henry A. Waxman

The Honorable Joe Barton
Chairman Emeritus, Committee on Energy
and Commerce
United States House of Representatives
Washington, D.C. 20515

The Honorable Cliff Stearns
Chairman, Subcommittee on Oversight
and Investigations
Committee on Energy and Commerce
United States House of Representatives
Washington, D.C. 20515
cc: Representative Diana L. DeGette

The Honorable Ed Whitfield
Chairman, Subcommittee on Energy and Power
Committee on Energy and Commerce
United States House of Representatives
Washington, D.C. 20515
cc: Representative Bobby L. Rush

The Honorable John Shimkus
Chairman, Subcommittee on Environment
and the Economy
Committee on Energy and Commerce
United States House of Representatives
Washington, D.C. 20515
cc: Representative Gene Green

The Honorable Lee Terry
United States House of Representatives
Washington, D.C. 20515

The Honorable Michael C. Burgess
United States House of Representatives
Washington, D.C. 20515

The Honorable Sue Myrick
Committee on Energy and Commerce
United States House of Representatives
Washington, D.C. 20515

The Honorable John Sullivan
Committee on Energy and Commerce
United States House of Representatives
Washington, D.C. 20515

The Honorable Marsha Blackburn
Committee on Energy and Commerce
United States House of Representatives
Washington, D.C. 20515

The Honorable Cathy McMorris Rodgers
Committee on Energy and Commerce
United States House of Representatives
Washington, D.C. 20515

The Honorable Charles F. Bass
Committee on Energy and Commerce
United States House of Representatives
Washington, D.C. 20515

The Honorable Brian Bilbray
Committee on Energy and Commerce
United States House of Representatives
Washington, D.C. 20515

The Honorable Mary Bono Mack
Committee on Energy and Commerce
United States House of Representatives
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The Honorable Pete Olson
Committee on Energy and Commerce
United States House of Representatives
Washington, D.C. 20515

The Honorable Gregg Harper
Committee on Energy and Commerce
United States House of Representatives
Washington, D.C. 20515

The Honorable Leonard Lance
Committee on Energy and Commerce
United States House of Representatives
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The Honorable Cory Gardner
Committee on Energy and Commerce
United States House of Representatives
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The Honorable Steve Scalise
Committee on Energy and Commerce
United States House of Representatives
Washington, D.C. 20515

The Honorable Tim Murphy
Committee on Energy and Commerce
United States House of Representatives
Washington, D.C. 20515

The Honorable Robert Latta
Committee on Energy and Commerce
United States House of Representatives
Washington, D.C. 20515

The Honorable Adam Kinzinger
Committee on Energy and Commerce
United States House of Representatives
Washington, D.C. 20515

The Honorable Bill Cassidy
Committee on Energy and Commerce
United States House of Representatives
Washington, D.C. 20515

ATTACHMENT

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FOCALPOINT
Consulting Group

Evaluation of Issue Resolutions Systems

September 30, 2010

NOT FOR PUBLIC DISCLOSURE

This report was prepared by FocalPoint Consulting Group based in part on information provided by staff and management of the Nuclear Regulatory Commission. The information was evaluated but not independently verified by FocalPoint. The assessment contained in this report was developed independent of the individuals who provided the information.

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Introduction by the Nuclear Regulatory Commission

From October 2008 through May 2009, in response to Commission direction, the U.S. Nuclear Regulatory Commission (NRC) established the Internal Safety Culture Task Force to identify potential initiatives that could improve the agency's safety culture. This direction was complementary to the external focus on licensees' safety culture which the agency has undertaken in recent years. The full Task Force report, including methodology, results, and recommendations, can be found at:

<http://www.nrc.gov/about-nrc/regulatory/enforcement/safety-culture.html#internal-safety>

It is important to note that the Task Force did not conduct a full safety culture assessment, for which the overall health of the organization, including all the strengths and weaknesses, would be systematically and thoroughly evaluated. The Task Force's approach was to understand what programs and processes currently exist in the agency that support a strong safety culture and determine opportunities for improvement. The Task Force accomplished this by considering views from all levels of staff and management and by collecting information both internally and at external organizations that have strong focus on safety culture.

From the data gathered internally, the Task Force identified that all employees, from the staff through management levels, exhibited a continuing strong sense of support for the NRC mission and pride in their work. This echoes the results and themes from several recent agency wide employee surveys.

One of the recommendations made by the Task Force, which is the focus of this current evaluation report, is for the agency to assess the effectiveness of the current set of disconnected systems that comprise the agency's problem identification, evaluation, and resolution process to identify areas for improvement. Based on the results, the agency should develop activities, enhancements, or initiatives to address identified weaknesses and areas in need of improvement."

The agency contracted with FocalPoint Consulting Group to conduct this evaluation and to develop options for improvements. The agency appreciates the participation by all the individuals who supported FocalPoint in their data collection and evaluation efforts and the open and honest sharing of views and insights. The results from this independent evaluation will be thoroughly reviewed by the agency, along with other applicable employee feedback inputs and relevant considerations, to determine how to further develop and improve in this area. In addition, agency wide communications will be provided as actions and developments in this area are undertaken, in order to keep the staff informed.

1. Executive Summary

In October of 2009, the U.S. Nuclear Regulatory Commission (NRC) hired FocalPoint Consulting Group, a management consulting firm, to perform an evaluation of the NRC's issue resolution systems. The Agency's issue resolution systems are important in enabling a safety-conscious, open, and collaborative work environment. Such systems should provide support for effective identification, evaluation, and resolution of issues to support continuous improvement in safety, quality, and reliability with regard to the NRC's regulatory mission.

The objective of this evaluation is to support the Agency in an assessment of its problem identification, evaluation, and resolution systems as recommended by the Internal Safety Culture Task Force. The scope of this evaluation included a set of 18 agency-wide and office/region-specific issues resolution systems that were relevant to the public safety and security mission of the NRC. The findings and recommendations of this evaluation are set out in this report.

In general, issues with safety/security significance can be addressed either through one of the issue resolution systems or through other means, such as an employee's management chain. The objective of this evaluation was to assess the systems and procedures supporting issue resolution, not to evaluate the quality of issue resolution at the Agency. The effectiveness of the supporting systems and procedures is one of several organizational attributes that ultimately determine the effectiveness of issue resolution.

Evaluation Approach

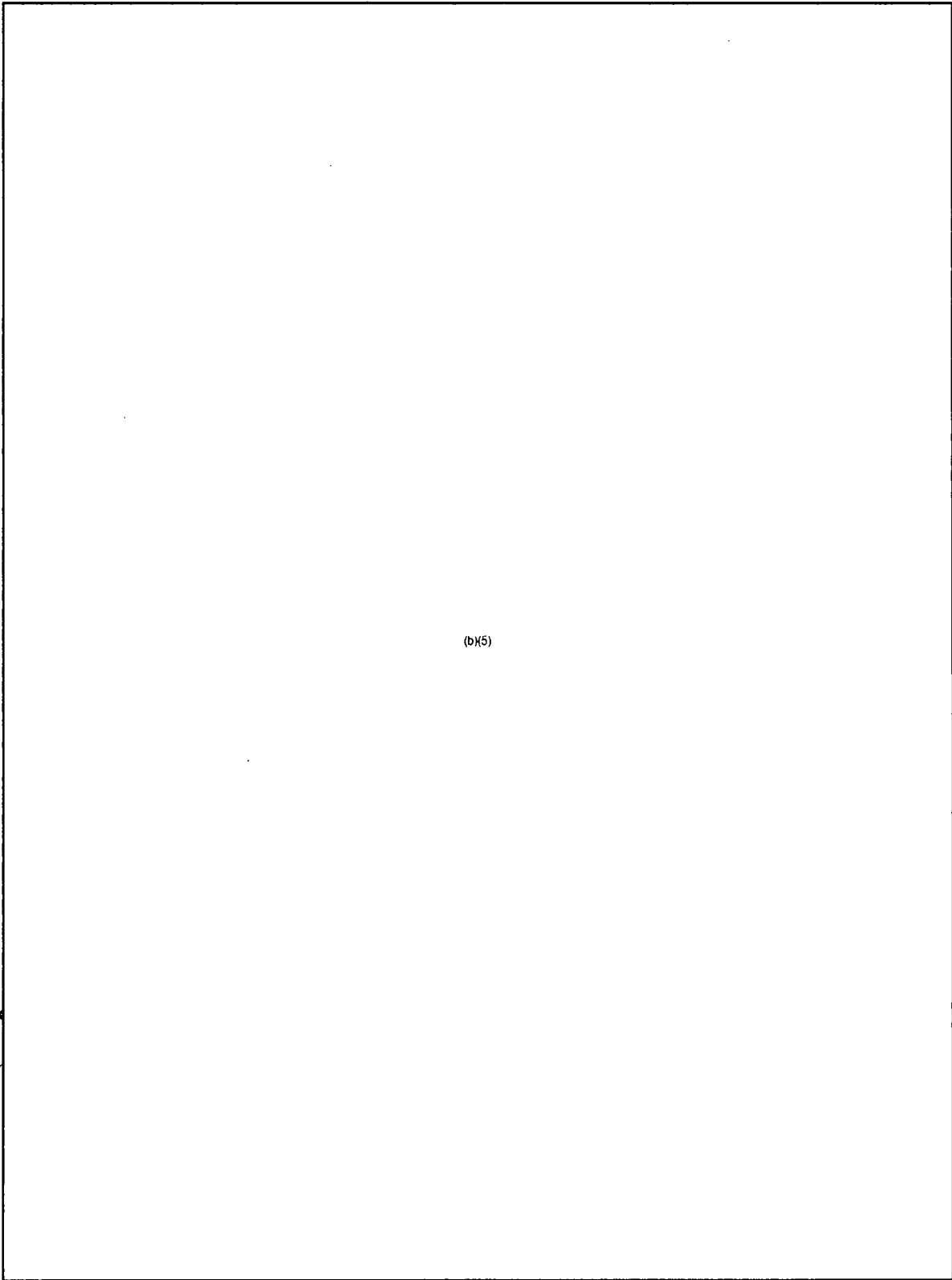
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Summary of Findings

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Some specific findings are provided below.

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Summary of Recommendations

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2. Introduction

2.1. Background

In October of 2009, the U.S. Nuclear Regulatory Commission (NRC) hired FocalPoint Consulting Group, a management consulting firm, to perform an evaluation of the NRC's issue resolution systems. The Agency's issue resolution systems are important in supporting efforts to maintain a safety-conscious, open, and collaborative work environment. Given the importance of the Agency's mission to regulate reactors, materials, and waste to ensure adequate protection of public health and safety and security, it is critical that the NRC develop, maintain, and exhibit credible strategies for addressing issues that may impact safety related to its regulatory function. An important part of this approach is having mechanisms in place to ensure that issues are identified, evaluated, and addressed so the organization can be improved with regard to safety, quality, and reliability.

The NRC chartered the Internal Safety Culture Task Force in October 2008 in response to the Commission's direction to "provide the Commission with a report outlining potential initiatives that could improve the Agency's internal safety culture." This effort is related to the Agency's ongoing efforts to improve the oversight programs for addressing safety culture for licensees. One of the recommendations is for the Agency to assess the effectiveness of the current set of systems that comprise the Agency's problem identification, evaluation, and resolution process to identify areas for improvement. The objective of this project is to support the Agency in evaluation of these systems as recommended by the Internal Safety Culture Task Force. The scope of this evaluation included a set of 18 agency-wide and office/region-specific issue resolution systems that were relevant to the public safety and security mission of the NRC and for work-related issues.

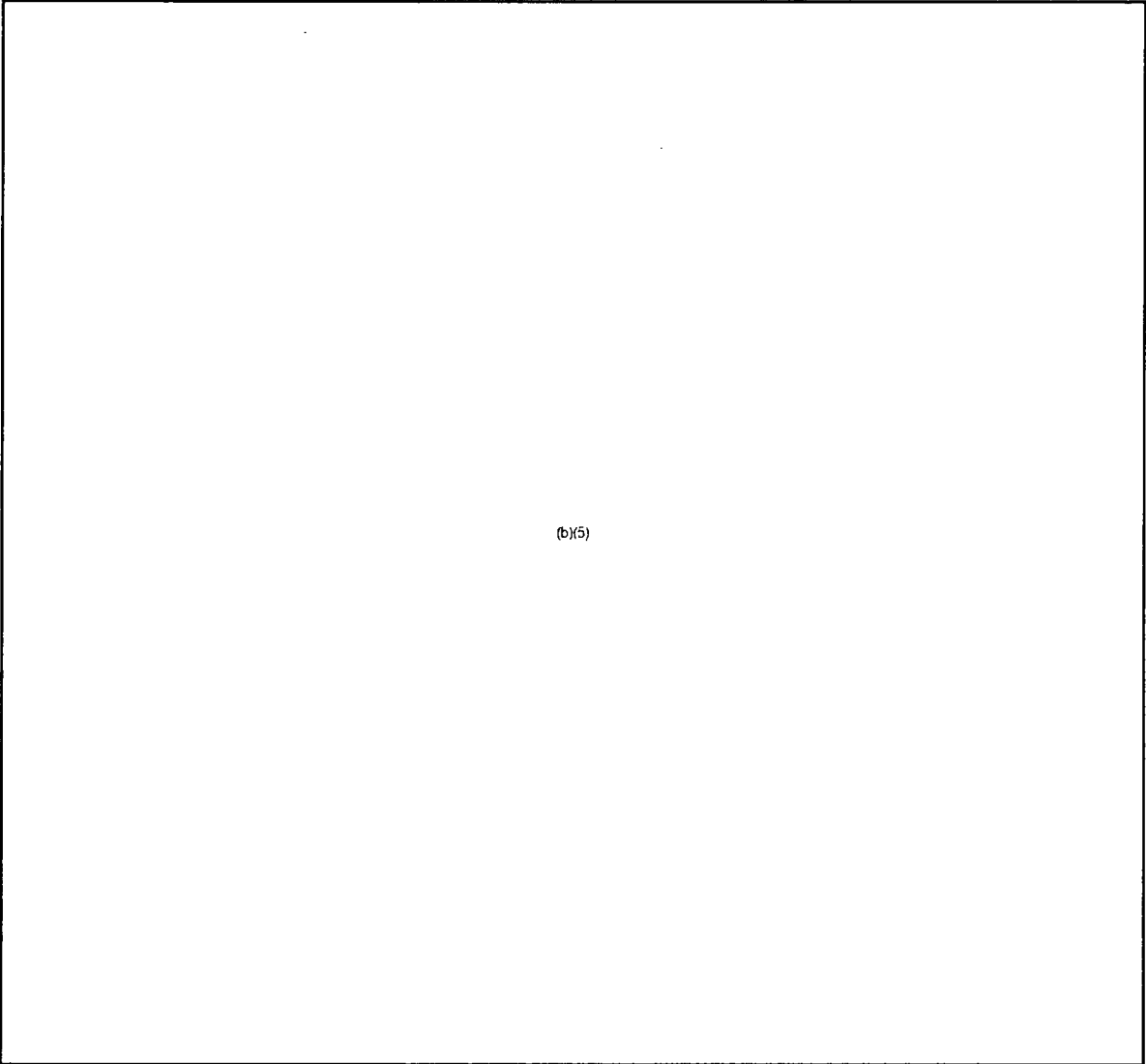
Exhibit 2: List of Issue Resolution Systems Reviewed

Type	System / Program
Agency-wide	• 2006 Petition Process
	• Allegations Program
	• Differing Professional Opinions (DPO) Program
	• Employee Satisfaction Surveys
	• Generic Issues Program
	• Lessons Learned Program
	• Non-Concurrence Process (NCP)
	• Reactor Oversight Process (ROP) Feedback Program
	• Suggestion Program
Office / Region Specific	• Office of Nuclear Material Safety and Safeguards / Division of Spent Fuel Storage and Transportation (SFST) Lessons Learned Process
	• Office of Nuclear Reactor Regulation Corrective Action Program (NRR CAP)
	• Office of Nuclear Security and Incident Response (NSIR) Ask Management
	• Office of Research (RES) Feedback Portal
	• Region I Ask Management
	• Region I Corrective Action Program
	• Region II Ask Management
	• Region III Suggestion Box
	• Region IV Ask Management

Since we started our evaluation in October 2009, a number of new programs have been created and implemented at the Agency and in the offices and regions. The one agency-wide system in use is OpenNRC, which was initially implemented to receive feedback on the Agency's Open Government Plan. The Agency is currently considering the continued use of this system to promote transparency, participation, and collaboration with Agency stakeholders. Among the office/region-specific systems recently implemented are suggestion boxes in the Office of Enforcement and Office of Administration. In addition, the Office of New Reactors is in the planning and design phase for a corrective action program.

In developing our report, we excluded statutory processes that are controlled by independent entities, such as the Office of the Inspector General's hotline, the National Treasury Employees Union Chapter 208 grievance process, and the Employment Discrimination Process.

2.2. Methodology



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2.3. Descriptions and use of systems

The following systems were reviewed as part of this assessment:

Agency-wide Programs/Systems:

- **2.206 Petition Process:** This program ensures the public's health and safety through the prompt and thorough evaluation of any potential problem addressed by a petition filed under 10 CFR 2.206. It provides appropriate participation by a petitioner in, and observation by the public of, NRC's decision-making activities related to a 10 CFR 2.206 petition.
- **Allegations Program:** Primarily a tool for stakeholders external to the NRC, this program deals with information concerning violations of NRC requirements and wrongdoing by individuals or organizations who are licensed by the NRC, applicants for licenses, licensee contractors or vendors, or employees of any of the above. Matters identified by NRC staff that involve potential wrongdoing are reviewed by the NRC's Office of Investigation within the Allegations Program but technical concerns identified by the staff are handled in other appropriate processes.
- **Differing Professional Opinions (DPO) Program:** This program is a formal process that all NRC employees and contractors can use to have their differing views on established positions considered by appropriate office directors and regional administrators.
- **Employee Satisfaction Surveys:** The purpose of employee satisfaction surveys is to gauge the employees' level of satisfaction. Until recently, the NRC performed two types of employee satisfaction surveys, in alternating years: the NRC Annual Employee Survey and the Federal Human Capital Survey (FHCS).
- **Generic Issues Program:** This program is responsible for identifying, evaluating, and resolving generic issues (i.e., regulatory matters that may not be sufficiently addressed by existing regulations, guidance, or programs). Such a matter may involve the design

construction, operation, or decommissioning of several licensees or a class of NRC licensees or certificate holders.

- **Lessons Learned Program:** This program establishes a formal and rigorous process to ensure correction of significant Agency deficiencies and prevention of major organizational problems identified by lessons learned from recurrence.
- **Non-Concurrence Process (NCP):** This process allows employees who choose not to concur on any part of a document in which they disagreed to register their concerns and attach them to proposed staff positions or other documents to be forwarded with the position as it moves through the management approval chain.
- **Reactor Oversight Process (ROP) Feedback Program:** This program allows employees to identify issues that need program-level attention and to suggest changes to improve the effectiveness or implementation of the ROP. Feedback can address concerns involving performance indicators, assessment, inspection, the significance determination process, enforcement, training, and cross-cutting issues.
- **Suggestion Program:** This program is available to any employee who wishes to address possible solutions to work-related issues or processes or simply to express ideas. If the suggestion is adopted, the employee is eligible for a monetary award.

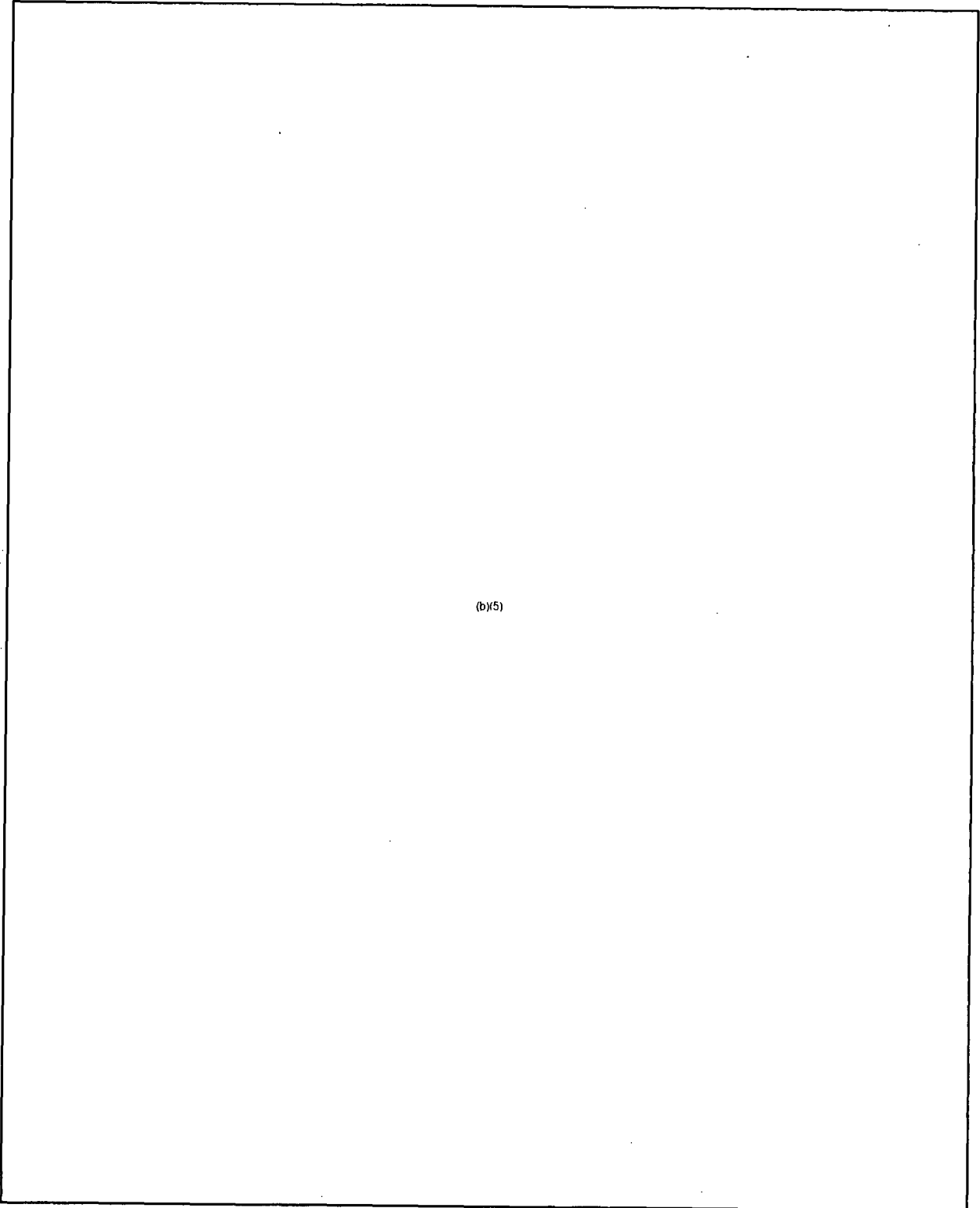
Office/Region-Specific Programs/Systems:

- **Office of Nuclear Material Safety and Safeguards (NMSS)/Division of Spent Fuel Storage and Transportation (SFST) Lessons Learned Process:** This process enables SFST staff to review the work performed by the Division and to improve efficiency and effectiveness.
- **Office of Nuclear Reactor Regulation (NRR) Corrective Action Program:** This program provides a process for NRR staff and managers to improve NRR work processes by identifying and resolving problems and suggesting possible enhancements to work practices.
- **Office of Nuclear Security and Incident Response (NSIR) Ask Management:** This system is a forum for NSIR employees to raise issues and concerns and ask any type of question, including those related to technical issues, security programs, and the workplace, and to receive an answer from management.
- **Office of Research (RES) Feedback Portal:** The purpose of this program is to encourage the RES staff to provide suggestions that will enhance RES practices.
- **Region I Ask Management:** This system gives all Region I employees the opportunity to ask management questions on any matter anonymously and receive an answer from management.
- **Region I Corrective Action Program:** This program ensures tracking and completion of issues in need of corrective actions, as identified in assessments, lessons learned, and other initiatives for Region I.

- **Region II Ask Management:** This system gives all Region II employees the opportunity to ask management questions of any matter anonymously and receive an answer from management.
- **Region III Suggestion Box:** This program gives all Region III employees the opportunity to make a suggestion, raise an issue, or ask a question of senior management and receive a response from senior management.
- **Region IV Ask Management:** This system gives all Region II employees the opportunity to ask management questions of any matter anonymously and receive an answer from management.

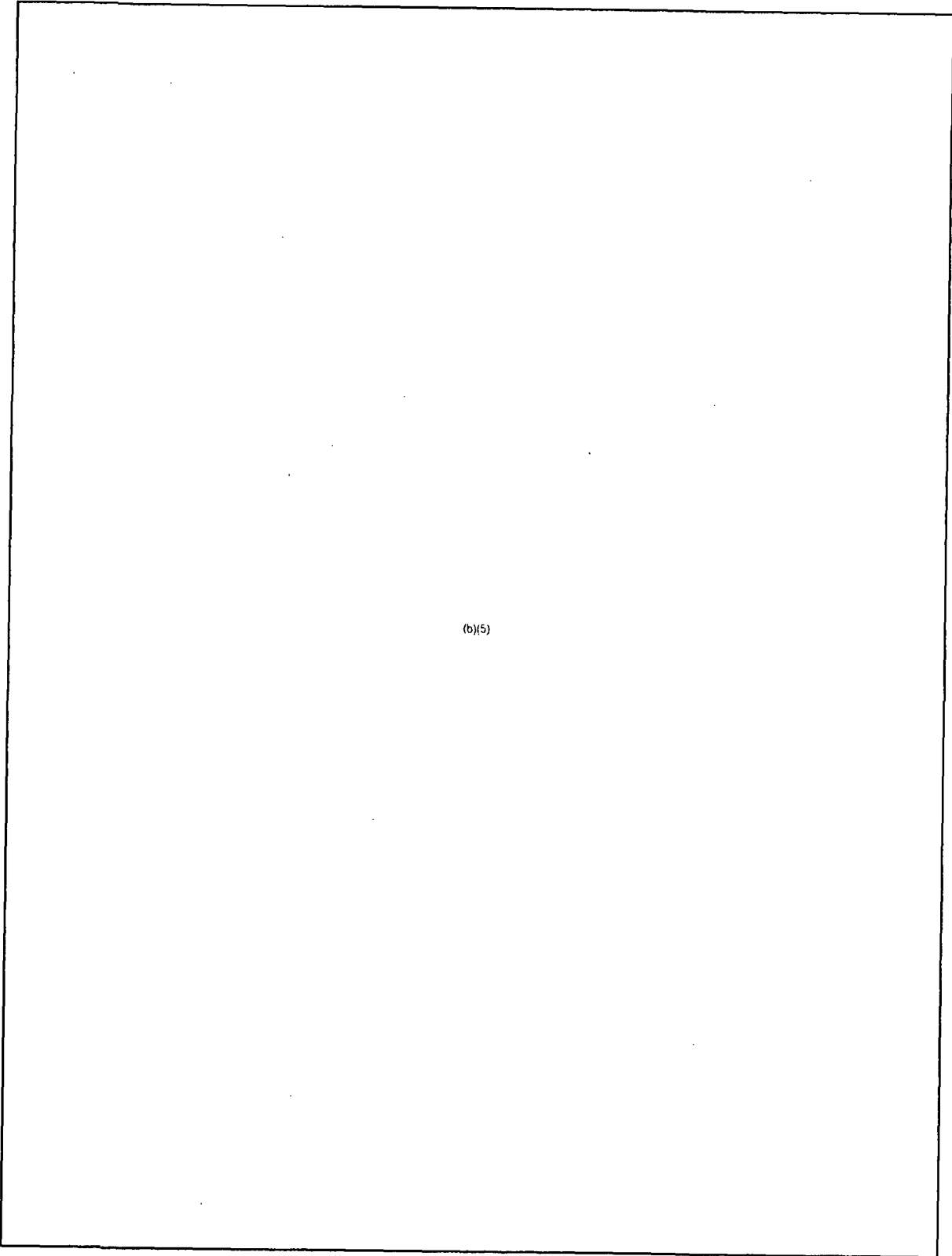
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3. Issue Resolution Systems at the NRC: Current Situation

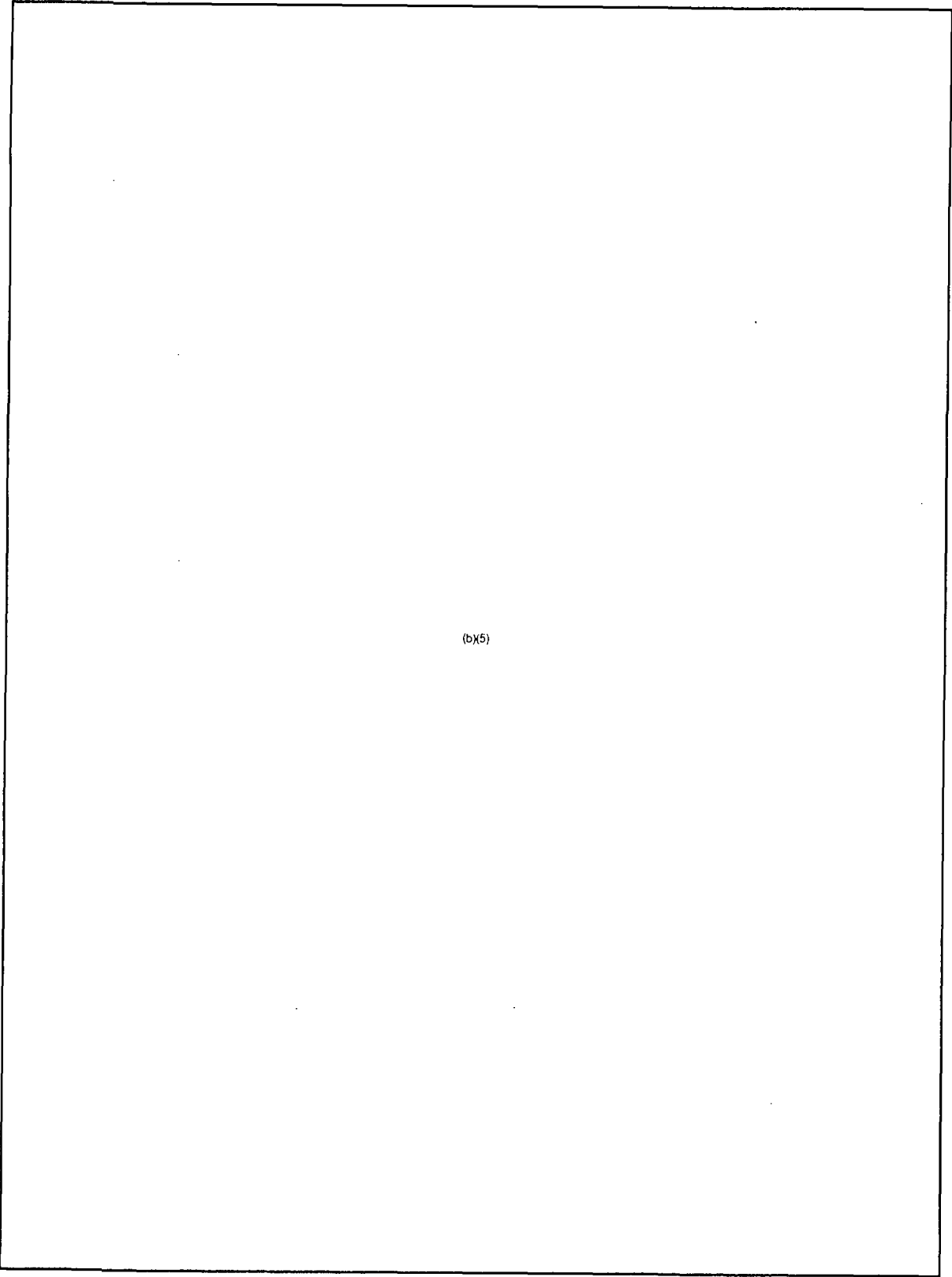


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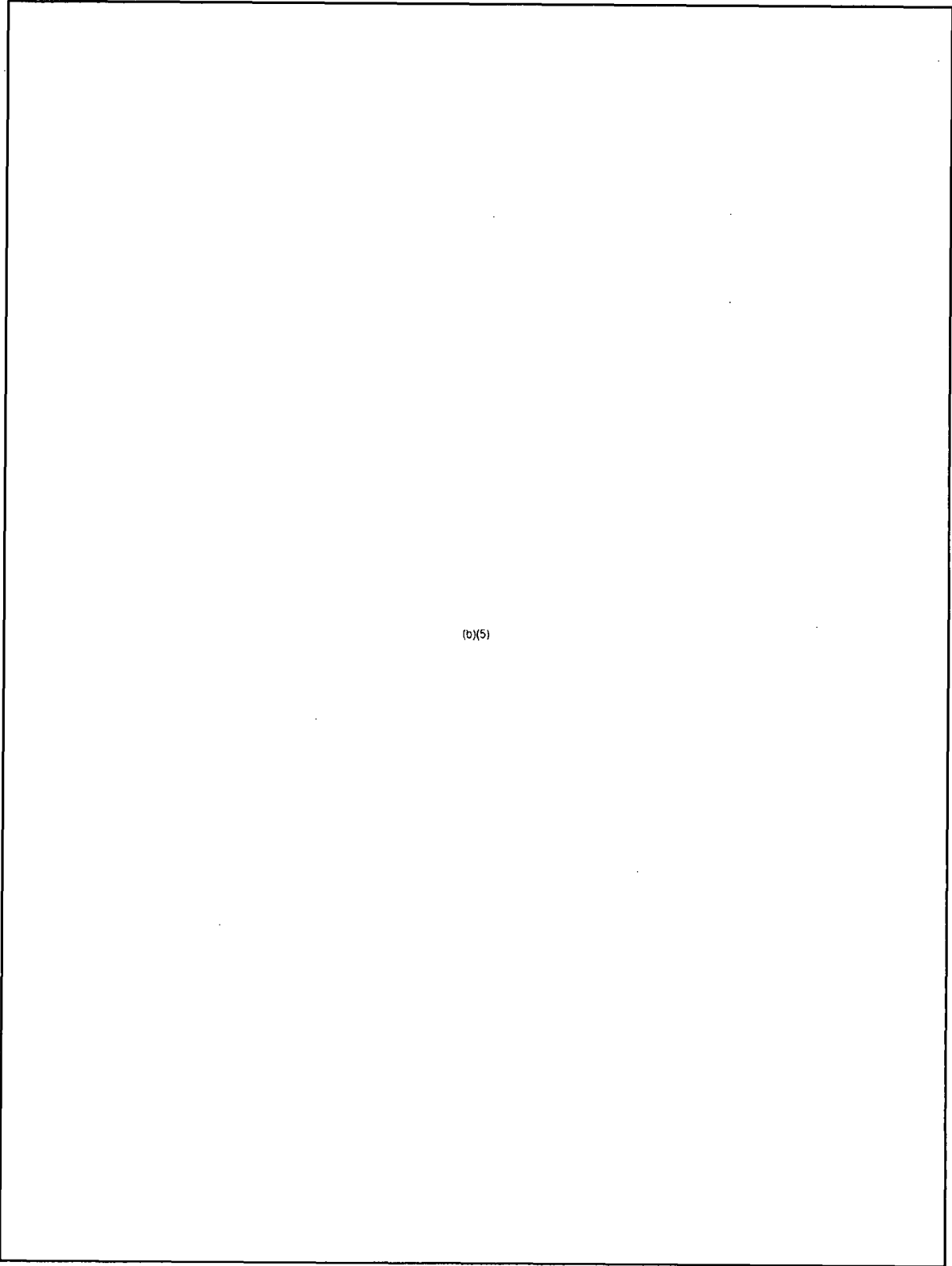
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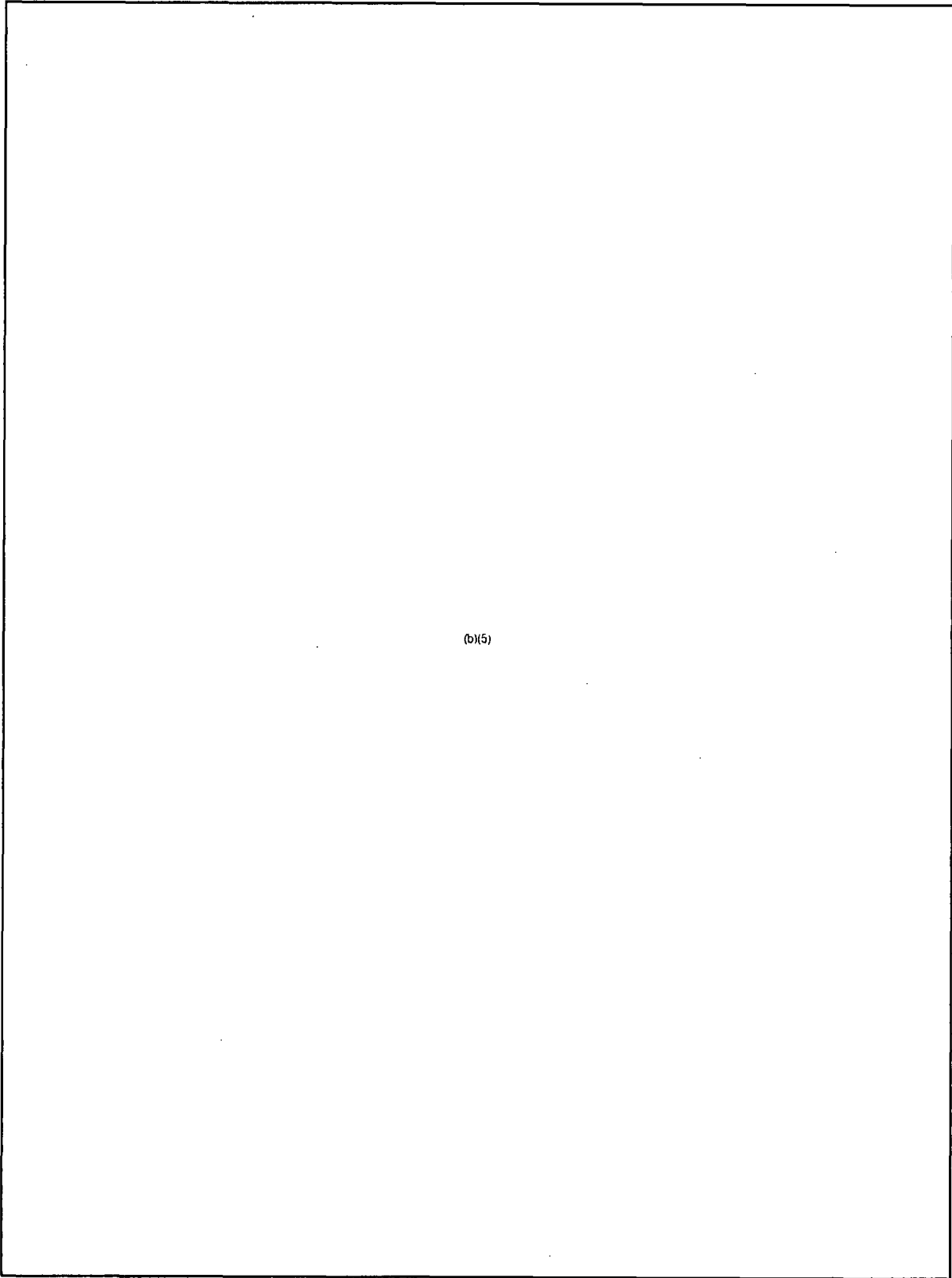


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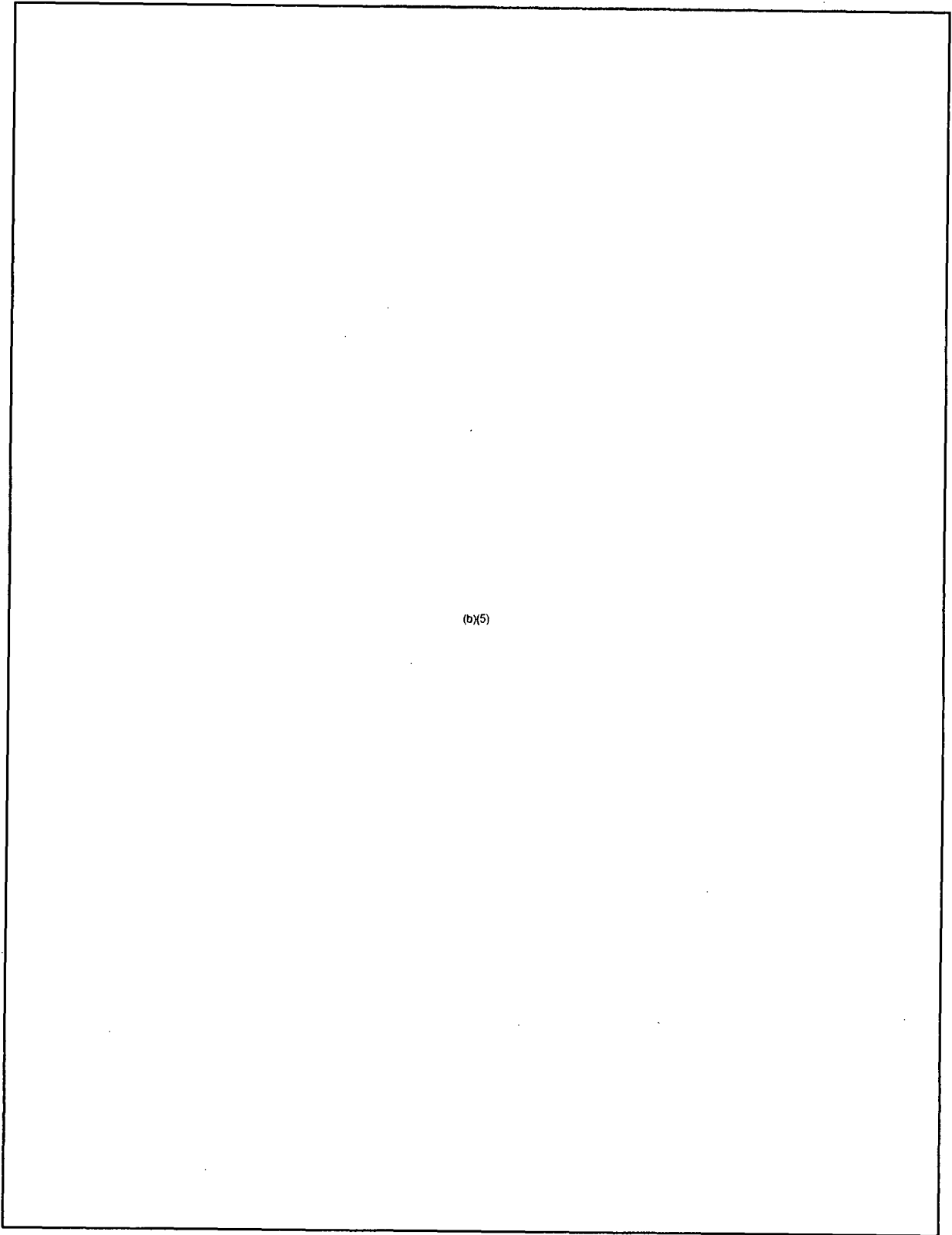
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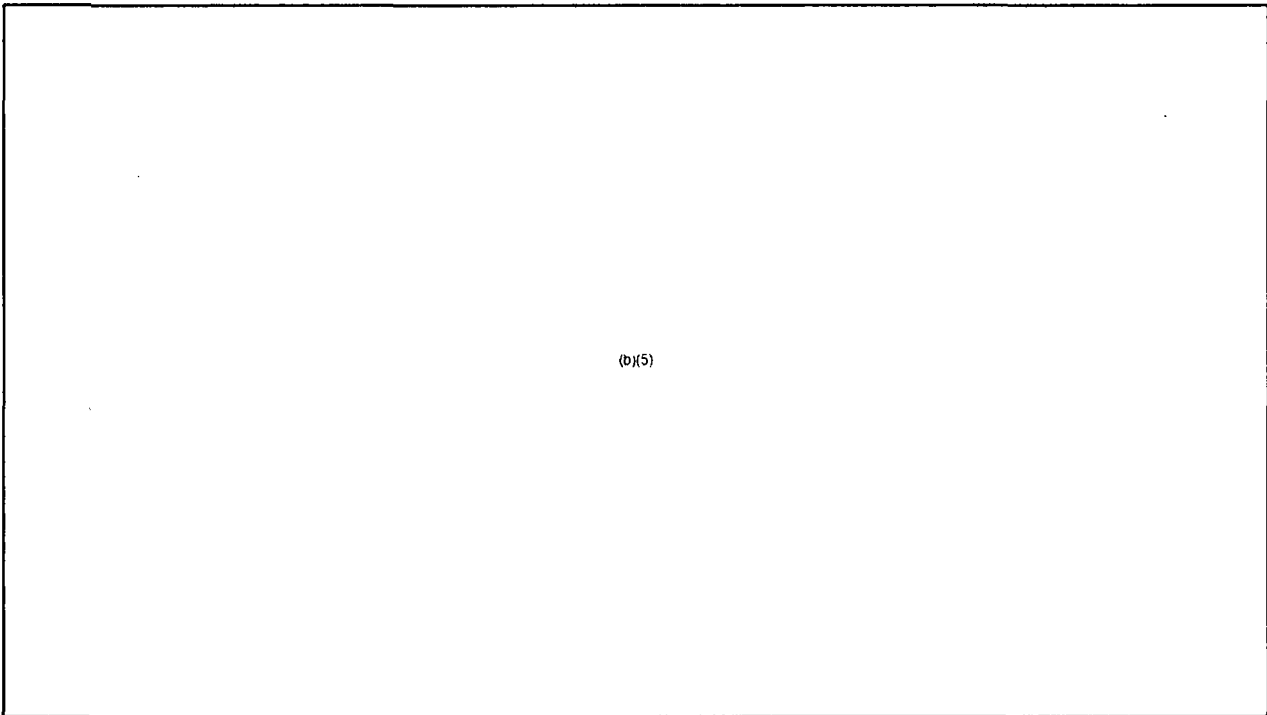
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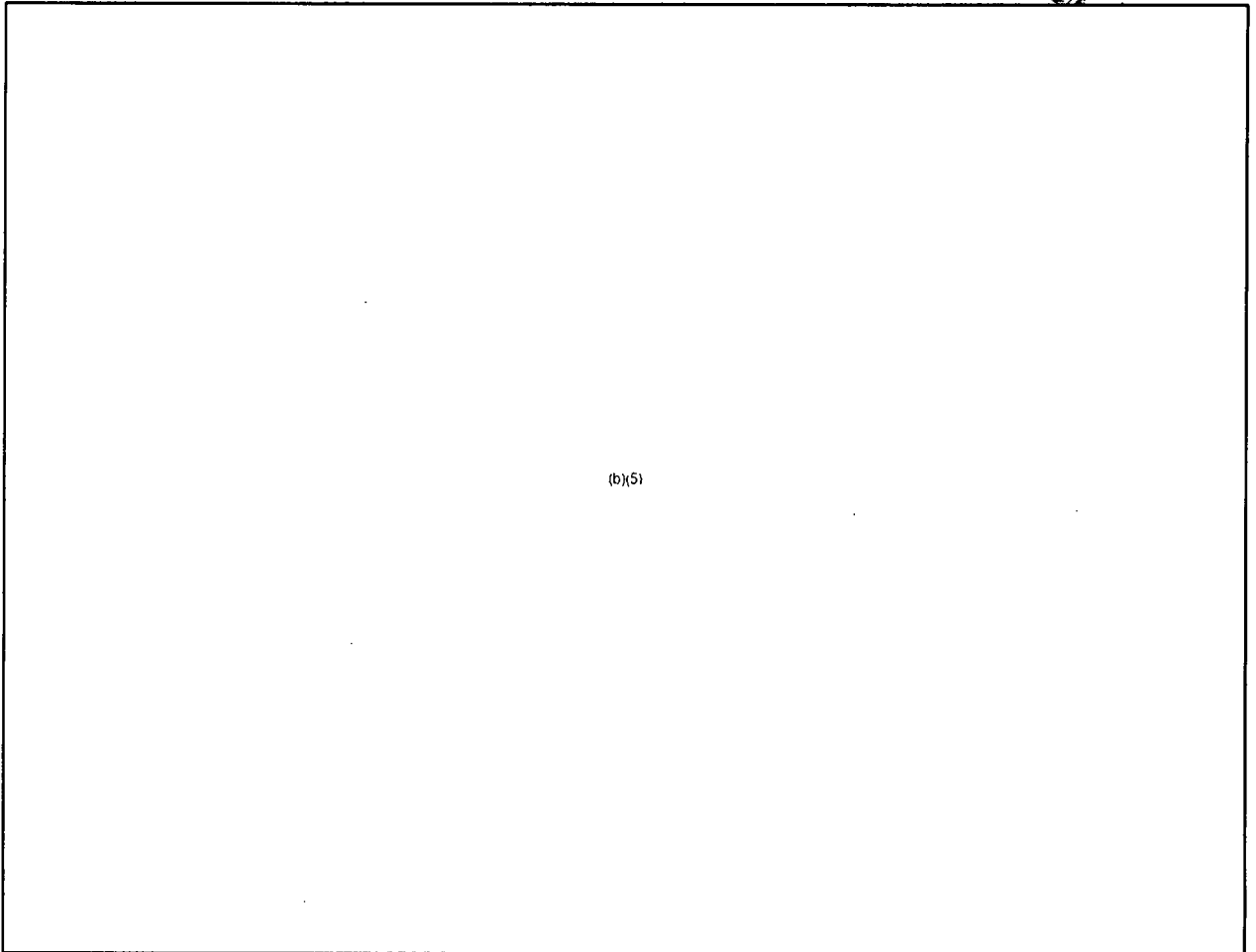


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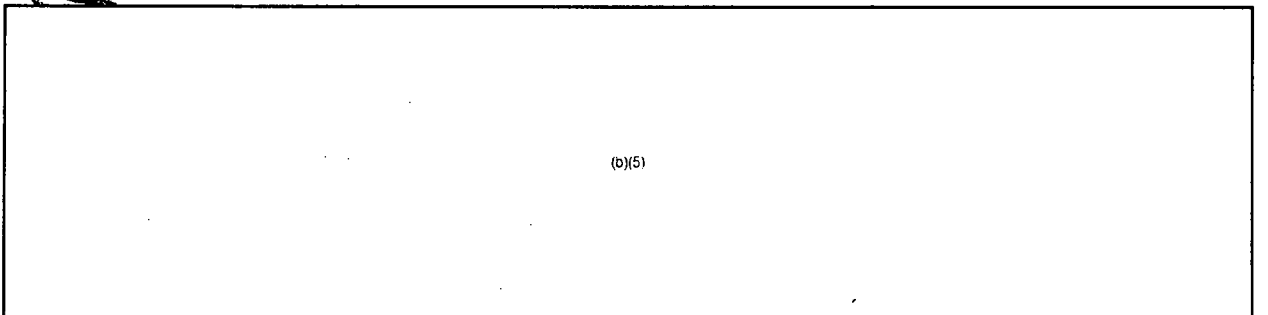
4. Issues and Options for Improvement

4.1. Problems identified

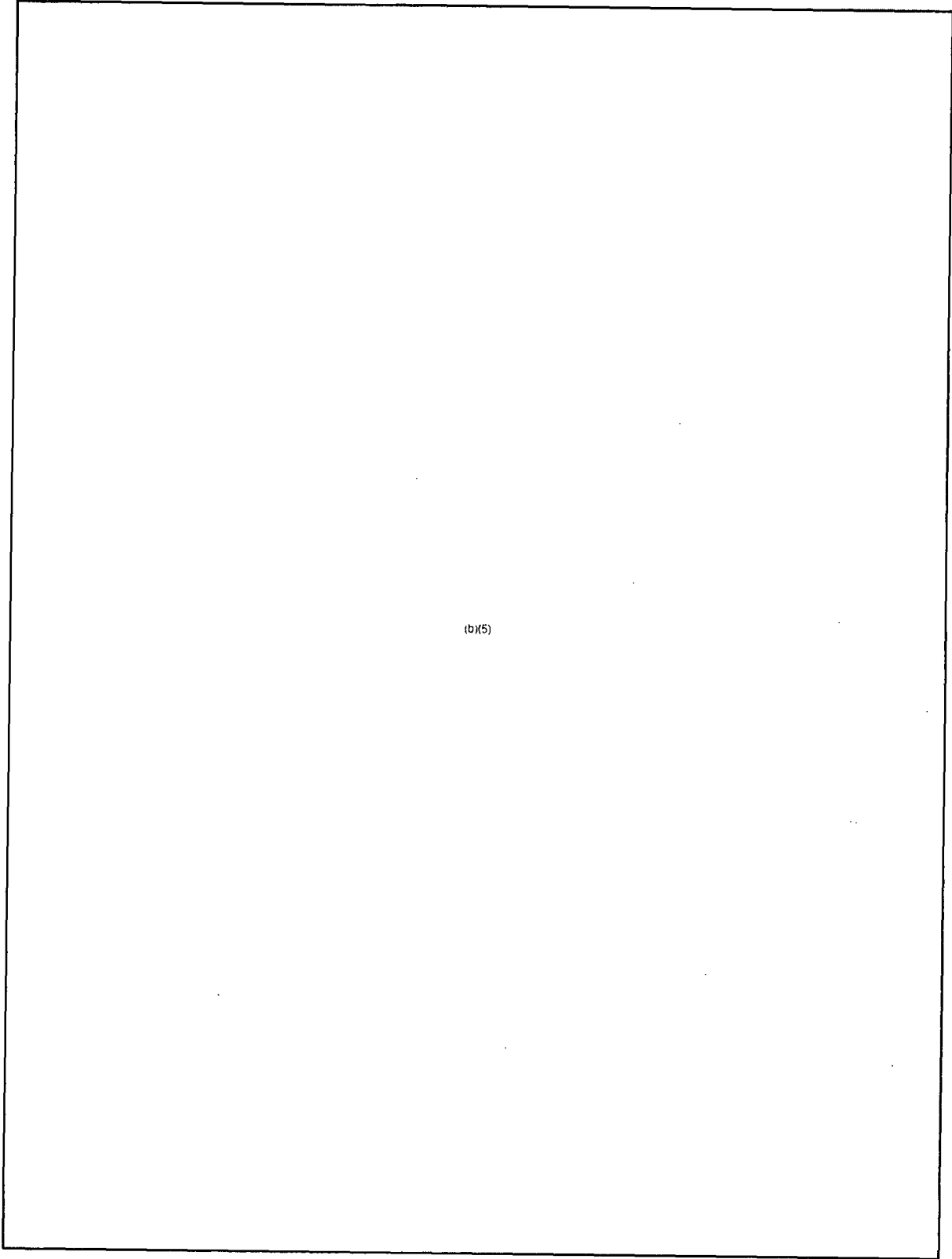


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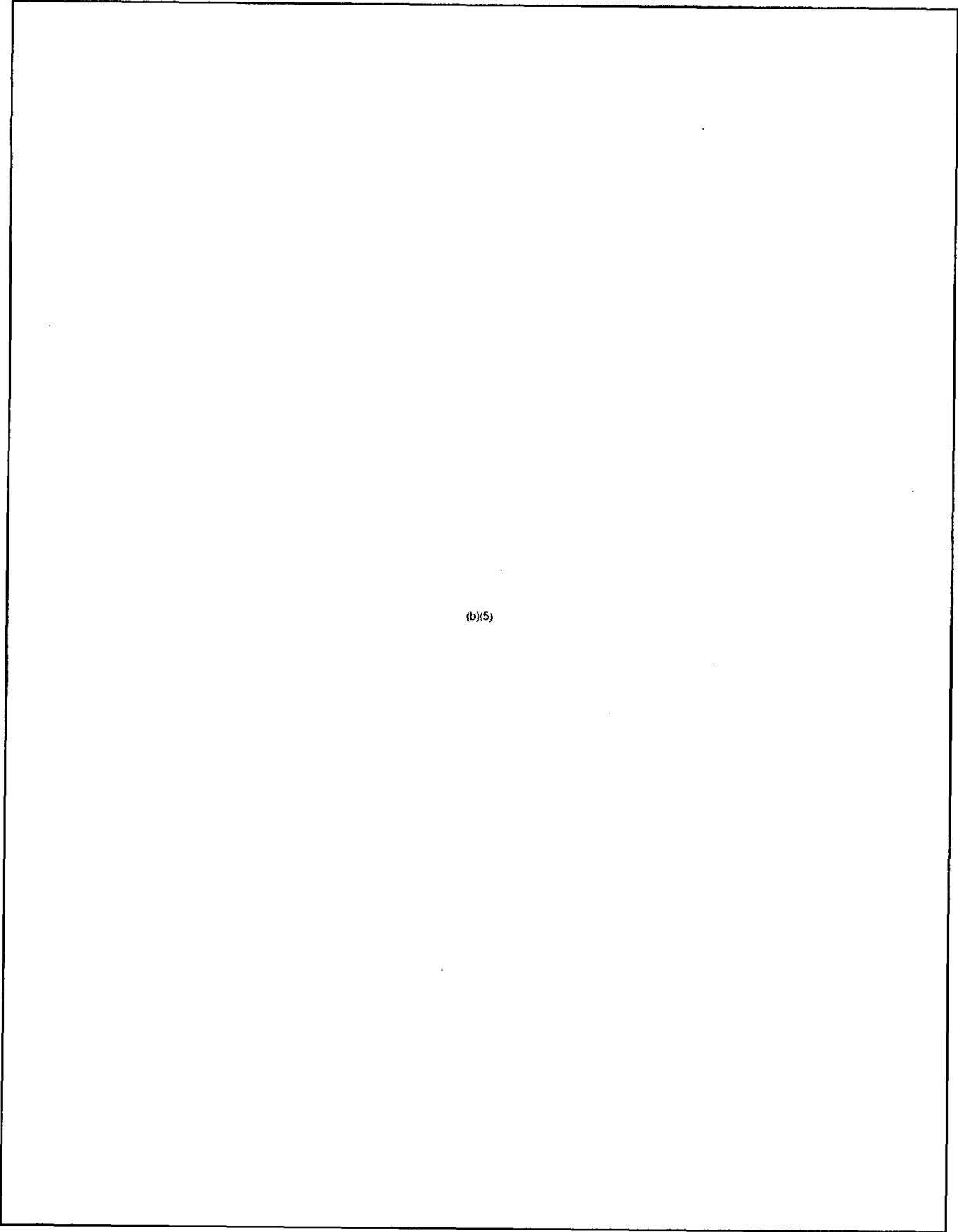
4.2. Options for Improvement



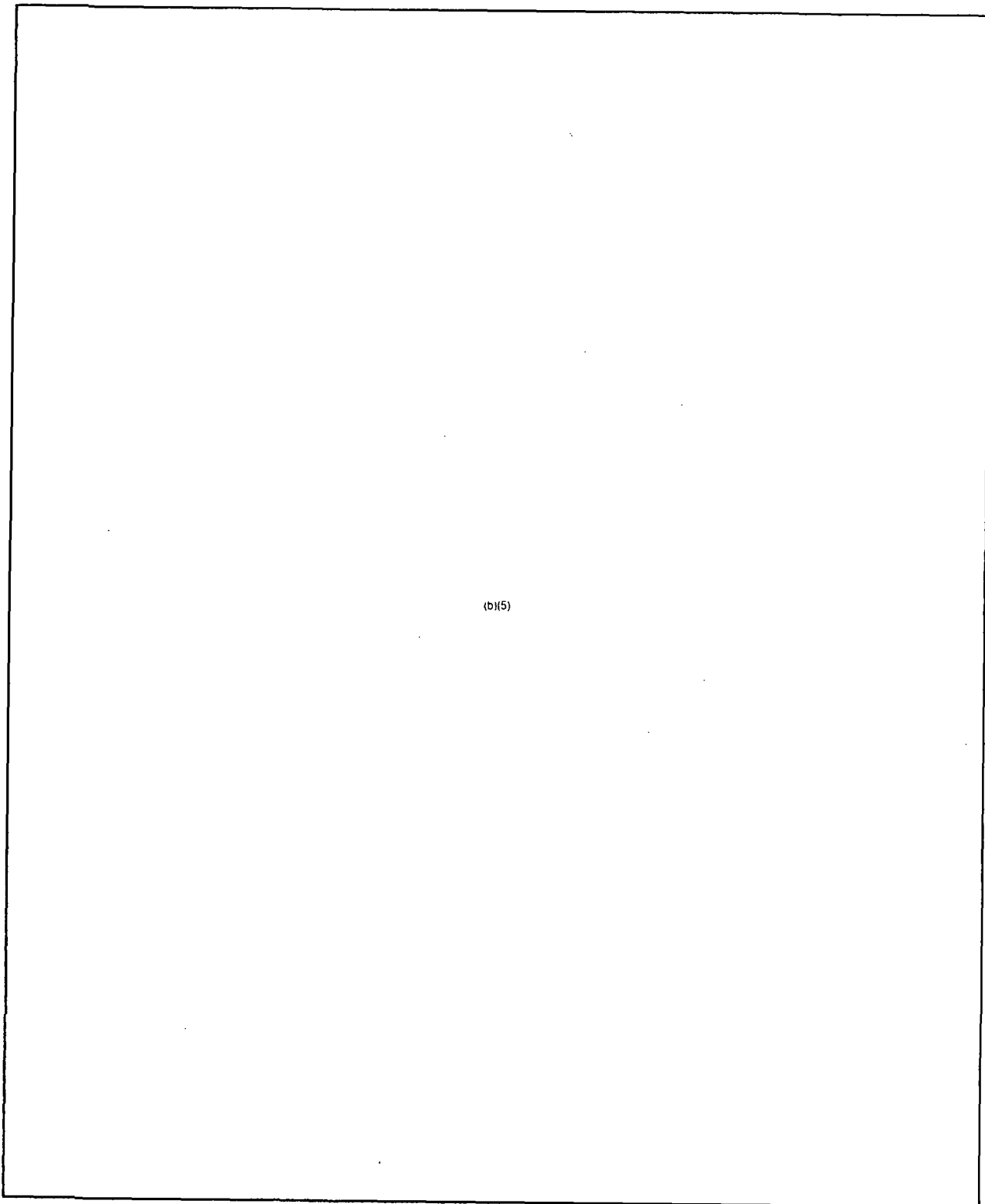
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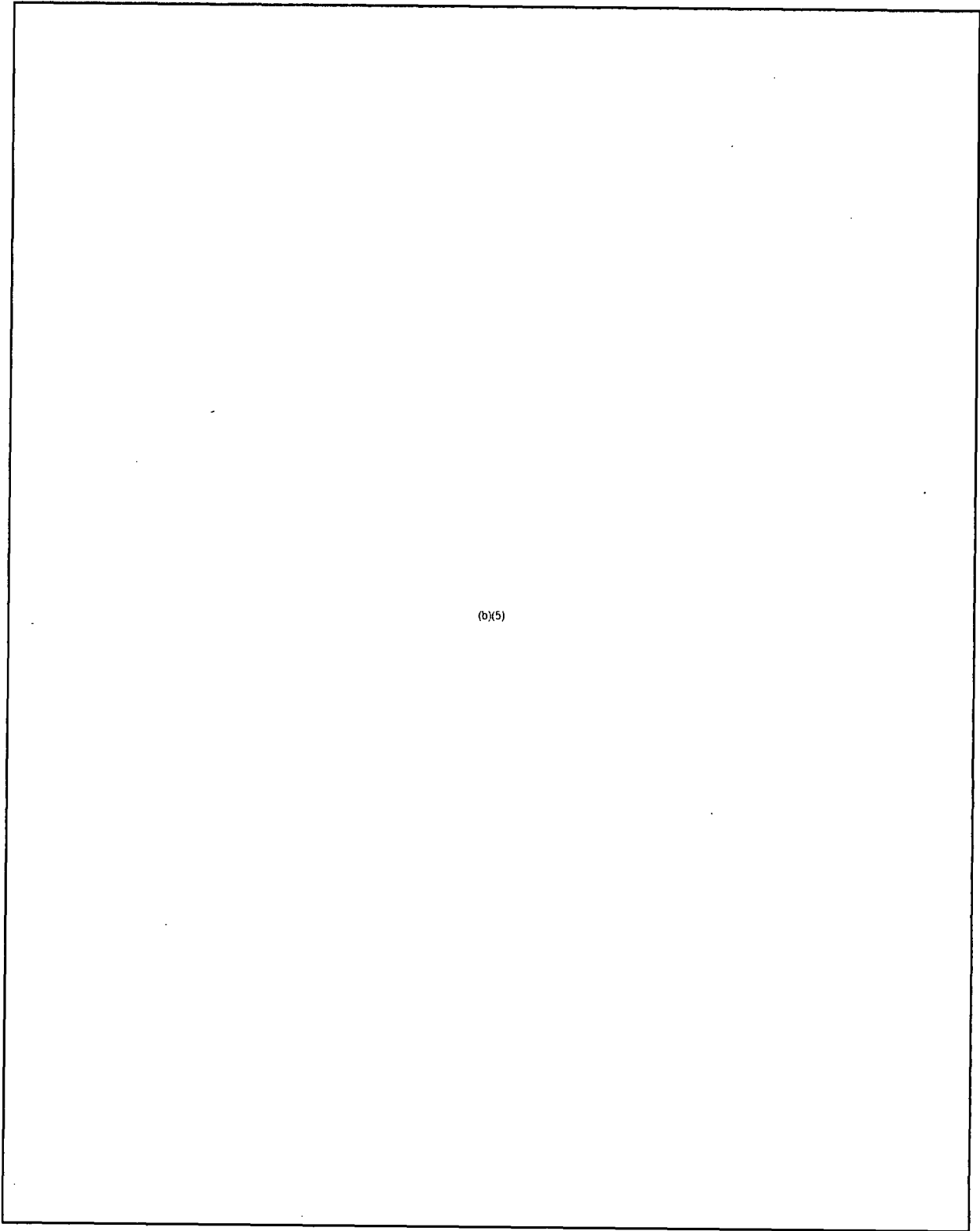


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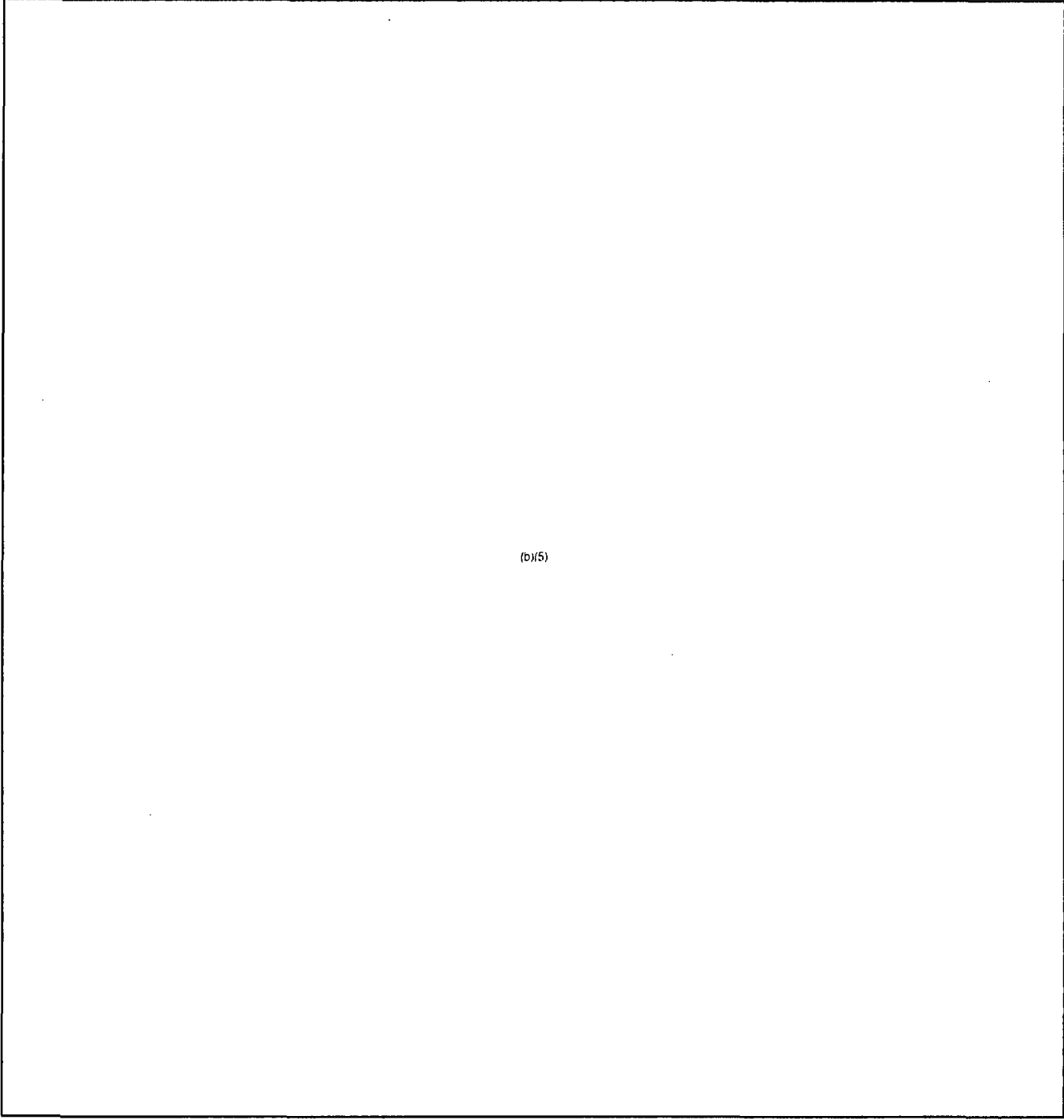
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5. Analysis of Options and Recommendation

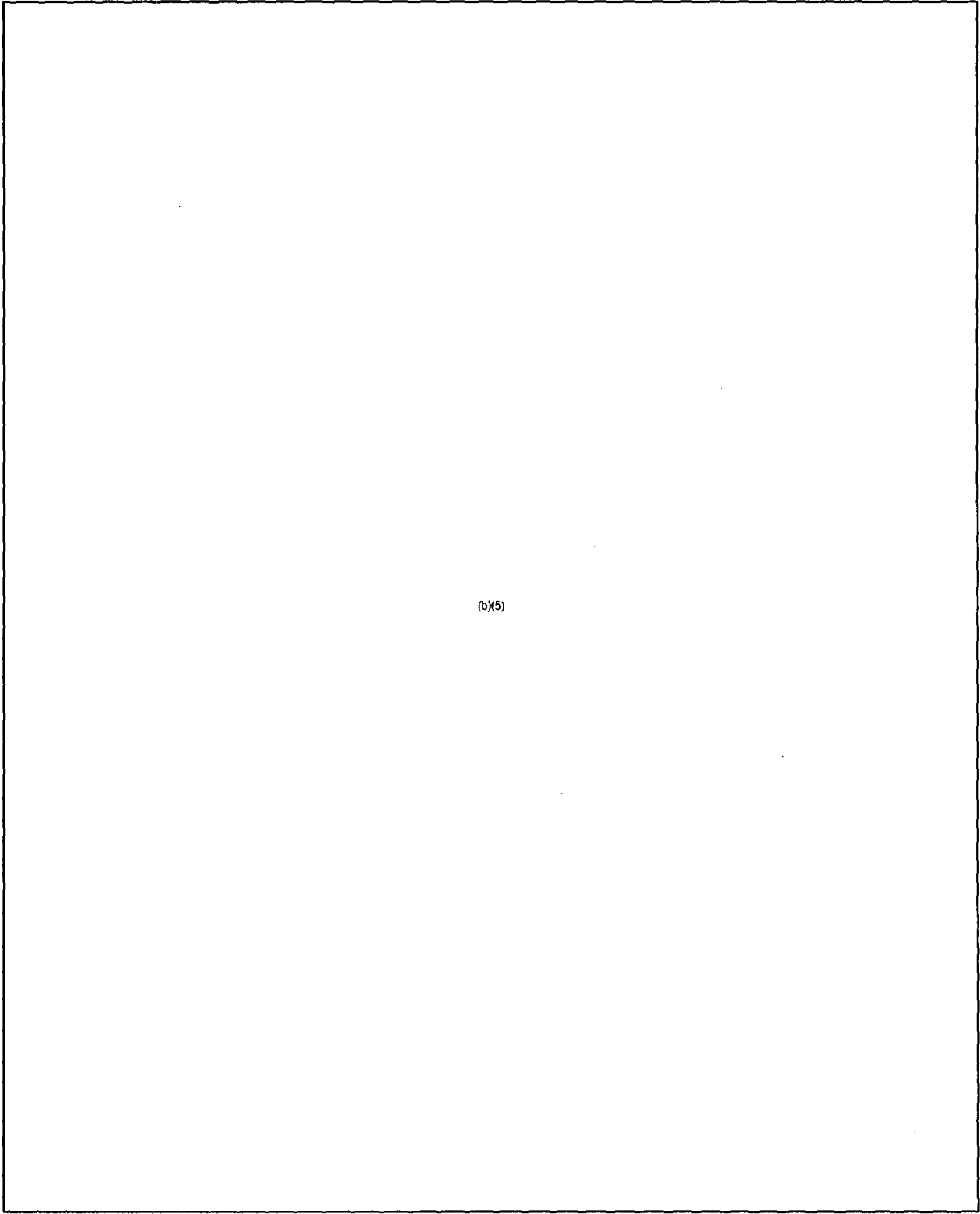
5.1. *Comparison of Options*

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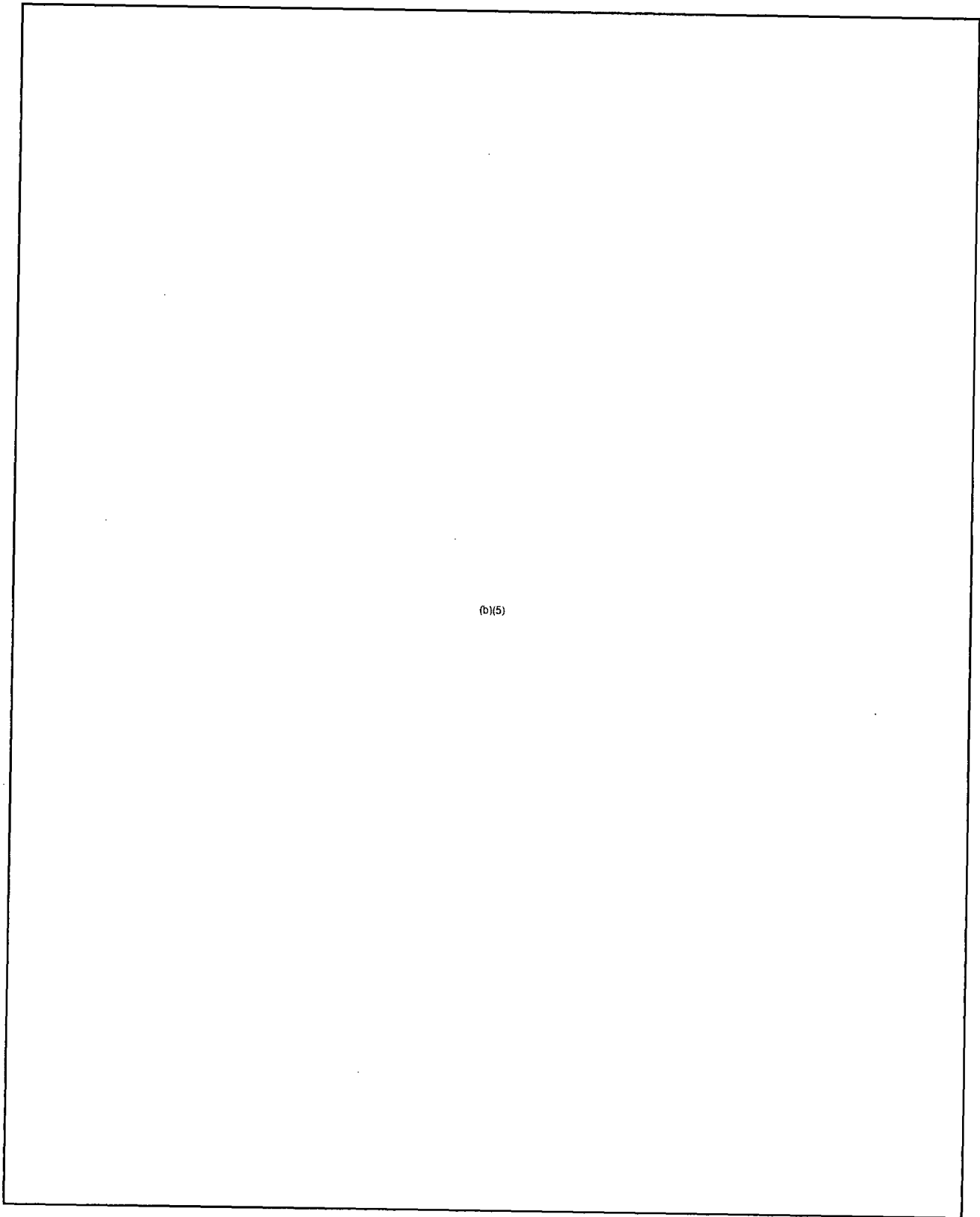
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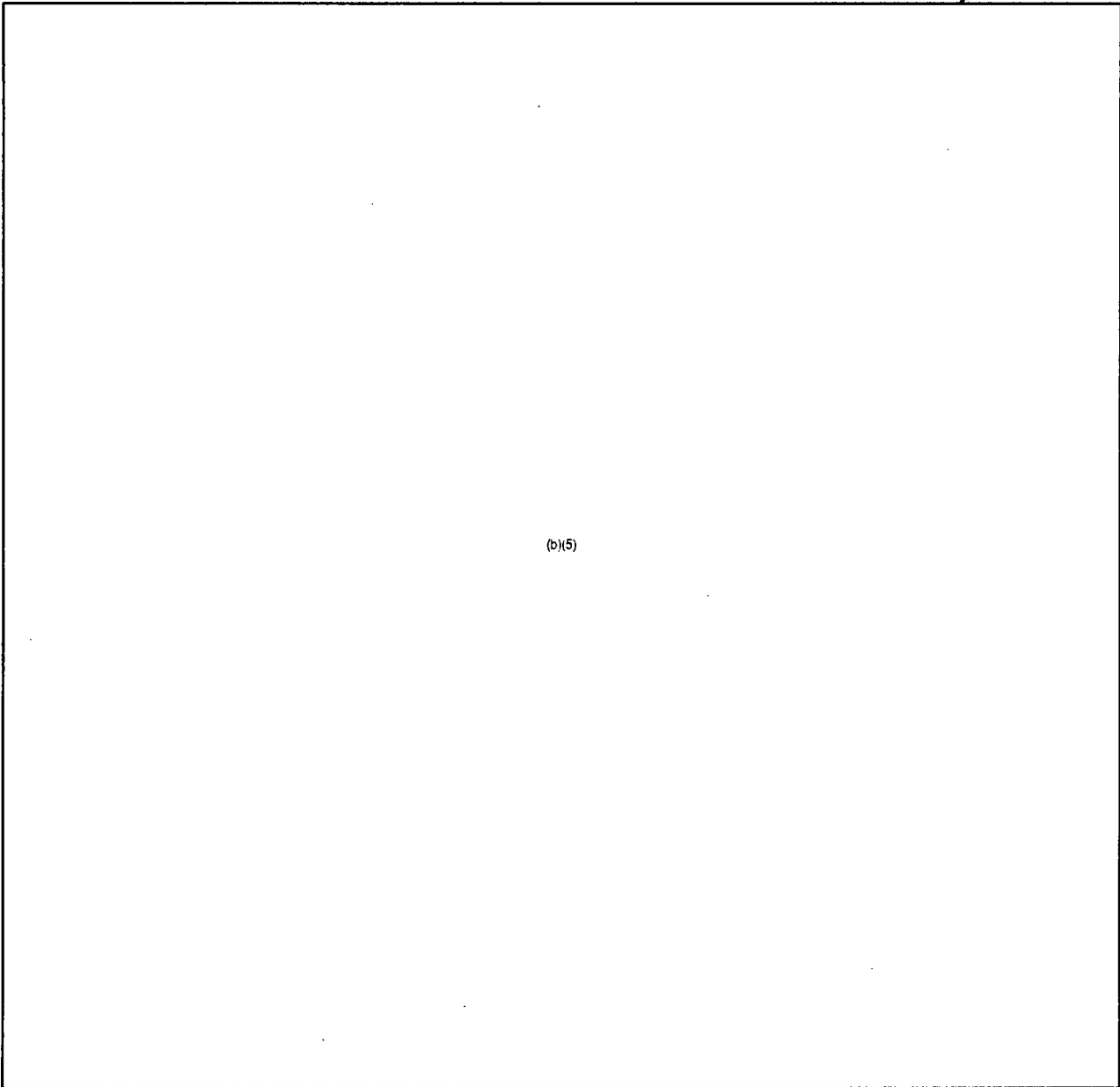
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5.2. Recommended Option



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Appendices

~~NOT FOR PUBLIC DISCLOSURE~~

A1. Profiles of Issue Resolution Systems

2.206 Petition Process

System Purpose

Description

This program ensures the public's health and safety through the prompt and thorough evaluation of any potential problem addressed by a petition filed under 10 CFR 2.206. It provides appropriate participation by a petitioner in, and observation by the public of, NRC's decision-making activities related to a 10 CFR 2.206 petition. It also ensures effective communication with the petitioner and other stakeholders on the status of the petition, including providing relevant documents and notification of interactions between the NRC staff and a licensee or certificate holder relevant to the petition.

As stated in Management Directive and Handbook 8.11, "Review Process for 10 CFR 2.206 Petitions" (MD 8.11), the objective of the 2.206 Petition Process is:

- To ensure the public health and safety through the prompt and thorough evaluation of any potential problem addressed by a petition filed under 10 CFR 2.206.
- To provide for appropriate participation by a petitioner in, and observation by the public of, NRC's decision-making activities related to a 10 CFR 2.206 petition.
- To ensure the effective communication with the petitioner and other stakeholders on the status of the petition, including providing relevant documents and notification of interactions between the NRC staff and a licensee or certificate holder relevant to the petition.

System users

Any member of the public may submit a 2.206 petition to request that the Commission take enforcement-related action.

How/where purpose is described

How to submit a 2.206 petition to the NRC is explained on the NRC public web site in the *About NRC* section, under *How We Regulate*, under *Enforcement*, under *Public Involvement*, and under *Petition the NRC to Take an Enforcement Action*. More information on the petition process may be found in the NRC brochure, "Public Petition Process" (NUREG/BR-0200) and in MD 8.11 which provides guidance on the review process for 10 CFR 2.206 petitions for NRC staff.

Similar or redundant systems

While there are other ways for the public to report or request NRC action on nuclear health and safety concerns, including the Allegations Program, the Incident Response Program, and the OIG Hotline, the 2.206 Petition Process is distinct in that a request for enforcement-related action by the Commission is submitted. This distinction and the criteria for reviewing petitions under the 2.206 Petition Process are defined in MD 8.11.

The program reported that there are no similar or redundant systems. However, there is overlap between this program and the Allegations Program. If the submitter desires anonymity, the NRC would review the safety concern under the Allegations Program rather than the 2.206 Petition Process.

Usage

Number of employees using

The program has received two petitions from an NRC employee. Employees may use the program since they are also members of the public. Twenty to 25 petitions are submitted annually by approximately 7-8 petitioners.

Number of times used

Three years ago, the program received approximately 12 petitions a year. The number of petitions has been growing in the past few years. As noted above, 20-25 petitions are submitted annually by approximately 7-8 petitioners.

Policies and Procedures

Descriptions of policies and procedures

As stated in MD 8.11, it is the policy of the NRC to provide members of the public with the means to request that the Commission take enforcement-related action (i.e., to modify, suspend, or revoke a license, or for other appropriate enforcement-related action, as distinguished from actions such as licensing or rulemaking). This policy is codified at Section 2.206 of Title 10 of the *Code of Federal Regulations* (10 CFR 2.206). The Commission may grant a request for action, in whole or in part, take other action that satisfies the concerns raised by the request, or deny the request. Requests that raise health and safety and other concerns without requesting enforcement-related action will be reviewed by means other than the 10 CFR 2.206 process.

After NRC receives a petition, the EDC assigns it to the director of the appropriate office for evaluation and response. The original incoming petition is sent to the office and copies of the petition are sent to the Office of the General Counsel and to the Agency 2.206 Coordinator. The official response is the office director's written decision addressing the issues raised in the petition. The office director can grant, partially grant, or deny the petition. The Commission may on its own initiative review the director's decision within 25 days of the date of the decision, although it will not entertain a request for review of the director's decision.

Regarding the petitioner's involvement in the process, the petitioner submits the issue in writing. The petitioner also gives information to the Petition Review Board (PRB) in writing or by telephone.

How and where policies and procedures are documented

Policies and procedures for the 2.206 Petition Process are documented in MD 8.11, which is scheduled for a routine update in September 2011. More information on the petition process may also be found in the NRC brochure, "Public Petition Process" (NUREG/BR-0200). Information on the procedures is also provided on the NRC public web site.

Safety and security significance

Petitions are handled in parallel so it is not an issue. If a petitioner requests immediate action (e.g., to shut down the plant immediately), the Petition Review Board meets internally within one week to determine if there is an immediate safety concern which warrants an immediate shutdown.

Privacy

The 2.206 Petition Process is an open process. The program obtains the petitioner's consent. If the petitioner desires anonymity, he or she is referred to the Allegations Program. Privacy has not been raised as a concern. The NRC publishes a notice in the *Federal Register* when it accepts a 10 CFR 2.206 petition for review and again when the Director issues a decision. In addition, a Monthly Status Report of Petitions Under Review are published at this web site.

Customer Service and Support

How customer service/support is provided

Petition Managers provide customer service and support, including providing more information about the procedure and process for filing and responding to a 2.206 petition. Petition Managers also provide assistance to help clarify a potential petition so that the NRC is able to better understand the issues of concern. Instructions on what to do before submitting a 2.206 petition and how to submit a 2.206 petition are available on the NRC public web site. Contact information for the Petition Manager is also published on the NRC public web site.

Once a petition has been submitted, a Petition Manager is assigned to the issue and works with the petitioner. Once a petition has been accepted for review, and throughout the petition process, the petitioner is informed of progress, is provided with opportunities to supplement information in the petition, and is given copies of all relevant correspondence. A public meeting may be held, if requested by the petitioner.

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Impact on Agency

Average time from issue raised to resolved and communicated

Program acceptance screening takes 30 days. However, the program sometimes has to request an extension because another Agency office is working on the issue which may take them 6 months to resolve (e.g., an inspection report). In the past 3 years, the program needed three to four extensions.

If the issue in the petition is accepted for review, the program has 120 days to issue the director's decision which includes the resolution.

How resolution is communicated

If the request satisfies the criteria for review as a 2.206 petition, the petitioner receives an acknowledgment letter. Within a reasonable time thereafter, the responsible office Director issues a "Director's decision" that either grants the requested action in whole or in part or denies the request and provides the reasoning for that decision. If the request is not accepted for review as a 2.206 petition, the petitioner is also notified. The request is treated as regular correspondence and the requestor receives a response to any concerns.

The Director's decision is filed with the Office of the Secretary. Within 25 days after the date of a Director's decision, the Commission may decide to review that decision. However, no petition

or other request for Commission review of a Director's decision will be entertained by the Commission.

The NRC publishes a notice in the *Federal Register* when it receives a 2.206 petition and again when the Director's decision is issued.

How implementation of resolution is tracked

A Monthly Status Report of Petitions Under Review and Director's Decisions on Completed Petitions are published on the NRC public web site.

How lessons learned are generated from issues and resolution

There were findings that came out of the lessons learned taskforce (e.g., processing of petitions).

How lessons learned are disseminated

Not applicable.

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Agency Suggestion Program

System Purpose

Description

The Suggestion Program (SP) is intended to recognize and reward employees, either individually or collectively, for suggestions that directly contribute to productivity, economy, or efficiency, or that directly increase effectiveness in carrying out NRC or Government programs. Initially the intent of the program was to promote technical suggestions for the Agency's programs and improve efficiency. The program has evolved to deal primarily with suggestions to improve business processes that are mainly administrative in nature (e.g., suggesting double-sided printing and hand sanitizer). The program does not receive many technical suggestions for the Agency's programs.

Program management recognizes the need for program improvement. Plans for improvement include developing a clear and narrow definition of the program to make the purpose more specific and defining how the reward is calculated. Program management wants to better define the program so they receive better suggestions.

The program is currently managed by the Associate Director for Human Resources Operations and Policy (ADHROP) in the Office of Human Resources (HR). The Administrative Assistant (AA) for the Associate Director serves as the Suggestion Program Coordinator. The AA has been tasked with developing a plan for program improvement and implementing the plan.

System users

The Suggestion Program is available to NRC full- and part-time employees.

How/where purpose is described

The purpose is described in Management Directive 10.72 Handbook Part IV (F) for Incentive Awards (MD 10.72). On the HR homepage on the NRC Intranet, there is only a link to MD 10.72 - Incentive Awards under Pay, Awards & Incentives. There is no mention of "Suggestion Program" or a program description. NRC Form 363, the form to submit an employee suggestion, can be found in InForms but the only way employees would know about the availability and purpose of the form would be if they read MD 10.72.

The SP Coordinator has been tasked with writing a definition/mission statement for the program as well as procedures for submission, evaluation, and compensation of suggestions.

Similar or alternative systems

No similar or redundant systems to the SP were identified. There are other office-specific suggestion programs, such as the Region III Suggestion Box and FSME Suggestion Box; however, this is the only program that offers monetary rewards based on the cost savings of the suggestion.

Usage

Number of employees using

The number of employees using the system is not tracked. Only the number of suggestion forms submitted is tracked. There have been cases where the same person submitted six suggestions.

Number of times used

There were approximately 40 total suggestions in FY 2009, some of which were duplicates. For example, there were five similar suggestions regarding the shuttle bus and 10 suggestions for hand sanitizer. Of the 40 total, 18 were unique suggestions.

In FY 2009, two suggestions received awards. One of the awards was for recommending double-sided printing and copying. This suggestion was submitted jointly by three employees and adopted by their office. In FY 2008, one suggestion received an award for suggesting that the grant program be automated to enable colleges to submit their grant applications online. This suggestion and award represent the desired purpose of the Suggestion Program.

Policies and Procedures

Descriptions of policies and procedures

As stated in MD 10.72, supervisors should encourage and assist in the development and preparation of their employees' suggestions. However, suggestions may be submitted directly to the Suggestion Program Administrator if an employee prefers to do so. Suggestions should be submitted on NRC Form 363, "Employee Suggestion." The suggestion must clearly indicate the following information:

- The idea or proposal and its relationship to existing practice or procedure, if any.
- How it will work in sufficient detail to permit evaluation.
- The benefits that will accrue to the Government if it is adopted.

Cash awards are given for officially adopted suggestions.

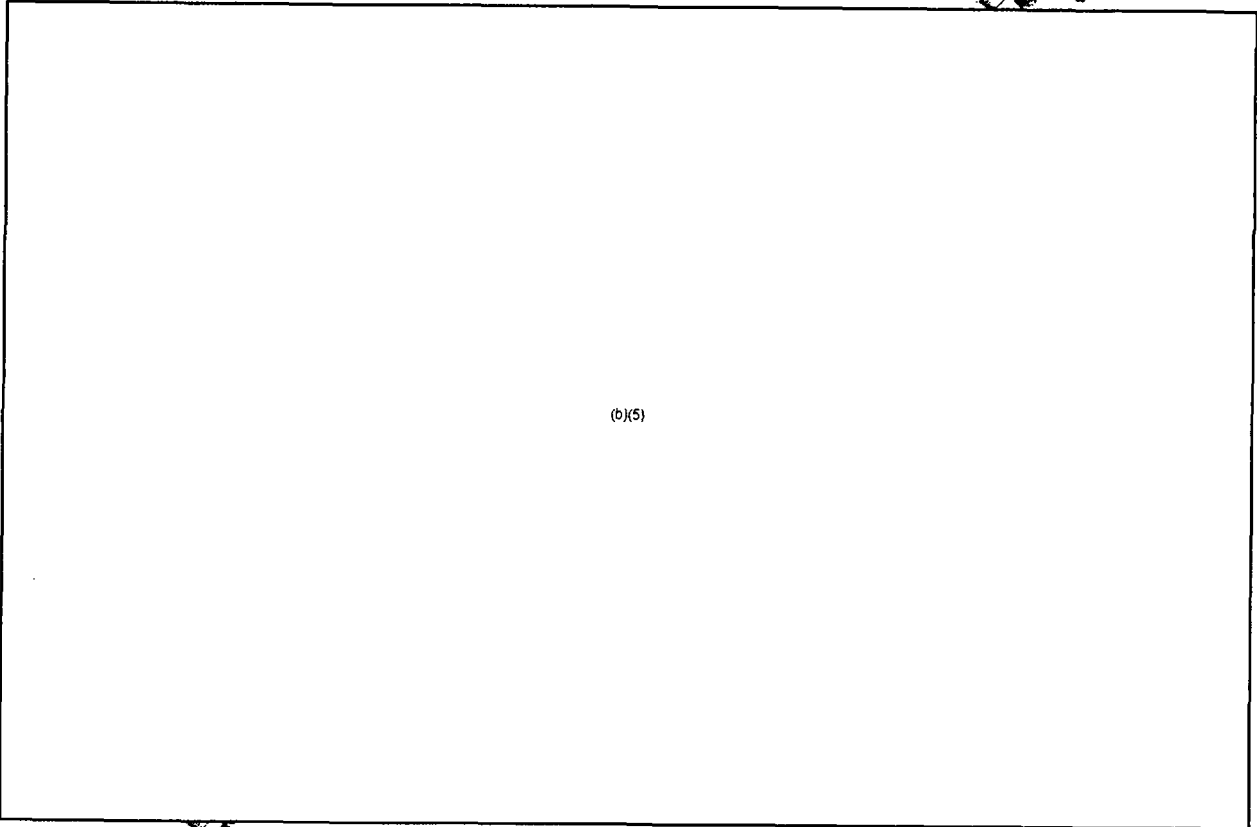
The process for handling suggestions submitted is summarized below:

- The employee submits a paper copy of NRC Form 363, "Employee Suggestion," to the SP Coordinator.
- The SP Coordinator identifies the appropriate evaluator and sends the suggestion to the evaluator for evaluation. The employee is copied on the cover letter to the Evaluator.
- The Evaluator completes NRC Form 364, "Evaluation of Suggestion," and returns it to the SP Coordinator within 45 days. If the evaluator recommends that the suggestion be adopted, a proposed award amount is included in the evaluation. Also included is a SF 52, "Request for Personnel Action."
- The SP Coordinator reviews the evaluation. If the Evaluator does not recommend adoption, the SP Coordinator sends a letter and a copy of evaluation to the employee to inform him or her of the decision, expresses gratitude for the suggestion, and encourages future suggestions. If the Evaluator recommends adoption, the SP Coordinator sends it to the Associate Director or the Deputy Director of ADHROP for review and approval.
- The Associate Director or the Deputy Director of ADHROP reviews the suggestion and the evaluation to assess the impact of adoption and approves the award amount and adoption.
- Upon approval, the SP Coordinator notifies the employee of the decision to adopt the suggestion and the award amount.

The employee is not involved in the evaluation of the suggestion. This process is performed independently.

How and where policies and procedures are documented

The policies and procedures for SP are documented in MD 10.72. However, the MD is not specific enough and needs to be improved. As noted earlier, the SP Coordinator has been tasked with writing the procedures for submission, evaluation, and compensation of suggestions as part of the program improvement efforts.



Safety and security significance

Issues with safety/security significance do not come through the SP. Current procedures do not call for handling any suggestion any differently. Suggestions are generally handled as they come in, with a 45-day target for review.

Privacy

Suggestions are not submitted anonymously. The employee suggestion form requires the employee to provide his/her name which is necessary to make an award. Employees have not raised concerns about privacy.

The program is considering making the evaluation phase anonymous, so that both the identities of the employee making the suggestion and the Evaluator are not revealed.

Customer Service and Support

How customer service/support is provided

Customer service and support are not provided.

Quality of customer service/support

Not applicable.

Impact on Agency

Average time from issue raised to resolved and communicated

The target evaluation time is 45 days. However, the target is never met. The estimated evaluation time is 3 months for suggestions that are not adopted and 6 months if adopted.

How resolution is communicated

The employee is copied on the cover letter to the Evaluator. If the suggestion is not adopted, the SP Coordinator sends a letter and copy of the evaluation to the employee to inform him or her of the decision, to express gratitude for the suggestion, and to encourage future suggestions. If the suggestion is adopted, the SP Coordinator notifies the employee of the decision to adopt the suggestion and the award amount.

How implementation of resolution is tracked

Currently there is no formal tracking of the process. The SP Coordinator uses an Excel spreadsheet to perform some informal tracking. There is also no process to make sure suggestions are implemented. The organization or individual responsible for implementation is unclear.

(b)(5)

How lessons learned are generated from issues and resolution

Lessons learned are generated from the ideas that are adopted.

How lessons learned are disseminated

Lessons learned are disseminated based on whether the adoption is office-specific or agency-wide.

(b)(5)

Allegations Program

System Purpose

Description

The Allegations Program is a forum for the public to raise concerns about licensed facilities. The program deals with concerns associated with NRC requirements and wrongdoing by individuals or organizations that are licensed by the NRC, applicants for licenses, licensee contractors or vendors, and employees of any of the above.

The purpose of the program is to ensure that these issues regarding requirements or wrongdoing that are brought to the NRC receive adequate follow up. The program must also ensure that people who bring forth the issues receive proper communication and have their concerns adequately resolved.

System users

The Allegations Program is available to any individual or organization that wishes to report an allegation to the NRC. Users are primarily external stakeholders, such as public interest groups, members of the public, and nuclear workers.

The program is not intended for NRC employees with the exception of a NRC Initiated Wrongdoing Concern when the program is used as a placeholder. This is where a NRC employee has identified licensee wrongdoings (e.g., an inspector thinks fire watch documents are falsified). If there is enough information, the Office of Investigations (OI) investigates it. If the wrongdoing can be substantiated, then it goes through the enforcement process with the licensee. It would be categorized in the Allegations Program for tracking purposes only during the investigation stage.

How/where purpose is described

The purpose of the Allegations Program is described in Management Directive and Handbook 8.8, "Management of Allegations" (MD 8.8). A description of the Allegations Program and its purpose can also be found on the NRC public web site in the *About NRC* section, under *How We Regulate*, and under *Allegations*. There is also a publication, NUREG/BR-0240, "Reporting Safety Concerns to the NRC: How to Report Nuclear Safety Concerns to NRC," which describes how to report a safety or security concern to the NRC and the allegations process.

Employees and contractors with access to the NRC Intranet can find a brief program description and a link to the NRC public web site for the Allegations Program on the *Employee Resources* homepage, under the *Employee Concerns* section, under *Differing Views*.

Similar or redundant systems

No similar or redundant systems to the Allegations Program were identified.

Usage

Number of employees using

The distribution of source categories remained consistent between CY 2004 and CY 2008. The primary sources of allegations continue to be employees of licensees (or former employees) and contractors (or former contractors).

Number of times used

The program answers approximately 600 allegations a year. In each of these allegations, there are two to three concerns on average. As reported in the Annual Trends Report for 2008, approximately 600 allegations were reported in CY 2008. There was a slight declining trend in the total number of allegations received by NRC from CY 2004 through CY 2007. In CY 2008, however, the total number of allegations received increased by about 10% over the total received in CY 2007, primarily because of substantive increases in allegations received at several reactor facilities and one fuel cycle facility. The increases do not appear to be the result of a general industry issue or other external factor as the reasons for the increases in allegations at these facilities were plant specific and varied (e.g., significant outage activity, construction activity, security issues, work environment issues, work planning, or corrective action program changes).

Because each allegation can include multiple concerns, the number of concerns received can provide more specific information on the staff effort needed for an appropriate response. The trend in the total number of concerns has paralleled the trend in total allegations over the last several years. In CY 2008, coinciding with the overall increase in allegations received, the total volume of allegation concerns received increased in all four regional offices, NMSS, and NSIR. Region IV experienced a substantial increase in the number of concerns received (with a 28% increase). Twenty percent of the allegations received in Region IV in CY 2008 included four or more concerns and 10% included six or more concerns. However, no trends were apparent in terms of allegation concerns coming from particular facilities or types of facilities or resulting from an event as the allegations containing higher numbers of concerns involved multiple individual reactor and materials facilities.

Policies and Procedures

Descriptions of policies and procedures

Each region and the two licensing offices (NRR and NMSS) have assigned an Allegation Coordinator to coordinate review and resolution of safety concerns reported to the NRC. If any NRC employee receives a safety concern, he or she is required to forward the safety concern promptly to the Allegation Coordinator.

Key steps in the process include:

- The allogger contacts the NRC (at a region or office) directly to submit an allegation.
- The allegation recipient informs the allogger of the identity protection policy and completes an Allegation Receipt Report (ARR). The allegation staff enters information into the Allegation Management System (AMS). The allegation recipient always requests the allogger's name and contact information; however, the allogger is not required to provide this data. An ARR is always completed. ARR's are also completed by NRC staff members when wrongdoing is suspected.
- If the allogger's contact information is provided, the Allegation Coordinator (AC) sends an acknowledgement letter to the allogger, which confirms receipt of and describes the NRC's understanding of the concern. The AC may also send a status update to the allogger if the process takes longer than what is deemed normal.

- The Allegations Review Board (ARB) reviews the allegation concerns, determines the safety/security significance and prioritization of resolution, and decides what action is required, including inspections, investigation, a request for additional information from the alleged, a Request for Information (RFI) from the licensee, etc. The ARB completes an Allegation Disposition Record which lays out how the issue is to be resolved. The ARB includes a Division Director (SES-level), a Branch Chief, a Team Lead for Allegations/Enforcement Staff, a Director of Office of Investigations, a Regional Counsel and pertinent allegation and technical staff.
- Action is performed as determined by the ARB. The AC tracks activity in the AMS to make sure actions are performed. The ARB may meet again on an allegation. If the allegation is substantiated and a violation exists, enforcement may be taken.
- The AC sends a closure letter to the alleged to inform that individual of action taken, if any. Approximately 20-25 times a year, the alleged does not agree with the outcome so the program engages those alleged again to determine what still needs to be done or if there are any new issues.

How and where policies and procedures are documented

Policies and procedures for the Allegations Program are documented in MD 8.8 and Allegation Guidance Memos (AGMs), which are interim guidance for internal staff. Each region and action office has implementing guidance procedures consistent with MD 8.8.

Safety and security significance

Actions to resolve concerns are prioritized based on their safety or regulatory significance. If the concern requires immediate action to protect the health and safety of the public, the NRC immediately contacts the licensee and requests that they investigate the matter and take prompt corrective action. The ARB determines the safety/security significance for issues submitted, which is noted on the Allegation Disposition Record, and prioritizes issue resolution.

Privacy

The Allegations Program provides anonymity to alleged. The program recognizes that nuclear workers are very concerned about protecting their identity. The highest goals of the program are: 1) identity protection which limits the disclosure of information externally and internally on a need-to-know basis and for very safety significant cases; and 2) the confidentiality process. To emphasize the importance of protecting an alleged's identity, the regions/action offices responsible for implementing the program have metrics in their operating plan to ensure there is no inadvertent release of an alleged's identity.

Even if the alleged has given consent to release his or her identity, the program still does not normally release that information, unless if the alleged releases his or her identity publicly. If the alleged's identity is already in the public domain, the program will contact the alleged to ask if the Agency can consider him or her a public alleged, and then in that case the program will acknowledge that individual's identity if asked.

The program is not a Privacy Act system. Files and databases are all identified by numbers, without any names. Any files containing an alleged's identity are under the control of the Allegation Coordinator, who controls access to that information. Additionally, the names of

individuals generally are not used during the ARB meetings. NRC employees who receive the names of the alleged are advised of the importance of protecting those individuals' identities.

As stated in MD 8.8, for allegations involving wrongdoing, the individual's identity may be disclosed at the NRC's discretion in order to pursue the investigation. For allegations of harassment and intimidation, the NRC discloses the alleged's identity during an NRC investigation if the alleged asserts he or she is the victim of discrimination. Therefore, the NRC normally does not investigate these cases if the alleged requests that his or her name be kept confidential or the alleged refuses to disclose his or her identity.

The program believes alleged are very concerned about their privacy. Being a whistleblower can be very challenging. By the time the issue is brought to the federal government, the licensee is very aware of the issues, the people involved, and their discontent. The licensee might think they know who the alleged is but the NRC will never reveal the alleged's identity.

Customer Service and Support

How customer service/support is provided

The Allegations Staff provide customer service through their communications with the alleged throughout the entire process, from in-take to closure. Communications include the acknowledgement letter, the status update letter (if necessary), the closure letter, and calls for additional information (if necessary).

Allegations are received in all mediums – through calls, emails/letters, in person, newspapers, reporters, and other media. Members of the public or people working in NRC-regulated activities may report safety concerns directly to the NRC by discussing the issues with an NRC staff member, calling the NRC's Safety Hotline at 800-695-7403, or writing a letter to the NRC. The NRC's Agency Allegation Advisor (AAA) oversees the integrity and implementation of the NRC allegation process. If anyone is dissatisfied with the allegation process or answers provided by the Allegation Coordinator, they can contact the AAA by calling 1-800-368-5642.

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Impact on Agency

Average time from issue raised to resolved and communicated

Within the first 30 days, the issue is discussed and the program develops a plan of action. The Agency is successful in meeting its timeliness goals. The targets for closing technical, non-wrongdoing allegations that do not require immediate action are:

- 90% of the allegations in 150 days;
- 95% of the allegations in 180 days; and
- 100% of the allegations in 360 days.

Complex safety concerns may require more time to resolve.

Other targets include:

- 90% of acknowledgement letters are sent within 30 days of receipt.
- 100% of acknowledgement letters are sent within 45 days.
- 100% of initial ARBs are convened within 30 days of receipt.

How resolution is communicated

The Allegation Coordinator sends a closure letter to the alleged to inform the individual of actions taken, if any. A notice of violation is sent to the licensee if any violations are identified. In general, this information is not released publicly if the issue is not substantiated or does not involve a violation. (However, findings of OI investigations are released, whether substantiated or not.) If this is a high visibility case, information may be released as appropriate (e.g., Peach Bottom). The identity of the alleged will not be released unless that individual is a public alleged who has agreed to have his or her identity disclosed by the NRC.

As stated in MD 8.8, the NRC tries to send an initial response to the concern and describes the NRC's understanding of the concern. Following the completion of an inspection or receipt of a response to a referral, the NRC sends another letter to the individual who submitted the concern. The letter explains what action the NRC took to review the safety concern and whether the concern was substantiated. If the review takes longer than six months, the NRC sends an interim letter that provides the status of the NRC's review.

How implementation of resolution is tracked

The Allegation Management System is used agency-wide to monitor the status of the different steps in the process (e.g., when to send acknowledgement letter, when to send a RFI, when to perform an inspection, when to conduct an investigation). If a violation is issued to the licensee, implementation of corrective action is tracked through the inspection program, not the Allegations Program.

How lessons learned are generated from issues and resolution

Most allegations do not call for lessons learned. Peach Bottom was an exception. On a more informal basis, region-specific lessons learned could be generated and shared at the counterpart meetings. The program does a biennial audit of MD implementation. The program audits half of the regions/action offices one year and the other half the following year. During the audit, the region/action office are informed if they were not responsive and/or timely enough.

How lessons learned are disseminated

Lessons learned are disseminated in annual reports and on a case-by-case basis, if pertinent.

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Differing Professional Opinions Program

System Purpose

Description

The Differing Professional Opinions (DPO) Program is a formal process that allows employees and contractors to have their differing views on established, mission-related issues considered by the highest level managers in their organizations (i.e., Office Directors [ODs] and Regional Administrators [RAs]). The process also provides managers with an independent, three-person review of the issue (with one person chosen by the employee). After a decision is issued, the employee may appeal the decision to the Executive Director for Operations (EDO).

The program was described as a tool of "last resort." Because the DPO process is resource-intensive and is only applicable for established positions, the program emphasizes the importance of discussing any issues early and informally, before decisions are made.

As stated in Management Directive and Handbook 10.159, "The NRC Differing Professional Opinions Program" (MD 10.159), the objective of the DPO Program is:

- To foster informal discussions with peers and supervisors on issues involving professional judgments that may differ from a currently held view or practice.
- To establish a formal process for expressing differing professional opinions (DPOs) concerning issues directly related to the mission of NRC.
- To ensure the full consideration and prompt disposition of DPOs by affording an independent, impartial review by knowledgeable personnel.
- To ensure that all employees have the opportunity to express DPOs in good faith, have their views heard and considered by NRC management, and be kept fully informed of the status of milestones throughout the process.
- To protect employees from retaliation in any form for expressing a differing opinion.
- To recognize submitters of DPOs when their DPOs have resulted in significant contributions to the mission of the Agency.
- To provide for agency-wide oversight and monitoring, to ensure that implementation of these procedures accomplishes the stated objectives, and to recommend appropriate changes when required.

Applicability

The DPO Program is available to all NRC employees and contractors.

How/where purpose is described

The purpose of the DPO Program is addressed in MD 10.159. A description of the DPO Program can also be found on the NRC public web site in the *About NRC* section, under *Our Values*, and under the safety culture component for *Open, Collaborative Work Environment*.

Information on the DPO Program can also be found on the NRC Intranet on the *Open, Collaborative Work Environment* homepage. EDO published materials, including periodic communications to staff, also contain program information. The Office of Enforcement (OE) also does outreach to NRC employees to inform them of the DPO Program, including requesting

to be on the agenda of all-hands meetings at the office, division, and branch levels. The DPO Program is also included in HR training.

Similar or redundant systems

No similar or redundant systems to the DPO Program were identified.

Usage

Number of employees using

Eighteen employees have used the DPO Program since it was last revised in May 2004.

Number of times used

Eighteen DPOs have been submitted since 2004. Of these, one was withdrawn before a decision was issued and nine were appealed.

Policies and Procedures

Descriptions of policies and procedures

As stated in MD 10.159, it is the policy of the NRC to maintain a working environment that encourages employees to make known their best professional judgments even though they may differ from the prevailing staff view; may disagree with a management decision or policy position; or may take issue with a proposed or established Agency practice involving technical, legal, or policy issues.

The DPO Program exists as a formal process that all NRC employees and contractors can use to have their differing views on established positions considered by appropriate office directors and regional administrators. A DPO can cover a broad range of concerns provided the opinion is related to the Agency's mission and to the strategic goals that support the mission (i.e., safety, security, openness, effectiveness, management). The DPO Program emphasizes the importance of informal discussions between the employee and his or her immediate supervisory management as a possible means of resolution.

If an informal resolution is unsuccessful, an employee can then file a formal DPO with the DPO Program Manager (DPOPM) by using NRC Form 680, "Differing Professional Opinion." Disposition of the DPO is assigned to the OD or the RA responsible for overseeing the concern described in the DPO. To review the DPO, the OD or the RA normally establishes a three-person panel of knowledgeable employees who have not been involved with the issue. The employee who submitted the DPO may nominate one member of the panel. The panel provides its conclusions and recommendations in a report to the OD or the RA, and the OD or the RA subsequently issues a DPO Decision to the submitter.

If the submitter does not believe the DPO Decision adequately addressed the concerns, he or she may submit a DPO Appeal to the EDO (or the Commission, depending on to whom the individual reports) through the DPOPM.

How and where policies and procedures are documented

MD 10.159 provides procedures for the expression, monitoring, and disposition of DPOs and appeals.

Safety and security significance

MD 10.159 requires that the DPOPM advise the appropriate levels of management to take action, and informs the Commission and EDO, as appropriate, regarding submittals that appear to be of immediate public health and safety significance.

Experts on the panel consider the safety/security significance of the DPO; however, by the time an issue gets to the DPO Program, management typically would have already addressed the safety/security significance. NRC employees are required to identify issues of safety/security significance as part of their jobs. The OD or RA decides on the prioritization of resolution based on the safety/security significance. The panel recommends action to the OD or the RA who then decides on the final action and implementation of decision and recommendations, if any.

As stated in MD 10.159, in establishing completion dates, consideration should be given to the safety significance of the issue, the age of the issue, and the priority of other work in the office.

Privacy

Pursuant to MD 10.159, if an employee wishes to submit a DPO but desires confidentiality, the employee may submit an unsigned DPO to an NRC manager or, if the employee prefers, to the DPOPM, who agrees to act as a surrogate submitter. Justifiable reasons why the employee cannot approach his or her immediate chain of command must be included on the DPO Form. Disposition of the DPO will then be completed in accordance with the procedures stated in MD 10.159. To protect the employee's confidentiality in such cases, it may not be possible to provide acknowledgment of receipt of the statement or disposition directly to the submitter. In these cases, the manager who forwarded the DPO will provide the DPOPM the information needed for the acceptance review and will relay to the originator both the acknowledgment of receipt and all reports received by that manager concerning disposition or resolution of the DPO issues. Public notices and summaries of the DPO's content will be redacted to protect the employee's confidentiality.

Anonymously submitted DPOs are not covered by the provisions of MD 10.159 and may be referred to the Office of Investigations, the Office of the Inspector General, or the Agency Allegation Advisor, as appropriate.

Prohibition of Retaliation

The DPO Program may be used without fear of retaliation, pressure, penalty, or unauthorized divulgence of its use in cases in which the submitter has requested confidentiality. Discouragement of or penalties for the use of the DPO process will not be tolerated. No negative reference (direct or indirect) to an employee's use of the DPO Program will be included in any part of the employee's performance evaluation and any violation of this protection is grounds for an employee grievance.

Managers and supervisors are strongly cautioned against giving the appearance of taking retaliatory actions against employees who submit DPOs. Any NRC employee who retaliates against another employee for submitting or supporting a DPO is subject to disciplinary action in accordance with MD 10.99, "Discipline, Adverse Actions, and Separations." This restriction applies to retaliatory actions as defined in MD 10.99 and to all prohibited personnel practices specified in the Civil Service Reform Act of 1978, as amended. Employees who allege that retaliatory actions have been taken because of their submittal or support of a DPO may seek redress through the negotiated grievance procedure or through the grievance procedure described

in MD 10.101, "Employee Grievances and Appeals of Adverse Actions," or through other avenues available to Federal Government employees, as appropriate.

Although the program reported that it has not received any employee concerns regarding privacy, the NRC 2009 Safety Culture and Climate Survey results show that there are some employee concerns regarding retaliation in using systems such as the DPO Program or expressing a differing view. The survey reports that many interview and focus group respondents feel that employees are submitting more Non-Concurrences than DPOs because employees perceive that submitting a DPO could alter an employee's career at the NRC. The survey also reports that with regard to these programs, the employees would like less focus on process and forms and more focus on how the NRC can have an open and cooperative work environment.

The applicable OD or RA's organization is responsible for record-keeping associated with the DPO. All DPO forms and other records created to document DPOs are official Agency records and are retained in ADAMS or another record retention system. DPO records are not declared as official Agency records until the DPO process is complete which can occur either after a DPO Decision is issued or a DPO Appeal Decision is issued. Once the process is complete, the DPO submitter can request that the records be treated as non-public or public records. If the individual does not want the records made public, that person's privacy is protected because the records are limited to the EDO and the DPOPM. If the individual wants the records made public, the records are subject to a releasability review in accordance with normal Agency procedures.

Customer Service and Support

How customer service/support is provided

The DPOPM provides customer service and support to potential and actual DPO submitters. OE provides training on the DPO Program through multiple venues. The DPOPM serves as the Agency expert and is available to answer employee questions about the program and other ways to pursue concerns. The DPOPM also provides advice and guidance to all parties involved in the DPO process (i.e., the submitter, the OD or RA, the DPO Panel, the EDO, the Commission).

As stated in MD 10.159, in response to the employee's request for assistance in preparing DPO statements, the submitter's immediate supervisor, in consultation with other management officials, will determine the amount of the employee's work time and administrative support to be provided to the DPO submitter.

If called to testify before a licensing board or a presiding officer, the employee may receive, upon request, assistance from the Office of the General Counsel (OGC) to prepare testimony or other documents to be filed with the board. Such assistance will be solely for the purpose of facilitating the filing of the necessary documents and will not constitute legal representation of the employee by the OGC staff.

(b)(5)

Impact on Agency

Average time from issue raised to resolved and communicated

MD 10.159 requires that all routine DPO cases should be completed within 60 days of acceptance of the issue as a DPO, and all complex cases should be completed within 120 days. This timeliness goal was revised by the EDO in 2006 to 130-190 days. This timeframe may only be extended with the approval of the EDO, or the Commission for employees reporting to the Chairman or the Commission, through the DPOPM.

How resolution is communicated

As stated in MD 10.159, typically within 8 calendar days of receipt, the DPOPM will issue a memorandum to the filer (with a copy to the appropriate OD or RA) indicating that the DPO has either been rejected or accepted for action. The decision to reject a DPO by the DPOPM is final. The justification for the action taken will be stated in the memorandum.

Generally within 8 calendar days after receipt of the DPO from the DPOPM, the cognizant OD or RA will select the members of the ad hoc panel. Generally within 8 calendar days of the issuance of the panel memorandum, the panel chair will schedule and conduct a meeting with the submitter to discuss the scope of the issue(s). After this meeting, the panel will develop a schedule of milestones for the completion of the review of the DPO. Copies of this schedule will be sent to the filer, the OD or the RA for the DPO, and the DPOPM. Any changes in the schedule should be reported to the DPOPM, who will forward copies of the changes to the filer and to the OD or the RA for the DPO.

Ad hoc panels are expected to complete their review and make their recommendation to the OD or the RA within 30 calendar days of the meeting with the filer. At his or her option, the OD or the RA may return the report to the panel with specific comments (e.g., revise for clarification or provide further information). Revised panel reports will be provided to the OD or the RA generally within 7 calendar days. This timeframe may not be appropriate for more complex cases and may be extended with the approval of the EDO, or Commission, as appropriate, through the DPOPM.

The OD or the RA will issue his or her decision to the DPO filer generally within 10 calendar days of the acceptance of the final panel report. Copies of the decision memorandum will be sent to the filer, the filer's management, the OD or the RA for the DPO, the DPOPM, and any individuals or organizations tasked with follow-up actions or implementations. If the submitter has requested confidentiality, all documents will be redacted.

Summaries of all completed DPOs are included on the DPO page of the *Open, Collaborative Work Environment* internal web site.

How implementation of resolution is tracked

The DPOPM tracks follow-up actions and final implementation of decisions resulting from the DPO process and is responsible for keeping all parties informed about such actions. If follow-up items or additional information needs are recommended by the panel and agreed to by the OD or the RA, completion dates for those actions should be established and communicated to the submitter or, in the event of a confidential submittal, to the manager who forwarded the DPO or to the DPOPM. In establishing completion dates, consideration should be given to the safety significance of the issue, the age of the issue, and the priority of other work in the office. If the schedule for the follow-up items is not met, the reason for the delay and a revised schedule for

completion of the action(s) will be communicated to the submitter or, in the event of a confidential submittal, to the manager who forwarded the DPO, and reported to the Chairman for employees in offices reporting directly to the Commission, or to the applicable Deputy Executive Director for Operations (DEDO) for employees in offices reporting directly to the EDO.

If recommendations are issued, the OD or the RA tasks someone to be responsible for implementing those recommendations, which are then tracked in the implementing office's control system. The OE maintains records that recommendations were issued but the OE does not track their implementation.

How lessons learned are generated from issues and resolution

The panel provides a report which may identify recommendations and/or lessons learned for the OD or the RA to consider for implementation. The DPO may highlight safety issues or process improvement issues.

How lessons learned are disseminated

A summary of the final decision is made public after it is reviewed for privacy and sensitivity.

(b)(5)

~~NOT FOR~~

~~ENCLOSURE~~

Employee Satisfaction Surveys

System Purpose

Description

The purpose of employee satisfaction surveys is to gauge the employees' level of satisfaction. Until recently, the NRC performed two types of employee satisfaction surveys: 1) The NRC Annual Employee Survey and 2) the Federal Human Capital Survey (FHCS), in alternating years. To meet the annual requirement that all Federal agencies survey their employees to measure employee satisfaction and Agency performance, NRC conducted the NRC Annual Employee Survey to help identify and improve programs and processes that are important to employees, as well as assess the effectiveness of its leadership and management practices. The FHCS is a tool administered by the Office of Personnel Management (OPM) biennially to measure employees' perceptions of whether, and to what extent, conditions characterizing successful organizations are present in their agencies. The survey results provide valuable insight into the challenges Agency leaders face in ensuring that the Federal Government has an effective civilian workforce. The NRC uses the survey results to examine management practices and improve the work environment for NRC employees.

Effective March 2010, the OPM changed the name of the FHCS to the Federal Employee Viewpoint Survey (FEVS) and instead of biennially, the OPM will administer this survey annually. As a result, the NRC will no longer conduct its own NRC Annual Employee Survey.

System users

Both surveys are conducted agency-wide. The NRC Annual Employee Survey includes full- and part-time, permanent employees, whereas the FHCS only included full-time, permanent employees.

How/where purpose is described

The purpose of the NRC Annual Employee Survey is described on NRC's public web site. The purpose of the FHCS can be found on the OPM's web site. The Partnership for Public Service uses data from the FHCS to produce rankings for "The Best Places to Work in the Federal Government."

Similar or alternative systems

No similar or redundant systems were identified. While there are other types of satisfaction surveys conducted by the Agency and its offices/regions which are for specific types of services and initiatives, such as the Payroll Satisfaction Survey, the employee satisfaction surveys are unique in that they measure the overall level of employee satisfaction with the Agency and its performance.

Usage

Number of employees using

At the time of this assessment, the most recent survey results available were the 2007 NRC Annual Employee Survey Results and the 2008 FHCS Results. For the 2007 NRC Annual Employee Survey, all 3,600 full- and part-time permanent employees of the Agency were

surveyed and 2,446 responded, for a 68% response rate. For the 2008 FHCS, the NRC had a response rate of 65%, which is better than the Government-wide response rate of 50%.

Number of times used

An employee satisfaction survey is administered to NRC full-time, permanent employees once a year. NRC part-time, permanent employees will no longer be surveyed since the NRC Annual Employee Survey has been replaced with the annual FEVS, which is administered by the OPM and only includes full-time, permanent employees.

Policies and Procedures

Descriptions of policies and procedures

The objective of employee satisfaction surveys is to measure employee satisfaction and Agency performance. The objective is to use this information to help identify and improve programs and processes that are important to employees, as well as assess the effectiveness of its leadership and management practices.

OPM administers the FHCS and issues the results for each agency and the Government-wide average. The NRC administers the NRC Annual Employee Survey and issues the results with the assistance of a contractor. The Partnership for Public Service announces the rankings for "The Best Places to Work in the Federal Government." Upon receipt of the results, the HR/PMDA Chief responsible for employee satisfaction surveys and his or her team analyze the data, including identifying the areas in which the agency performed well and which require improvement. The HR/PMDA Chief provides multiple briefings on the results and analysis throughout the year. The HR Office Director announces the results to management and employees. The Chairman may also be involved with the announcement.

The HR/PMDA Chief requested the OPM provide the NRC's Federal Employee Viewpoint Survey results by office so that each office can analyze its office-specific results and develop improvement plans that are targeted for each office. To protect employee privacy, OPM agreed to provide results by office for offices that meet the minimum threshold of 25 employees or more. The NRC 2008 Annual Employee Survey results were available by office. Each office only received the results for its office specifically. Results by office were not published for other offices to review and compare although the offices could decide to share results with each other.

How and where policies and procedures are documented

NRC adheres to the OPM guidelines and the Chief Human Capital Officers Act, which require agencies to conduct employee satisfaction surveys. The NRC does not have separate policies and procedures documented.

Safety and security significance

If any of the survey questions related to safety and security come back with poor results, this would be identified when the results are analyzed and management would determine the necessary course of action to address these issues.

Privacy

The OPM issues policies and procedures related to privacy. Survey responses are confidential. Privacy has not been raised as an employee concern.

Customer Service and Support

How customer service/support is provided

The OPM provided customer service/support for FHCS and will do so for the FEVS. The NRC provides the advertising to encourage employees to respond. In the past, the NRC Annual Employee Survey referred employees to the HR/PMDA for customer service/support.

(b)(5)

Impact on Agency

Average time from issue raised to resolved and communicated

Issue resolution times vary depending on the type of issue. If the issue is clear-cut, resolution may take 1-2 weeks. If the issue is not clear-cut and HR needs to involve offices and different levels of management and staff to conduct focus groups, resolution may require more time. There is no specific target for issue resolution.

How resolution is communicated

Resolution may be achieved and communicated through corrective action plans, focus groups, and senior management meeting groups. Also, HR may work with the Human Capital Council made up of Office Deputy Directors to resolve agency-wide issues.

How implementation of resolution is tracked

HR informally tracks issue resolution by comparing the prior year's results with the current year's results to assess whether there was an increase or decrease in satisfaction in the areas identified for improvement. If in any year a significant issue is identified and a correction action plan or improvement plan is implemented, formal tracking would be performed by HR or the office depending on the type of issue. Since the NRC tends to perform well on these employee satisfaction surveys and is ranked #1 as the best place to work in the federal government according to the Partnership for Public Service, formal tracking of issue resolution and implementation as a result of the surveys is uncommon. Instead, the Agency tracks its performance year-over-year at the Agency overall and by office in order to gauge the employees' level of satisfaction.

How lessons learned are generated from issues and resolution

Not applicable.

How lessons learned are disseminated

Not applicable.

(b)(5)

Generic Issues Program

System Purpose

Description

The purpose of the Generic Issues Program (GIP) is to resolve significant safety issues that may lead to rules changes or back-fits to enhance safety regulation. The program is a source of information in the knowledge management area. It is closely tied to risk (e.g., what is the risk significance of seismic hazard changes for GI-199?). The program primarily reviews reactor issues and rarely reviews FSME or NMSS issues. However, sometimes issues come to the program that fall outside the NRC's area of direct regulatory authority (e.g., increased probability of dam failures upstream of nuclear power plants).

As stated in Management Directive and Handbook 6.4, "Generic Issues Program" (MD 6.4), the objective of the GIP is:

- To improve the internal management and review of issues coming before the NRC from both internal and external sources. The program does not create procedures or rights enforceable by law, nor does it replace existing formal processes for obtaining or otherwise participating with respect to Agency determinations regarding licensing actions (10 CFR 2.105), rulemaking (10 CFR 2.802), or requesting enforcement action (10 CFR 2.206).
- To identify a cost-effective solution for a Generic Issue (GI) and to implement the solution or a set of solutions for that GI, as appropriate.
- To ensure that the immediate and long-term safety, safeguards, and regulatory burden concerns identified as GIs are clearly identified, documented, tracked, and analyzed and that corrective actions are effectively implemented and verified.
- To ensure that program and regional offices maintain a coordinated and efficient capability to effectively identify, document, track, screen, and assess GIs; impose new or revised requirements; relax requirements; and verify licensee implementation and effectiveness of the new or revised requirements.
- To ensure that the public, Congress, Agreement States, licensees, certificate holders, other entities regulated by or subject to the regulatory jurisdiction of NRC, and appropriate agencies of foreign countries and international organizations are provided with current information regarding GIs, including the actual or potential hazards to public health and safety or the common defense and security.

System users

Organizations or individuals internal or external to the NRC, including the NRC staff, the Agreement State staff, the Advisory Committee on Reactor Safeguards (ACRS), the Advisory Committee on Nuclear Waste (ACNW), the Advisory Committee on the Medical Uses of Isotopes (ACMUI), licensees, certificate holders, industry groups, or the general public, may propose a GI. The program is predominantly used by NRC employees.

How/where purpose is described

The purpose of the GIP is addressed in MD 6.4. A description of the GIP and its purpose can also be found on the NRC public web site in the *About NRC* section, under *How We Regulate*, and under *Generic Issues Program* at <http://www.nrc.gov/about-nrc/regulatory/gen-issues.html>.

Employees and contractors with access to the NRC Intranet can find a significant amount of information at <http://www.internal.nrc.gov/RES/projects/GIP/index.html>.

Similar or redundant systems

Other offices have programs to deal with issues that are generic (e.g., issues that affect multiple licensees), which are not a part of the GIP. The term "Generic Issue" within the GIP has a very specific meaning which is tied to the GIP criteria.

Usage

Number of employees using

See below.

Number of times used

Nine issues have been submitted since FY 2008.

Issues fail acceptance review when they fail one of the GIP criteria. Usually issues are rejected because of their low risk significance, because an existing program is identified that can handle the issue, or because the issue needs basic research to understand its significance. Even for rejected issues, the GIP provides value by documenting the evaluation of the issue and referring the issue to the appropriate regulatory program or RES for possible actions.

The program has dealt with over 850 issues since its inception.

Policies and Procedures

Descriptions of policies and procedures

As stated in MD 6.4, it is the policy of the NRC to have an effective program for the resolution of GIs that affect licensees, certificate holders, or other entities regulated by or subject to the regulatory jurisdiction of NRC, as well as regulatory approval processes – for example, the design certification rule, standard design approvals, and early site approvals.

The program described the GIP process as follows:

- Identification/submission of proposed generic issue;
- Acceptance review (2 weeks);
- Screening using the seven criteria by the Research and Regulatory Office evaluation (6 weeks);

The seven criteria, used to varying degrees during all GIP stages, are:

- Affects public health and safety, the common defense and security, or the environment;
- Generic (i.e., affects two or more facilities or licensees);
- Not readily addressed by other regulatory programs and processes or existing regulations or industry initiatives;
- Can be resolved by new or revised regulation or policy;
- Risk or safety significance can be adequately determined;
- The issue is well-defined, discrete, and technical; and
- Resolution may involve action by licensees.

Issues not handled by this program include:

- Addressable by existing initiatives or activities; and
- Requires either long-term research or a scoping study.
- Safety risk assessment (4 months);
- Regulatory assessment (1-2 years); and
- Regulatory Office implementation and verification (which occurs under existing programs and processes outside the GIP but is tracked and reported until completion)

With regard to the submitter's involvement in the process, the program initially promptly communicates with the submitter to clarify and confirm understanding of the issue. The program provides the submitter with feedback during each stage of the GIP process.

How and where policies and procedures are documented

MD 6.4, which was last updated in November 2009, documents the policy and procedures for handling, tracking, and defining the minimum documentation associated with the processing of GIs. Currently, RES Office Instruction TEC-002 is being updated per SECY-07-0022. GIP policies and procedures can also be found on NRC's public web site in the *About Us* section, under *How We Regulate*, under *Generic Issues Program*, and under *Policy and Procedures Documents*, and at the internal web page.

Safety and security significance

The program uses existing risk tools (e.g., PRA) to assign safety/security significance. The program tries to utilize numerical values for analysis even though they are not required. The responsible office management makes a decision if an issue needs immediate attention because of safety or depending on the amount of public scrutiny (e.g., NRR makes decisions for LAW NRR Office Instruction LIC-0304). Otherwise, issues are dealt with as they are submitted. The process uses a graded approach: the further an issue proceeds (the more it is understood and management consensus is developed to prioritize and spend resources), the more resources and attention it receives, both in terms of resources to perform technical work, and in terms of engagement with industry and development of communication tools such as Communication Plans. The graded approach also allows issues that clearly do not meet the GIP criteria to exit the program promptly and efficiently.

Pursuant to MD 6.4, the GIP process is used to determine the safety and security significance of the GIs. During the identification stage, if any identified candidate GI has the potential for involving an adequate protection issue, the GIP notifies the responsible program office so that prompt actions can be taken to evaluate the issue and to initiate any necessary compensatory measures. During the initial screening stage, the GI Review Panel assesses whether the candidate GI has the potential to be classified as an adequate protection, a substantial safety enhancement, or a reduction in unnecessary regulatory burden issue. The panel documents its recommendation in its initial screening memorandum which, at a minimum, includes a clear, concise description of the GI, its safety significance, and information prepared by the submitter. The actual classification into one of the categories above is made at the technical assessment stage.

Privacy

The program does not have anonymous submissions. However, on the public web site, concerned individuals can submit issues without providing their names.

Customer Service and Support

How customer service/support is provided

The program will help submitters fill out the Form for Public to Propose a Generic Issue, which is available on the NRC public web site, and will explain the program to them. A GIP representative may also be contacted with questions by submitting an online request form, which is also available on the NRC public web site. The program assigns a REE Project Manager to each GI.

(b)(5)

Impact on Agency

Average time from issue raised to resolved and communicated

Criticisms of GIP timeliness in the 2005 timeframe led to SECY-07-0022 and significant program changes. These changes have resulted in improved GIP timeliness. That said, it must be noted that the program is a consensus-building group so the process will continue to be slow. The process can take anywhere from a couple of months to several years depending on the issue and its complexity. MD 6.4 contains goals but issues vary in regulatory and technical complexity. Only complex issues make it to the later stages of the program and the program deals with some of the most difficult issues facing the Agency; therefore, it can be a difficult and time-consuming process to build consensus.

How resolution is communicated

The program provides the submitter with feedback during each stage of the GIP process. The different types of communication provided by the program include:

- Generic Issues Management Control System (GIMCS) reports are issued quarterly and are available on the NRC public web site. These reports show the progress in resolving generic issues that the NRC identified for regulation and guidance development.
- Resolution of Generic Safety Issues (NUREG-0933) is an online document explaining issues and their resolution. While NUREG-0933 is a valuable knowledge management tool, it only provides a limited history on any particular issue or topic because once an issue is closed and documented as closed in NUREG-0933, NUREG-0933 does not get further updates on that issue or topic.
- Significant changes are also reported in semi-annual reports to Congress.
- The internal web page is maintained with updated information.

- Communication plans.
- Public meetings.

How implementation of resolution is tracked

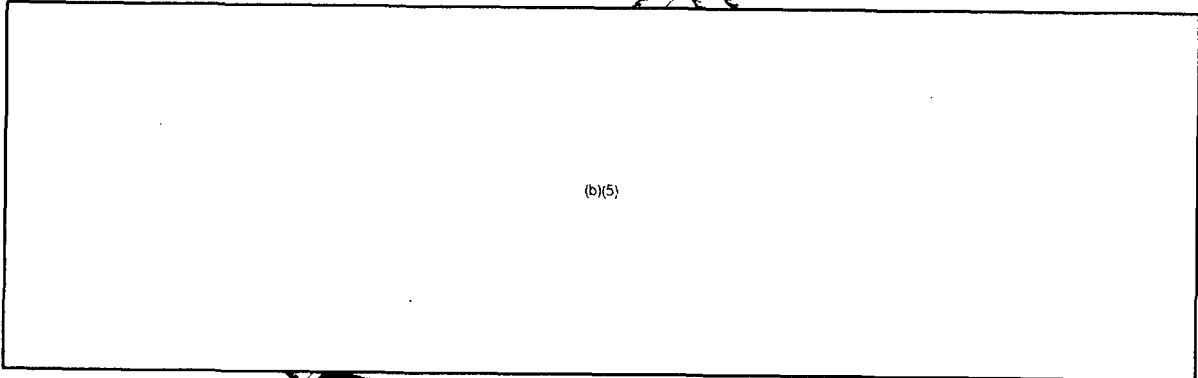
RES collects updated status information from the responsible program manager (who may work in RES or another office) until actions for the issue are completed. This information is reported in the quarterly GIMCS reports and periodic NUREG-0933 updates.

How lessons learned are generated from issues and resolution

The program does not have a specific process for generating lessons learned but the GIP was revised in 2007, so the program is closely monitoring what works well and what is problematic. The intent is to revise the program and guidance as they learn.

How lessons learned are disseminated

Lessons learned are not disseminated formally to other organizations/regions. GIP staff have periodic liaison meetings and gather feedback on the program. Information from those events are translated into program documents such as TEC-002 and MO 64.



NOT FOR

NSIR Ask Management

System Purpose

Description

NSIR Ask Management is a forum for employees to raise issues and concerns. It is a tool for asking any type of question relating to technical issues and workplace. Senior management takes this tool seriously, as evidenced by their review of the questions at the semi-annual management retreat and workshops. NSIR management makes every effort to address questions when raised and to provide resolutions as appropriate.

System users

The system is intended for Office of Nuclear Security and Incident Response (NSIR) full- and part-time employees. Other NRC employees with access to the NRC Intranet can access this system, submit a question, and view past questions and responses from the NSIR home page.

How/where purpose is described

There is no formal written definition or purpose described for the NSIR Ask Management system. This is intentional so that employees feel free to ask any questions. There is a link to Ask Management on the NSIR homepage on the NRC Intranet. Placement of this link is at the top of the homepage near the Office Director and Deputy Director's photos which makes it easy for an NSIR employee to find it. NSIR employees are reminded of the system's availability each time the Office Director emails the response to a question submitted. The questions and answers are also published in the quarterly/semi-annual newsletter, *Director's Corner*, which serves as another reminder of the system's availability.

Similar or alternative systems

RES, RI, RII, RIII, and RIV have similar systems. The RIII system is not online but the purpose is the same.

Usage

Number of employees using

Since questions can be submitted anonymously, the number of employees using the system cannot be tracked.

Number of times used

The system was created 2-3 years ago and came out of NSIR's own initiative. Only a handful of questions were submitted in FY 2009. There have been six questions and answers posted on the NSIR Ask Management site since the beginning of FY 2009.

Policies and Procedures

Descriptions of policies and procedures

All questions submitted are answered. It is in NSIR's best interests to resolve issues quickly. Questions are typically posted "as-is."

The process for handling questions submitted to the system is summarized below:

- An employee submits a question.
- The NSIR TA, the Office Director and/or the Deputy Director review the question and identify the appropriate committee or Division to address it.
- The Office Director sends out an interim email to acknowledge that this question has been asked and a response is being developed.
- The Committee/Division evaluates the question/issue. This group assessment may include:
 - Employee interviews;
 - Additional data collection;
 - Identification of root cause; and
 - Development of report, including findings and recommendations.
 If the identity of the person who raised the issue is known, then the employee may be involved since that makes the process more effective.
- The Committee/Division reports their findings and recommendations to NSIR senior management, comprised of the Front Office and Division Directors.
- NSIR senior management meets to review the findings and recommendations.
- For added credibility, the Office Director or Deputy Director publishes the question and answer through the following communication channels:
 - Email from the Office Director to all NSIR employees;
 - The NSIR Ask Management site on the Intranet; and
 - The quarterly/semi-annual newsletter titled *Director's Corner*.

How and where policies and procedures are documented

Policies and procedures for the NSIR Ask Management system are not documented. While there is a concerted effort to respond to each question, the process is informal. Questions and answers are posted to the Ask Management site on the NSIR homepage on the NRC Intranet. The Office Director also emails each question and answer to the NSIR employees. The questions and answers are also published in the quarterly/semi-annual newsletter, *Director's Corner*.

Safety and security significance

Issues with safety/security significance are not brought to this system. These types of issues typically arise during policy development and are handled directly through policy development working groups and management. Although employees can raise these types of issues in this program, that situation has not occurred.

Privacy

Questions are submitted anonymously unless the employee chooses to reveal his or her identity. Privacy has not been raised as an employee concern.

Customer Service and Support

How customer service/support is provided

There is no need for customer service. All questions receive immediate responses.

Quality of customer service/support
Not applicable.

Impact on Agency

Average time from issue raised to resolved and communicated

Response times vary depending on the nature of the question submitted. Response times have not exceeded 1 month from date of submission.

How resolution is communicated

As noted previously, the Office Director or Deputy Director publishes the question and its answer through the following communication channels: an email from Office Director to all NSIR employees, the NSIR Ask Management site on the NRC Intranet, and the quarterly/semi-annual newsletter, *Director's Corner*.

How implementation of resolution is tracked

Questions submitted through NSIR Ask Management do not trigger sustained tracking; rather, the action required is typically a short and concise effort so that issues are resolved fairly quickly.

How lessons learned are generated from issues and resolution

Because responses to NSIR Ask Management's questions are issued so quickly, lessons learned are immediately generated by those answers.

How lessons learned are disseminated

Not applicable.

(b)(5)

Region I Ask Management

System Purpose

Description

The system allows staff to ask management questions. It provides broad insight across the office, covering topics such as morale issues within the office. It also serves as a communication tool, such as when it was used to inform the staff about the availability of flu shots.

The system allows employees to make suggestions that are assessed by management and may be adopted. It allows employees to question why procedures are executed a certain way and prompts management and staff to rethink the processes. At times, the system may be a venting tool for staff.

System users

The system is intended for the Region I employees who are its primary users. Anyone with access to the NRC Intranet can access the system, submit a question, and view past questions and responses from the Region I home page.

How/where purpose is described

The purpose of the Region I Ask Management system is not documented. The system was reported as being fairly self-explanatory.

Similar or alternative systems

NSIR, RES, RII, RIII, and RIV have similar systems. The RIII system is not online but the purpose is the same.

Usage

Number of employees using

Since questions can be submitted anonymously, the number of employees using the system cannot be tracked.

Number of times used

Approximately 350 questions have been submitted since 2004. The system was started in 2003. The number of responses posted on the Region I Ask Management by year is:

- CY 2009 – 34 total (on average, about three per month)
- CY 2008 – 60 total
- CY 2007 – 72 total
- CY 2006 – 26 total
- CY 2005 – 22 total
- CY 2004 – 12 total

Approximately 90% of the questions submitted receive responses. Since some questions receive verbal responses or are duplicates, about 75% of questions receive a written response. Not all

questions submitted receive a response since some are duplicates and some do not meet the criteria for a response.

Policies and Procedures

Descriptions of policies and procedures

The process for handling questions submitted to the system is summarized below:

- Region I employees submit questions anonymously using an online electronic form. Anyone can submit anything to go to the Regional Administrator (RA). Employees sometimes submit questions via email directly to the Region I Technical Communications Assistant (TCA) who will post them to the Region I Ask Management site.
- The TCA receives the inquiry and suggests to management whether or not to respond. The Deputy RA or the RA ultimately chooses whether or not to respond. Questions that personally attack another individual, that are deemed trivial, or that have been answered before will not get a response.
- The division responsible for the subject matter drafts the response; about 15% of the time, the TCA will draft the reply. The employee who raised the issue could be involved in its resolution as the questions are provided anonymously. Management needs to consult the experts knowledgeable in the area to answer the question. The final response is approved by either the RA or the Deputy RA.
- The TCA emails the question and its response to all Region I employees. Questions and answers are also posted to the Region I Ask Management site and are verbally communicated at all-staff meetings which occur four times a year. Questions are typically posted "as-is," however, the TCA may edit or summarize a question if necessary. In these cases, the TCA will include a note stating that in the interest of brevity/professionalism, the question has been edited.

How and where policies and procedures are documented

Policies and procedures for the Region I Ask Management system are not documented. The lack of documentation does not appear to cause any confusion since employees generally understand the system's purpose and how to use it. Questions and answers are posted to the Region I Ask Management site on the NRC Intranet and are verbally communicated at all-staff meetings in the region.

Safety and security significance

Very few questions with safety/security significance are submitted through the system. This system is not considered the appropriate place for these types of questions. If such a question was received, the TCA would refer it to another system for handling. The system has only received one question like this in the last 4 years.

Privacy

Most questions are submitted anonymously. Privacy has not been raised as an employee concern.

Customer Service and Support

How customer service/support is provided

There is not much need to provide customer service. The availability of the system is advertised at all-staff meetings four times a year. Employees generally demonstrate an understanding of the existence and availability of this system.

Customer service is provided by a response to a question that has been submitted. Employees can submit a question through the online form or email the TCA directly.

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Impact on Agency

Average time from issue raised to resolved and communicated

The average response time is 5 weeks or 35 days. The target is 30 days to communicate a response. On average, it takes 4 hours to draft a response to each question. It can take anywhere from 1 to 11 hours to draft a response. Sometimes the TCA may be able to communicate the answer in 1 hour. If the question is sensitive (e.g., sensitive HR issues), the TCA may need to coordinate with HQ which increases the response time. Some questions require research which also increases the response time.

It was reported that the questions are worth the time spent on responding but that the program needs to be selective in choosing which questions to answer. At the beginning of the program, 85-90% of the questions submitted were answered. The current response rate has fallen slightly to approximately 80% in an effort to set expectations on what management will answer.

How resolution is communicated

The TCA emails the question and its answer to all Region I employees and also posts this information on the Region I Ask Management site. The question and its answer is also discussed at the all-staff meetings which occur four times a year.

How implementation of resolution is tracked

Most questions and answers are not promises for action. Responses are typically more informative. Questions may be delegated to staff for consideration and resolution. If a suggestion is deemed a good one, then Region I may implement. If any commitment for action is made, a corrective action plan would be implemented and tracking would be done in the Region I Corrective Action Program.

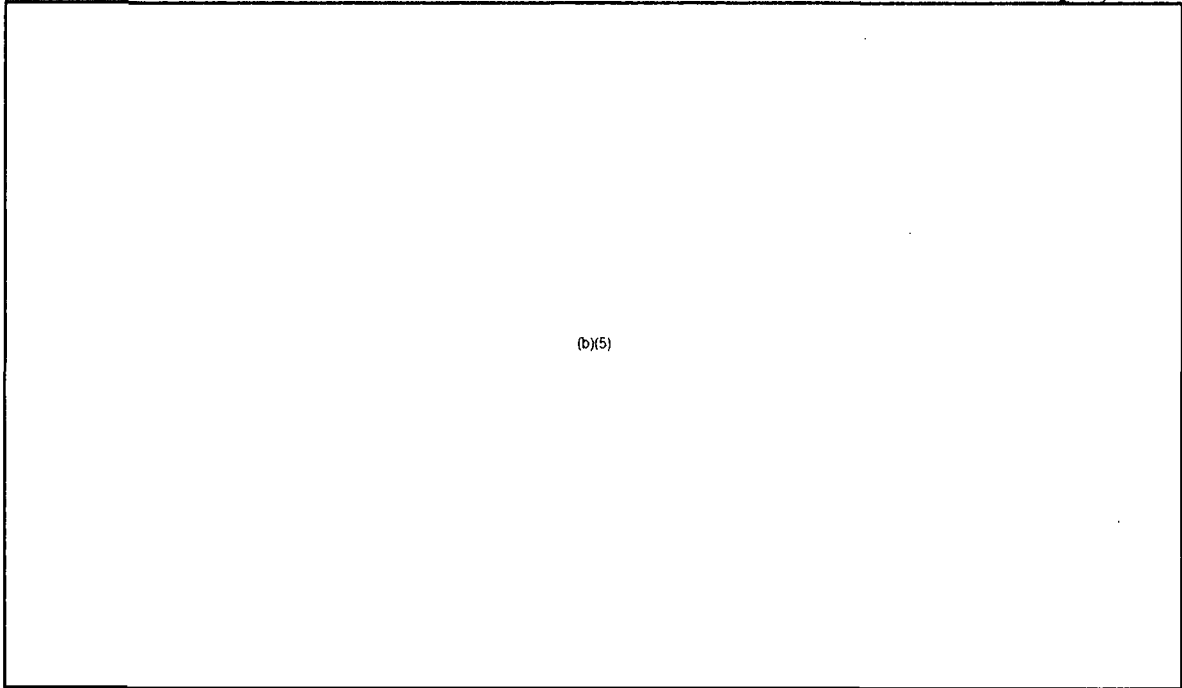
How lessons learned are generated from issues and resolution

Lessons learned are not often generated from the Region I Ask Management system. As mentioned above, if a submission involves a good idea, then Region I may implement the suggestion. If there is a lesson learned, Region I will conduct a lessons learned review through the Region I Corrective Action Program.

How lessons learned are disseminated

Offices/regions can access each other's system, but they typically do not. Some questions are specific to the region but some apply across regions. The offices/regions can go into each other's

systems and copy answers for similar questions. Although there is potential to share answers for consistency and efficiency, the offices/regions rarely consult each other on questions and responses.



NOT FOR PUBLIC

Region II Ask Management

System Purpose

Description

The purpose of the system is to provide another avenue for dialogue for Region II employees. To advance values of an open, collaborative work environment and to continue be the "Best Place to Work" according to the Partnership for Public Service, it is important to have an effective avenue for communication to share views and perspectives. In addition, management does not want an overly burdensome system that is a time sink.

System users

The system is intended for Region II employees who are its primary users. Anyone with access to the NRC Intranet can access the system, submit a question, and view past questions and responses from the Region II home page.

How/where purpose is described

The purpose of the Region II Ask Management system is not documented. The system was reported as being fairly self-explanatory. There is a link to Region II Ask Management on the left side of the Region II homepage on the NRC Intranet, which makes it easy for a Region II employee to find it. Region II employees are routinely reminded of the system's availability, its purpose, and the link on the Intranet. At least once a month at the all-hands meetings, questions and answers are presented and Region II employees are given a chance to hear and engage in open dialogue.

Similar or alternative systems

NSIR, RES, RI, RIII, and RIV have similar systems. The RIII system is not online but the purpose is the same.

Usage

Number of employees using

Since questions can be submitted anonymously, the number of employees using the system cannot be tracked. Employees may be discouraged from submitting a question if they knew the system was performing some sort of tracking.

Number of times used

The system has been operational for over two years, since the fall of 2007. The number of responses posted on the Region II Ask Management by year is:

- CY 2009 – 32 total (on average about three per month)
- CY 2008 – 26 total

All questions and answers since the system's inception are posted on the Region II Ask Management site. Most questions are related to corporate support issues, including travel and IT. In the first two months of 2010, the system experienced a surge in the number of questions submitted with approximately 10 per month. Typical monthly volume is one to four questions. The recent increase was due, in part, to weather-related emergency office closure policy and implementation questions.

Policies and Procedures

Descriptions of policies and procedures

All questions submitted are answered. If a duplicate question is received, a response is provided pointing to the previous question and answer. Management treats each question as if the employee came to the front office to ask the question in person. Each question received is treated with respect to ensure employees feel comfortable with asking questions. Management attempts to answer each question immediately.

The process for handling questions submitted to the system is summarized below.

- An employee submits a question.
- The RA, both Deputy RAs, and an IT person receive an email notification that a question has been submitted.
- The Deputy RA reviews the question and decides whether to answer directly or refer that task to the Division Director.
- The Deputy RA or the Division Director drafts a response to the question. If the employee reveals his or her identity, the Deputy RA ensures that the employee receives a personal response. Management wants the employee to participate and to foster open dialogue. For example, the Deputy RA may go to the employee's office to discuss the response.
- The Deputy RA reviews a draft response. If necessary, the Deputy RA may revise that response or send it back to the Division Director for revisions.
- The Deputy RA publishes the question and answer through the following communication channels:
 - The Region II Ask Management site on the NRC Intranet;
 - Email: If the submitter's identity is known, an email will be sent to the submitter to notify that individual that a response has been posted; and
 - The Monthly all-hands meeting.

If the submitter's identity is known, with the employee's consent, the Deputy RA will recognize the employee at the monthly meeting and thank him or her for asking a question, which may encourage other employees to ask questions.

How and where policies and procedures are documented

Policies and procedures for the Region II Ask Management system are not documented. The lack of documentation does not appear to cause any confusion since employees generally know the purpose of the system and how to use it. Questions and answers are posted to the Region II Ask Management site on the NRC Intranet and communicated verbally at monthly all-hands meetings in the region.

Safety and security significance

This system typically does not receive regulatory safety/security issues. Submitted questions tend to be related to corporate support. Although staff are not precluded from asking about safety/security issues, they typically do not use this system to ask such questions. If an occupational safety question was submitted, the Deputy RA who received the question would weigh the question to determine the breadth and timing of the response needed. In general,

management attempts to answer each question fairly quickly. If question is related to physical security occupancy, the Deputy RA who received the question would treat this type of question with a greater sense of urgency.

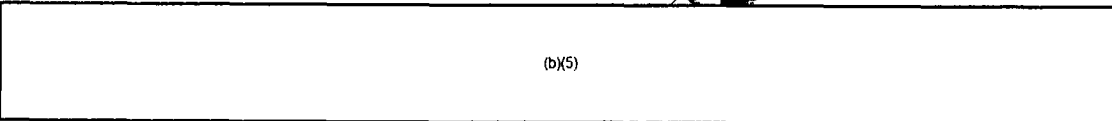
Privacy

Most questions are submitted anonymously. Privacy has not been raised as an employee concern. The anonymity feature on the system was reported as sound and secure. The leadership team does not try to determine the submitter's identity.

Customer Service and Support

How customer service/support is provided

As mentioned above, all questions are answered. Management attempts to answer each question fairly quickly. Other than this basic process, there is no need for customer service. So far, the system has run without any glitches. If employee encounters an issue with the system, he or she can easily submit another question.



Impact on Agency

Average time from issue raised to resolved and communicated

A response is typically provided within two weeks of a question being posted. It can be provided sooner or later, depending on the nature of the question.

How resolution is communicated

As stated previously, if the submitter's identity is revealed, the Deputy RA who received the question may go to the employee's office to discuss the response. The Deputy RA will also send an email to the employee to notify that person that a response has been posted. All questions and answers are posted on the Region II Ask Management site. At least once a month at the all-hands meetings, questions and answers are presented and Region II employees are given a chance to hear and engage in open dialogue.

How implementation of resolution is tracked

Tracking the implementation of a resolution is dependent upon on the question submitted and the type of action required. The vast majority of questions involve communication of information or clarification. Some questions require actions for which the resolution is so straightforward, that resolution will be performed in the normal course of business. A minority of questions may result in a ticketed item that is tracked until closure in Region II's ticketing system called Director's Action File by Fiscal Year (DAFFY). DAFFY is a legacy system which will be replaced by EDATS.

How lessons learned are generated from issues and resolution

With every question submitted to the system, there is the potential for lessons learned. The question could be an indicator that management needs to improve communication. Region II has not systemized lessons learned into Region II Ask Management. Although management is not

compelled to create a lessons learned program just for this system, there is management incentive to learn from these questions and Region II's leadership team remains mindful when question(s) should prompt such a review.

How lessons learned are disseminated

See above.

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Non-Concurrence Process

System Purpose

Description

The purpose of the Non-Concurrence Process (NCP) is to allow an individual to voice the opinion that he or she does not agree with a document, voice concerns on the document, or express a differing view, in a less formal process (as compared to the Differing Professional Opinions [DPO] Program, which is considered the most formal process). The NCP is always performed in relation to some material that requires concurrence.

As stated in Management Directive and Handbook 10.158, "NRC Non-Concurrence Process" (MD 10.158), the objective of the NCP is:

- To promote discussion and consideration of differing views on documents in the concurrence process;
- To provide a non-concurrence option for individuals with concerns about documents in the concurrence process that they had a role in creating or reviewing; and
- To provide a uniform approach to processing non-concurrences.

An employee may choose not to concur on any part of a document in which he or she has disagreed. In addition, employees are permitted to document their concerns and attach them to proposed staff positions or other documents to be forwarded with the position as it moves through the management approval chain by using the NCP. The NCP applies to all documents undergoing concurrence. The NCP applies equally to administrative issues, policy issues, and technical concerns.

Non-concurrence is part of the normal NRC document review and concurrence process. The NCP does not set separate schedules for documents involving non-concurrences. The NCP does not require independent review; non-concurrences are addressed by the individuals normally responsible for documents' concurrence.

Applicability

The NCP is open to the author of the document, those on document concurrence, and document reviewers and contributors, provided they were assigned by supervisors to perform these roles. NRC headquarters and regional employees, except members of boards and advisory committees reporting to the Commission, may non-concur in a document.

Employees also may request to be removed from concurrence. However, document sponsors must assure the adequacy of the concurrence chain and make document signers aware of important concerns that resulted in the request.

How/where purpose is described

The purpose of the NCP is addressed in MD 10.158. A description of the NCP and its purpose can be found on the NRC public web site in the *About NRC* section, under *Our Values*, and under the safety culture component for *Open, Collaborative Work Environment*.

Information on the NCP can also be found on the NRC Intranet on the *Open, Collaborative Work Environment* homepage. EDO's published materials, including periodic communications to staff, also contain program information. The OE also conducts outreach to NRC employees to inform

them of NCP, including requesting to be on the agenda of all-hands meetings at the office, division, and branch levels. NCP is also included in HR training.

Similar or redundant systems

The NCP complements the other mechanisms for raising concerns but is not as broad as the Open Door Policy because the NCP applies only to concerns about documents in concurrence (i.e., it cannot be used once a document is signed out) and may be used only by individuals who are eligible to non-concur. The Open Door Policy can be used by any employee to discuss "any work-related issue or concern" with Agency supervisors and managers. The NCP also differs from the DPO Program because the NCP can be used to challenge positions in draft documents, before a final position is established. The DPO Program applies only to positions that are no longer under staff review and has certain prerequisites and exclusions that do not apply to the NCP.

Usage

Number of employees using

The NCP is implemented within the office responsible for issuing the subject document. Although NCPs are not tracked formally, the number of times the NCP has been used can be determined by searching the NRC's Agency-wide Documents Access and Management System (ADAMS) for "Non-Concurrence Process."

Number of times used

The NCP has been used approximately 20 times since it was established in November of 2006.

Policies and Procedures

Descriptions of policies and procedures

As stated in MD 10-158, it is the policy of the NRC to promote discussion and consideration of differing views in the preparation and review of Agency documents. Individuals have various mechanisms for expressing their views about Agency decisions, including the Open Door Policy and the DPO Program.

All employees – including those who may not be eligible to use the NCP – have a responsibility to express and discuss differing views as early as possible in the preparation and review of Agency documents. Individuals with concerns and those responsible for originating and issuing documents, including document sponsors and signers, have a responsibility to seek solutions to concerns that might otherwise result in a non-concurrence. Non-concurrence should be necessary only when informal discussions are unable to resolve an individual's concerns and the individual seeks a response through the NCP.

The NCP is a three-part process: 1) the initiation of a non-concurrence; 2) the document sponsor's review; and 3) the document signer's review. The NCP requires use of NRC Form 757 to facilitate the process. Non-concurring individuals and those responding to non-concurrences must use the form.

How and where policies and procedures are documented

The policies and procedures for the NCP are documented in MD 10.158, which provides guidance on initiating, documenting, reviewing, processing, withdrawing, and keeping records of non-concurrences on documents in the review and concurrence process.

Safety and security significance

MD 10.158 does not specify the process for assigning safety/security significance. NRC employees are very much aware of how they need to handle safety/security issues and that process may or may not go through NCP. All individuals on the concurrence chain get to review the non-concurrence; any safety/security risk would be picked up in the normal course of this review. NRC also has other procedures to recognize safety/security issues, such as the Open Door Policy. If there is safety/security significance, there would be prioritization of resolution, not specifically under NCP but in the standard course of business.

Privacy

The NCP does not include any provisions for anonymity or confidentiality. An individual who does not want to concur on any part of a document in which he or she has disagreed and who wants to remain unidentified can request that they be removed from concurrence. Consistent with the NRC's normal practice of withholding deliberative process documents, NCP forms are normally non-public, unless an individual requests that they be made public.

The program reported that it has not received any employee concerns regarding privacy. The NRC 2009 Safety Culture and Climate Survey reported that many interview and focus group respondents feel that employees are submitting more Non-Concurrences than DPOs because employees perceive that submitting a DPO could negatively alter an employee's career at the NRC.

Prohibition of Retaliation

As stated in MD 10.158, retaliation against individuals who non-concur is prohibited and may result in disciplinary action. Employees who believe that retaliatory actions have been taken because of their non-concurrence may seek redress through the negotiated grievance procedure (Article 51 of the Collective Bargaining Agreement) or through the grievance procedure described in MD 10.101, "Employee Grievances and Appeals of Adverse Actions," or through other avenues available to Federal Government employees, as appropriate.

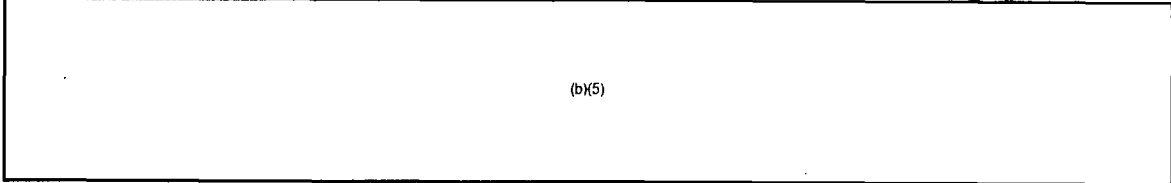
Records

The document sponsor's organization is responsible for record-keeping associated with the NCP. All NCP forms and other records created to document non-concurrences are official Agency records and are retained in ADAMS or another record retention system. All non-concurrence records, including records of non-concurrences that are subsequently withdrawn, shall normally be non-public, even if the document they are associated with is publicly available, unless subject to special requirements. Based on unique licensing requirements, the need to make non-concurrence records associated with the high level waste repository program publicly available is governed by the provisions of 10 CFR Part 2, Appendix J. Subject to all other requirements related to the public release of Agency records, non-concurrence records may be made publicly available at the request of the nonconcurring individual or in response to a Freedom of Information Act request.

Customer Service and Support

How customer service/support is provided

The Differing Views Program Manager (PM) in OE provides customer service and support to potential and actual users of the NCP. OE provides training on the NCP through multiple venues. If a specific case is brought to OE's attention, the PM will educate the employee, the document sponsor, and the document signer about the process and their roles and responsibilities.



Impact on Agency

Average time from issue raised to resolved and communicated

Since the NCP is implemented within the office, there is no central tracking of NCP usage or the average time for resolution. MD 10.158 does not establish a specific time limit for the review of non-concurrences. The intent is to resolve non-concurrences as part of the normal document concurrence process and in accordance with the normal document schedule. In all cases, the review of non-concurrences shall be complete before the document is issued. All employees involved in this process have a responsibility to make the NCP as timely, efficient, and effective as possible. Concerns should be raised promptly and addressed thoroughly and promptly. Information provided to support the NCP, whether from a non-concurring individual, the individual's supervisor, or another office, should be provided in a timely manner. In addition, all parties should endeavor to be succinct in completing NCP forms and related records; only information which is necessary to make or support a decision on a non-concurrence should be provided.

Notwithstanding efforts to be prompt, the NCP requires that certain actions occur before a document can be issued and some documents may be delayed beyond their normal schedules. Document sponsors should adjust document schedules as necessary to allow adequate time to address non-concurrences in accordance with the requirements of this directive. Non-concurring individuals, document sponsors, and others involved in the non-concurrence process shall not be held accountable for delays in document issuance provided they endeavored to meet their responsibilities. In evaluating such efforts, managers should recognize that in some cases, the first opportunity individuals have to clearly formulate their concerns is when a document is presented to them for review or concurrence.

How resolution is communicated

Pursuant to MD 10.158, at the conclusion of the process (i.e., after the document signer has made a final decision on the non-concurrence), the document sponsor shall inform the non-concurring individual and assure that the NCP Form accurately reflects actions taken to address the non-concurrence and the final status of the non-concurrence (non-concurring individual either concurs, non-concurs, or withdraws) before declaring the form an official Agency record.

How implementation of resolution is tracked

Tracking is performed and documented on the NCP Form all along the concurrence process by individuals on the concurrence chain, which is attached to the document.

How lessons learned are generated from issues and resolution

Although the NCP does not include centralized, formal oversight, the Differing Views PM is aware of many of the instances that the NCP is used. Based on experience from observing the implementation of the NCP, the PM takes action on an ongoing basis to incorporate lessons learned on an implementation level and to identify lessons learned for future policy revision. OE is responsible for periodically assessing the process and revising the policy, as necessary.

How lessons learned are disseminated

The Differing Views PM has taken action to modify the NCP Form to address several lessons learned. The PM also highlights key lessons learned through training and implementation coaching. The OE will disseminate a revision to MD 10.158 after a periodic assessment is performed.

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Lessons Learned Program

System Purpose

Description

The purpose of the Lessons Learned Program (LLP) is to review the Government Accountability Office (GAO) and Office of Inspector General (OIG) lessons learned reports, and other various internal documents containing lessons learned items, to see if they are applicable to other agency-wide. The program provides reasonable assurance that major organizational problems identified by lessons learned will not recur; furthermore, the knowledge gained from the lessons learned is retained and disseminated in a manner that will maximize its benefit and usefulness to the staff. The EDO assigns lessons learned to a lead office for review.

As stated in Management Directive and Handbook 6.8, "Lessons Learned Program" (MD 6.8), the objective of the LLP is:

- To establish a formal and rigorous process to ensure correction of significant Agency deficiencies.
- To provide reasonable assurance that major organizational problems identified by lessons learned will not recur.
- To institutionalize the knowledge gained through the corrective action processes and develop solutions for long-term organizational retention.
- To confirm the long-term effectiveness of corrective actions.

The program is a set of processes, procedures, and oversight that is designed to collectively ensure that significant Agency deficiencies are identified and corrected in such a way that they do not recur. This goal is accomplished by using a rigorous process to identify significant lessons learned, developing detailed corrective action plans, subjecting those plans to formal review and approval, and ensuring that the plans have been effective and have not had any unintended consequences. Each corrective action plan must include an explanation of what actions will be taken to institutionalize the knowledge gained through the identification of a lesson learned to help prevent its recurrence. Because deficiencies entered into this program are expected to require significant resources to correct, and because the Agency already has many corrective action mechanisms that function at the office level and below, a high threshold has been established for entering deficiencies into the LLP.

System users

Offices/regions, not individuals, submit potential lessons learned to the program.

How/where purpose is described

The purpose of the LLP is described in MD 6.8 and the Program's Charter.

Similar or redundant systems

There are lessons learned programs at the office/region level, but no similar or redundant agency-wide systems were identified.

Usage

Number of employees using

SharePoint Enterprise Lessons Learned System (SPELLS) is a repository and tracking application for the LLP. The application is not online yet and is not available to the staff as it has not been launched.

Number of times used

There have been about five issues raised since May 2009. The program is currently in the process of entering these five items since the system has been intermittently functional.

Policies and Procedures

Descriptions of policies and procedures

It is the policy of the NRC to continuously self-evaluate and improve Agency processes, procedures, and programs. MD 6.8 provides guidance to NRC personnel to implement an agency-wide program that will ensure that knowledge gained from significant lessons learned is retained and disseminated in a manner that will maximize its benefit to the Agency.

The program described the process as follows:

- Review reports to identify potential lessons learned items;
- Decide whether to include an item in the LLP by utilizing the five threshold criteria listed in MD 6.8;
- If criteria are met, recommend a lead office to the EDO;
- The EDO assigns the lead office;
- The lead office creates a plan and presents it to the Lessons Learned Oversight Board (LLOB) for review and approval; and
- The lead office writes the Effectiveness Review.

How and where policies and procedures are documented

MD 6.8 documents the policy and procedures for the LLP.

Safety and security significance

The LLOB makes a determination as to which items constitute a lesson learned by applying the program's threshold criteria. A potential lessons learned item must meet all of the following criteria to be designated a lessons learned item:

- The item has significant organizational, safety, security, emergency preparedness, or generic implications;
- A need exists to institutionalize corrective action for this item because the failure to do so would reasonably be expected to challenge the ability of the Agency to meet any of the strategic outcomes designated in the Strategic Plan;

or

The corrective action would substantially improve the safety or security of NRC employees;

- A root cause exists or can be identified; and
- The apparent resolution is actionable.

Privacy

Submissions are made by offices and not individuals.

Customer Service and Support

How customer service/support is provided

The LLPM provides customer service and support. Currently, individuals seeking support can email the LLPM. [REDACTED] (b)(5)

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Impact on Agency

Average time from issue raised to resolved and communicated

Resolution times vary depending on the nature of the issue. MD 6.8 states the EDO establishes timeliness goals to ensure that:

- Each potential lessons learned item is promptly considered to determine if it should be processed as a lessons learned item.
- A lead office is promptly identified and tasked for each lessons learned item.
- The lead office completes its review and develops corrective action plans within an appropriate time frame.
- Corrective actions are promptly implemented once approved.

How resolution is communicated

The quarterly and annual reports have issue summaries.

How implementation of resolution is tracked

SRELS tracks resolution implementation. Pursuant to MD 6.8, the lead office manages implementation of the approved corrective action plan according to the schedule identified in the plan. A memorandum from the lead office to the LLOB is required for the closeout of the lessons learned item. Following implementation of the corrective actions for the lessons learned items, the lead office performs an effectiveness review of the corrective actions to confirm that the completed actions have addressed the root cause(s) of the problem. If the corrective actions are deemed ineffective, the lead office is responsible for correcting the identified issues and performing another effectiveness review, if necessary.

How lessons learned are generated from issues and resolution

The LLOB makes a determination as to which items constitute a lesson learned by applying the program's threshold criteria (see above for the program's five criteria).

How lessons learned are disseminated
Lessons learned are disseminated through SPELLS.

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NRR Corrective Action Program

System Purpose

Description

The purpose of the Office of Nuclear Reactor Regulation (NRR) Corrective Action Program (CAP) is to receive suggestions for improving NRR processes. As stated on the NRR CAP site on the NRC Intranet, the program provides a process for NRR staff and managers to improve work processes by identifying and resolving problems and suggesting possible enhancements to work processes. The Human Capital Branch (HCB/PMDA) has responsibility for the NRR CAP.

System users

The system is intended for NRR employees who are its primary users. Anyone with access to the NRC Intranet can access the system, submit a Problem Identification Form (PIF), and view open and closed items on the NRR CAP site.

How/where purpose is described

The purpose of the NRR CAP is described in the NRR Office Instruction ADM-101, Revision 1 (ADM-101, Rev. 1), effective March 25, 2005. Program information and resources can also be found on the NRC Intranet, on the NRR homepage, on the CAP web site.

Similar or redundant systems

The program reported that there are no similar or redundant systems to the NRR CAP. Other offices/regions have CAPs to handle their specific issues and suggestions. There are also agency-wide programs, such as the Lessons Learned Program and the Suggestion Program. NRR is responsible for the Reactor Oversight Process (ROP) Feedback Program, which primarily deals with proposed changes to the inspection program. No similar or redundant systems focused on NRR office-level issues were identified.

Usage

Number of employees using

Since the program offers anonymity to the submitter, the number of employees using the system cannot be tracked. The program reported that they have not received a NRR CAP email in months.

Number of times used

Since 2008, four to six suggestions have been received by the program.

Policies and Procedures

Descriptions of policies and procedures

Pursuant to ADM-101, Rev. 1, the policy is to support the Agency's effectiveness goal through initiatives that serve to sharpen the Agency's focus on safety and security and ensure that available resources are optimally directed toward the NRC's mission. As a means to achieve the effectiveness goal, NRR implemented a corrective action program to support NRR's approach for continual improvements in its work processes and procedures. Specifically, this program

facilitates identification and correction of problems. This program encourages employees to recommend process improvements then has them evaluated and implemented as appropriate.

A submitter may be involved in different stages of the process as deemed necessary, including intake of the issue, meeting(s) with the CAP Program Coordinator (CAP PC) and/or assigned evaluator to ensure understanding of the issue, and meeting with the assigned manager to review the implementation and have an opportunity to ask questions.

How and where policies and procedures are documented

The policies and procedures for the NRR CAP are documented in ADM-101, Rev.1, effective March 25, 2005. They are up to date and can be found on the NRR CAP site.

Safety and security significance

Upon receipt of a PIF, the NRR CAP PC assigns it to one or more NRR organizations for evaluation. The responsible organization assigns the PIF to an evaluator who determines the safety/security significance of the submitted issue.

According to ADM-101, Rev.1, the evaluator develops the proposed actions to address the PIF. Possible action(s) taken in response to PIFs may include:

- Immediate actions to remedy problems with a specific work product;
- Interim actions to address concerns pending the development and implementation of a long-term remedy;
- Long-term actions to prevent recurrence of the same or similar problems that resulted in the PIF or to implement process enhancements suggested in the PIF; or
- No action required.

The schedule proposed for the completion of corrective actions or suggested improvements should consider the significance of the problem, the required resources for resolution, and the near-term potential for recurrence.

Privacy

The program offers anonymity for the submitter. Privacy has not been raised as an employee concern.

Customer Service and Support

How customer service/support is provided

The CAP PC provides status updates to the submitter throughout the process from intake to closeout. The CAP PC may meet with the submitter to understand the issue. PIFs submitted to the program are entered and tracked in the PIF tracking system by the CAP PC who is responsible for the overall implementation and performance monitoring of the NRR CAP. The CAP PC also responds to employee telephone inquiries and email questions.

The NRR CAP site also provides program information and resources, including online submission of PIFs, FAQs, Office Instruction, open and closed CAP items, and contact information for program points of contact. The program offers multiple ways for a PIF to be submitted, including:

- The NRR on-line PIF system at <http://nrr10.nrc.gov/PIP/welcome.htm>;
- An email to NRR_PIP; and
- A paper copy of the PIF or other written description to the NRR CAP PC at mail stop O5-H21. (Anonymous submissions are allowed with this method.)

(b)(5)

Impact on Agency

Average time from issue raised to resolved and communicated

Resolution times vary depending on the nature of the issue. Each PIF has a response plan and schedule which is tracked in the PIF tracking system. Depending on the issue, it can take anywhere from 1 day to years to resolve the issue. Generally, an issue is resolved right away or another office manages the resolution.

How resolution is communicated

The assigned manager communicates resolution to the CAP PC who then notifies the submitter when the PIF is closed and records that the notification was made in the PIF tracking system. The information recorded on the PIF, including the evaluation and responses taken, is shared with the submitter. Issues and resolutions are also posted on the NRR CAP site.

How implementation of resolution is tracked

The status of each issue and implementation of resolution is tracked in the PIF tracking system and posted on the NRR CAP site. As stated in ADM-101, Rev. 1, upon completion of each specific action included in the PIF's response plan, the assigned manager emails the status to the CAP PC, who updates the database by entering the implementation date for that action.

How lessons learned are generated from issues and resolution

(b)(5)

How lessons learned are disseminated

Not applicable

(b)(5)

Region I Corrective Action Program

System Purpose

Description

The current purpose of the Region I Corrective Action Program (CAP) is to ensure identified corrective actions are tracked and completed. Region I is considering expanding the program so its purpose may also include problem identification and issue resolution. Region I would also like the program to provide prioritization and evaluation. Region I wants a more comprehensive program that would allow them to look at past issues and how they responded and to conduct some issue trending analysis. It is cumbersome to use the existing system to conduct historical reviews and examine previous issues and responses.

System users

Management decides what actions go into the Region I CAP. Actions primarily originate from internal planned assessments. Anyone with access to the NRC Intranet can view limited information on the Region I CAP from the Region I homepage. Primary users of this information are likely Region I managers and supervisors.

How/where purpose is described

The purpose of the Region I CAP is described in Regional Instruction (RI) 650.2, "Region I Corrective Action Program" (RI 650.2), which can be found on the Region I homepage on the NRC Intranet. Employees can get to the Region I CAP site through the Region I homepage; however, it is not well advertised and employees may not know that program information can be found there.

Similar or alternative systems

Region I also has the Region I Lesson Learned Program that is linked to Region I CAP but this program is used less frequently by Region I staff. It is primarily a knowledge management tool that allows viewing of information.

At the regional and division levels, there are ticketing systems that track actions. These systems are not a formal CAP but they track actions and initiatives. At the division level, these actions are tracked similarly to corrective actions but they do not have the same level of prioritization, formality, and commitment for completion. Region I CAP items follow a more formal process, are deemed higher priority, and require completion. A change in due date for a Region I CAP item requires Deputy RA approval. In comparison, a division-level ticket item is less formal and divisions have discretion over changes to due dates.

Usage

Number of employees using

This information is not tracked. Management decides what actions are entered in the Region I CAP. The data is entered by the Deputy RA Secretary or other administrative staff.

There is an electronic form on the Region I CAP site to submit an action for entry into the system. The electronic form is not restricted so anyone with access to this site could submit an action.

Number of times used

The Region I CAP was started in 2002. In 2009, the Region I CAP had 19 assessments (or other activities) that resulted in 84 corrective actions. In 2008, they had 28 assessments (or other activities) that resulted in 138 corrective actions.

Policies and Procedures

Descriptions of policies and procedures

The purpose of RI 650.2 is to set forth the regional procedure for developing, implementing, and tracking to completion, corrective actions to be taken or improvements to be initiated as a result of Region I internal reviews (self assessments, lessons-learned reviews, betterment initiatives, or retreat items), as well as assessments or lessons-learned reviews conducted of Region I by parties external to the region.

How and where policies and procedures are documented

The policies and procedures for the Region I CAP are documented in RI 650.2, which went into effect on August 2002 and has not been updated since then. In terms of actual practice, the program basically operates as currently documented but there are some nuances that have changed.

Safety and security significance

There are no established criteria for assigning safety/security significance to corrective action items but management does assess safety/security significance. The amount of impact on the organization drives the significance determination. The Region I CAP primarily deals with actions that are related to organizational excellence. Prioritization of issue resolution based on safety/security significance is determined in the assessment from which the corrective action originated. Prioritization is not determined through the Region I CAP. Due dates may already be pre-determined from the originating assessment.

Privacy

This is not applicable since management decides what actions are entered in the Region I CAP.

Customer Service and Support

How customer service/support is provided

The Region I CAP tracking system is primarily administered by the Deputy RA Secretary who provides some support in terms of entering and updating data in the database. There is limited support provided on the current corrective action tracking system, which was developed in-house. The system is an Access database that was described as somewhat cumbersome by the administrative staff who use it. The Deputy RA Secretary and other administrative staff have reported having problems with the tracking system.

Currently, there is no owner for this program which is due in part to the way the program is used by Region I. When the program was first developed, there was an original owner. It then evolved to a point where an owner was no longer needed.

(b)(5)

(b)(5)

(b)(5)

Quality of customer service/support
Not applicable.

Impact on Agency

Average time from issue raised to resolved and communicated

Resolution times vary depending on the nature of the issue. A due date is assigned for each corrective action. The Region I CAP is a formal process and any change to a due date must involve Deputy RA approval. The program representative reported that most actions are completed by the due date. There are some cases where actions are prolonged but those are not the norm.

How resolution is communicated

The program indicated that they could do a better job at documenting the completion of actions. There is no clear guidance on what is required for closeout. The owner of the corrective action is required to send the Deputy RA Secretary an email stating that the corrective action was completed with supporting documentation attached. Then, the Deputy RA Secretary updates the tracking system and the issue comes off the active list. Sometimes there is no documentation detailing what action was taken.

How implementation of resolution is tracked

Management tracks and monitors implementation of corrective actions weekly. RI 650.2 requires an annual assessment of the program but this has not been done every year. The region will be performing an assessment in 2010.

How lessons learned are generated from issues and resolution

The program representative was unsure what goes into the Region I Lessons Learned Program. Region I will be looking to improve this moving forward.

How lessons learned are disseminated

Region I has a process for sharing the results of the self-assessments they perform which is how lessons learned are disseminated. There is a culture among the regions to share information with each other and the program offices at NRC headquarters. This information sharing is done outside of the Region I CAP and is a part of the Region I culture.

(b)(5)

(b)(5)

~~NOT FOR PUBLIC DISCLOSURE~~

Region III Suggestion Box

System Purpose

Description

The purpose of the Region III Suggestion Box is to serve as another tool for regional employees to communicate with senior management, including the RA. In the 1998-1999 timeframe, Region III undertook a management change initiative to improve the work environment in the region. One of the recommendations from that initiative was to provide employees with additional avenues for providing input and raising concerns to management. A staff working group came up with the idea of placing suggestion boxes throughout the region. That recommendation was adopted.

System users

The system is intended for Region III employees. Anyone in the Region III building can submit a suggestion. A few employees making suggestions provide their names, but most submissions are anonymous.

How/where purpose is described

The purpose of the Region III Suggestion Box is not formally documented. Management communicates the purpose verbally at new employee orientation and all-staff meetings. Five suggestion boxes have been placed throughout the Region III facility in high-traffic areas, such as the lunch rooms, so that employees can easily see and access them. Regional Counsel reminds and encourages the employees to use the Region III Suggestion Box at the end of each all-staff meeting. In 2005, management encouraged usage in an information notice that was sent to all Region III employees. In the past 10 years, management has sent a couple of reminder notices regarding the Region III Suggestion Boxes.

Similar or alternative systems

Management reported that there are no similar or redundant systems in Region III and that the Agency has a more formal Suggestion Program. NSIR, RES, RI, RII, and RIV have similar online systems. The RIII system is not online but the purpose is similar.

Usage

Number of employees using

Since questions can be submitted anonymously, the number of employees using the system cannot be tracked.

Number of times used

The Region III Suggestion Box was implemented over 10 years ago. Typically, a total of 20-25 submissions are received per year, or four to five per quarter. Management has record of submissions on file since 2004.

Policies and Procedures

Descriptions of policies and procedures

Management typically responds to all submissions placed in the suggestion boxes. An exception would be personnel-type suggestions or questions that may be inappropriate to share with all staff. If the submitter's identity is provided, management may address the issue one-on-one with the submitter and ask if he or she still wants the matter addressed at the all-staff meeting. When communicating with staff, Regional Counsel may not read the submission word-for-word but instead may summarize if something is inappropriate or to protect the employee's identity.

The process for handling submissions is summarized below:

- Employees complete the suggestion forms and place them in one of the suggestion boxes.
- The DRMA Secretary checks the locked suggestion boxes for submissions at least monthly.
- The DRMA Director and the Deputy Director review submissions and share them with the senior managers during leadership meetings. Most responses are provided by DRMA since most questions/suggestions address corporate issues. If the submitter's identity is known and it is appropriate to involve that person, the submitter may be involved in this review.
- The RA, the Deputy RA, the Division Directors, and the Regional Counsel review and discuss submissions and proposed responses approximately 2 weeks before the next all-staff meeting.
- The DRMA Director and the Deputy Director present submissions and responses to the Regional Counsel for review in advance of next all-staff meeting.
- The Regional Counsel reviews all submissions and responses in advance of the next all-staff meeting.
- The Regional Counsel communicates suggestions/questions and responses to employees at the all-staff meeting.

How and where policies and procedures are documented

Policies and procedures for the Region III Suggestion Box are not documented. They are verbally communicated.

Safety and security significance

Occasionally management will receive a submission regarding facility safety and security (e.g., closing stairwells during business hours, access doors that are not closing properly). In general, management handles all submissions in the same manner as noted above.

Privacy

Submissions are mostly anonymous which management respects. If the submitter's identity is provided, management will ask the person if he or she wants his or her identity disclosed at the all-staff meeting when the suggestion is being discussed. Privacy has not been raised as an employee concern.

Customer Service and Support

How customer service/support is provided

No customer service is provided. The system is fairly maintenance free. The DRMA secretary checks the suggestion box at least monthly and replenishes the blank suggestion forms as necessary. The suggestion boxes are locked and the DRMA secretary has the key. There are a total of five suggestion boxes in the Region III building. Region III has 225 employees, with 175 in the Region III building; the remaining employees work at the power plants.

Quality of customer service/support

Not applicable.

Impact on Agency

Average time from issue raised to resolved and communicated

Response times are unknown since submissions are not dated.

How resolution is communicated

There is a standing agenda item in all-staff meetings to discuss Region III Suggestion Box submissions and responses. All-staff meetings are held at least once a quarter but may be conducted more frequently if necessary. Submissions and responses are not communicated to staff in writing. This was attempted but was found to be too time consuming and employees seem to be satisfied with verbal communication at the all-staff meetings.

How implementation of resolution is tracked

Three out of five submissions are questions that do not require implementation. The balance are suggestions. Infrastructure-type suggestions may require implementation. The Division responsible for implementation is responsible for tracking these issues. If DRMA is responsible, the action would be tracked in the Division leadership meeting every Wednesday.

How lessons learned are generated from issues and resolution

Not applicable. Lessons learned are not generated.

How lessons learned are disseminated

Not applicable.

(b)(5)

Region IV Ask Management

System Purpose

Description

The purpose of the Region IV Ask Management system is to provide another avenue of communication for employees. They have multiple channels of communication but this one is anonymous. The system is a modern day suggestion/complaint box. The system was designed to be more of a suggestion box and less of a complaint box. Clarification questions are often submitted to the system.

System users

The system is intended for Region IV employees who are its primary users. Anyone with access to the NRC Intranet can access the system, submit a question, and view past questions and responses from the Region IV home page.

How/where purpose is described

The purpose of the Region IV Ask Management system is not documented. Region IV did not create a policy guide and management does not think one is necessary. On the Region IV homepage on the NRC Intranet, there is a flashing arrow pointing to the link for Ask Management which makes it easy for a Region IV employee to find it. In addition, Region IV employees are reminded of the system's availability at current events meetings, such as the all-hands meeting. Questions and answers are summarized and communicated at these monthly meetings in addition to being posted on the Region IV Ask Management site.

Similar or alternative systems

NSIR, RES, RI, RII, and RIII have similar systems. The RIII system is not online but the purpose is the same.

Usage

Number of employees using

Since questions can be submitted anonymously, the number of employees using the system cannot be tracked.

Number of times used

The system has been operational for over a year since March 2009. For the 9 months in CY 2009, 27 questions and answers were posted on the Region IV Ask Management site, which is on average about three questions per month. For the 12 months since the program's inception, a total of 35 questions have been submitted.

Policies and Procedures

Descriptions of policies and procedures

All questions may not be posted if they are duplicates or inappropriate for this forum. A question is typically posted as submitted, however, it may be reworded to protect anonymity (e.g., remove any personal identifiers) or to rephrase disparaging comments (e.g., if insulting to an

organization or another individual). Anyone who has access to the NRC Intranet can view the questions and answers and submit a question.

The process for handling questions submitted to the system is summarized below:

- An employee submits a question.
- The RA, the Deputy RA, the DRM Director and the Regional Personnel Officer receive an email notification that a question has been submitted. All read the question and decide who will answer.
- One of the four roles listed above drafts the response. If the submitter's identity is known, the Deputy RA would involve the employee. So far, no submitters have revealed their identity; all questions submitted have been anonymous.
- The Deputy RA reviews all questions and responses and may provide edits prior to posting if necessary.
- The person who drafted the response posts the question and its answer to the Ask Management site.
- The question and its answer are also summarized and communicated each month at the all-hands meeting.

How and where policies and procedures are documented

Policies and procedures for the Region IV Ask Management system are not documented. The lack of documentation does not appear to cause any confusion since employees generally know the purpose of the system and how to use it. Questions and answers are posted to the Region IV Ask Management site on the NRC Intranet and verbally communicated at current events meetings, such as the all-hands meetings in the region.

The first question and answer posted on the Region IV Ask Management site does address some of the policies and procedures for the system. When asked whether management will be selective about the questions that are posted especially if a question posed could embarrass another individual, management's response was:

The short answer is, yes. We do not intend to embarrass anyone. We believe that it is important to establish as many means of effective communication with the staff as possible. Communication tools, such as this "ask management" button, we hope will improve our communications.

Controversial questions are an expected outcome of this process, which is why it was developed to assure anonymity. Management will do its best to answer them, however, it should be noted that there may be some rare occasions where the subject matter may not be appropriate to answer. If this occurs, we will be sure to describe why an answer can't be provided at that time.

Safety and security significance

Typically, questions with safety/security significance are not submitted to this system. Since this program's inception, no safety questions regarding reactors have been submitted to this system. There may have been questions related to employee work conditions. If a submission is time

sensitive or urgent in nature, the Deputy RA responsible for the system would make sure a response is provided immediately.

Privacy

Questions are submitted anonymously. Privacy has not been raised as an employee concern. Management does not try to determine who submitted the question. Rather, their focus is on answering the question.

Customer Service and Support

How customer service/support is provided

Customer service and support is not provided for the system. If employees encounter problems with the system, they can submit a trouble ticket to the IT help desk. There has not been a need for customer service and support. The system is an informal way to answer employee questions and to help with communication. The intent is to keep the system simple.

Quality of customer service/support

Not applicable.

Impact on Agency

Average time from issue raised to resolved and communicated

A response is typically posted within 2 weeks of a question being submitted. There are no targets for responding. If a concern is time sensitive or urgent in nature, the Deputy RA responsible for the system would make sure a response is provided immediately.

How resolution is communicated

All questions and answers are posted on the Region IV Ask Management site on the NRC Intranet. They are also communicated at the all-hands meetings.

How implementation of resolution is tracked

Few submissions require action other than the response itself. Most submissions are clarification questions to help improve understanding of policy. If action is required, the executive responsible for answering the question will also be also responsible for implementation. Some examples of submissions requiring action include:

- A suggestion to start an Ask IT system resulted in the development of an IT FAQ which was emailed to all Region IV employees.
- A suggestion to post all policy guides in WordPerfect and Adobe PDF on the Region IV Intranet was also implemented.

How lessons learned are generated from issues and resolution

The system helps management understand matters that are important to employees. It prompts management to pay attention to matters that may not be on their radar. For example, one lesson learned came from a question regarding the pending office move which let management know that employees had concerns about this event. This system informs management and allows them to address the employees' concerns.

How lessons learned are disseminated

Questions that are troublesome are shared with the other regions. There is a counterpart meeting of all Deputy RAs in the regions which offers a way to coordinate answers to questions submitted. Since regions have access to each other's Ask Management systems, they can copy/paste responses for similar questions. There is less coordination with NRC headquarters.

(b)(5)

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Office of Research Feedback Portal

System Purpose

Description

The purpose of the Office of Research (RES) Feedback Portal is to encourage RES staff to provide suggestions that will enhance RES practices.

System users

The system is intended for RES staff who are the primary users. Anyone with access to the NRC Intranet can access the system, submit feedback/suggestions, and view past submissions and responses.

How/where purpose is described

The purpose is described on the RES Feedback Portal site. There is a link to this site at the bottom of the RES homepage on the NRC Intranet.

Similar or redundant systems

NSIR, RI, RII, RIII, and RIV have similar systems for their respective offices/regions. The RIII system is not online but the purpose is the same. There is an Agency Suggestion Program that handles Agency-level issues and has a monetary incentive, which is different from this program which is meant to deal specifically with office-level issues.

Usage

Number of employees using

Since suggestions can be submitted anonymously, the number of employees using the system cannot be tracked. About 10-15 individuals per year are estimated to use this system.

Number of times used

Ten to 30 suggestions are submitted each year.

Policies and Procedures

Descriptions of policies and procedures

Guidelines documented on the RES Feedback Portal state that suggestions should be written clearly and concisely, focus on a single idea, and be constructive. Suggestions are anonymous throughout the review process and are selected on merits such as efficiency, functionality, and/or cost-savings. Reviewers will also consider how well suggestions relate to NRC performance goals. The process is clearly described on the RES Feedback Portal.

How and where policies and procedures are documented

The guidelines and process are documented on the RES Feedback Portal site. There is a link to this site at the bottom of the RES homepage on the NRC Intranet.

Safety and security significance

The FPA will review submissions and will refer them to RES management if any safety/security implications are involved. Safety/security related suggestions are not common but those that are submitted take precedence.

Privacy

Anonymity is offered in the web-based submission form. Names are not used on the 'status' web page that shows suggestions submitted and their responses. Privacy has not been raised as an employee concern.

Customer Service and Support

How customer service/support is provided

The FPA provides customer service and support based on emails to RES Feedback.

(b)(5)

Impact on Agency

Average time from issue raised to resolved and communicated

The target for an initial response is a few weeks. In some cases, response times could be improved.

How resolution is communicated

Submissions and resolutions are communicated on the RES Feedback Portal site. If the submitter's name was provided, the FPA will email the individual to notify him or her to check the web site for resolution.

How implementation of resolution is tracked

Implementation of resolution is tracked in the suggestion database which is an MS Access application. Open action items are tracked in the same place that suggestions are centrally stored.

How lessons learned are generated from issues and resolution

Many suggestions do not lend themselves well to general lessons learned. Any lessons learned would be generated on a case-by-case basis.

How lessons learned are disseminated

Lessons learned are not often disseminated. RES management would take this step, if applicable.

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Reactor Oversight Process Feedback Program

System Purpose

Description

The Reactor Oversight Process (ROP) Feedback Program is an internal feedback process for the NRC staff to identify concerns or issues and recommend improvements related to ROP policies, procedures, or guidance. Feedback can address concerns involving performance indicators, assessment, inspection, significance determination process, enforcement, training, and cross-cutting issues.

The NRR Division of Inspection and Regional Support (DIRS) oversees and uses this program to document, review, and resolve problems, concerns, or difficulties encountered in implementing the NRC's ROP. The ROP Feedback Coordinator coordinates the review of the ROP Feedback Forms.

System users

The ROP Feedback Program can be used by any NRC employee who has concerns or wishes to provide feedback regarding the NRC's ROP. The primary users are the inspectors at the plant sites and in the regions. HQ staff also use this program.

How/where purpose is described

The purpose is described in the Inspection Manual Chapter 0801, "Reactor Oversight Process Feedback Program" (IMC 0801). IMC 0801 was revised July 6, 2010. Employees can also find program information and resources on the NRC Intranet at the ROP Feedback Program site on ROP Digital City on the NRR homepage and on the NRR/DIRS Reactor Inspection Branch (IRIB) SharePoint site. This program is also described on the NRC public web site at *Nuclear Reactors*, under *Operating Reactors*, under *Oversight*, under *Reactor Oversight Process*, under *ROP Program Evaluations and Stakeholder Feedback*.

Similar or alternative systems

No similar or alternative systems were identified.

Usage

Number of unique users

Each ROP Feedback form has the name of the person submitting the change request; however, the program does not track usage by unique individuals. This number could be tallied by looking in the system but total is not readily available.

Based on a review of the Yearly Activity Query-Received report, 19 individuals submitted forms in 2009 and 22 in 2008.

Number of times used

Based on a review of the Yearly Activity Query-Received report, 99 feedback forms were submitted by 19 individuals in 2009; and 57 feedback forms were submitted by 22 individuals in 2008. This is an average of 5.2 forms per individual in 2009, and 2.6 in 2008. A snapshot look of the current activity in August 2010 shows there are 149 open feedback forms.

Policies and Procedures

Descriptions of policies and procedures

Pursuant to Inspection Manual Chapter (IMC) 0801, it is the NRC's policy to encourage the staff to identify issues that need program-level attention and to suggest changes to improve the effectiveness or implementation of the ROP. Although feedback is expected to come mostly from staff who implement the Agency's oversight programs, any NRC employee may use the program to make suggestions or recommendations regarding the ROP.

Prior to July 6, 2010, the process was the following: An initial response to acknowledge the feedback received by the Reactor Inspection Branch (IRIB) was issued within 15 working days of receipt. DIRS had an established goal to resolve feedback forms with a high priority immediately*, a medium priority within 90 days, and low priority feedback forms within 180 days. A feedback issue normally would be closed when it had been resolved or moved into another program to be resolved (for complex issues), and the originator had been notified of that action. ROP documents affected by resolved feedback forms were updated at least yearly.

After July 6, 2010, the process changed. Now the IRIB responds with an initial response with 10 working days of receipt. ROP feedback forms are processed in accordance with the timelines associated with the inspection manual documents timelines published in SharePoint and updated by the lead reviewers. Documents with approved feedback are published annually. Urgent feedback is communicated by originator management to lead reviewer management and may impact the document timelines.

* Note: Based on interviews with the program, the following differences were noted when comparing the procedures as documented in IMC 0801 and how the process is currently performed, including:

- Any proposed changes that need to be addressed in fewer than 90 days are considered high priority and need to be handled by the respective IMC lead directly or through another program, and not the ROP Feedback Program. Only medium and low priority changes are handled by this program.
- The ROP Feedback Coordinator does not coordinate the review of feedback to the ROP with the NRR Work Planning Center and does not process the feedback using the NRR Work Planning and Characterization Form. The ROP Feedback Coordinator assigns the feedback form directly to the lead reviewer and coordinates with the assignee to resolve the concern.

How and where policies and procedures are documented

Policy and procedures for the ROP Feedback Program are documented in IMC 0801.

Safety and security significance

Prior to July 6, 2010, the originator assigned the priority for response. According to IMC 0801 and the ROP Feedback Form, the priorities were as follows:

- High: perform immediately;
- Medium: <90 days; and
- Low: <180 days, after consulting with the lead reviewer.

However, as mentioned above, only medium and low priority changes were handled by the program. Any proposed changes that needed to be addressed sooner than within 90 days were considered high priority and were either handled by the respective IMC lead directly or through another program.

After July 6, 2010, the process changed. Urgent feedback is now communicated by originating management to lead reviewer management and may impact the document timelines.

Privacy

ROP Feedback Forms are not public. There is no PII on the forms and they are treated as "for internal use only." Forms require the originator's name and supervisor approval. Privacy has not been raised as an employee concern.

Customer Service and Support

How customer service/support is provided

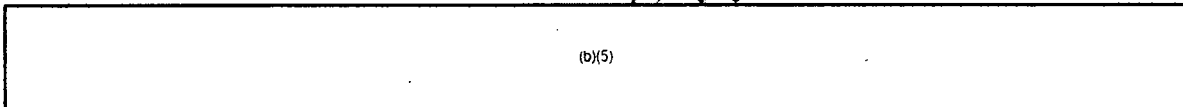
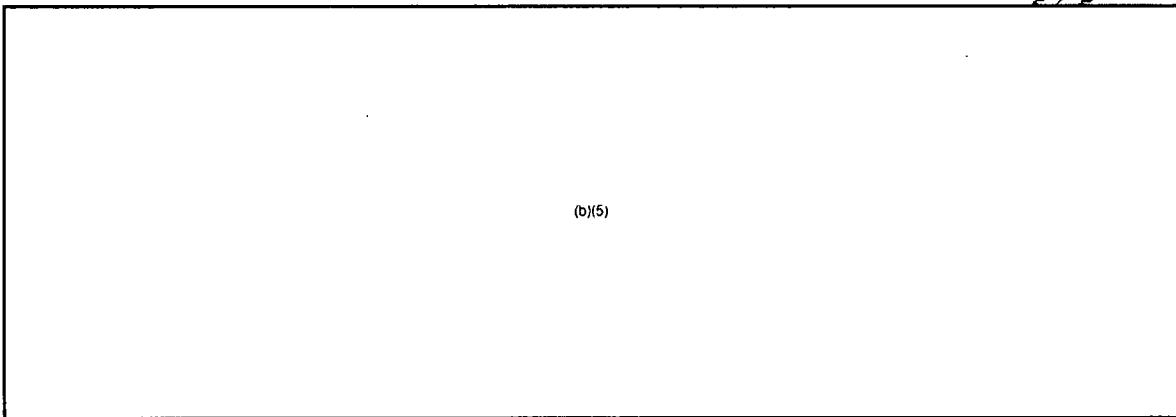
The ROP Feedback Coordinator provides customer service and support, including sending acknowledgement that the form has been received and informing the originator if anything is missing on the form that may prevent it from moving forward in the process (e.g., supervisor approval).

The ROP Feedback Program Coordinator performs the following process coordination:

- Check the ROP Feedback Program email inbox frequently for ROP Feedback Form submissions.
- Review the form to confirm it is signed by the originator's Branch Chief or supervisor. Submitted forms are not entered into the program database or assigned for review until they have the required signature. If signature approval is not received within two weeks, the Coordinator sends notice to the originator to inform him or her that no action has been taken due to lack of signature approval. After July 6, 2010's process update, only forms authorized by the supervisor are sent to the ROP Feedback Program Inbox.
- Once the form is signed by the originator's Branch Chief or supervisor, the Coordinator begins the process by entering information from the completed form into the program database and assigning a unique ID to the form.
- Assign the appropriate IMC owner as lead reviewer. Each inspection procedure has an IMC owner.
- Send an acknowledgement receipt to the originator, typically within one week of receiving the complete form.
- Once the form is resolved and submitted by the lead reviewer, update the database as either "closed" or "closed pending change notice."
- Forward the resolved feedback form to its originator, the originator's supervisor, all regional coordinators, and the lead reviewer.
- If the resolved form has a document change pending, track the form until it is incorporated into the program document. The program document is updated on a periodic basis or at least

annually. Once the inspection procedure or manual chapter is issued, remove the form from all tracking programs.

After July 6, 2010, all open feedback forms and document timelines for processing are posted in SharePoint.



Impact on Agency

Average time from issue raised to resolved and communicated

The program reported that currently they are not doing well in meeting the timeliness targets for resolving feedback forms. Some forms are complicated and take a long time to resolve. Also, the program indicated that they do not control the offices and staff who are responsible for resolving the forms, which makes it difficult to meet the timeliness targets. Going forward, the program is trying to improve timeliness.

Data for average time to resolve a feedback form was not readily available at the time of the program interview. This figure could be calculated by looking in the system but an average was not readily available. Based on a review of the Closed by Calendar Year report, 41 forms were closed in 2009 with an average closure time of 244 days per form. In 2008, 109 forms were closed with an average closure time of 166 days per form. Data by medium and low priority was not available.

DPRS has an established target to resolve feedback forms with a medium priority within 90 days and low priority within 180 days. There is also a target to acknowledge receipt of the feedback form to the originator within 15 working days of receipt.

How resolution is communicated

As stated in IMC 0801, the lead reviewer forwards the ROP Feedback Coordinator an electronic copy of the signed feedback resolution. The ROP Feedback Coordinator electronically forwards the resolved feedback form to its originator, the originator's supervisor, all regional coordinators, and the lead reviewer. All Regional Feedback Coordinators receive resolved forms in order to

distribute the forms to the unique internal stakeholders within the region's organization to keep them informed of relevant program changes.

How implementation of resolution is tracked

Pursuant to IMC 0801, the IRIB closes a ROP Feedback Form upon receipt of approval from the cognizant Branch Chief when no change is necessary to the document in question. The ROP Feedback Coordinator continues to track feedback issues electronically where a revision to an inspection procedure or manual chapter is to be documented. The reviewer will mark the block entitled "Hold for Issuance of Change Notice" in Section H. The feedback form will continue to be tracked in the table in Section I until the Change Notice for the inspection procedure or manual chapter is issued. Once the inspection procedure or manual chapter is issued, the ROP Feedback Coordinator will close the feedback form. The program document is updated on a periodic basis or at least annually. If the resolution of the feedback does not affect a program document, the issue is closed when the approved final response is sent to the originator and the originator's management.

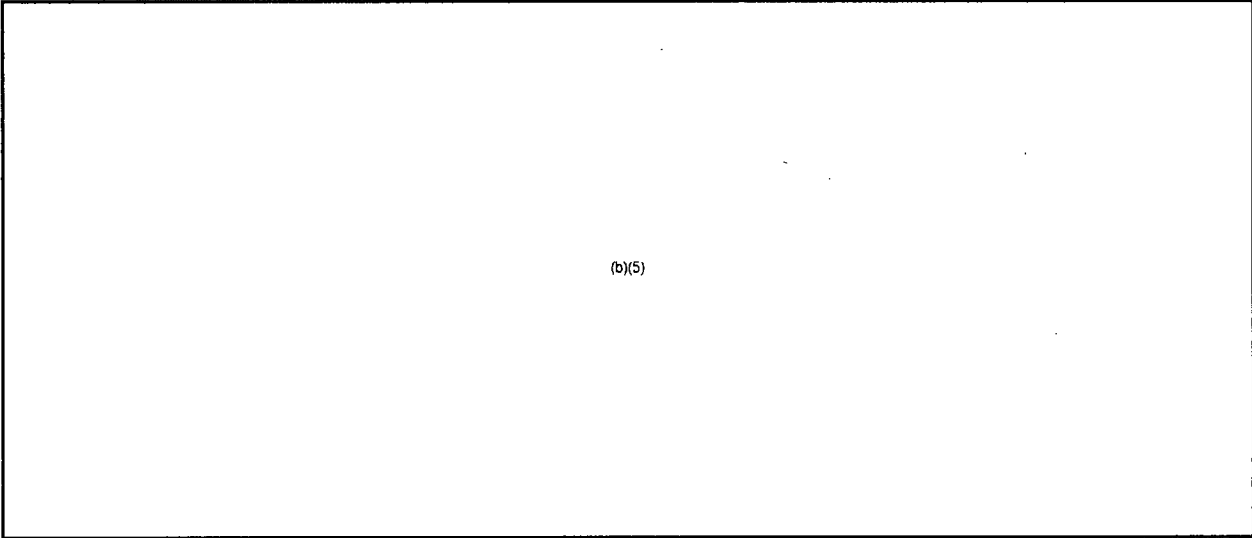
How lessons learned are generated from issues and resolution

The program reported that the whole process is essentially a lessons learned. Some IMCs have working groups to assess any lessons learned.

How lessons learned are disseminated

As noted above, the ROP Feedback Coordinator will electronically forward the resolved feedback form to its originator, the originator's supervisor, all regional coordinators, and the lead reviewer. All Regional Feedback Coordinators receive resolved forms in order to distribute the forms to the unique internal stakeholders within the region's organization to keep them informed of relevant program changes.

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SFST Lessons Learned Process

System Purpose

Description

The purpose of the system is for the Division of Spent Fuel Storage and Transportation (SFST) in the Office of Nuclear Material Safety and Safeguards (NMSS) to conduct an internal annual review of the work they performed and identify any process improvements to increase efficiency and effectiveness.

System users

The system should be used by all employees in SFST. The primary users are intended to be SFST project managers when they finish a case of high complexity.

How/where purpose is described

The purpose of the SFST Lessons Learned Process is described in the OI entitled "Lessons Learned." The OI, which is available in ADAMS, was first issued in November 2004 and last updated in February 2009. All employees receive an OI binder when they start and administrative assistants provide copies of any OI updates. This process and its purpose are not described on the NMSS homepage on the NRC Intranet. The only information available is the OI and the lessons learned reviews and management responses which are saved on the shared G: drive.

Similar or alternative systems

No similar or redundant systems were identified. There is an agency-wide Lessons Learned Program; however, the lessons learned reviews that are performed by the SFST Lessons Learned Process are intended to be division-level reviews and typically do not meet the criteria for the agency-level program.

Usage

Number of employees using

Usage is not tracked by individuals.

Number of times used

Since the last process update in February 2009, three cases have been submitted. An annual review has not yet been conducted under this updated process.

Under the previous process, one case was submitted in 2009, one in 2008, none in 2007, one in 2006, two in 2005, and two in 2004. That is a total of seven cases submitted since 2004.

Policies and Procedures

Descriptions of policies and procedures

Initially, the SFST Lessons Learned Process was focused solely on the site-specific licensing process, but SFST has not performed a site-specific license since 2004. In February 2009 when the OI was revised, the SFST Lessons Learned Process was broadened to include initial

certifications for storage casks as well as first-of-a-kind design approaches for storage casks or transportation packages.

Under the previous process, lessons learned reviews were done on a case-by-case basis after each highly complex case was completed. Under the current process, an annual review is performed on all cases to look for commonalities. As instructed in the OI, technical reviewers, inspectors and project managers can upload lessons learned to the division directory on the shared G: drive.

SFST licenses independent spent fuel storage installations (ISFSIs) under two licensing options: 1) a site-specific license; and 2) a general license. There are 55 licensed ISFSIs: 15 are site-specific licenses, including some that are 10 CFR Part 50 reactor facilities; 40 are general licenses. A general license authorizes a nuclear power plant licensee to store spent fuel in NRC-approved casks at a site that is licensed to operate a power reactor or possess fuel under 10 CFR Part 50.

SFST also issues certification of storage casks. An NRC-approved cask is one that has undergone a technical review of its safety aspects and been found to be adequate to store spent fuel at a site that has been evaluated by the licensee to meet all of the NRC's requirements in 10 CFR Part 72. The NRC issues a Certificate of Compliance for a cask design to a cask vendor if the review of the design finds it technically adequate.

How and where policies and procedures are documented

Policies and procedures for the SFST Lessons Learned Process are documented in the OI which was last updated in February 2009.

Safety and security significance

This program only looks at the process of how the review was conducted. Any issues with safety and security significance are handled during the course of the licensing review.

Privacy

A submitter probably could submit a case anonymously but program management is not aware of an instance where a case was submitted anonymously. Typically, the whole team including the project manager proposes the lesson learned in a memo and is involved in any discussions with the Division Director. Program management is not aware of any privacy concerns. The perception is that most SFST employees are very open in providing their opinions.

Customer Service and Support

How customer service/support is provided

Technically, there is no customer service or support. Users could call the process lead for support; however, the name and contact information for the process lead is not published.

Quality of customer service/support

Not applicable.

Impact on Agency

Average time from issue raised to resolved and communicated

Under the current process, a lessons learned review is done on an annual basis.

How resolution is communicated

Resolution is communicated in a memo from the Division Director.

How implementation of resolution is tracked

Under the previous process, implementation was not tracked. Under the current process, if a lessons learned review results in a change to a procedure, implementation would be tracked in the Division ticketing system and/or the Division operating plan.

How lessons learned are generated from issues and resolution

The entire process is a lessons learned review.

How lessons learned are disseminated

Lessons learned are disseminated in a memo from the Division Director. Lessons learned reviews and management responses are saved on the shared C: drive and placed in ADAMS. Generally, lessons learned are not applicable outside of SFST.

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A2. Evaluation Methodology

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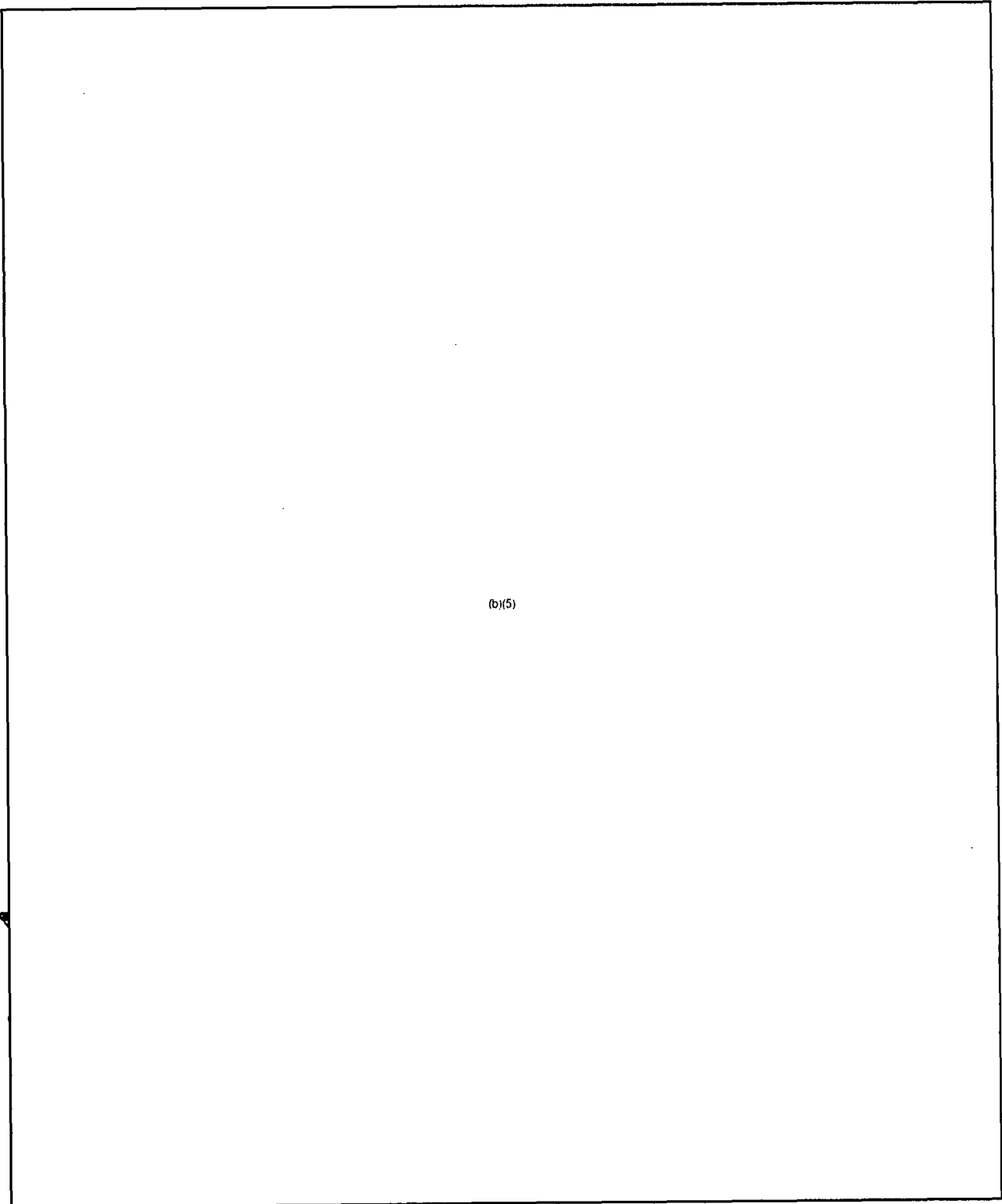
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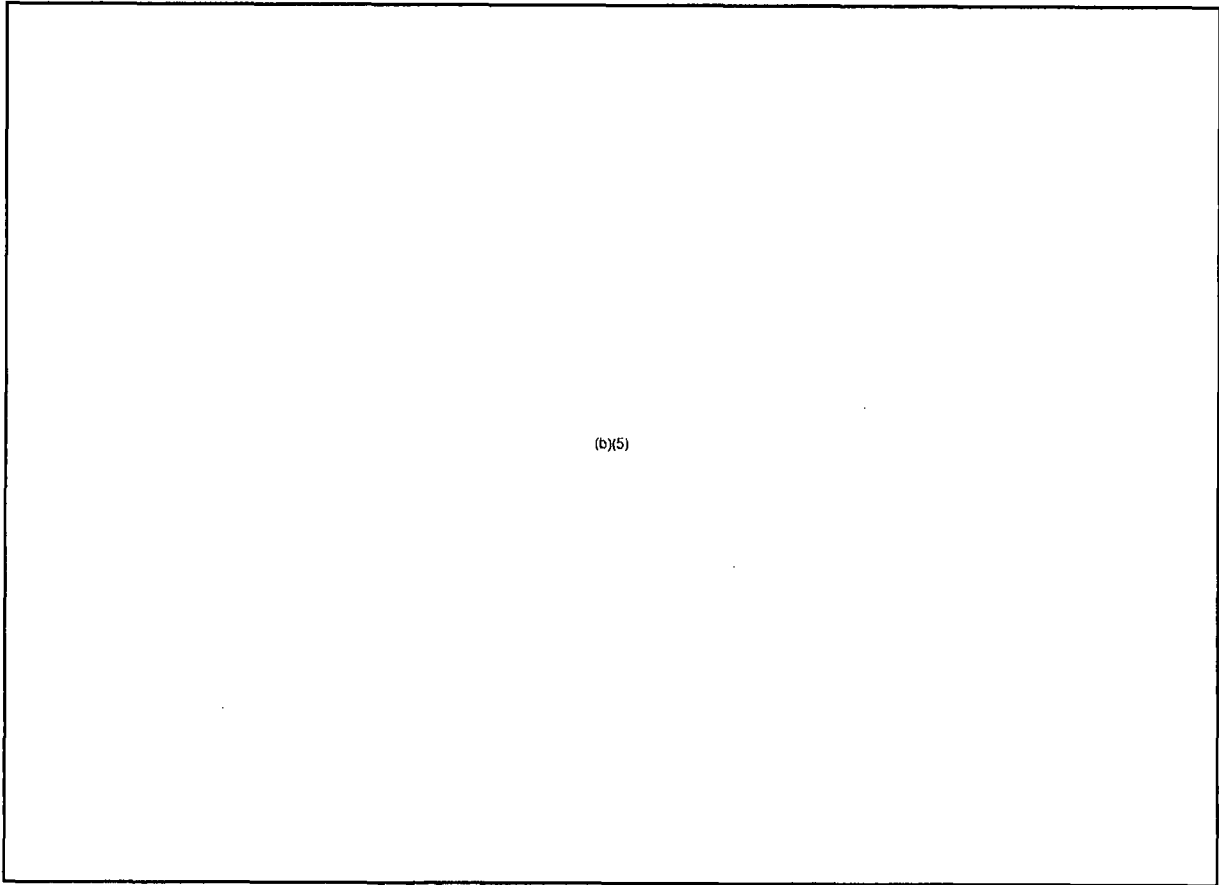
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A3. Implementation Approach



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NRC OD Contract Annual Report

January, 2012

Agenda



- Defining Organization Development
- NRC OD Contract Overview
- Current NRC OD Work Footprint
- Overview of NRC OD Work
- Organizational Insights
- Recommendations

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Organization Development Definition

- Organization development is an organized effort undertaken to improve an organization's effectiveness while building internal capacity. Key premises of organization development include:
 - Action Research
 - A Collaborative Client-Consultant Relationship
 - Application of Behavioral Science Knowledge
 - Viewing Organizations as Complex Systems
 - The Use of Targeted Interventions
- OD work can take place at the organizational, team and individual level – most OD work combines interventions at the three levels

NRC OD Contract Overview



September 2010: Contract Launch

5 Year 8(a) Contract (1 Base Year, 4 Option Years) Awarded to Suntiva LLC in September 2010. Contract Ceiling over 5 Years: \$1.95M. Contract is a "Fee for Service" Contract – i.e. Funded on an "As Needed" Basis by Clients

Getting the Word Out

Spent First Six Months Getting Word Out to NRC Leaders regarding the New Contract through Presentations, Meetings with Key Stakeholders, Articles etc.

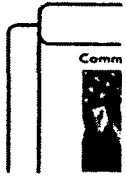
End of First Fiscal Year

By the End of the First Contract Year, 21 Task Orders had been Issued on the Contract. They Range from Enterprise-wide Support to Individual Coaching as Part of New Team Formation

Goals of a centralized OD contract:

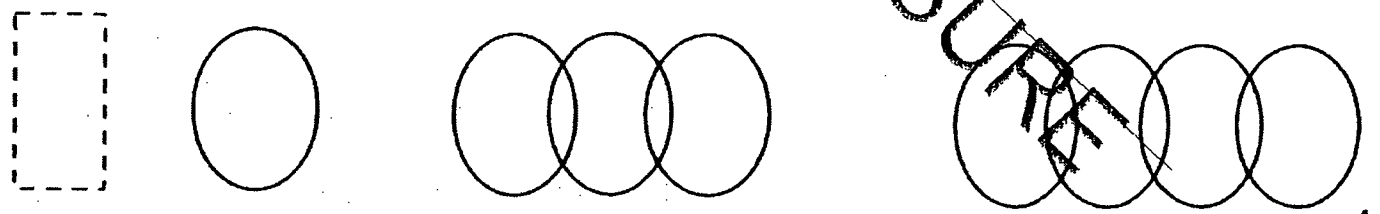
- Consistency across the organization in terms of quality and approach
- More visibility into work being done, money spent and evaluation of effectiveness
- Integrate tasks across organization as appropriate to maximize impact to NRC
- Integrate what we learn from the work back into the NRC organizational system

Where OD Work is Taking Place



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Legend:
Circles = where work has/is currently taking place
Dashed square = work may soon begin there



Type of NRC OD Work



ORGANIZATION
 PUBLIC
 SUPPORT
 TEAM

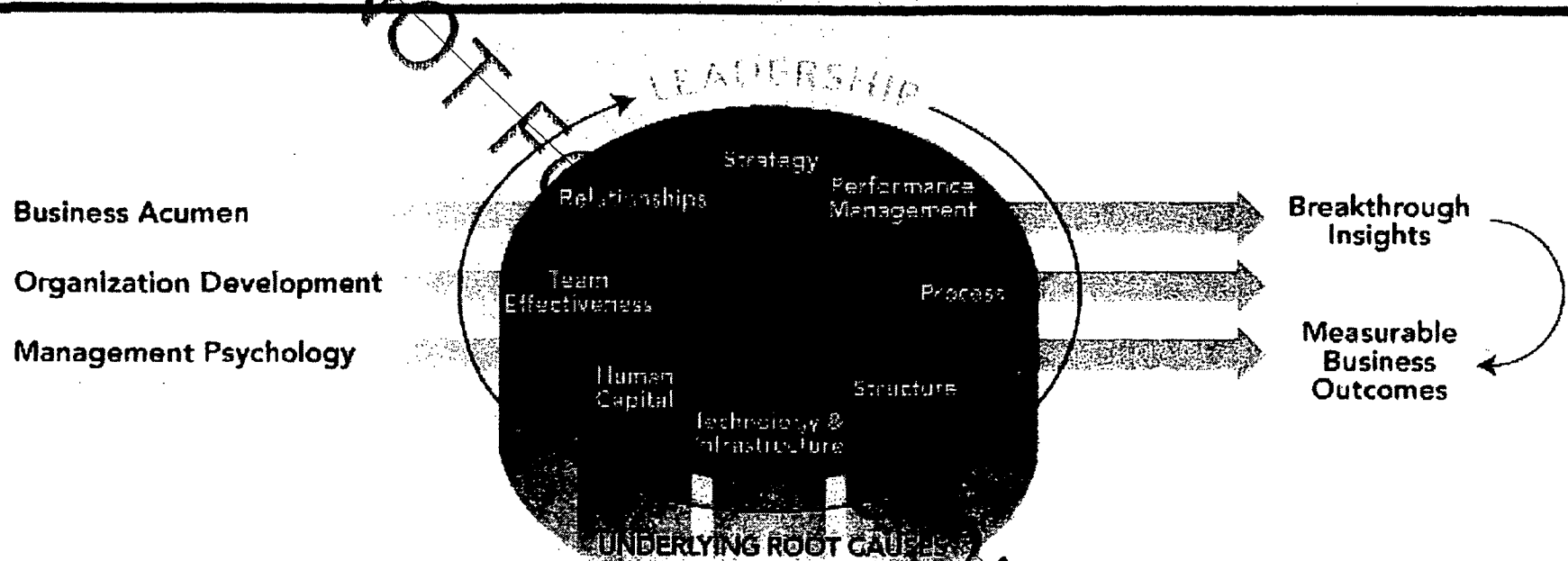
Organization

- NRC Federal Employee Viewpoint Survey Analysis (Organization-wide and Office-Specific)
- NRC Organizational Culture (Safety Culture Terminology and Framework)
- Analysis of Tech and Non Tech Staff Mission Alignment
- OCWE Training
- NRC FEVs and SCGS Survey Meta Analysis in Support of a HPO
- FEVs and Safety Culture Action Planning Support

Team

- NRR Leadership Team Strengthening Program
- Office of Enforcement Team Effectiveness
- RES Team Effectiveness (Branch)
- Office of Administration Leadership Team Offsite Facilitation
- Office of Strategic Acquisition Coaching
- Office of Information Services IRSD Organization Assessment
- NMSS Admin Team Offsite
- OEDO Admin Team Support
- CSU Leadership Team Support
- NMSS Culture Assessment
- SLM Facilitation
- Offsite Facilitation

Used Suntiva's Organization Assessment Model to Structure Our Insights



- ❖ Understanding *root cause* issues versus symptoms
- ❖ Bringing to bear multiple areas of expertise
- ❖ A focus on *business outcomes*
- ❖ Taking a *systems approach* to our work

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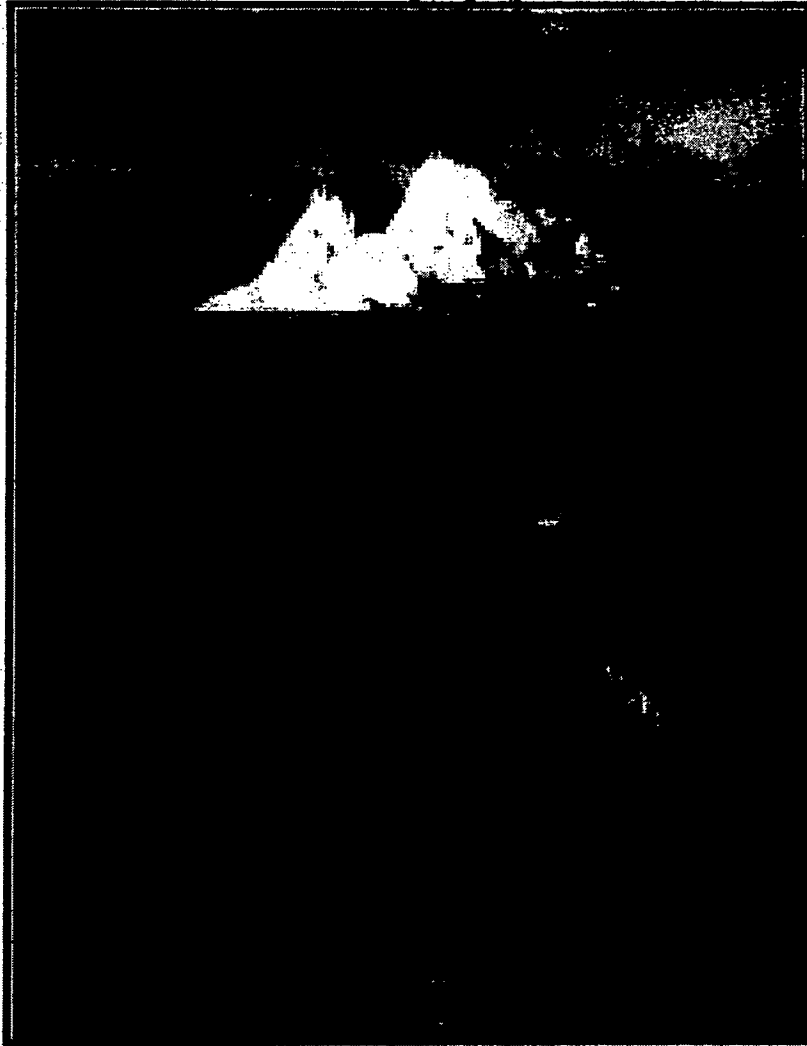
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Organizational Insights - Culture



- Strategy
- Technology/Infrastructure
- Structure
- Processes
- Performance Management
- Team Effectiveness
- Human Capital
- Leadership

External
Conscious
Logical

CULTURE

- Assumptions
- Beliefs
- Espoused Values versus Values in Action
- Norms
- Unwritten rules

Internal
Unconscious
Emotional

PUBLIC DOCUMENT CLOSURE

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Recommendations



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Attachment 6

**[16 pages - withheld in full
exemption 5/deliberative process
privilege]**

Attachment 7

**[28 pages - withheld in full
exemption 5/deliberative process
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12

THE OFFICE OF NEW REACTORS: FOCUS GROUP SUMMARY

Two NRO focus groups were conducted on September 28th. The purpose of the focus groups was to:

- Better understand, from Technical Reviewers and Administrative/Corporate Support professionals, the perspectives and root causes (and symptoms) associated with the current work environment within the Office.
- Identify actionable items to close gaps in Office quality, working relationships, and communications.

FOCUS GROUP #1: TECHNICAL REVIEWERS

A total of nine Technical Reviewers participated in focus groups. The average tenure of Technical Reviewers in the focus group was approximately 1.5 years within the Office of New Reactors. The focus group agenda was as follows:

Safety Culture and Climate Survey Action Planning

Objectives:

- o Discuss the current environment in NRO
- o Identify opportunities and actions to improve NRO
 - o Working Relationships
 - o Organizational Change and Quality Focus
 - o Open Collaborative Work Environment

9:30a Welcome & Introductions (Glenn Tracy)

- Facilitator & Participant Introductions
- Focus Group Overview & Agenda

9:40 Temperature Check (two teams)

- o Discuss and document the current environment in NRO:
 - How would you characterize the work environment?
 - Describe current working relationships. Peer-to-peer; staff-to-managers, etc.
 - What is your level of comfort raising issues and seeking resolution?
 - Describe how changes in NRO are initiated?
 - Is NRO doing the right things? Headed in the right direction?

Discuss your contribution and level of engagement:

- Do you feel your work contributes to NRO's mission?
- Do you feel you are producing high quality products?
- Do you feel you that NRO is producing high quality products?
- Do you have the tools and training to do your job?

10:45 Create a Plan of Action (two teams)

- o Determine areas for improvement and actions to address NRO needs:
 - Listen to the OEDO's LPP OCWE Speech
 - What does OCWE mean to NRO?
 - Brainstorm actions to help NRO fully realize OCWE.
 - What can NRO do to improve organizational change? Quality focus? Working relationships? Training and Development?

- Use wall charts to summarize actions

11:00 Discuss of Proposed Action Plans

- Large group discussion of proposed actions

11:30 Close

1. Summary of Technical Reviewers' Comments

Q. How would you describe the current environment in NRO?

Technical reviewers described the NRO work environment as good overall. The environment can be stressful, depending upon which Division staff work in. DSRA, in particular was noted as being very stressful, hectic with lots of work. Participants noted that NRO is a schedule-driven organization with many functions requiring years of technical expertise.

Q. What is your level of comfort raising issues and seeking resolution?

Overall, technical reviewers are comfortable raising issues, but noted that the schedule is often the "gorilla" in the room. It is difficult to sway/influence managers to make changes in the schedule. Conversations with Branch Chiefs on this subject "takes work". However, technical reviewers are not shy about raising issues or concerns. They noted that raising issues is more challenging in DNRL. Technical Reviewers commented that a Branch Chief in this Division creates a stressful environment and is known for having shouted at a Technical Reviewer about the schedule. Technical Reviewers also noted that because they are new to the Office (and agency) they are less likely to raise certain issues because it may negatively impact their reputation or limit future opportunities.

Q. How are people treated? Describe the current level of trust, respect, openness, etc.

Technical Reviewers commented that people are treated with respect and trust overall. Peer-to-peer relationships are working well. However, there are misunderstandings about the NSPDP and the purpose of rotations. Senior staff do not realize that NSPDP employees are full-time, permanent workers in the Office. They ask program participants questions about who they work for and where they will work – which shows that they don't understand that NSPSP participants are hired into the Office. NSPDP participants want senior staff to understand that they are rotating to better understand and learn about technical aspects of NRO work. They would like more structure and consistency across rotations and desire stretch assignments with ample senior staff oversight (to ensure learning and success). Technical Reviewers feel that there is a knowledge management challenge facing the Office as well. More transition time and longer rotations are needed to help new hires fully understand the technical aspects of their work.

One member of the focus group noted tension between HQ and Region II over DCIP and CCI. Clarity on roles and authorities would help lessen the tension and improve working relationships. The participant perceives that Region II is accustomed to "doing things on their own" and does not value the opinion/expertise from HQ. There is disagreement on how to approach the program and who has ownership of it.

Q. How are changes initiated within NRO?

Changes with NRO are often initiated by Branch Chiefs and above, with information communicated to staff via email. There are numerous email messages. Deciphering the value and importance of emails is increasingly difficult. Important messages are communicated to the staff by Branch Chiefs during staff meetings. No changes originate from the bottom up.

Q. Is NRO doing the right things? Headed in the right direction?

Technical Reviewers feel that NRO is doing the right things. Management is looking for ways to improve. The tone of the Office is positive. However, the Office needs to look at the schedule and resources assigned to support workload. There isn't a construction inspection schedule. However one Technical Reviewer believes that it is forthcoming and that the Office must be ready.

Q. Do you feel your work contributes to NRO's mission?

Overall, Technical Reviewers see how their work contributes to the NRO mission, with the exception of Construction Inspection. Ability to see how work contributes to the NRO mission depends upon understanding the work and technical functions of the Office. This may not be realized until 6 months into position, or as one's knowledge of technical duties improves.

Q. Do you feel you are producing quality products?

Technical Reviewer quality is high most of the time. Stress and workload reduce quality. However, the quality from the labs has been an issue. In one case, a Branch Chief said that "good enough is good enough" this did not demonstrate commitment to quality. As engineers, Technical Reviewers strive for perfection, but must also learn that there has to be balance.

Q. Do you feel NRO is producing quality products?

Technical Reviewers feel that NRO can improve the quality of the products that it produces. In one branch within DNRL it is felt that senior staff are not giving their best effort. For example, several safety evaluations had to be rewritten because of poor quality. The work was best explained as a 'cut and paste' job. In addition, the quality of work produced by contractors is poor. For example, the SE was not written in the style and decisiveness of a regulator. The contractors' style of writing is too open-ended, which requires significant edits or rewrites, thus increases staff workload.

Q. Do you have the tools and training to do your job?

Technical Reviewers noted that training is good. However, the Office needs more emphasis on the Qualification Program and needs to hold new hires accountable for following it. Accountability for achieving qualifications varies by Division. Some people know that they won't be held accountable if they don't get qualifications, and therefore do not work towards completing the program.

Technical Reviewers noted that non-technical staff are not getting opportunities for reactor training. For example, there is a lack of knowledge on the function of the turbine building. Few people have a proper understanding of reactor-specifics. Many project managers are non-technical and need this knowledge.

Areas for Improvement

Technical Reviewers developed two wall charts with actions to improve the concerns raised during the focus group (see pages 4-5).

**2010 NRC OIG SAFETY CULTURE AND CLIMATE SURVEY
OFFICE ACTION PLAN FOR the Office of New Reactors**

ACTION FOR: NRO

KEY AREA FOR IMPROVEMENT: Collaboration

<u>ACTION STEPS:</u>	Responsibility Assigned To	Resources Needed
Increase project to project communications	DNRL MGMT	Meetings
Increase clarity of priorities of projects	DNRL MGMT	

KEY AREA FOR IMPROVEMENT: Quality of work products

<u>ACTION STEPS:</u>	Responsibility Assigned To	Resources Needed
More diligent review of SE inputs to help ensure quality	Technical Staff	
To ensure well-written docs (through more thorough review and concurrence)	Upper Management (concurrence)	

KEY AREA FOR IMPROVEMENT: Involvement of New Employees

<u>ACTION STEPS:</u>	Responsibility Assigned To	Resources Needed
Identify opportunities to include new hires in technical work early (via observation or project work)	NSPDP	Suitable work Willing staff
Educate NRO staff on NSPDP Program	NSPDP Liaison	

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**2010 NRC OIG SAFETY CULTURE AND CLIMATE SURVEY
OFFICE ACTION PLAN FOR the Office of New Reactors**

KEY AREA FOR IMPROVEMENT: All Staff to Provide Anonymous Evaluations of Senior Managers

ACTION STEPS:	Responsibility Assigned To	Resources Needed
Biannual evaluation of Branch Chiefs using template surveys	Survey –Staff (Debby Johnson)	
Results should be presented to upper management	Survey –Staff (Debby Johnson)	
Take necessary actions based on survey	Actions – Upper Management	

KEY AREA FOR IMPROVEMENT: Ensuring Knowledge Transfer

ACTION STEPS:	Responsibility Assigned To	Resources Needed
Determine a hands-on approach to training junior staff (i.e. developing safety evaluations and using confirmatory codes)	Branch Chiefs – Assign senior staff and provide time	
Assign review areas to be highlighted for transfer and ensure they are covered thoroughly	Branch Specific	

FOCUS GROUP #2: ADMINISTRATIVE PROFESSIONALS SUMMARY

Administrative and Corporate Support Professionals. A total of 15 Administrative and Corporate Support Professionals participated the focus group. The average tenure of participating Administrative and Corporate Support Professionals is approximately 2.5 years within the Office of New Reactor. Perceptions among staff in this focus group varied significantly. Perceptions were based on the Division in which they work and the managers and/or technical staff that they work with. Throughout the focus group participants used time to coach and encourage each other, specifically when management or career advancement concerns were raised. The Administrative and Corporate Support Professionals demonstrated very supportive, nurturing behaviors and shared ideas to help each other succeed.

Safety Culture and Climate Survey Action Planning

Objectives:

- o *Discuss the current environment in NRO*
- o *Identify opportunities and actions to improve NRO*
 - o *Organizational Change and Quality Focus*
 - o *Open Collaborative Work Environment*

1:00p Welcome & Introductions (Glenn Tracy)

- *Facilitator & Participant Introductions*
- *Focus Group Overview & Agenda*

1:10 Temperature Check (two teams)

- o *Discuss and document the current environment in NRO:*
 - How would you characterize the work environment?
 - How are you treated? How are Administrative and Corporate Support professionals viewed by others in NRO/Outside NRO?
 - What is your level of comfort raising issues and seeking resolution?
 - Describe how changes in NRO are initiated?
- o *Discuss your contribution and level of engagement:*
 - Do you feel you are producing high quality products?
 - Do you feel you that NRO is producing high quality products?
 - Do you have the tools and training to do your job?

2:05 Create a Plan of Action (two teams)

- o *Determine areas for improvement and actions to address NRO needs:*
 - Listen to the OEDO's LPP OCWE Speech
 - What does OCWE mean to NRO?
 - Brainstorm actions to help NRO fully realize OCWE.
 - What can NRO do to improve organizational change? Quality Focus?
- *Use wall charts to summarize actions*

2:35

Discuss of Proposed Action Plans

- *Large group discussion of proposed actions*

3:00

Close

Q. How would you describe the current environment in NRO?

Administrative and Corporate Support Professionals noted that the overall environment across NRO is positive. However, participants indicated that the work environment in DNRL is largely negative; citing low support, high workload, high stress and high turnover as characteristics of DNRL.

Administrative and Corporate Support Professionals feel pressure to perform well. Participants discussed the level of competition within their field and limited advancement opportunities within the NRC. They also, at times, feel undue scrutiny or judgment from Technical Assistants who perhaps, have had bad experiences with the other administrative professionals.

NRO is a fast-paced and sometimes stressful Office. This perception varies based on which Division participants work in. Half of focus group participants noted that their immediate branch or Division was supportive, positive and a fun place to work. In these Divisions, administrative professionals feel that they are part of the leadership team. There is also good work-life balance (DE, Front Office and ARP). The other half indicated push back from management, micromanagement, high workload and low teamwork as creating a negative work environment. Those with poor work environments indicated the following concerns:

- Open door policy does not exist
- DNRL Supervisor said (on two occasions), "Don't mess up because I'll take you down with me"
- Administrative responsibilities are unclear and unvalued by technical staff
- Discomfort raising issue because no results will be achieved

Q. How are you treated? How are Administrative and Corporate Support professional viewed by others in NRO? Outside of NRO?

Administrative and Corporate Support Professionals noted that treatment varies by Division. However, the majority of participants indicated that peer-to-peer relationships are good, information is shared and peers are willing to help each other. However, few Administrative and Corporate Support professionals don't share information due to competitive pressure.

In DE, managers and technical staff help make sure Administrative professionals understand documents and the context behind what's being put out. The relationship between Administrative professionals and Technical Reviewers is good because managers help foster a positive relationship.

Workload is high, but most managers want you to get the job done; and approve overtime within reason. In DNRL overtime is not approved. Workload volume is high which contributes to poor quality (i.e., not enough time to get things done; many LAs to support. LAs are viewed as the bottleneck). In this Division, administrative professionals feel that they are not rewarded or acknowledged.

Q. What is your level of comfort raising issues and seeking resolution?

Administrative and Corporate Support Professionals noted that most issues are resolved at the lowest level. Resolution on issues between peers is common and easy. With Branch Chiefs, experiences vary. Participants noted that breaking the ice with manager or technical staff is difficult, but obtaining resolution can be done. In general, administrative issues boil over or they are addressed to technical staff by managers (e.g., the document log).

A few participants stated that they are afraid to raise issues to managers (and some technical staff) within DNRL. Because of poor response and lack of results; concerns are "not worth bringing up".

Q. Describe how changes in NRO are initiated?

Administrative and Corporate Support Professionals stated that changes are initiated when senior leaders believe it's time to clamp down and when new measures are needed. When the problem is solved things go back to normal. Changes are cyclical and occur when there's a problem.

Q. Do you feel you are producing high quality products?

Administrative and Corporate Support Professionals feel that they are producing high quality work. However, secretaries forward information to staff and many times they do not read their emails. It is discouraging to Administrative and Corporate Support Professionals when individuals say that they don't know how to do something after attempts to communicate have been made by the secretaries.

Administrative and Corporate Support Professionals indicated that they are not producing high quality products in DNRL.

Q. Do you feel you that NRO is producing high quality products?

Yes.

Q. Do you have the tools and training to do your job?

Administrative and Corporate Support Professionals feel that more training is needed on policies and procedures and on the technical aspects of products.

NOT FOR PUBLIC DISCUSSION

**2010 NRC OIG SAFETY CULTURE AND CLIMATE SURVEY
OFFICE ACTION PLAN FOR the Office of New Reactors**

ACTION FOR: NRO

KEY AREA FOR IMPROVEMENT: Better Communication and Teamwork Across the Entire Office

ACTION STEPS:	Responsibility Assigned To	Resources Needed
Provide all staff with a clearer understanding of short term goals and big picture	MGMT	Staff Interaction
Seek out management input and cooperation (i.e., use open door policy)	All Staff	Better communication and skills for staff
Initiate new policies and procedures (by providing tangible solutions to support product development and quality)	Administrative Professionals	Office wide policy and procedures

KEY AREA FOR IMPROVEMENT: Better Support to Administrative Professionals

ACTION STEPS:	Responsibility Assigned To	Resources Needed
Take proactive steps to improve working environment for all staff. Create an environment where Administrative Professionals are valued for their contribution to the NRO mission.	Management	Focus groups by management
Hold regular Administrative meetings (with management representation)	Administrative Professionals	Time made available for meetings

KEY AREA FOR IMPROVEMENT: Career Development for Administrative Professionals

ACTION STEPS:	Responsibility Assigned To	Resources Needed
Seek opportunities for informal/formal mentoring	Administrative Professionals	Mentor Program in place
Identify technical training opportunities for Administrative Professionals	Management/Staff	More Flex time

**2010 NRC OIG SAFETY CULTURE AND CLIMATE SURVEY
OFFICE ACTION PLAN FOR the Office of New Reactors**

KEY AREA FOR IMPROVEMENT: Communication Between Administrative Professionals and Management

ACTION STEPS:	Responsibility Assigned To	Resources Needed
Seek opportunities to be open and share information	All	
Raise and address issues with supervisor	Administrative Professionals	Patience, understanding and a plan of action
Develop a suggestion box	Management	
Hold meetings (with mediator, if necessary)	Management	Neutral Party

KEY AREA FOR IMPROVEMENT: Gather Lessons Learned From Previous Mistakes

ACTION STEPS:	Responsibility Assigned To	Resources Needed
Communicate mistakes and corrective actions to Staff to help reduce mistakes in the future	Branch Chiefs – Assign Senior staff	Time
Reduce common errors by creating a checklist	Administrative Professionals	

NOT FOR PUBLIC DISCLOSURE

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13

OPEN COLLABORATIVE WORK ENVIRONMENT THEMES

There are some pockets within the organization in which some staff believe or perceive that the intentions and behaviors of their supervisors and managers are not consistent with a healthy OCWE or do not reflect enduring receptiveness.

- Not widespread throughout the region but similar observations were made in more than one organizational unit.
- The following examples pertain:
 - a. Some senior managers are not accessible to the staff as they may think.
 - b. Senior managers do not welcome suggestions to innovate from younger staff members.
 - c. There is ex-Navy clique that sets the culture of the office.
 - d. Perception that at least one manager retaliates for using the open door process.
 - e. Perception that some managers and supervisors do not trust the professional judgment of their staffs, and don't believe they are qualified to do their jobs.
 - f. Some supervisors do not treat their staffs with respect as evidenced by belittling them, and calling them derogatory names such as "stupid" sometimes in front of others.
 - g. Perceptions of micromanagement.
 - h. Perception of a hostile environment in one group caused by a particular manager.
- Misperceptions regarding the satellite card affair are still with us.
- Some feel the Ask Management is not particularly helpful or responsive.
- Some feel that the Non-Concurrence process is rarely if ever used because there is an expectation that you will concur.
 - Some senior staff members are advising the junior staff not to use the DPO process because it will hurt your career.
- Some are not aware of the Open Door, Non-Concurrence and DPO processes (mainly administrative staff).
- Some feel that policy and process changes in one division have reduced level of customer service.

TRAINING AND DEVELOPMENT THEMES

Feeling among 14's and 15's that there are plenty of training opportunities but they are way too busy to take full advantage of them.

13's want more practical training on how to be a good inspector (e.g., SDP process, how to find a finding, etc.).

General dissatisfaction with the availability and sequencing of formal TTC courses needed for certification and a lack of linkage to their work schedule as well as dissatisfaction with iLearn.

Lower graded staff feels that the higher graded staffs get all the training opportunities.

Perception of the administrative staff that they cannot get training unless it is given locally, which limits their opportunities for growth.

Some of the technical staff feel that a person will only get promoted if they have a track record of identifying inspection findings.

There is a lack of advancement opportunities in the support areas.

The hiring and recruiting processes need to be streamlined further.

FOCUS GROUPS

- Pleased that they were conducted.
- Anxious to hear the results.
- Fear that nothing will be done in response to them.
- IDP's aren't an effective tool.

OTHER THEMES

Work product quality is sacrificed to meet metrics.

There is no consistency in the performance appraisal process.

Survey questions were designed to largely elicit positive responses.

Nothing positive will come out of the survey.

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UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION IV
612 EAST LAMAR BLVD, SUITE 400
ARLINGTON, TEXAS 76011-4125

May 4, 2010

MEMORANDUM TO:

Elmo E. Collins
Regional Administrator

Arthur T. Howell, III
Acting Deputy Regional Administrator

FROM:

Linda L. Howell, Chief /RA/
Response Coordination Branch

SUBJECT: FOCUS GROUP RESULTS FOR DRMA AND ORA REGARDING THE 2009
OIG SAFETY CULTURE & CLIMATE SURVEY

This forwards a summary of information exchanged during four focus group meetings conducted with staff and managers in the Office of the Regional Administrator and the Division of Resource Management and Administration. Enclosure 1 provides a summary of information shared by the staff and managers that attended the focus group meetings organized according to the categories included in the survey. I have also included a copy of the slides used to facilitate the meeting discussions.

I plan to review the information provided in the enclosure with you during a meeting which is currently being scheduled by your administrative staff. In addition to the summary provided in the enclosure, I will be prepared to provide you with some specific details which support the staff's opinions and observations. I also plan to discuss some observations concerning the survey responses based on my analysis of the data.

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ORA/DRMA FOCUS GROUP MEETING SUMMARY

This document includes a summary of comments received during four focus group meetings conducted with ORA and DRMA personnel and their respective managers/supervisors. Comments are organized according to survey categories.

Category 1

Responses in this category were favorable overall, although some unfavorable feedback was provided by DRMA staff. Some DRMA staff members noted that their branch chiefs frequently changes work/task assignments without explanation for the changes or new priorities. This resulted in the staff feeling as though everything had an equal priority and left the staff feeling stressed.

Category 2

Question 18b and 22c had lower favorable responses. Some RCB staff noted that, in part, this may reflect their frustration with NSIR at the time the survey was taken. Examples of reasons for this included a higher than normal level of task assignments from the program office with less than normal support from the program office. For RCB staff who shared information on these two items, they interpreted "senior management team of the NRC" to mean the program office rather than regional management. The RCB staff who discussed this issue clearly pointed out that their frustration was specifically directed to NSIR and had no relation to regional management or task assignments.

Category 3

DRMA staff from several units expressed frustration with their management team. Many staff members noted that new supervisors made many changes to the DRMA processes when they came on board without providing the staff any background explanations for the changes. In some instances, when the staff questioned why processes were being changed and provided a history of how the existing processes were established, the new supervisors responded in a derogatory manner, indicating that NRC was not "doing things right" or that the agency didn't know what it was doing.

Several DRMA staff members from multiple DRMA units expressed concerns about their interface with the management team. They noted that in their opinion, the management team doesn't value the staff, is disrespectful of the staff, lacks trust and confidence in the staff and interacts with them in a derogatory manner. Multiple examples of interactions between staff and supervisors were discussed, with several staff members acknowledging observation of the examples or providing additional, similar examples of their own. Some of the examples discussed included interactions and discussions between staff members and supervisors that did not reflect the respect that we have come to expect in our work environment and in some instances appeared unprofessional. It was notable that almost all examples were corroborated by others in the session. Some staff members also reported that in some instances when they attempted to hold discussions of issues with division management, they felt some degree of retaliation by their supervisor.

Several DRMA staff provided examples of exchanges between staff and managers in which the managers told the staff that they "didn't know what they were doing;" "were not qualified to perform at their grade level, and that others at their grade level performed much better." The

group unanimously reported that in their opinion, some of the DRMA management team doesn't appreciate lower grade staff and treats them differently. This group included representatives of the regional HR team.

Category 4

DRMA managers and staff noted that they have significant challenges in working with some program offices with respect to exchange of information. OIS, ADM, OHR and NSIR were highlighted as presenting challenges to productive exchange of information.

Several DRMA staff members, representing more than one unit, noted that they have been instructed by their managers to not have contact with their HQ peers and to not have contact with the senior regional managers. Upon further discussion, they were adamant that they have been specifically instructed not to contact the senior management team in the region.

ACES staff did note that they feel a lack of appreciation by other divisions for the level of work required of ACES staff to implement their program. This was also echoed by RCB staff since many of the tasks performed on a routine basis are transparent to the remainder of the region. After significant discussion, the group determined that the region might benefit from supporting more rotational opportunities so that staff can experience different positions and perhaps see firsthand the value that their peers add to our mission. This would also help the staff develop a deeper appreciation for how their peers contribute to an individual's work and perhaps foster some improved teamwork and respect for the value that each of us brings to the Region.

Category 5

In the empowerment category, a lot of feedback was received representing several sources outside ORA and DRMA during discussions with ACES and RCB. The ACES and RCB staff expressed no concerns about empowerment but they shared information given by their peers on several occasions and from multiple, diverse sources. Some technical staff suggested that from their perspective, NRC may not welcome innovation because of the "agency identity" of having a senior management team that has a number of former naval officers. The staff described the agency as "rigid" and less accepting of recommendations for change. This left them feeling less empowered in some areas than they would like. Of particular interest were comments indicating that some of our new and lower grade technical staff believes that senior management doesn't want to hear their ideas on how a task or process might be changed simply because they are not a grade 14 or have less experience. It was reported that senior staff members are the origin of this issue; that is to say that purportedly, the senior staff is telling junior staff not to bother sharing ideas with senior managers because they are not interested in hearing from staff at grade levels below 14. This particular issue was associated with the technical staff and several individuals in one group stated they had heard this issue from multiple sources.

DRMA managers expressed several concerns about staff communications with senior regional managers and the process for resolution of complaints and allegations involving the DRMA management team. Specifically, they expressed a desire for senior regional managers to discuss complaints and allegations with them to determine whether the issue was credible. They expressed frustration that the staff doesn't discuss issues with them and instead "bypasses the normal chain of command" and runs to the "front office." Some noted that in their view, the open door policy was merely a way to bypass the normal chain of command.

DRMA staff reported that they perceive their management team lacks trust in the staff. In discussing this examples of a branch chief asking the staff questions then turning and questioning other staff about the response was cited by several staff members. Some staff members noted that when they discussed processes with their supervisor the supervisor discounted their views, telling them they were wrong or didn't know what they were doing. Some staff stated that this has resulted in them not sharing views or raising questions to the supervisor.

Category 6

In the communication category, one item of note was shared by ACES and RCB. Staff reported that many of the newer staff members in Region IV are cautioned by their peers that it might not be safe to speak up in the NRC. ACES and RCB staff noted that their peers are informing them that the staff apparently is still sharing the story about the satellite cards that were the subject of an investigation several years ago. However, the full story is not known to the staff and the story that is apparently being shared today is that a contractor raised a concern that was proven true and was later terminated for raising the concern.

Both issues discussed above (empowerment and communication) were also associated with a concern on the part of newer staff in engaging in the DPO process. It was reported by some participants that the discouragement by senior staff members for raising new ideas and speaking up within the organization has also discouraged newer staff members about using the DPO process. Some ACES and RCB staff reported that newer staff members have noted that senior staff members are telling them not to engage in the DPO process because to do so would be harmful to their careers.

Also in the area of communication, staff reported that most of the Region IV staff is reluctant to use the "Ask Management" tool because they are convinced that their input is monitored as an individual. In other words, they believe there is no anonymity in this process.

Category 7

The ACES and RCB staff expressed some frustration with staffing. Both units noted that additional work continues to be tasked to their organizations with no increase in staffing. The staff recognized that the tasks were important and could not be deferred, but they expressed frustration with the "flat-line" budget model.

Some DRMA staff expressed frustration with the process used by their management team for work assignments. They noted that in some areas, not all, managers redirect work assignments and priorities frequently without explanation for why activities were re-tasked or providing sufficient guidance on work priorities. In one area, the staff reported that work assignments were frequently changed and the staff was frequently re-directed with all tasks having equal importance, thus leaving the staff very stressed.

DRMA staff in two units expressed some frustration about changes introduced by branch chiefs which, in their view, have reduced customer service. They reported that tasks that used to be done by the staff to foster customer service have been terminated by branch chiefs.

Category 8

DRMA managers noted that they believe NRC does a good job of training the staff, but they also discussed challenges. In particular, they noted that they sometimes believe that the agency develops training requirements for all staff when perhaps the underlying reason for the training is a need to correct performance issues for a single or few individuals. DRMA managers also noted that opportunities for personal development and growth, even at the branch chief level, are limited in some areas because of access restrictions for some programs as well as staffing issues that challenge our ability to develop rotational opportunities.

DRMA staff noted that there are minimal opportunities for personal development within their organization. Although they believe that some rotational opportunities to learn new skills would benefit them, they do not think this approach to personal development would be supported by the DRMA management team.

Training opportunities may be an issue for ACES from the perspective that they feel challenged in balancing work load with the ability to sponsor rotations and to take training.

Category 9

No unfavorable information was shared.

Category 10

Responses in the job satisfaction category were favorable.

Category 11

Although the survey responses for three of the four items in this category were favorable, the response to question 11 is much less favorable. DRMA staff did express some unfavorable views with respect to this question. In discussing their thoughts, it appeared that they tended to disagree with this statement because a number of the staff members believe that there are minimal opportunities for them to develop personally in the organization. They also noted that there is a perception that there are no upward mobility opportunities for the DRMA staff.

There was one other item that came up during discussions about Category 11 responses and questions. It involved the regional property inventory and the issue came from the technical staff. They noted that when DRMA began the series of "hands on" property inventory (coming into people's offices), a high percentage of the staff was left with the impression that management believed that employees might steal property from the agency. The issue involves a perceived lack of trust.

Other Comments/Concerns

Several individuals in ACES and RCB shared their thoughts about access to senior regional management (RA/DRA). Some senior staff noted that they believe that the RA is not as accessible and that access to the RA has diminished in recent months. Some staff also noted that in their opinion, they do not see the RA outside of scheduled meetings as often as they used to. In exploring why this perception exists, the staff discussed specific examples of trying to exchange information with or provide information to the RA and being denied access by the administrative staff even though the RA had requested the information. Most of the examples

provided by the staff involved attempts by the administrative staff to exercise some control over the RA's schedule and avoid repeated interruptions. However, in the examples discussed by the staff, there was a legitimate need to contact the RA but the staff was turned away from the RA's office or denied access to the RA. The staff's perception is most likely an unintended consequence of attempting to exercise greater control over the RA's schedule. One action that might address the perception of reduced contact with the RA is to implement the planned attendance by the RA at ACES and RCB branch meetings periodically.

DRMA staff and managers also expressed a desire to have greater interface with the RA and DRA. DRMA staff noted that they feel that they do not have rapport with the RA and some noted that they feel that they don't really know the RA. DRMA staff and managers suggested that it would be nice if the RA and DRA circulated in the DRMA area periodically.

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REPORT

**Focus Group
2009 OIG Survey
Open, Collaborative Working Environment**

Encompassing:

- I. The Open Door Policy
- II. NRC Non-Concurrence Process
- III. The NRC Differing Professional Opinions Program
- IV. Ask Management

By:

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2009-2010

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Open, Collaborative Working Environment

During the spring of 2010, the NRC Region IV Office conducted a series of focus groups with Region IV staff. The purpose of the focus groups was to gain a better understanding of the results of the OIG safety culture survey that was administered in the spring of 2009. The specific area of focus of this report is the open, collaborative working environment which is supported by the Open Door Policy, Non-Concurrence Process and the Differing Professional Opinion process.

Each focus group followed a similar format. The participants responded to a series of questions related to their knowledge, experiences, and perceptions of the open, collaborative working environment. The questions are provided in (Appendix A). Approximately 55 participants representing all of Region IV Divisions brought to the focus group discussion a broad range of backgrounds and experiences. In this report, all references to individuals and divisions have been deleted in order to protect the identity of the participants.

The discussions revealed many similar experiences and perceptions among the focus group participants of the open, collaborative work environment process. In some instances, staff members praised individual managers, divisions and the Regional office as a whole; more frequently, however, the participants pointed toward some organizational issues rooted in some upper management. The focus of discussions maintained a broad view of the management team, although, at times, issues applied to one of two specific managers. While each topic of discussion, as listed above, were covered individually, the experiences, feelings and perceptions were very similar for all three policies/processes.

Each focus group also included a discussion about the Ask Management feature on the Region IV webpage. The focus group discussions centered on awareness, experiences, and satisfaction with the process and answers provided. Several insights, concerns and suggestions for improvement were explored and will be discussed in more detail in the Ask Management section of this report.

The NRC defines its approach to an open, collaborative work environment with the following:

"The NRC strives to establish and maintain an open, collaborative working environment that encourages all employees and contractors to promptly voice differing views without fear of retaliation. At the NRC, we encourage trust, respect, and open communication to foster and promote a positive work environment that maximizes the potential of all individuals and improves our regulatory decision-making."

The following summary of the Focus Group findings is based upon nine recurring questions presented during Focus Group Discussion which are found in (Appendix A). The summary also incorporates 5 recurring themes: (1) Trust/Retaliation, (2) Implementation, (3) Management Skills, (4) Survey Impact, and (5) Ask Management.

Part One of this Reports summarizes each theme and offers recommendations of what management can do to improve the level of satisfaction and achievement for non-management personnel. Part Two provides extensive quotations and paraphrases from individual participant responses, meant to illustrate and support the themes.

PART ONE
RECOMMENDATIONS

(1) Open Door Policy, Non-Concurrence, and Differing Professional Opinion policies/processes. In general, the participants of the focus groups felt the Open Door Policy, Non-Concurrence Process, and Differing Professional Opinion process were good processes/policies and most, though not all, were at least aware of the policies and their intent. Those not fully aware of policies and intent of the policies appeared to be mostly administrative staff. Contrary to the stated NRC vision of encouraging trust, respect and open communication, experiences and perceptions provided by the focus groups revealed that this vision is not being fully met.

- (a) In terms of **trust and retaliation**, the participants in this study stressed the importance of management—
- Respecting confidentiality of employee's when requested as required in MD 10.160
 - Preserving the privacy of the employee's concern
 - Being approachable to the staff and listen to their views and concerns
 - Objectively consider different views and alternative approaches
 - Process an understanding of the intent of the policies
- (b) In terms of **Implementation**, the participants in this study stressed the importance of management—
- Taking prompt committed actions on an issue when identified
 - Actively engage in honest evaluation of all sides of an issue
 - Be willing to "go to bat" for staff members
 - Maintaining respect and privacy for the concerned staff member
- (c) In terms of **Management Skills**, the participants in this study stressed the importance of management—
- Having or developing strong interpersonal skills
 - Communicating effectively in person, writing and email
 - Truly champion the use of the Open Door, Non-Concurrence and Differing Professional Opinion processes
 - Respect the idea of preserving privacy about employees' concerns
- (d) In terms of **Who the policies are open to**, some participants in this study—
- Were not aware that they could use the policies.
- (e) In terms of **Who the employees perceive as the Regions' Management and Senior Management**, participants in this study —
- Most participants had different opinions on how these terms were used in the survey.

(2) Survey Impact. The safety and climate survey was conducted in order to measure NRC's safety culture and climate to identify areas of strength and opportunities for improvement. The identified areas of improvement were further studied via focus groups to improve understanding of open, collaborative working environment and determine if the staff is comfortable with the process.

In terms of the survey's impact, the participants of this study stressed the importance of management—

- Not only taking a critical look at the programs and policies in place, but also taking a critical look at themselves for opportunity for improvement
- Providing feedback to the staff on the results of the focus groups and corrective actions being put in place
- Recognize when other managers are consistently having personnel issues and take corrective actions (i.e. coaching or removal from management position)
- Not sending constant reminders to complete the survey
- Not pressuring the staff to complete the survey

(3) Knowledge needed by some staff to use the policy/Changes needed. While most technical staff were well versed with policies for Open Door Policy, Non-Concurrence Process, and Differing Professional Opinion, many administrative participants in the study were not. Several employees would not use the process because it's not properly implemented and feared retaliation.

In terms of the knowledge needed to use the policies, the participants of this study stressed the importance of management —

- Correctly implement the policies
- Post results of the DPO and Non-Concurrence process
- Ensuring that all staff is aware of the Open Door Policy, Non-Concurrence Process, and Differing Opinion

PART TWO

SUMMARY OF FOCUS GROUP MEMBERS' RESPONSES

(1) Trust/Retaliation

Trust is the basis for almost all relationships in life. When trust is absent, it is impossible to create a healthy and productive work environment.

Open Door Policy

During the focus group discussions concerning the Open Door Policy, participants shared multiple occurrences in which retaliation was felt or trust was violated. For example, several experiences were shared in which a manager was approached via the Open Door Policy due to issues with the participants' immediate supervisor. In all shared experiences, the immediate supervisor was advised of the meeting and promptly confronted the staff member. The prompt confrontational response by the immediate supervisor suggests that not only did the manager share the fact that issues had been raised about the immediate supervisor but also identified the person(s) who raised them. According to the differing views program, the success of the Open Door Policy relies heavily on trust and once a manager has "opened the door" to an employee, they should "close the door" and preserve privacy. Whether intentional or unintentional, this program expectation was not met in the multiple instances shared by focus group participants.

Non-Concurrence

During the focus group discussions concerning the Non-Concurrence process, participants revealed that the use of the process is non-existent. Several participants observed that "zero reports have gone out with non-concurrence." Furthermore, many participants shared the belief that an unspoken understanding exists in which "You will concur." Specifically, one individual stated, "the unwritten policy... is you will not - not concur."

Differing Professional Opinion

During the focus group discussions pertaining to the Differing Professional Opinion process, participants expressed a reluctance to use the DPO process unless the issue in question was substantially significant. The general feeling of some was that if the DPO were used, the end result would carry negative consequences especially if the DPO effort was unsuccessful. For example, one participant stated, "I'll never do it, it's a black mark if I am not successful," and "If I made everyone work and don't win, I will see repercussions." Other participants expressed concerns with being new to the agency. They felt that due to their lack of experience with the NRO, "intended backlash" could occur. One of the participants shared that they were aware of seven individuals that were involved in a DPO six or seven years ago, since that time only one of those individuals have been promoted. The participant admitted that there could be many reasons for the others not getting promoted, but since their involvement in the DPO is a common denominator, the perception is careers have stalled due to the use of the DPO.

(2) Implementation

The key to a successful policy or program is two-fold. First, the staff must be well-informed of the programs and be able and willing to use the programs when appropriate. Secondly, and more importantly, the management team must be successful in implementing the programs fully

and correctly once the process has been initiated by the staff. During the focusing group discussions concerning the Open Door Policy, Non-concurrence, and Differing Professional Opinion, a common theme was identified for these programs/policies in which the management teams' implementation of the programs failed to meet the intent of the programs.

Open Door Policy

During the focus group discussions concerning the Open Door Policy, participants expressed the viewpoint that a manager's poor implementation or lack of implementation of the Open Door Policy was a reason for the policy to not be initiated by the staff. Specifically there were concerns that "management may not act on an issue" and "management may not go out on a limb due to own career concerns." The focus group participants also shared the perception that not all managers really support the Open Door Policy. For example, one participant said that "managers mention the Open Door Policy to check off a list" and they "haven't seen a Division level manager or higher walking around encouraging the use of the Open Door Policy." Some administrative participants felt that the technical staff by-passed them and go to the front office on matters that can be resolved at the lowest level. This process causes reactions from all levels of management and thus brow-beating occurs. Some also thought that the tone of the Region encourages misuse of staff. For example, some administrative staff carries the burden if an error is found in a report that was reviewed by several levels of management.

Non-Concurrence

During the focus group discussions pertaining to the Non-Concurrence process, participants revealed that not only is the process not implemented, but its use was in fact discouraged. Several participants observed that "zero reports have gone out with non-concurrence." Moreover, many participants shared the belief that an unspoken understanding exists in which "You will concur." Specifically, one individual stated, "the unwritten policy...is you will not -- not concur." During the discussions, a participant shared that the non-concurrence process has been used as leverage to get management's attention. The specific instance described a scenario in which a document was going through concurrence even though a contributing staff member had a differing view on certain aspects of the document. The staff member's concerns were ignored until the threat of using the non-concurrence process was presented. At that point, management then worked to reconcile the differences.

Differing Professional Opinion

During the focus group discussions concerning the Differing Professional Opinion process, participants expressed concerns of negative consequences from being involved in a DPO, especially if the DPO Process is not successful. The focus group later stated that part of those concerns extends from the fact that occurrences and results of DPOs are not well publicized in the Region. One participant stated "I know of two instances of DPO within 20 plus years." The focus group indicated that more visible posting of DPOs and more importantly the results of the DPO whether successful or non successful may ease some of the concern about using the process.

(3) Management Skills

During the focus group discussions concerning an open collaborative working environment, many participants shared the view that the region has programmatic problems that can be contributed to one or two problem managers. The focus groups recognize that becoming a

successful manager is not an easy task. However, when a repressive management style exists, the issue should be addressed. Since many focus group participants expressed having similar problems with the same manager(s), the perception has developed that other members of the management team are either unaware of the issues and therefore do nothing or they are aware and choose to do nothing. Other staff participating in the focus group felt that a different set of rules applies to upper management than the rest of the staff. One individual shared an example involving the behavior of a manager at a facility. They concluded by saying, "If I would have done that, I would have been fired."

The focus groups also recognized that individuals are often promoted based on technical competency. However, once individuals reach the management level, interpersonal relationship competency becomes as important, if not more important, than technical abilities. To that end, several participants felt that the process for selecting managers, including SES managers, should re-evaluated. Additional emphasis should be placed on interpersonal, behavior, and leadership skills during the selection process. Managers who don't meet expectations need to be brought up to standards and/or moved to a different position.

(4) Survey Impact

During the focus group concerning the 2009 OIG safety culture and climate survey, participants felt that the survey will have little or no impact on changing the culture. Some participants felt the survey was Headquarters biased and was "limited in response options." As such, the results may present a positive when the situation is negative. Others described the survey as being too vague and designed to deflect the responsibility of having a poor open collaborative work environment away from management and onto either the policies or the staff. The focus group participants also expressed discomfort with the idea of having members of management lead the focus groups. Some participants felt that with management involved, results could be steered.

Regarding the terms "Senior Management", most participants had different opinions of what that meant. Region management is a bargaining unit and Senior Management is SES Management. Given this misconception, the survey should be written to clearly articulate who is being addressed in the question. This will allow staff to clearly identify who the question is addressing. In example, first line supervisor, second line supervisor, senior management, regional administrator and etc.

(5) Ask Management

During the focus group discussions concerning Ask Management, participants voiced concerns over confidentiality since one would be logged in under their username while using the feature.

Focus group participants fell into one of two categories. **Category 1** includes those who were not aware of Ask Management and/or did not know how to access it. Ask Management is accessed via the RIV webpage. Several focus group participants said that they never visit the RIV webpage and have never seen the Ask Management feature. Others shared that even when they did visit the RIV webpage, they either did not see the Ask Management link or did not know what it was. **Category 2** includes individuals who have visited the Ask Management page and/or have used it to ask a question. The general consensus among the participants in Category 2 was that the answers were vague and very "cookie cutter", i.e. copy-and-paste from a policy guide, or did not really answer the question at all. Others felt that great effort is expended to make the answers "politically correct" and "appease everyone" versus being

honest and to the point. Other participants expressed concerns of whether or not "management" is actually answering the questions. One individual shared that they were contacted for information to help answer a question from Ask Management. After the information was provided, that individual was instructed to rewrite the information in a form that "looked like it came from management." Recommendations include a desire to have a rating system so the answers can be rated and an email being sent when Ask Management is updated. The email should list the questions that were added. Another suggestion was to make the feature more personable by sending the response to the person who asked if they provided their name, and soliciting feedback on the quality of the answer before it gets posted on the webpage.

Conclusion

The Open, Collaborative Working Environment in Region IV is not meeting the intended vision and corrective action is essential in addressing issues identified in this report. This report suggests that many employees do not feel comfortable with the process and feel that it's not meeting its intended purpose. Therefore, the Region IV Office should consider invoking change starting with expectations from the front office to those charged with carrying out the vision of Open, Collaborative Working Environment in Region IV. Specifically, there needs to be clear expectations on implementation of the Open Door Policy, Non-Concurrence Process and the Differing Professional Opinion process. This report also suggests that some interpersonal skill training is needed by a few managers. Ask Management needs to be reviewed for effectiveness and recommendations for improvements identified in this report considered. Moreover, the NRC as an agency should consider revising its survey questions to address staff concerns. Many believe the survey was written to achieve favorable responses. Finally, it is strongly encouraged that continuous feedback be provided to staff on how the results of this focus group are being addressed.

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APPENDIX A

I. Open Door Policy

Main Question:

1. Think about the NRC's Open Door Policy, what comes to mind?

Follow-Up Question:

2. What causes you to feel the way you do?

Probing Questions:

3. Who do you think the NRC's Open Door Policy is Open to?
4. Who do you perceive as the Region's Management and Senior Management?
5. Do you think the Survey helps change the Culture?
6. What was going on at the time you answered the Survey? Did it impact your response?
7. What do you need to know about the process in order to use it?

Prompting Question

8. If you could change one thing about the policy, what would you change, and what's the main reason that one thing needs changing?

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II. NRC Non-Concurrence Process

Main Question:

1. Think about NRC's Non-Concurrence Process, what comes to mind?

Follow-Up Question:

2. What causes you to feel the way you do?

Probing Questions:

3. Who do you think the NRC's Non-Concurrence Process is open to?
4. Who do you perceive as the Region's Management and Senior Management? (If same group of people participating, you don't need to ask this question again.)
5. What was going on at the time you answered the survey regarding this process? Did it impact any of your responses? (If same group of people participating, you don't need to ask this question again.)
6. What do you need to know about this process in order to use it?

Prompting Question:

7. If you could change one thing about the NRC's Non-Concurrence Process, what would you change and what's the main reason that one thing needs changing?

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III. Differing Professional Opinions Policy (DPO)

Main Question:

1. Think about NRC's Differing Professional Opinions Policy, what comes to mind?

Follow-Up Question:

1. What causes you to feel the way you do?

Probing Questions:

1. Who do you think the Differing Professional Opinion Program is Open to?
2. Who do you perceive as the Region's Management and Senior Management? (If same group of people participating, you don't need to ask this question again.)
3. What was going on at the time you answered the Survey? Did it impact your responses? (If same group of people participating, you don't need to ask this question again.)
4. Do you think the Survey help change the Culture? (If same group of people participating, you don't need to ask this question again.)
5. What do you need to know about this process in order to use it?

Prompting Question:

1. If you could change one thing about the NRC's Differing Professional Opinion Policy, what would you change and what's the main reason that one thing needs to be changing?

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IV. Ask Management

Main Question:

1. Think about Region IV's Ask Management, what comes to mind?

Follow-Up Question:

1. What causes you to feel the way you do?

Probing Questions:

1. Have you had a desire to use Ask Management?
2. Do you feel Ask Management questions are adequately answered?

Prompting Question:

1. If you could change anything about Region's IV Ask Management, what would you change and what's the main reason for the change?

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UNITED STATES
NUCLEAR REGULATORY COMMISSION

REGION IV
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ARLINGTON, TEXAS 76011-4126

April 27, 2010

TO: Elmo Collins,
Regional Administrator, RIV

FROM Vincent Gaddy,
Focus Group Team Leader

Bob Hagar,
Team Member

Rayo Kumana
Team Member

SUBJECT: EVALUATION OF TRAINING AND DEVELOPMENT ISSUES IDENTIFIED
DURING THE MOST RECENT OIG SAFETY CULTURE SURVEY

Following review of last year's RIV OIG Safety Culture survey results, Region IV management observed that some divisions provided more positive responses to questions related to training and development than other divisions. This focus group was specifically initiated to delve into any real or perceived differences in the way that training and development was being implemented across the divisions and to gain insight into why RIV employees responded the way they did to certain questions. Once management has insight into the underlying reasons for responses, more effective corrective actions can be implemented.

How the process worked:

Category 8 of last year's OIG Safety Culture survey specifically focused on training and development. All training and development responses were individually and collectively rolled up and averaged for an overall regional and divisional favorable response rate. Then, divisional favorable responses were compared against regional favorable responses. Areas, within each division, that were below the regional favorable average were selected for additional follow-up. The number of areas (questions) identified for additional follow-up within each divisions were:

- DRP – Six areas
- DRS – Seven areas
- DRMA/ORA – Three areas
- DMNS – None. All areas for DMNS were above the average regional favorable rate. No focus groups were conducted.

Once the areas for additional focus were identified, the working group (Rayo Kumana, Bob Hagar, and myself) designed specific questions intended to gain insight into the underlying

reasons for the responses. The specific areas (questions) are included in the corresponding enclosures.

Design of Focus Groups

The focus groups were specifically designed to interview employees of similar grade and job functions together. At no times were interviews conducted with employees and supervisors. The reason was to allow employees to feel more comfortable and increase their willingness to share information. The majority of the focus groups were conducted during face-to-face interviews. An exception to this was interviews with residents and site administrative assistants. Due to the logistical challenges in getting these employees together at a same time, face-to-face discussions were unrealistic. These employees chose to provide their feedback via surveys. Questions on the survey were the same as those asked during face-to-face discussions. Additionally, due to time constraints associated with completion of the overall projects, a few other employees in the regional office also completed surveys. However, the majority of RIV employees met face-to-face with the members of the group. Of the 15 sessions conducted, 10 were face-to-face with members of the focus group. The remaining 5 were via surveys.

Data Reporting

Each area (question) of concern started with a restatement of the original question from the OIG survey. Then, questions that were designed by focus group members were asked to get to the underlying reason for specific responses. All individual comments are included as "Supporting Comments." The supporting comments generally formed the basis for the conclusions drawn by the focus group. Results are included in the following enclosures:

- DRMA/ORA – Enclosure 1
- DRS – Enclosure 2
- DRP – Enclosure 3

Big Picture Results

Higher grade employees generally view training and development more positively than lower grade employees. Most lower grade employees believe that the training budget, rotational and cross-training opportunities favor higher grade employees. Some lower grade employees believe that they have not received adequate training for their current job. The training they did receive taught them neither the overall expectations for their jobs nor all of the skills required to perform their jobs.

Younger DRS and DRP inspectors expressed a desire for more training (ROP, allegations, emergency response, etc.)

Most employees stated that their workload prevented them from attending training. As such, they may not take classes that could help them better perform their job.

Everyone wanted more timely addition of courses into iLearn.

Elmo Collins

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Most agreed that RIV had done a good job of recruiting the right people for its future needs, but had not done a good job of acquiring people. The hiring process is too slow and too cumbersome.

Enclosures as stated

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**DIVISION OF RESOURCE MANAGEMENT &
ADMINISTRATION/OFFICE OF REGIONAL
ADMINISTRATOR**

RIV TRAINING AND DEVELOPMENT

FOCUS GROUP RESULTS

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DRMA/ORA Conclusions

Q.8 – The training I received from the NRC has adequately prepared me for the work I do.

Overall Conclusions

Generally 13's and 14's believed that their training has prepared them for their current job. With an exception - Branch Chiefs desired more supervisory training.

The administrative staff (lower grade employees) did not agree that their training adequately prepared them for their job. They felt that not only had they not received necessary training, the training that they did receive, in some instances, had to be learned on their own time. They also felt that training dollars were not being assessed fairly – Most money went to DRMA higher grade employees.

Training provided to admin staff does not meet needs of RIV. Need more training on "how to perform my job."

Higher grade employees have better/more training opportunities.

Everyone seemed to agree that time was a major constraint for going to training. Employees perceive that opportunities for training are more limited in branches that are under-staffed than in branches that are adequately staffed

Supporting Comments

- Employees had/have to learn Access on their own time.
- Training given to admin staff does not meet the needs of RIV. RIV needs to provide new admin staff training on NRC processes and expectations for new admin staff employees.
- Most of the RIV overall training budget goes to DRMA. However, the admin staff is often left out.
- Admin staff training opportunities suffer because they are only allowed to take local training. More opportunities are available outside the local area.

Q. 26 – Do you have sufficient knowledge of safety concepts to apply them to your job.

Overall Conclusions

No one had a clear understanding of safety concepts that applied to their job. Some thought this was limited to electrical safety (shock prevention).

Almost all indicated they had not received any industrial safety training from the NRC

Additional Comment

- The RIV office facilities aren't handicap-friendly.

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Q. 53b – There are sufficient opportunities for me to receive: Cross-training to learn other jobs

Overall Conclusions

Results were mixed. Higher grade employees stated they had considered cross-training opportunities and they had been encouraged by management to pursue these opportunities. However, they wished for more opportunities at the management level.

Administrative staff stated that opportunities for cross-training were limited because there was no one to backfill their job. They also felt cross-training opportunities were not advertised to the staff.

Several stated that there should be more cross-training opportunities in the intelligence areas and ACES staff.

Supporting Comments

- Employees in Headquarters have better access to cross-training opportunities than employees in RIV.
- Cross-training in DRMA can be threatening. You may be training someone to take your job.
- Cross-training opportunities outside DRMA are not available.
- Can't cross-train due to lack of people to cover job.
- Cross-training isn't available to some members of the staff. Favors higher-level employees.
- Cross-training opportunities are often not that effective since the rotating employee is not given all the authority that the permanent employee has.

Other Training Issues

Additional (Blanket) training does not always solve the problem. Training should be targeted to the offending individuals.

Be sensitive to training. It's too much. Too many classes required by iLearn.

Allow employees sufficient time to complete training.

RIV needs to better allocate its training budget – Allocate budget on a quarterly basis.

I have heard that several admin assistants state that it seems the technical staff gets their training approved first, then left over money is used for the admin staff. However, I'm not sure if this is true since I don't know if the admin staff prepared and provided training plans as requested.

There has not been a position open in RIV that administrative assistants could apply to in regards to a new series or upward mobility. Why couldn't the IT position, Management Analyst position, auditor position, or even HR assistant position be posted as an entry level position so that RIV admin staff could apply and have an opportunity for advancement?

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DIVISION OF REACTOR SAFETY

RIV TRAINING AND DEVELOPMENT

**FOCUS GROUP
RESULTS**

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DRS Conclusions

Q.8 – The training I received from the NRC has adequately prepared me for the work I do.

Overall Conclusion

Most participants agreed that the technical training they received met the minimum standards for performing their job. Most also agreed that more specialized training is needed. However, senior inspectors/team leaders expressed concern that they have not been provided adequate supervisory training for leading teams.

Almost all inspectors had issues with the availability of training and how training is scheduled.

Inspectors would like to be assigned inspections that better coincide with their areas of expertise. For instance, electrical engineers would like to be assigned to inspections related to electrical issues.

Most inspectors agreed that the current training for ISI inspectors is inadequate. See comments below.

Everyone felt more RPS training was needed.

OJT is the most meaningful – need more.

Branch Chiefs expressed a desire to have more training in supervisory and "soft" skills.

Supporting Comments

- Several inspectors expressed a need for additional MOV and ISI training. Several inspectors stated that they started in the job before receiving specific training on ISI inspections. Welding/NDE are examples of training that is not officially required for new inspectors but is important on the job.
- Several inspectors expressed additional concerns with ISI inspections. Comments were:
 - ISI inspectors have no experience on NDE and welding, ISI requires special skills that are not part of the qualification program, ISI quals require significant outside training. ISI specific qual cards include 4 required courses, but inspectors are generally limited to 1 a year.
- RPS is inadequate – The training is worse than nothing. RPS is not intuitive and there are no resources for anyone to learn.
- Inspectors would like to have more training specifically for the job they perform. Specific training mentioned was MOVs, ISI and more NDE.
- Training classes are only held during spring and fall when inspectors are busy. Coordination and planning of classes is not done well by TTC and HQ/PDC. Some classes are difficult to get into.

- Recently DRS requested specialized training from the TTC. However, the only time TTC personnel were willing to deliver the course was during an outage season. Consequently, the only recipient was a DRP PE.
- Training generally focuses on knowledge about various aspects of a job; no training besides OJT teaches how to do the job. However, OJT is only effective if the involved mentor is effective.
- Although OJT is the most meaningful form of training, there is no standard for OJT.
- Inspector training could be more meaningful if BC's were allowed to provide input into the development of qualification cards.
- Need more training of the SDP; minor vs. more than minor cross cutting aspects.
- Most classroom training for inspectors doesn't help them become better inspectors.
- Several people expressed a desire for additional training on how to perform their current job.

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Q. 42 – I believe I have the opportunity for personal development and growth in this organization.

Overall Conclusion

Most inspectors felt that the DRS workload prevented them from taking developmental courses.

Supporting Comments

- Technical training and current job takes priority and is a problem itself.
- Lack of funding makes availability of classes a problem.
- There is a lack of opportunity for promotion for senior inspectors.
- Work load prevents senior inspectors from getting time to take classes offered at TTC/PDC.
- It's often difficult to justify "soft" training (higher priorities for time and funding).
- Can't access such training because of conflicting schedules. Inspectors are usually committed to inspection dates before training dates are posted.
- Higher grade employees don't have opportunities for lateral transfers, for personal development and growth, because DRS branches tend to be specialized.
- Branch Chiefs are usually too busy with their workload to take advantage of opportunities for development and growth.
- Some perceived that opportunities for development are available only to those whom management had determined are most-worthy, or to those who have already had opportunities to demonstrate what they can do.

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Q. 62a – I think the NRC is doing good job of: Recruiting the right people for its future needs.

Overall Conclusion

Generally, most inspectors believed that the right people were being recruited, but were being placed in the wrong positions. A few indicated that more industry-experienced people were needed.

Supporting Comments

- Resources are not distributed appropriately, requiring people to support inspections outside of their assigned area.
- Not enough electrical engineers.
- Inspectors are often assigned to fill slots with little or no regard to whether the inspector is actually qualified (by knowledge and experience, not by a card) to complete the associated inspection scope.
- Balance between formal education vs. experience is lacking
- It's hard to find quality industry personnel.
- Over-hiring is not allowed, but for certain specialties such as licensing examiners, it is needed to ensure enough people make it through training pipeline.
- New technology training is not available for licensing examiners.
- Agency is not looking forward enough to determine needs.
- NSPDP is providing some quality personnel.
- Some personnel are being trained and then lost to HQs or other employers.
- Management is not forward looking with respect to staffing and training.
- Need authority to over-hire and double-encumber to facilitate knowledge transfer.
- In the past we haven't focused on recruiting people to fill specific needs; instead, we recruited good people from selected universities. Recruiting should be focused to meet agency needs.
- Recruiting could be improved if technical staff were allowed more participation. For instance, technical staff would like more input in school selection. Using the school selections provided by HR often results in recruiting people with similar backgrounds.

Q. 62b – I think the NRC is doing a good job of: Developing its people to their full potential.

Overall Conclusion

Most DRS personnel agreed that the inspection schedule prevents RIV from developing people to their full potential.

Supporting Comments

- Development is difficult due to work load. Senior personnel could help, but they are busy as well.
- Resources for developing people are inadequate.
- Some people don't get experience with findings and SDP because they are in a functional area with few issues. Opportunities for growth and promotion are based on number of inspection findings.
- Inspectors at a good performing plant don't have as many opportunities to learn how to screen and document findings as do inspectors at a poorly performing plant.
- As noted in Question 62a, the NRC often assigns inspectors to scopes for which they're not qualified. The resulting experience is a learning one, but learning that way isn't the best way.
- Obstacles are work schedule and limited funds.
- We need to do a better job of developing NSDP'ers. Through their rotational assignments we expose them to a variety of jobs, but we don't actually teach them how to do any particular job. As such, they aren't prepared for jobs when they graduate.

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Q. 62c – I think the NRC is doing a good job of: Retaining its most talented people.

Overall Conclusion

Results are mixed as to whether NRC is doing enough to retain its most talented people.

Supporting Comments

- Most losses now are due to retirement, not other attrition, but job satisfaction is low – not exciting enough for new graduates.
- Younger people are frustrated that the agency is slow to embrace technology.
- Yes, but within 5 years the NRC may not retain some young people, because job challenges and job satisfaction here may not be as high as at other organizations.
- Agency has not retained enough people.
- Forced moves are an issue, particularly with residents.
- Promotional opportunities in the region are lacking.
- Retention programs are ineffective – they don't address why individuals are leaving.
- Oftentimes, retention programs (bonuses, recognition) are too little, too late; the real need is to increase job satisfaction.

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Q.91a – How often do the following interfere with your attending training for your current job: My personal workload.

Overall Conclusion

All agreed that personal workload often interfered with the ability to take training. A few personnel stated that work load very often interfered with the ability to take training.

Supporting Comments

- Workload interferes with attending training due to inspection schedules.
- Lack of technical training adversely affects the quality of inspection efforts. Some inspectors may miss issues due to lack of specialized training.
- Changing workload is an obstacle. Inspections are scheduled out much more in advance that classes and inspection schedules are not flexible.
- Changing schedules is a hit against metrics, therefore discouraged.
- Senior inspectors can't delegate enough because junior personnel lack skills and training to perform the work.
- The IRC staff often assigns inspectors to event rosters without verifying that the inspectors are available, and then requires the inspectors to find replacements.
- Effect of forfeiting training – low quality inspections (missed issues, etc.)
- Inspectors have to commit to inspection dates before dates are available.
- Obstacles are an SES metrics that would take a hit if we change an inspection date to enable training and a lack of experienced bench strength to replace team leaders who need training.
- Attending training can have a chilling effect for senior employees. Work assignments aren't diverted to others, tasks either interfere with training (via phone calls or email requiring a quick response) or accumulate to be dealt with after training. Consequently senior employees are reluctant to take time off for training.

Q. 91b – How often do the following interfere with your attending training for your current job: Availability of classes/courses.

Overall Conclusion

DRS personnel, particularly the inspectors, agreed that the lack of class availability was a problem.

Supporting Comments

- Classes are scheduled after inspection schedules are developed.
- iLearn does not list classes until the last minute
- Root cause classes have not been offered for months and are holding people up from completing inspector qualifications.
- ISI training is only scheduled when inspectors are busy with ISI inspections. Inspectors have been told to not even bother applying.
- Specialized courses such as filters/HVAC or heat exchangers are offered extremely rarely.
- Training schedule and availability is focused on HQs desires. Regional needs are ignored.
- DRS GG-14 are not given opportunity to attend leadership courses.
- SRA requalification training courses are not available.
- Personal training plans are often "trumped" by late additions to and/or changes to the regional calendar. The region doesn't plan activities for branch chief far enough in advance.

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Other Training Issues

The recently required OSHA training was too much effort for too little benefit.

Some documents (old NUREGs and old versions of the ASME Code) are required to fully understand licensee commitments, but they aren't available online.

RCB staffing or exercises is not coordinated with inspections or vacations or training opportunities.

Main obstacle is a "clique" of ex-Navy personnel; if you're not one of them, you have limited opportunities to promotion to GG-15.

For some Branch Chiefs, training and development is mostly about keeping ahead of the workload.

Some training imposed through iLearn isn't useful or valuable. (ex. recent OSHA courses)

Training coordinators generally aren't helpful.

Regional awards process is not effective. It's too bureaucratic. Nothing differentiates performance. It's more of a cattle call.

Need more attention, focus, etc for special efforts. Awards for special inspections are a thing of the past.

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DIVISION OF REACTOR PROJECTS

RIV TRAINING AND DEVELOPMENT

FOCUS GROUP RESULTS

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DRP Conclusions

Q. 53a – There are sufficient opportunities for me to receive: Training to improve my skills in my current job.

Conclusions

In-Office Conclusions

Most DRP personnel agreed that there were sufficient opportunities to receive training. However, there was a general sense that some classes needed for full inspector qualification were not readily available.

Branch chiefs stated that the most important skill needed for the job was project and time management. Branch Chiefs would like to receive more training on personnel management.

PEs surveyed would like to receive more training on the ROP, RPS, and more technical training (diesels, motors, pumps, valves, etc). Also additional training on how to interview people, understand regulations.

Site Administrative Assistant Conclusions

Some site secretaries expressed concern that there are not sufficient training opportunities for them to improve skills in their current job.

Resident Inspector Conclusions

Most residents agreed that there were not sufficient opportunities to receive training.

Supporting Comments

In-Office

- Often classes for basic qualifications are not available when needed. This has resulted in delays in completing the qualification process.
- Courses are not posted in iLearn soon enough to avoid potential conflicts. Inspection activities are not linked with the qualification card requirements. For instance, EOC meetings are often scheduled during the same weeks as required training.

There needs to be more of an effort made to link the qualification card requirements with the availability of training classes.

- G-205 (Root Cause Incident Investigation Workshop) is required by the qual card, but no classes are scheduled.
- Need more hands-on vendor workshops (no other specifics given).

- Scheduling classes is difficult, especially with the lead time which commits you so far in advance; it's hard to know how busy you will be by the time you take the training.

Resident Inspectors

- The region should allow residents to perform an annual week of cross-training by observing baseline inspections at different sites, where the only focus and responsibility of the inspector is to gain insight from the way the resident staff is performing inspections.
- Residents would like additional training in the following areas: work prioritization, accurate and timely communications, technical knowledge, critical thinking and technical writing and the ROP.
- Objectivity visits are a very good method for improving inspection skills. However, objectivity visits are often typically coordinated to provide support to sites that need site emergency response coverage, or support for completing the baseline inspection requirements.
- Sufficient training is available – biggest obstacle is site coverage

Site Administrative Assistants

- There is limited training available to site secretaries unless you are allowed to receive training in the Dallas area. With job and family obligations, most are not able to go when courses are offered in Region IV.
- Time is the biggest obstacle to site secretaries for receiving training.
- It's been almost two years since the last counterpart meeting. This is the only hands on training I routinely receive. If a site admin assistant has to miss a counterpart meeting, the next training opportunities become much longer, three to four years in some cases.
- Need more consistent counterpart sessions for admin assistants.
- Need more training on all computer programs used in RIV.
- Need more organization skills – job requires lots of multi-tasking.
- Would like to have a basic understanding of nuclear power/industry/NRC. Also a basic understanding of how government operates. Also a basic understanding of emergency response would be helpful.
- Improve the timeliness of training – Sometimes training on new computer systems are too far ahead of the actual release and sometimes it lags behind.

Q.53b – There are sufficient opportunities for me to receive: Cross-training to learn other jobs.

In Office Conclusions

Most DRP personnel believed that although there are cross-training opportunities available, they are not well advertised.

Site Administrative Assistant Conclusions

Site admin assistants would like more cross training opportunities in the regional office and other sites. Some also expressed a desire to participate in emergency exercises.

Resident Inspector Conclusions

There are sufficient cross-training opportunities, but they are not well advertised.

Supporting Comments

In-Office

- Members of the technical staff expressed interest in cross-training opportunities in DRP. Branch Chiefs expressed more cross-training opportunities outside the reactor realm.
- Regional cross training opportunities are available, but they are not well advertised.

Resident Inspectors

- The region should allow residents to perform an annual week of cross-training by observing baseline inspections at different sites, where the only focus and responsibility of the inspector is to gain insight from the way the resident staff is performing inspections.
- Objectivity visits are a very good method for improving inspection skills. However, objectivity visits are often typically coordinated to provide support to sites that need site emergency response coverage, or support for completing the baseline inspection requirements.
- DRP should consider short term opportunities, one to three weeks, for qualified inspectors to perform different inspection.
- The region should start encouraging/allowing additional qualification from the existing 1245 framework.

Site Administrative Assistants

- A site admin assistant commented that she had applied for two rotational opportunities in the region only to have the positions withdrawn before being filled. This is very discouraging.

- Site admin assistants would like more cross-training opportunities in headquarters of other regions.
- Some site admin assistants believed that only the region benefits from cross-training opportunities. These opportunities should be mutually beneficial. Site admin assistants stated that they frequently perform fill-in positions in the region, however when applying for a temporary promotion to one of the same positions, they are told that their experience doesn't count because it was not documented by personnel, so they don't get credit for the experience. The region benefits by paying a lower salary to perform higher grade work, and then denies the experience credit toward a promotion or even a temporary promotion.

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Q 53c – There are sufficient opportunities for me to receive: Training to increase my eligibility for a better job.

In Office Conclusions

Higher grade employees generally believed that the region provided sufficient training opportunities.

Lower grade employees generally believed that regional training opportunities were lacking. They believed that the HQs employees had an advantage since the PDC was in HQs. Also, the frequency of course offerings should be increased.

Site Administrative Assistant Conclusions

Generally site admin assistants believed there were not sufficient training opportunities for increasing their eligibility for a better job. They believed they either had to move to Texas or go back to school to become an inspector to increase your eligibility for jobs.

Resident Inspector Conclusions

Resident staff believed there were sufficient training opportunities, but time and resources prevents them from taking advantage of these opportunities.

Residents also commented that inspection activities make them more competitive for better job. However, these opportunities are not well advertised – You need a mentor watching out for you to get plugged into special opportunities.

Supporting Comments

- Almost all employees expressed an interest in receiving more leadership training.
- Lower grade employees generally stated they would not consider other jobs until they are fully qualified.
- One site admin assistant commented that although she fills out training requests annually she hasn't had any training approved in several years. She's become discouraged and won't even fully explore options just to be shot down.

Q.62a – I think the NRC is doing a good job of: Recruiting the right people for its future needs

Overall Conclusion

DRP employees believe the region is doing a good job at targeting the right people, but not a good job of acquiring the right people.

Supporting Comments

- Hiring process is cumbersome and slow. This prevents us from hiring the right people.
- The hiring process should be streamlined. It needs to be faster.
- Add more specific job information to USAJOBS.
- Reconsider the need to interview current supervisors before making a hiring decision.
- Information about hiring should be more readily available.
- Don't send erroneous email messages about hiring status.
- Recruiting should be directed to bringing people in that have nuclear industry experience as either SROs, technicians or engineers.
- Offer higher starting salaries to be more competitive.
- Advertise job positions more in local newspapers.
- Need more latitude to hire trusted employees from the sites. Potential candidates have approached residents about working for NRC, but they are never hired (never made the BQL so they went elsewhere). There were people we definitely should have hired, but no amount of campaigning by the resident was helpful. Perhaps a personal recommendation would be welcomed.
- The agency has a backward looking recruiting program, sending recruiters to schools where current employees came from. We should be recruiting from schools with strong engineering programs and large numbers of students. For example, we send recruiters to several schools with less than 10,000 students, but completely ignore Rice/U of Houston which have a combined total of 50,000 students.

Q. 62c – I think the NRC is doing a good job of: Retaining its most talented people.

Overall Conclusion

Generally, the NRC is doing a good of retaining talented people.

Site admin assistants believe their retention rate could be improved by more training to site personnel.

Supporting Comments

All DRP

- The NRC is doing a good job of retaining talent; however, improvements could be made by increasing job benefits and showing examples of future agency job opportunities through rotations.
- NRC retention process could be improved by greater use of the retention bonus and a more distinct performance award system, i.e., limited number of awards with a greater amount of bonus.
- Salary restrictions are the biggest obstacle to retention.

Site Administrative Assistants

- Getting a job with the NRC is definitely a lengthy process and could turn some talented people away because they might not be able to wait that long to know if they have been hired. If there is any way to speed up the process, it could be beneficial.

Resident Inspectors

- Relocation – there is tremendous pressure on the resident staff to NOT move back to the region in the current economic situation. Given the weakness of our relocation program (the RIV office has the lowest relocation incentive payment in the country and the relocation contractor is not paying market rates for homes), we will probably lose more residents to other employers in the coming years.
- RIV needs to eliminate the financial disincentive to moving back to the region.

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Q. 70 – There is sufficient opportunity for me to receive additional technical training to enhance my job skills.

Conclusions

In-Office Conclusions

Most DRP in-office employees believed that there were sufficient opportunities to receive training to enhance job skills. However, most employees felt additional courses needed to be added to reflect changes in the industry.

Resident Inspector Conclusions

Sufficient training opportunities – mixed.

Site Administrative Assistants Conclusions

Not enough training opportunities.

Supporting Comments

In- Office

- Need more courses on computer codes. More and more sites are using computer codes for performing site calculations. Most inspectors don't understand these codes.
- Need more courses on the ASME Codes and application (welding, DGs)
- Younger employees expressed a strong desire for more allegations training. Employees suggested role playing.
- Need more access to public meetings. A KM session on public meetings would be helpful.
- Monday's KM sessions are great, but they need to be standardized.
- More allegations training is needed.
- More exposure to public meetings.

Resident Inspectors

- For residents, scheduling and resources were the biggest obstacles to for receiving additional training.
- Aside from TTC refresher training, resident don't receive any instruction on how to do our jobs during an accident. Additionally, the TTC training is not geared towards how to be a resident – It's focused on how the plant/licensed operator will respond. In my several years onsite, there hasn't been a participation exercise, so the only opportunity I've had to practice these skills is during actual events. Is that really what we want?

- Need more cross-training
- Residents have adequate systems training, need more focus at the component level.
- Need more hands-on vendor workshops.
- Need more training on emergency response/reactor accident training.

Site Administrative Assistants

- Would like more training on the new computer programs being implemented (i.e., Work 2007, HRMS) and emergency response training.
- Would like to have a broader understanding of the nuclear field and what the inspectors do. I know it's not necessary for the core functions of my job, but it would be interesting and would be beneficial to my work.
- The biggest obstacle to receiving additional training is travel. Can't always make trips due to family obligations.

All

- Opportunities to attend training are limited in some cases by available offerings and available staff to fill in while away.
- All employees felt that we need better/easier access to information about available training.

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POTENTIAL AREAS TO EXPLORE OR ADDRESS FROM THE FOCUS GROUPSOCWE

Action Items from May 13 -14, 2010 Off-Site Meeting

Re-inventing "Ask Management"

Assessing barriers to utilizing the non-concurrence process

Considering scheduled Open-Door periods with RA/DRA

Conducting RA/DRA skip-level meetings with branch chiefs only and staff only

Increasing the visibility of the resolution of issues raised through various OCWE processes

Addressing some staff impressions that some supervisors and managers do not treat employees with respect

Ensuring the staff, especially the administrative staff, are aware of the open door, non-concurrence and DPO processes

Addressing staff impressions that supervisors and managers are always pressed for time (harried)

TRAINING AND DEVELOPMENT

Re-invigorating the IDP process

Recruiting at schools with larger engineering student bodies

Assessing the efficacy of relocation policy for resident inspectors

Identifying additional measures to further streamline recruiting and hiring

Enhancing developmental opportunities for lower graded staff

Addressing the perception that inspectors have to identify performance deficiencies to get promoted

MISCELLANEOUS

Reviewing ROPG's for consistency with higher tiered Agency level guidance documents (e.g., Management Directives)

Addressing the consistency and objectivity of performance appraisals

Addressing perceptions that meeting Operating Plan Metrics is more valued than the quality of the work products

Addressing the perception/reality that some supervisors and managers are micro-managers

Identifying behaviors that reinforce that supervisors and managers value the staff

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ATTACHMENT

14

August 23, 2011

MEMORANDUM TO: Brian W. Sheron, Director
Office of Nuclear Regulatory Research

FROM: Thomas M. Kardaras, Chief /RA/
Information Technology and Infrastructure Branch
Program Management, Policy Development
and Analysis Staff
Office of Nuclear Regulatory Research

SUBJECT: RES FOCUS GROUP TO PROMOTE AN OPEN AND
COLLABORATIVE WORK ENVIRONMENT FINAL REPORT

The purpose of this memorandum is to provide you with a status of the focus group that was established to promote an open and collaborative working environment (OCWE). The group has completed the majority of its planned activities and believes we can sunset this focus group. We will be scheduling a briefing with you in the near future to discuss our report and our recommended transition plan.

The focus group developed and implemented an approach that was designed to promote an open and collaborative work environment among the staff within the office and to address a number of the items related to OCWE in the RES 2009 OIG Safety Culture Survey Results. The group met with RES staff in sixteen (16) branches to discuss the working environment that currently exists in RES and to identify any drivers, factors or best practices contributing to its strength as well as any barriers or challenges to openness and collaboration. Enclosure 1 summarizes some of the insights from those meetings. In other outreach activities, the group attempted to raise awareness about agency programs through an OCWE-related article in the Researcher, presentations from both the group sponsor and group lead during two RES all-hands meetings and through a guest panel comprised of both RES and agency staff members to discuss their experiences with the agency's Differing Professional Opinion and Non-Concurrence processes at a third all-hands meeting. The group also recently briefed Renee Pedersen of the Office of Enforcement about the effort and our recommendations.

As a result of our outreach effort to the staff, we were able to condense our insights to a few key observations and the five recommendations shown below (see Enclosure 2 for more detail):

- Continue hosting office director brown bag seminars with a clear purpose and outcome
- Increase interactions between management and staff
- Conduct a panel discussion about DPO, non-concurrence, and open door policy at a RES all-hands meeting every two years

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B. W. Sheron

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- Increase RES collaborative interactions with one or more of our corporate offices
- Provide quick links on the internal RES website to the agency's DPO, non-concurrence and Open Door Policies

Since receiving authorization to implement our final recommendations, only one of them is not yet implemented. Specifically, the recommendation for increased interactions between managers and staff has not yet been implemented. We expect to complete this item in the near future. We look forward to discussing with you the results of our focus group activity and our transition plan for the OCWE activity into normal RES processes.

Enclosures:
As stated

cc: R. Pedersen, OE
M. Case, RES
W. Ott, RES
M. Sircar, RES
S. Coffin, NRO
J. Yerokun, R-II/DCI
D. Chan, RES

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ADAMS Accession No.: ML111990430 PKG

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ENCLOSURE 1

FY2010 RES Focus Group
Promote an Open and Collaborative Work Environment
GROUP ACTION REPORT: MEETING NOTES

AUG - OCT | 10

FY 2010 FOCUS GROUP

Promote an Open and Collaborative Work Environment

Activity Report:

MEETING NOTES (REDACTED VERSION)

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FY2010 RES Focus Group
 Promote an Open and Collaborative Work Environment
 GROUP ACTION REPORT: MEETING NOTES

Organization:	REDACTED
Date:	08/10/2010
Group Members:	Mike Case, Bill Ott
Notes:	<p>Observation was offered that after a survey involving considerable effort about three years ago a report was prepared for higher review but in the course of time and management transfers the effort died. A copy of the briefing material was provided to us.</p> <p>One staff member observed that "we had some bullies here before." This staff member said that they shut and had little hope for advancement. New management brought them out and gave new hope for professional development.</p> <p>Staff observed that higher management didn't seem to realize what the situation was. Awards given to abusive managers seemed to encourage behaviors (permissive environment).</p> <p>Staff who had experience from other agencies and joined NRC within last several years observed that NRC is wonderful compared to the median. They had observed poisonous environments that created a "someone is out to get them" feeling. NOT THE CASE HERE!</p> <p>What do they think about the open door policy? Reluctant to use. Lack of familiarity with higher management.</p> <p>No intimidation observed between staff levels.</p> <p>Feedback mechanisms could be important.</p> <p>In this branch all bad feelings and experiences were associated with only two individuals who are no longer with the NRC. The same names came out of conversations with other branches. Conclusion - one or two individuals can be the source of all the bad vibes and stories.</p> <p>See BC's every day. Lack of confidence up the chain may be a result of lack of contact time and one-on-one familiarity.</p>
Organization:	REDACTED
Date:	08/24/2010
Group Members:	Bill Ott, Stephanie Coffin
Notes:	<p>Administrative staff doesn't feel as connected to technical staff. Service role not respected.</p> <p>There is a fear that someone won't have your back.</p> <p>Access, the ability to walk in and talk to someone is very good. Interactions generally positive when it is clear that you are there to help.</p>

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	<p>Individuals can be a problem when they don't understand roles and responsibilities, particularly when it means that they don't get the answer that they want.</p> <p>Interoffice collaborative work environment has not been as good on development of agency wide applications such as FAMIS.</p> <p>One individual observed afterwards that the presence of higher management at the meeting caused them to be reluctant to talk and that at least one person had not been candid in their observations. They recommended that further meetings not include management from the branch's oversight. We discussed and decided to not limit attendance. General environment at branch level has been good. We hope that any individuals who feel intimidated will find a way to express their views to us separately. We invite any follow up contacts at the end of each meeting.</p>
Organization:	REDACTED
Date:	09/01/2010
Group Members:	Jimi Yerokun, Stephanie Coffin
Notes:	<p>More awareness of the other processes, other than the DPO may be necessary</p> <p>There is a negative connotation with the DPO process</p> <p>There is inadequate feedback and down flow of information from using the processes. There is no real horizontal coordination</p> <p>Some good examples of using the processes were noted, e.g., SGTR and SOARCA</p> <p>It appears that management's reception is not positive when the processes are used.</p> <p>The DPO process involves huge resource investment but not a career enhancement</p> <p>Using DPO means that something must have been broken</p> <p>Management does not want to hear bad news.</p> <p>Collaboration among branches and divisions could be increased; not enough communication; people may assume there is not anyone else who can contribute</p> <p>Having a formal process (e.g., DPO) is a good thing</p> <p>Collaboration may be driven more by personality and experience</p> <p>RES management more enlightened (as compared to several years ago); feel there is increased access to higher levels of management</p>
Organization:	REDACTED

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 GROUP ACTION REPORT: MEETING NOTES

Date:	09/21/2010
Group Members:	Mita Sircar, Jimi Yerokun
Notes:	<p>Too many processes and there is a lack of clarity amongst the processes such that they are not fully understood. Training may not be the solution. A knowledgeable POC for assistance is more effective.</p> <p>Invite BCs in the higher management meetings so that flow of information from top level to branch level takes place.</p> <p>Open Door Policy - For higher management such as EDO, availability of time is uncertain. Announcing open time slots will be helpful. The differences of the approaches of the senior management regarding Open Door policy are unknown. Different managers go about it differently.</p> <p>DPO is perceived as a clash, not eye to eye contact.</p> <p>Non-concurrence is perceived as negative.</p> <ul style="list-style-type: none"> i) Region - III inspector shared his experience as suicidal to one of the staffs who went on rotation. ii) Management was not knowledgeable about the process. iii) Product due date is unchanged when "non-concurrence" is involved. Since non-concurrence process takes time, additional burden results to meet the due dates. iv) Renee Peterson assisted the employee; it took 2 hrs for explanation. Why the process requires OGC? <p>There are many discouraging stories, but staff never hears any success story.</p> <p>To make DPO effective, the culture should come from top.</p> <p>Use of LinkedIn was suggested. It is approved in CDC, EPA but why not in NRC?</p> <p>While working on a working group, his supervisor said that all communication should be through supervisor.</p> <p>Why is the DPO handled by OE and not by OEDO? The OE name may have some negative connotation to the processes.</p> <p>Commission does not expect that all staffs are in agreement on all issues. They actually want to see the pros and cons and the different staff views if they exist.</p> <p>Concurrence page does not have enough space.</p> <p>There could be better and more user friendly ways to train staffs on these processes.</p>
Organization:	REDACTED
Date:	09/21/2010
Group Members:	Mita Sircar, Jimi Yerokun

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Notes:	Joint meeting with REDACTED. See REDACTED Notes.
Organization:	REDACTED
Date:	09/22/2010
Group Members:	Tom Kardaras, Mike Case
Notes:	<p>Started the discussion by talking about the DPO, Non-Concurrence and Open Door Policy programs and everyone indicated that they knew very little about those programs. Everyone was given the number of each Management Directive so they could read about the programs at a later time.</p> <p>Someone commented that there are a number of challenges to an open and collaborative work environment. They cited the organizational structure and managerial skills as being a major challenge to truly fostering an open and collaborative work environment. They also indicated that anytime there is a lack of understanding at the higher levels then there is chaos.</p> <p>Someone indicated that many times when they attempt to be open and collaborative nothing happens. Meaning, those they are attempting to collaborate with don't engage.</p> <p>Everyone indicated that they feel their voices are heard in RES and that they are heard and understood.</p> <p>Someone indicated that sometimes there are problems related to decision-making.</p> <p>Someone indicated that it would help when collaborating to be granted authority to make decisions across branches.</p> <p>Someone indicated that the mentoring program is a positive.</p> <p>Someone asked if managers should allocate more of their time to their people.</p> <p>Someone suggested that there needs to get a better way rather than the suggestions program to collect employee input.</p> <p>Someone indicated that staff needs to stop taking things personally when discussing behaviors and to consider criticism as a good thing. Sometime its all in how they interpret the comments.</p> <p>Someone said that if we are going to be open and collaborative it can't be forced it has to be natural and that the managers must create the environment.</p>
Organization:	REDACTED
Date:	09/30/2010
Group Members:	Mita Sircar, Jimi Yerokun
Notes:	<p>OCWE – Why we need to take it on? How technical is DPO?</p> <p>There appears to be a good knowledge of the process, although, some perceive that there may be some negativity associated with process</p>

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	<p>The feedback process could be improved</p> <p>Some cultural issues at the highest level, management needs to demonstrate the culture Start form the top down</p> <p>The non-concurrence process has some associated problems</p> <p>Publishing success stories could be helpful</p> <p>User friendly ways to train staffs would be helpful</p> <p>Why does OE own the process? It looks bad, may be better owned by OEDO</p> <p>Some of the issues with the non-concurrence process does not lead to comments; disagreements amongst the staff is not shared or communicated with the staff but just moved up the chain to the Commission</p>
<p>Organization:</p>	<p>REDACTED</p>
<p>Date:</p>	<p>10/04/2010</p>
<p>Group Members:</p>	<p>Mita Sircar, Mike Case</p>
<p>Notes:</p>	<p>DPO- powerful process but complicated.</p> <p>For huddle room reservation, the common practice within the branch is to put a note on the door. Someone wrote on the white board to reserve it; that caused unpleasant situation (yelled at).</p> <p>By working in another office, she knew the right person to ask. However, she was cautioned about breaking the line of command.</p> <p>Suggested more informal interaction time (fun hours) to know the expertise. HFRB spends common time with other offices. HFRB has founded "First Thursday" - First Thursday is a monthly opportunity for NRC's human performance professionals to gather after work, get to know each other, and have some fun.</p> <p>Knowledge Transfer – The knowledgeable person gets tied up with tasks, and do not get time for knowledge transfer.</p> <p>RES staff usually works individually and do not get opportunity to collaborate or participate on other staffs' issues. It will be helpful to have a common table to put out the technical questions.</p> <p>Using branch meeting as opportunity for discussion/input from experienced staff or identify the source of knowledge base.</p> <p>Communication is not so efficient between offices and levels.</p> <p>Open and collaborative work environment exists at the staff level; more management support is needed, top down approach is recommended.</p>

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	<p>To run the projects in more collaborative manner, built-in language in the SOW may be effective.</p> <p>Finding NUREGs are not so intuitive. There should be a better way to organize them.</p>
Organization:	REDACTED
Date:	10/05/2010
Group Members:	Stephanie Coffin, Tom Kardaras
Notes:	<p>Someone asked about the safety survey result and whether RES's results were better than their peers. They were told that the results were higher than the average and that RES's score was higher in some cases than other offices.</p> <p>Someone pointed out that feeling comfortable in talking to supervisor on differing opinions was one area in the survey.</p> <p>Someone indicated that through their own experience when they arrived to RES, they didn't talk to their Director about anything.</p> <p>Someone indicated that there is a natural filtering process as information moves up the chain of command and that this can prevent important information to never make it to the real decision makers. It is an organizational challenge.</p> <p>Someone told of an experience that they had at General Electric in the 1980s. They explained how managers would "sit in the trenches with staff" because the goal was to steal all of the ideas of their competitors.</p> <p>Someone indicated that there are managers in RES that indicate that messages must be filtered before they go out.</p> <p>Someone explained how a lot of times only one manager gets a message and others do not.</p> <p>Everyone felt their group collaborates really well.</p> <p>Someone mentioned that without collaboration there is a loss of productivity and the culture is adversely affected.</p> <p>Someone said that there is no incentive to collaborate. They viewed funding metrics, power metrics and organizational structure as barriers.</p> <p>Someone said there is a time to collaborate.</p> <p>Someone said that there are Branches with internal expertise and other branches with only external expertise and that this causes frustration when attempting to collaborate.</p> <p>Someone said that the current chain of command causes problems.</p> <p>Someone said that sensitive topics or sensitive deliverables can prevent collaboration at times.</p> <p>Someone indicated that the Differing Professional Opinion (DPO) program</p>

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	<p>should be avoided at all costs. They explained how someone had offered a DPO and folks weren't happy and the person submitting it ended up retiring.</p> <p>Someone said there is no alignment on what the DPO is.</p> <p>Someone said that non-concurrence can only be validated by experience.</p> <p>Someone said we are a majority-based society and they talked further about collaboration, concurrence, consensus and the ideal that all opinions are created equal. They went on to ask if it really is an efficient business practice.</p> <p>Someone said to be truly open and collaborative there must be information flowing up and down. They cited pushing financials to employees is mission directed. They talked about metrics and goals being measured as white collar welfare, spending for spending sake.</p> <p>Someone talked about the quality survey and how it doesn't go into high quality and technical piece. They indicated that it only deals with on-time and user needs.</p> <p>Someone talked about the importance of the personalities of Branch Chiefs and Division Directors playing an important role in encouraging collaboration. They went on to say they should consult with staff and be cooperative with others.</p> <p>Someone talk about there is a lot of managers who display too much ownership of their turf and they also agreed with the earlier comments about metrics.</p> <p>Someone pointed out things we do good. When there are large projects there are lots of people and there is always good communications and frequent meetings, and there is respect making it easier to collaborate. On the other hand, when there are projects with other divisions there are conflicts and personality clashes.</p> <p>Someone said it is really important for people to go outside of their comfort zone when collaborating.</p>
<p>Organization:</p>	<p>REDACTED</p>
<p>Date:</p>	<p>10/05/2010</p>
<p>Group Members:</p>	<p>Jimi Yerokun</p>
<p>Notes:</p>	<p>The OCWE process is good and well practiced in RES.</p> <p>Senior managers interact well with staffs, e.g., Mike Webber coming to RES and walking the halls interacting with staffs.</p> <p>Some staffs mentioned having positive experiences with the Open Door policy in RES. They have no reservations with talking up the chain in RES. Although there have had negative experiences in other offices (e.g., NMSS)</p> <p>There is a perception that management rotates through a lot and as such there may be some doubt about genuine commitment.</p> <p>There is usually a good level of support from RES management</p>

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	<p>The feeling is that senior management actually believes in this stuff. E.g., EDO and Chairman</p> <p>Regarding the DPO process, there is the perception that management always sticks with management. While no one indicated that they have had any direct experiences with retaliation, some perceive that indirect consequences occur.</p>
Organization:	REDACTED
Date:	10/06/2010
Group Members:	Tom Kardaras, Stephanie Coffin
Notes:	<p>Someone indicated that they have been in the agency for 2 years and they have had no issues and a positive experience. They indicated that in that time they worked in the agency, they were at NRO and RES for a time and in both jobs they always received positive response to technical opinions.</p> <p>Someone else, who had only been working in RES for two months and had recently come over from NRR, indicated how NRR is very supportive of the non-concurrence process and that there is a difference between offices.</p> <p>Someone else said while at RES, they have not seen a single program that cannot be improved but added that the work environment between branches has improved. Folks are going beyond needs and being very helpful.</p> <p>Someone said that in RES there are more timely results, actions, better products and higher quality.</p> <p>Someone said that RES takes opinions seriously.</p> <p>Someone talked about the importance of Openness and reaching consensus. They talked about the interactions between RES, NRR and NMSS and they feel that through technical meetings they serve as a platform to reach consensus.</p> <p>Someone said it is very important to have face-to-face interaction.</p> <p>Someone, who was previously at NASA, said that they were shocked about NRC's review processes. Technical reviews and Peer reviews do not play an important role. They added that work isn't declared mission critical which suggest minimum QA by staff. Peer review increases responsibility levels amongst staff. They said it is very tough for them to get used to the lack of Q&A on peer reviews.</p> <p>Someone said they have no problem in going to Brian with an issue.</p> <p>Someone said that peer reviews are so important.</p> <p>Someone said they are positive about working at NRC but noticed that decisions are top-down with no room for disagreement.</p> <p>Someone said they have faith in people that they work with.</p> <p>Someone said the peer review is not a barrier to collaboration. They added that there is discomfort in writing conclusions or reports.</p>

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	<p>Someone said that maintaining schedules and inputting their time causes the loss of time to conduct peer reviews.</p> <p>Expand on what everyone's saying. One benefit of the peer review is that the 2nd person is confirming the right things and understands there can be no confusion or mistakes and that it is aligned with plan or goal.</p> <p>Detailed peer review; awareness is important to OCWE.</p> <p>Must be a balanced approach concerning the type of work</p> <p>KM benefits</p> <p>Quality is foremost and everyone should be proactive.</p>
Organization:	REDACTED
Date:	10/12/2010
Group Members:	Mita Sircar, Tom Kardaras
Notes:	<p>Someone said that they have a great Branch Officer that promotes collaboration well and creates a strong openness culture.</p> <p>Someone said they have fear to speak in an open group.</p> <p>Someone described how they worked 2 years in NRR and now that they are in RES, they can tell that it is more difficult in NRR and given the fact that there were more DPO issues and power plants having problems that should have welcomed it.</p> <p>Someone said that training is needed because there are contentious meetings. The training is needed to get past the difficult parts of this.</p> <p>Someone talked about the recent leak of a budget memo that mentioned discontinuing the licensing review activities at Yucca Mountain.</p> <p>Someone asked whether there is a RES contact for the DPO process.</p> <p>Staff members have heard of non-concurrence to take place but were not involved directly.</p> <p>Same with DPO... heard about it, however, no personal experience.</p> <p>Good processes but need to be top down.</p> <p>There are some negative perceptions depending on individual personality of the Sr. Manager and on the other hand sometime the staff is off-base.</p> <p>In general staff expressed collaborative work environment within the branch.</p> <p>Sometimes if they receive antagonistic email, they take initiative to make it more collaborative.</p> <p>Within the branch, they practice open door policy. Upon asking, one person responded that so far he didn't need to go to higher management, however, if situation arises he feels positive about open door policy. Others agreed.</p>

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	<p>Positive feedback about Brian's and James's brown bag meetings.</p> <p>Staffs asked about point of contact within RES for various processes.</p> <p>Training to face contentious situation.</p> <p>Expressed concern about top management disclosing budget matters prematurely.</p>
Organization:	REDACTED
Date:	10/13/2010
Group Members:	Tom Kardaras, Mita Sircar
Notes:	<p>Someone states the agency's Open Door Policy is not highly encouraged because there are negative opinions amongst staff and that it won't be accepted.</p> <p>Someone said the response to them is always to follow hierarchy but many times it is not followed.</p> <p>Someone shared how the utility utilized open door policy very well.</p> <p>Someone cited a time when someone wrote a DPO and they lost their position and then through arbitration was able to regain their position.</p> <p>Someone said that the more a differing opinion is voiced within the agency the more negativity is voiced by management.</p> <p>Someone indicated that you can't cultivate a good habit by not doing it.</p> <p>Someone said that there has never been anyone who wrote a DPO and became an SES manager and they indicated that they believe it will never happen in the future.</p> <p>Someone said that it really comes down to personality and problems in management.</p> <p>Someone said problem goes directly to staff.</p> <p>Someone said that there is too much formality.</p> <p>Someone relatively new to RES said that as they understand it to get promoted they must stay low and under the radar. In other words, don't rock the boat.</p> <p>Someone raised a discussion on the brown bag meetings and said that they really don't like that as a time to meet with management because that is their personal time.</p> <p>Someone said it's all about people.</p> <p>Someone raised this question: When you look at RES staff you can see lots of diversity, but in some of the cultures, open door is not something folks want to do, could that be a barrier?</p>

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	<p>Someone said that to be open and collaborative there has to be a strong commitment.</p> <p>Someone said managers are questioning resource sharing and that is not being collaborative.</p> <p>Someone junior cited an example where they requested a review of a Reg. Guide and it was returned with lots of markups and then without doing anything to the document gave it to a senior person and they requested the same review and the document was returned with no change comments.</p> <p>The question was raised on how OCWE would look to them.</p> <p>The responses follow.</p> <p>Improved time management A comfortable environment Fewer layers of management (The more layers, the more layers staff has to bypass when raising an issue) Top Down (leaders take ownership) Free thinking</p> <p>Someone asked why does the Chairman visit with the Office Director but the Office Director never visits with staff.</p> <p>Someone responded to someone else who had said the NRC operates a lot like the navy by indicating that they don't think look like a naval organizational structure at all.</p> <p><i>DPO is perceived as career limitation. To remove that fear, it has to come from top down.</i></p> <p><i>To promote openness it would be effective that managers walk down to the floor informally time to time and get feedback from staffs.</i></p> <p><i>Culture change for having super managers (non-technical) vs. promoting technical people with leadership capabilities to managerial positions.</i></p> <p><i>With super manager concept it requires lots of briefing and possibility of making decisions that is not aligned with the best technical interest.</i></p>
<p>Organization:</p>	<p>REDACTED</p>
<p>Date:</p>	<p>10/19/2010</p>
<p>Group Members:</p>	<p>Jimi Yerokun, Mike Case</p>
<p>Notes:</p>	<p>The nature of the group's work is such that they are always collaborating with others, both within and outside the office. That is the way work gets done, providing and collecting information. People generally cooperate (have to?).</p> <p>It would be better for the group if RES supervision is more proactive and shares more on the nature of their work activities. Do not necessarily have to always be in the receiving mode, i.e., always waiting for questions/queries from FPMB</p>

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	Most of the branch members were not familiar with most of the OCWE processes. They think that most of the processes are for more for the technical staff
Organization:	REDACTED
Date:	10/20/2010
Group Members:	Jimi Yerokun, Mita Sircar
Notes:	<p>The real issue is trying to collaborate with other offices because of the nature of the branch's infrastructure work</p> <p>The major obstacle is trying to collaborate with OIS. The office does not listen to inputs or suggestions. Things are basically forced down onto the program offices.</p> <p>How can we improve in providing feedbacks to other offices, e.g., OIS</p> <p>There is the fear of being tagged as a troublemaker (fear of recrimination), thus issues are sometimes not raised.</p> <p>The old school view is take problems to immediate supervisor. Current procedures support this view and don't really encourage the use of paths around the supervisor.</p> <p>Relations between offices more prone to show disrespect.</p> <p>Security – IT – purchasing procedures have slowed procurements by factor of 2 because staff not trusted.</p> <p>Need to get ideas to right part of decision chain.</p> <p>OIS doesn't listen – recrimination can be a factor.</p> <p>Effects on career are real.</p> <p>Threshold for raising negative items on senior management review items is higher than for positive items.</p> <p>Need objectivity where career advancement is concerned. How can subjectivity be reduced?</p> <p>Setting up meetings is a process involving many different parties with no one group in charge – everybody has niche and says not my job when another aspect is addressed. Work environment is protect yourself, not collaborative. Need a central responsible authority to cover all aspects.</p>
Organization:	REDACTED
Date:	10/21/2010
Group Members:	
Notes:	
Organization:	REDACTED
Date:	10/28/2010

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Group Members:	
Notes:	
Organization:	REDACTED
Date:	10/07/2010
Group Members:	Bill Ott, Mike Case
Notes:	A MEETING WAS CONDUCTED BUT NO NOTES WERE PROVIDED
Organization:	REDACTED
Date:	
Group Members:	
Notes:	
Organization:	REDACTED
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Organization:	REDACTED
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Group Members:	
Notes:	
Organization:	Open and Collaborative Work Environment Focus Group FINAL MEETING w/ Staff
Date:	November 9, 2010
Group Members:	Tom Kardaras, Mita Sircar, Stephanie Coffin, Bill Ott
Notes:	Browns Bags – confusion as to the purpose of these (the schedulers do not contain any information). Are they for management? For staff? For new staff this isn't at all clear. Do they have to take place during lunch hour (do people have to take their lunch break to attend)? Division management and branch chiefs neither encourage nor discourage attendance. Might be awkward for some folks to raise issues in a group setting. SES and staff – feel a sense of isolation between these two levels.

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Promote an Open and Collaborative Work Environment
GROUP ACTION REPORT: MEETING NOTES

Recommend getting out to talk with the staff more. Disappointed that not more SES managers attend the RES seminars. Staffs also perceive that the managers are not interested for detail technical issues.

DPO/Open Door/Non-concurrence – feel a need to follow standard protocol and hierarchy when raising issues – i.e., would not take advantage of open door policy without talking with lower level supervision first. The message would be stronger and more positive if managers take the first step to reach out to staff rather than wait for staff to bring them issues.

It is looked as career impactive. It would be more credible to see good examples such as senior manager filed DPO at some point of his/her career. Staffs feel the procedures are complicated, suggested simplification of procedures.

Suggestion Program: Suggested to make it simpler, i.e., email, hand note.

Find ways to get message of purpose of brown bags disseminated – breaking down barriers to communication.

Docent process for bringing new staff along.

SES more concerned with process and less on technical content. Absent at seminars unless a Commissioner shows up.

Get out more and talk to staff. Outreach by managers.

Resource implications influence relationship with other offices. Competition for funds results in a splash of cold water on user need discussions.

Simplify the procedures.

ENCLOSURE 2
 FY2010 RES Focus Group
 Promote an Open and Collaborative Work Environment

In an effort to better understand current staff views about the existing work environment within the office, the RES focus group to promote an open and collaborative work environment conducted meetings with about 75% of the office staff between August and October, 2010. This report provides the group's main observations and offers some recommendations to the RES management team about ways to improve the environment.

FY 2010 Focus Group	Promote an Open and Collaborative Work Environment
<p>Observations:</p>	<p>The RES environment generally encourages an open and collaborative work environment (OCWE). Staff indicated good access to management, especially 1st line supervisors (i.e., branch chiefs). There is still room for improvement.</p> <p>Managerial participation is critical to helping remove barriers. Staff also has a role to play to encourage and participate in OCWE.</p> <p>Increased trust between staff and management would naturally lead to a more OCWE. RES staff indicated that increasing manager and staff interactions is important to gain comfort and familiarity and trust, which are critical to an OCWE.</p> <p>Awareness of and familiarity with the DPO, non-concurrence, and open door policy processes is minimal, especially newer employees.</p> <p>Real or perceived instances of bad behavior by past managers have had far-reaching and long-lasting effects. Most staff remains uncomfortable using the Differing Professional Opinion (DPO), non-concurrence, and open door policy processes; staff has real fear about the effect on their careers.</p> <p>OCWE becomes more difficult as one goes beyond collaborating within one's branch. As the collaboration extends to the division, or to the office, or to the agency, barriers become more and more difficult to overcome.</p>
<p>Recommendations:</p>	<p>Continue with RES office director brown bag seminars. Enhance these by including a purpose and outcome statement in the Outlook scheduler and increase encouragement of staff attendance at these by RES management.</p> <p>Increase division director (and deputy) interactions with staff. Suggestions include: attendance at RES seminars, walk the halls, set aside access time, etc. Interactions should be informal and unstructured.</p> <p>Work through OE to prepare a panel discussion of the DPO, non-concurrence, and open door policy at a RES All-Hands meeting and repeat this action every two years.</p> <p>Increase RES collaborative interactions with one or more of our corporate offices. Suggest OIS and ADM for this year. This would primarily be a PMDA item but will need support from technical staff and management.</p> <p>Provide quick links on the internal RES website to the agency's DPO, non-concurrence and Open Door Policies.</p>

NOT FOR PUBLIC DISCLOSURE

Table-1 (Observations and Recommendations)

ATTACHMENT

15

March 5, 2012

NOTE TO COMMISSIONERS' ASSISTANTS

OCM/GBJ

Angela Coggins
 Anna Bradford
 Laura Pearson
 Lisa Clark
 Tom Hipschman
 Nathan Sanfilippo
 Neha Dhir
 Melody Fopma
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Patrice Bubar
 Bill Orders
 Rebecca Tadesse
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 Carrie Crawford

OCM/WCO

Ho Nieh
 Michael Franovich
 Andrea Kock
 Kimberly Sexton
 Linda Herr
 Sunny Bozin

FROM: Nader L. Mamish /RA/
Assistant for Operations, OEDO

SUBJECT: LIST OF TOPICS RAISED BY SENIOR STAFF IN PERIODIC MEETINGS WITH
THE COMMISSION

For your information, the enclosure lists the topics raised by senior staff in periodic meetings
with the Commission, for the period of February 22, 2012 through February 28, 2012.

Enclosure:
As Stated

cc: R. W. Borchardt, EDO
M. Weber, DEDMRT
M. Virgilio, DEDR
D. Ash, DEDCM
N. Mamish, AO
K. Brock, OEDO
SECY
OGC

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OPA
OIP
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EDO R/F

ML12065A086

On 2/22 and 2/23, Elmo Collins had periodic meetings with Chairman Jaczko and Commissioners Svinicki, Apostolakis, and Ostendorff. The topics raised by Elmo were:

- Ft. Calhoun oversight – activities and status
- SONGS – S/G issues in U2 and U3 – NRC action and plans
- Wolf Creek AIT – preliminary results and issues
- Columbia Generating – issue potentially greater than green – stack radiation monitor
- Palo Verde – potential greater than green – lack of control of SGI information
- Diablo Canyon issues - licensee amendment, shoreline fault analysis review, California outreach, Diablo Canyon Independent Safety Committee invitation for NRC presentation
- River Bend escalated enforcement action on control room operators
- Region IV office move update
- Planned response to Missouri Representative Mott-Oxford letter (Chairman only)
- Site visit to South Texas and departure of Ed Halpin from South Texas (Chairman only)

On 2/27, the DEDOs had a meeting with Chairman Jaczko. The topics raised by the DEDOs were:

- NPP Issues
- Radiological remediation and cleanup
- GAO Audit
- Vote on SECY 12 0025
- TABS update
- AARM Planning – Agreement State licensee/Agreement State
- Synchronizing petition reviews and rulemaking processes
- Rulemakings excluded from Cumulative Effects of Rulemaking
- IMPEP Periodic Meetings
- BRC recommendations

On 2/27, Jim Wiggins had a periodic with Commissioner Magwood. The topics raised by Jim were:

- Sharing Aircraft Impact Assessment
- Interactions with UAE
- Cybersecurity Roadmap
- NLE 12 activities

On 2/27, Marty Virgilio had a periodic with Commissioner Svinicki. The topic raised by Marty was:

- SECY on Proposed Orders and Requests for Information

On 2/27, Eric Leeds had a periodic with Commissioner Apostolakis. The topics raised by Eric were:

- Status of the RIC
- Update on the Status of NFPA-805

ENCLOSURE

- AREVA test of Fuel Assembly in Connection with GSI-191
- Fukushima SECY Paper

On 2/27, Marty Virgilio had a periodic meeting with Commissioner Magwood. The topics raised by Marty were:

- SECY on Proposed Orders and Requests for Information
- EPA's Paper on Radiological Remediation and Cleanup

On 2/28, Mike Johnson had a periodic meeting with Chairman Jaczko. The topics raised by Mike were:

- Status of Levy COL review
- Status of STP Financial Review
- Status of AREVA Design Certification Review
- Meeting with DOE Regarding Advanced Reactors
- Delay of AP1000/COL celebration
- Update Regarding Mike's Trip to China

On 2/28, the ODs had a weekly meeting with Chairman Jaczko. The topics raised by ODs were:

NSIR

- Meeting with FEMA Regarding Industry Post-Fukushima Actions

FSME

- No input

NRR

- Inspection Findings Regarding Degraded Voltage Relay Protection

RES

- Monthly Subcommittee on Disaster Reduction meeting

NRO

- No input.

- Review and Update of the Draft Design Information Questionnaire for LES
- The Licensing Hearing Regarding Mixed Oxide Fuel Fabrication Facility

NOT FOR PUBLIC DISCLOSURE

March 13, 2012

NOTE TO COMMISSIONERS' ASSISTANTS

OCM/GBJ

Angela Coggins
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 Linda Herr
 Sunny Bozin

FROM: Nader L. Mamish /RA/
Assistant for Operations, OEDO

SUBJECT: LIST OF TOPICS RAISED BY SENIOR STAFF IN PERIODIC MEETINGS WITH THE COMMISSION

For your information, the enclosure lists the topics raised by senior staff in periodic meetings with the Commission, for the period of March 5, 2012 through March 9, 2012.

Enclosure:
As Stated

cc: R. W. Borchardt, EDO
M. Weber, DEDMRT
M. Virgilio, DEDR
D. Ash, DEDCM
N. Mamish, AO
K. Brock, OEDO
SECY
OGC

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EDO R/F

ML12073A332

Commissioner Periodics during the week of March 5 - 9, 2012

The DEDO's met with the Chairman

- The Chairman's 2012 Priorities
- Safety culture presentations
- Central and Eastern US Seismic Source Characterization Project
- Land contamination/economic consequences
- Outreach to NRC retirees
- The SRM for SECY 12-0025 (Fukushima Tier 1 items)
- Plant issues of interest
- Recent interactions with EPA on the remediation cleanup process

Brian Sheron met with Commissioner Magwood

- Phase 1 portion of the National Academies of Science Cancer Study (Brian requested a briefing by the NAS on Monday, March 12, and plans to send a summary to the Commission as a CA note by Tuesday.)
- NRC's participation in a radiation worker's study being conducted by DOE

Michael Weber met with Commissioner Ostendorff

- The recent Commission meeting on the assessment of the threat environment
- The Commissioner's recent participation in the panel session on the Blue Ribbon Commission report at Waste Management 2012
- Mike's upcoming trip to the Republic of Korea
- The staff's development of the Central and Eastern U.S. Seismic Source Term

Eric Leeds met with Commissioner Ostendorff

- Update on RIC (registrations and plenary sessions)
- Staff Review Status of Pilgrim License Renewal Application
- NFPA-805 (schedule for initial wave of amendments)
- Fukushima (filtered venting)

Michael Weber met with Commissioner Apostolakis

- Mike's status briefing on the staff's SOARCA project
- Possibility of a Commission meeting on economic impacts and land contamination in support of regulatory decisions
- Mike's upcoming trip to the Republic of Korea
- The Carnegie Endowment's new report on Fukushima

ENCLOSURE

March 27, 2012

NOTE TO COMMISSIONERS' ASSISTANTS

OCM/GBJ

Angela Coggins
 Anna Bradford
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OCM/WCO

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 Michael Franovich
 Andrea Kock
 Kimberly Sexton
 Linda Herr
 Sunny Bozin

FROM: Nader L. Mamish /RA/
Assistant for Operations, OEDO

SUBJECT: LIST OF TOPICS RAISED BY SENIOR STAFF IN PERIODIC MEETINGS WITH
THE COMMISSION

For your information, the enclosure lists the topics raised by senior staff in periodic meetings with the Commission, for the period of March 19, 2012 through March 23, 2012.

Enclosure:
As stated

cc: R. W. Borchardt, EDO
M. Weber, DEDMRT
M. Virgilio, DEDR
D. Ash, DEDCM
N. Mamish, AO
K. Brock, OEDO

SECY
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Commissioner Periodics during the week of March 19 - 23, 2012

The DEDO's met with the Chairman

- Congressional interactions with Southern California Edison on the ongoing review of the tube ruptures in the steam generators at SONGS
- Status of the response to the loss of information at River Bend Station
- Readiness of the Japan Lessons Learned Directorate/NRR to potentially use of the Risk Task Group's recommendations (presented by Commissioner Apostolakis at the RIC) in responding to Near Term Task Force Recommendation 1
- Current thinking within OMB on how the Federal Mobility directive is evolving into a Digital Government Strategy
- Mike Weber's recent trip to the Republic of Korea, including discussions with Dr. Park (KINS) and Dr. Kang (NSSC) regarding cooperation with the MDEF Working Group on the APR 1400 design
- FPL's decision to release the OSART report for Seabrook
- NRC's status in meeting IPv6 (Internet Protocol version 6) goals established by the Administration.
- Overview of the IPEC, the replacement for the IT Senior Advisory Council
- Status of OIS' wi-fi project (enabling an opt-in for NRC issued laptops), Region II conference space, Region IV ribbon cutting, and the Region I move.

The Corporate Office Directors met with the Chairman

- Alignment meeting held with OEDO, OE, and HR on safety culture/organizational culture.
- SES reassignment eligibles for OC position will be coming to Chairman and Commissioners.
- Tom Boyce announced he is leaving NRC in 3 weeks to work as VP for a small IT services and consulting business based in northern VA, Applied Innovation.
- Use of wireless work @ home laptops is moving forward. Technical issues resolved.
- SBCR luncheon on Women's History.
- EEO Refresher session this week.
- Vonna Orfanos attending a leadership conference of EEO directors next week
- SBCR trying to obtain the person from EPA who was the impetus for the No FEAR Act to speak at NRC on June 13

The Program Office Directors met with the Chairman

- Compatibility issue with State of Colorado and Pinion Ridge Mill
- Mike Weber, Brian McDermott and two FSME staff would accompany the Chairman on his visit to Neutron Products in April
- DOE is moving towards taking a recommendation to the Secretary to move forward on the grouting of tanks in the F Tank Farm at the Savannah River Site
- NRO discussed plans for the Levy COL Mandatory Hearing
- NSIR will be issuing PSEG (the licensee for Salem and Hope Creek) a yellow finding in the Security Cornerstone for an issue involving unattended openings identified during the Force-on-Force exercise preparations

ENCLOSURE

- In July when the NRC implements the initiative to integrate safety and security inputs into the ROP action matrix, the yellow security input will be characterized as "blue" representing a "greater-than-green" finding.
- NSIR will be working with Region I to conduct the associated 95002 inspection once the licensee indicates its readiness to receive.
- The JLD Steering Committee is considering an industry proposal on the interpretation of "two refueling cycles" in the recent Orders. The industry interpretation could extend some licensee implementation schedules beyond 12/31/2016.
- All the required 50.54(f) responses on Thermal Conductivity Degradation have been received. Early reviews revealed that licensees are indicating that ECCS performance will remain within NRC acceptance criteria.
- The Seabrook OSART Report has been sent to Region 1 with a request to make it public. The Report will be placed in ADAMS in the next day or so.

Vonna Ordaz met with the Chairman

- Women's History Month Luncheon, featuring Ms. Cheryl McCarty.
- Diversity & Inclusion Strategic Plan
- EEO Committee Chairs and Co-Chairs interested in meeting with the Chairman, to share Committee insights. Union will be invited.

Jim Wiggins met with Commissioner Ostendorff

- EPA PAGS Status
- Holdren Letter on EPZ Size, KI and Evacuation Planning
- Annual Threat Review Redo
- Interagency Activities Related to Preparedness
- Post-Wikileaks Impacts on NRC (2 significant audits that have occurred recently, looking at program administration associated with classified systems)

Victor McCree met with Commissioners Magwood, Apostolakis, Svinicki, and Ostendorff (*topics were the same in all meetings*)

- Status of several operating reactors
- Status of operating fuel cycle facilities
- New construction projects in Region II
- His recent trip to Vienna to participate in the IAEA-sponsored consultancy on enhancing the effectiveness of IRRS missions

Mark Saporius met with Commissioner Apostolakis

- Apparent (but not actual) rise in Abnormal Occurrences
- Patient release paper
- New Jersey Dept of Environmental Protection intends to issue five apparent violations to Gamma Irradiator Service (GIS)
- On March 22, staff will meet with members of the Virginia Uranium Working Group (established by the VA Governor on January 19) in Richmond, VA

April 2, 2012

NOTE TO COMMISSIONERS' ASSISTANTS

OCM/GBJ

cc Angela Coggins
cc Anna Bradford
 Laura Pearson
 Lisa Clark
 Tom Hipschman
 Nathan Sanfilippo
 Neha Dhir
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 Carrie Crawford

OCM/WCO

X Ho Nieh
X John Tappert
 Michael Franovich
 Andrea Kock
 Kimberly Sexton
 Linda Herr
X Sunny Bozin

FROM: Nader L. Mamish /*RA Wendy Landau for* /
Assistant for Operations, OEDO

SUBJECT: LIST OF TOPICS RAISED BY SENIOR STAFF IN PERIODIC MEETINGS WITH
THE COMMISSION

For your information, the enclosure lists the topics raised by senior staff in periodic meetings with the Commission, for the period of March 26, 2012 through March 30, 2012.

Enclosure:
As stated

cc: P. W. Borchardt, EDO
M. Weber, DEDMRT
M. Virgilio, DEDR
D. Ash, DEDCM
N. Mamish, AO
K. Brock, OEDO

SECY
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ML12093A284

Commissioner Periodics during the week of March 26 - 30, 2012

The DEDO's met with the Chairman

- Congressional interactions with Southern California Edison on the ongoing review of the tube ruptures in the steam generators at SONGS
- Status of the response to the loss of information at River Bend Station
- Readiness of the Japan Lessons Learned Directorate/NRR to meet with the Chairman to discuss the potential use of the Risk Task Group's recommendations (presented by Commissioner Apostolakis at the RIC) in responding to Near Term Task Force Recommendation 1
- Current thinking within OMB on how the Federal Mobility directive is evolving into a Digital Government Strategy
- Mike Weber's recent trip to the Republic of Korea, including discussions with Dr. Park (KINS) and Dr. Kang (NSSC) regarding cooperation with the WDEP Working Group on the APR 1400 design

The corporate office directors met with the Chairman

ADM

- The estimated annual savings from the EWC for acquisition training amounts to \$20K - \$30K annually.
- GAO has notified NRC that it will be conducting a web-based survey of the security of federal facilities, and will be contacting NRC's DFS Director to participate.
- We have seen an increase in recycling volume as a result of blue/green bins. This should translate to more revenue to NRC (for child care tuition assistance and EWRA) since co-mingling of materials should decrease.

HR

- Revisiting policy on workplace violence, and EDO signed the last policy statement.
- TABS communications plan issued. Brown bag lunches being held. HR briefed its TABS recommendations to ODs this week, the first of corporate office briefings before the 4/30 due date to EDO.

OIS

- Found patching vulnerability on public server, and working to fix. Working with CSO to prevent future occurrences.

SBCR

- Scheduling additional sessions of EEO refresher training for supervisors. Vonna selected her deputy(ies) and will announce it shortly.

The program office directors met with the Chairman

FSME

- Status of DOE moving forward on the grouting of tanks in the F Tank Farm at the Savannah River Site. (Work may start Monday.)

ENCLOSURE

NRO

- Affirmation schedule for Summer.
- Technical issues related to the Florida Power & Light application. (NRO plans to deal with them similar to the way the shield building issue was handled.)

NSIR

- Counter Intelligence (NSIR making progress on training in advance of tasking memo)
- Richard Reed, White House National Security staff, is moving on to Red Cross. No replacement named yet.

NRR

- One year review of Naval Reactors new design – The A1B reactor for the Gerald Ford aircraft carrier.
- Planned memo to the Commission on Parent Company guarantees, describing that NRR will stay with the "status quo."

NMSS

- Cathy Haney signing off on a DPO in Fuel Cycle, bringing it to closure.
- Working with RII on documentation of fuel cycle site inspection results.

RES

- Sent up two CA notes this week, one on Ft. Calhoun ASP schedule, and one on NAS Cancer Study Phase 1 results.
- TA briefing on SOARCA.

Michael Weber met with Commissioner Ostendorff

- Observations from Mike's recent visit to the Republic of Korea.
- Upcoming NMSS All Staff Meeting.
- Secretary of Energy's Decision on F Area Tank Closure.
- Proposed revisions to NRC's Enforcement Policy.
- Land Contamination/Economic Consequences.

Jim Wiggins met with Commissioner Apostolakis

- EPA PAGS Status. EPA was still awaiting release from OMB to publish the PAGS in the Federal Register.
- Holdren letter. (Planned NRC response to the letter sent to OSTP from several congressmen related to EPZ size, KI, and evacuation.)

Brian Shelton met with Commissioner Apostolakis

- The Commission is scheduled to receive 3 papers: one on the NTTF Tier 3 items, including a recommendation on filtered vents on BWR Mark I and Mark II containments; a paper on the results of the spent fuel pool comparative consequence study; and a paper on economic impacts, including how the agency currently handles economic impacts, how other agencies handle them, and what options there were for considering them.

April 9, 2012

NOTE TO COMMISSIONERS' ASSISTANTS

OCM/GBJ

Angela Coggins
 Anna Bradford
 Laura Pearson
 Lisa Clark
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FROM: Nader L. Mamish /RA/
Assistant for Operations, OEDO

SUBJECT: LIST OF TOPICS RAISED BY SENIOR STAFF IN PERIODIC MEETINGS WITH
THE COMMISSION

For your information, the enclosure lists the topics raised by senior staff in periodic meetings with the Commission, for the period of April 2, 2012 through April 6, 2012.

Enclosure:
As stated

cc: R. W. Borchardt, EDO
M. Weber, DEDMRT
M. Virgilio, DEDR
D. Ash, DEDCM
N. Mamish, AO
K. Brock, OEDO

SECY
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ML12100A244

The DEDO's met with the Chairman

- Weekly status report on 2012 Focus Areas

Martin Virgilio

- Plant issues
- Fukushima project update

Darren Ash

- SRM on Engagement of Stakeholders

Mike Weber

- Enforcement policy revisions
- Consideration of consequences other than health impacts
- Common Prioritization of Rulemakings

The corporate office directors met with the Chairman

ADM

- No damage to Region 4 building from yesterday's tornadoes
- Energy savings for March were \$32K from same month last year (Savings of \$180K for the first 6 months of FY 12 as compared to midyear FY 11)
- We are working with GSA to finalize a settlement with LCOB on its December 2011 delay claim. (This would not have an impact on NRC's FY 12 or FY 13 rent budget for 3WFN, as the 15 year term period start date would be adjusted accordingly)
- The Facilities Bulletin informing staff of the closure of the Rockville Pike sidewalk from Marinelli to Old Georgetown Road was for PEPCO to install permanent power to 3WFN

HR

- FEVS announcement and TABS blog are with Chairman's staff for review
- IG entrance conference on its culture survey is today. HR will be working with IG to see how we can integrate their survey with FEVS
- HR will be providing TABS guidance to office directors on what they can tell their staff and adding news flashes on the TABS web site

OIS

- NSA testing was completed (While they identified areas for improvement, they told us that our security configuration is good)
- BYO devices pilot was successful

SBCR

- At the Chairman's meet-and-greet with the Diversity Management Advisory Committee, Chairman will hear of the Committee's accomplishments, and the expectation is that the meeting is an opportunity for him to hear from the Committee
- Announced two office deputy selections

Bill Dean met with the Chairman (plant status)

Overview: Susquehanna Unit 1 is in Degraded Cornerstone column of Action Matrix, Limerick 2, Millstone 2, and Pilgrim are in the Regulatory response column, and Calvert Cliffs is in Regulatory response column based on Security Cornerstone

- Specific plants discussed:
 - Vermont Yankee
 - Indian Point
 - Pilgrim
 - Fitzpatrick
 - Limerick
 - Peach Bottom

ENCLOSURE

- o Oyster Creek
- o Three Mile Island
- o Calvert Cliffs
- o Nine Mile Point
- o Seabrook

Mark Satorius met with the Chairman and with Commissioners Svinicki and Magwood (discussed same topics with all)

- Recent event in Texas involving exposure to a radiographer (NRC reported it as a 3 on the INES scale)
- DOE Secretary decision to sign the waste determination for the F Tank Farm at the Savannah River Site on March 27
- Discussed the interactions that the staff was having with the State of Colorado on the recent compatibility issue of regulations
- What might be expected from the leadership of the OAS and NRC during this week's Commission Briefing
- Recent Peter Crane letter (he criticizes the staff for revising the Patient Release Paper based on ACMUI comments to follow the Commission's direction in the SRM).
- With Chairman only: status of the Integrated Source Management Portfolio
- With Commissioners Svinicki and Magwood only: Apparent (not actual) increase in AOs

Roy Zimmerman met with the Chairman and with Commissioners Ostendorff and Magwood (topics the same at all)

- RIC session on safety culture (Finishing up responses to questions to post on the RIC webpage; coordinating responses with HR, SBCR, and OEDO)
- Proposed changes in the OE staffing plan thru 2016 in light of today's fiscal environment
- Commission paper recently sent up on proposed Enforcement Policy changes.
- Annual Enforcement Program Report for CY2011 that was also just sent up to the Commission
- Commission paper on the topic of enforcement discretion for new reactor construction
- OE is supporting NRR and OGC in crafting a draft order for Aerotest
- Annual, internal enforcement coordinator counterpart meeting with the regions in early May
- OE supporting NRR on NFPA fire protection license amendment scheduling and enforcement discretion issues
- External safety culture outreach continues

Cyndi Pederson met with the Chairman

- Byron U2 Unusual Event (Jan. 30th)
- Davis Besse shield building
- Palisades public meeting and end of cycle meeting
- Prairie Island declining performance
- Perry end of cycle meeting
- Breckenridge, MI decommissioning success
- Guards and security screening equipment in RIII lobby
- Authority to Operate meeting on RIII PBX today

Jim Wiggins met with the Chairman

- Counterintelligence Program (started actions in response to tasking memo)
- Cybersecurity Roadmap
- Force on Force Significance Determination process
- Enhanced Weapons/Preemption Paper
- Frequency of Threat Briefing

Michael Weber met with Commissioner Magwood.

- The Commissioner had several questions; Mike did not raise any topics of his own

Michael Weber met with Commissioner Apostolakis

- Organization of Agreement States and the Conference of Radiation Control Program Directors meeting
- Mike's trip to Korea
- Risk Task Group recommendations and report

Cathy Haney met with Commissioner Ostendorff

- BRC Commission Meeting on April 10
- Reprocessing (resources, Commission policy)
- Upcoming NMSS All Hands meeting, at which the Commissioner will be the keynote speaker

Brian Sheron had a meeting with Commissioner Ostendorff

- The Commissioner had several questions; Brian did not raise any topics of his own

NOT FOR PUBLIC DISCLOSURE

April 17, 2012

NOTE TO COMMISSIONERS' ASSISTANTS

OCM/GBJ

Angela Coggins
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 Laura Pearson
 Lisa Clark
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OCM/WCO

John Tappert
 Michael Franovich
 Andrea Kock
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 Linda Herr
 Sunny Bozin

FROM: Nader L. Mamish /RA/
Assistant for Operations, OEDO

SUBJECT: LIST OF TOPICS RAISED BY SENIOR STAFF IN PERIODIC MEETINGS WITH
THE COMMISSION

For your information, the enclosure lists the topics raised by senior staff in periodic meetings with the Commission, for the period of April 9, 2012 through April 13, 2012.

Enclosure:
As stated

cc: R. W. Borchardt, EDO
M. Weber, DEDMRT
M. Virgilio, DEDR
D. Ash, DEDCM
N. Mamish, AO
K. Brock, OEDO

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ML12108A001

Commissioner Periodics during the week of April 9 - 13, 2012

The DEDO's met with the Chairman

- 2012 Focus Areas
- Various plant issues
- Follow-up on Spent Fuel Scoping Study paper
- Colorado concern on the handling of Piñon Ridge matter
- Recommendations on permanent implant brachytherapy
- Annual OAS meeting (week August 27th)

The corporate office directors met with the Chairman

ADM

- NRC's conflict of interest response to Idaho National Laboratory mailed to Mr. Grossenbacher Friday, April 6

HR

- Issued data call on non-monetary awards.
- TABS update issued yesterday (Employees will be able to sign up for automatic electronic updates of TABS-related information as it is posted)
- OPM conducted further analysis of the 2011 FEVS employee survey results, and as a result ranked NRC #1, NASA #2

OIS

- Meeting with OMB tomorrow on various IT initiatives
- ADAMS P8 session will be offered in the Auditorium

SBCR

- Response to Dec 2011 EEO meeting SRM, questioning rights of NRC contractors to NRC's EEO process, was signed by EDO
- Older Americans Month and Asian Pacific American Month occur in May
- SBCR is developing a list of upcoming events and will share it with Chairman's office

The program office directors met with the Chairman

RES

- RES staff is briefing full ACRS Committee today on spent fuel pool study
- NRC staff briefed Hill staffers on Energy and Commerce Committee on economic consequences

NMSS

- Status of preparations for IAEA safeguards at LES

FSME

- Chairman can expect either a call or request for a drop in (or both) from National Mining Association's Katie Sweeney to complain about a staff decision. (Staff has chosen to prioritize the license renewal for Willow Creek above their request to increase the flow rate)
- Part 35 paper on medical event definitions for permanent brachytherapy was with the Commission

NRO

- Update on the Vogtle rebar issue

NSIR

- Status of development of Integrated Response
- Upcoming Security Advisories (G8 meeting at Camp David occurring May 18-19 and for the NATO meeting in Chicago on May 19-21)
- Preemption Requests related to firearms and ammunition

Enclosure

NRR

- South Texas safety injection check valve showing boric acid deposits
- NFPA 805 enforcement strategy for Browns Ferry
- Accompanying Bill Dean on a visit to Limerick next week to tour the plant and to talk to Exelon about reliable, hardened vents for BWR Mk II containments

Jim Schaeffer and Kathy Lyons-Burke met with the Chairman

- Windows 7 Testing and Planning
- Bring Your Own Device rollout
- Open Government
- Classified Uncontrolled Information Implementation
- NRC Infrastructure Assessment (NSA performed blue team testing)
- Federal Information Security Management Act Evaluation from OMB (NRC achieved a "green" 94% level of compliance, 4th highest in government)
- Authority to Operate and Plans of Action and Milestones
- Standards Working Group (Cyber security standards, checklists, and guidance.)
- Management Directive/Handbook 12.5 (Automated Information Security Program)

Mark Satorius met with Commissioner Ostendorff

- A recent event in Texas involving exposure to a radiographer
- DOE Secretary decision to sign the waste determination for the F Tank Farm at the Savannah River Site
- OEDO had forwarded a paper that proposes changes to Part 35 (definition of a medical event as it relates to permanent implant brachytherapy)
- ICRP 103 (paper that summarizes several years of work in interacting with stakeholders, both domestic and international in the merits of updating Part 20 to current international standards)
- New Jersey Dept of Environmental Protection intends to issue five apparent violations to Gamma Irradiator Service
- Strengthening Agreement State Programs (including FSME's assessment whether there is an actual downward trend in Agreement States)
- Current rulemaking before the Commission to modify Part 73 in the area of "radiological sabotage"

Jim Wiggins met with Commissioner Ostendorff

- Fukushima Operations Center Tapes (conversations with and about IRSN)
- Cybersecurity (NEI Guideline 10-04)
- Force on Force (almost ready to move forward with a revised FoF Significance Determination Process)
- Wolf Creek Force on Force Results
- Follow-on to the Integrated Pilot Comprehensive Evaluation (IPCE) program
- Economic Consequences/Land Contamination

Kathryn Greene met with Commissioner Magwood

- Status of 3WFN
- Strategic Acquisition
- White Flint building renovations
- Relocation of NRC warehouse
- Energy savings in FY 12
- TABS tasking to each corporate office (reports were due to OEDO at the end of the month)

April 23, 2012

NOTE TO COMMISSIONERS' ASSISTANTS

OCM/GBJ

cc Angela Coggins
 cc Anna Bradford
 Laura Pearson
 Lisa Clark
 Tom Hipschman
 Nathan Sanfilippo
 Neha Dhir
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 Susan Loyd
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FROM: Nader L. Mamish /RA
Assistant for Operations, OEDO

SUBJECT: LIST OF TOPICS RAISED BY SENIOR STAFF IN PERIODIC MEETINGS WITH THE COMMISSION

For your information, the enclosure lists the topics raised by senior staff in periodic meetings with the Commission, for the period of April 16, 2012 through April 20, 2012.

Enclosure:
As stated

R. W. Borchardt, EDO
M. Weber, DEDMRT
M. Virgilio, DEDR
D. Ash, DEDCM
N. Mamish, AO
K. Brock, OEDO
G. Ellmers, OEDO

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ML12114A235

Commissioner Periodics during the week of April 16 - 20, 2012

The DEDO's met with the Chairman

Ash

- Managing and updating IT/IM systems
- Results of a recent National Security Agency review of our IT systems for vulnerabilities (NRC viewed by NSA as on par with other civilian agencies)
- Recent meeting with the IG where they addressed roles, responsibilities and interfaces with DHS and FBI.

Virgilio

- Staff and the licensee progress in addressing the Ft. Calhoun restart issues
- Staff actions in response to a potential for boric acid corrosion on a non-isolatable check valve at South Texas Project Unit 2
- Recent issue on Point Beach that is related to the licensee's treatment of external events (tomado)
- San Onofre U2 tube to tube wear
- Confirmatory order being developed for Browns Ferry on NPPA 805
- Current status of the Vogtle rebar
- Staff audit to review documentation that addresses the key errors and other concerns in four ESBWR topical reports and to determine what additional information GE-Hitachi needs to submit on the docket to support approval of the topical reports and ESBWR design certification
- OGC is reviewing the COL options paper (on how to address Fukushima issues) that NRO is developing
- Fukushima Steering Committee was briefed on 2 Tier 3 plans (EP and seismically induced fires and floods) and the staff's approach for the upcoming public meetings.
- Pilgrim license renewal paper being reviewed

The corporate office directors met with the Chairman

ADM

- 3WFN Steering Committee meeting (NRC soon to receive a written schedule update from LCOR)

CSO

- Quarterly report submitted to OMB

HR

Of 28 recent hires, 12 were veterans including 2 disabled veterans.
Administration is pushing agencies to hire more disabled and Hispanic individuals

OIS

- Review of entire portfolio of IT investments to inform the FY 14 budget request

SBCR

- Minority Serving Institution annual report is due to Dept. of Education on Friday April 27

Enclosure

The program office directors met with the Chairman

NSIR

- Region I move (NSIR will continue to support Region I's office move related to incident response and classified communications)
- Nuclear Security Working Group
- Emergency Planning Working Group

FSME

- Staff is in final preparations for the Joint Convention on the Safety of Spent Fuel Management and Safety of Radioactive Waste Management.
- ACMUI meeting

RES

- Received ACRS report on Research

NMSS

- During a software upgrade at LES production from cascades 1.1 -1.8 was lost.

NRR

- Update on staff work on filtered vents

NRO

- Vogtle Construction (Staff determined that the installation practice observed by our inspectors did not meet ACI and was an item contrary to the approved design that would require prior NRC approval)
- SMRs (Ameren has identified itself as a potential SMR COL applicant working with Westinghouse, provided DOE comes through with loan guarantees)

Cheryl McCrary met with the Chairman

- Ongoing investigations (OUO)

Cheryl McCrary met with Commissioner Ostendorff

- Ongoing investigations (OUO)

NOT FOR PUBLIC DISCLOSURE

May 1, 2012

NOTE TO COMMISSIONERS' ASSISTANTS

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FROM: Nader L. Mamish /BA/
Assistant for Operations /OEDO

SUBJECT: LIST OF TOPICS RAISED BY SENIOR STAFF IN PERIODIC MEETINGS WITH
THE COMMISSION

For your information, the enclosure lists the topics raised by senior staff in periodic meetings with the Commission for the period of April 23 - 27, 2012.

Enclosure:
As stated

cc: K. W. Borchardt, EDO
M. Weber, DEDMRT
M. Virgilio, DEDR
P. Ash, DEDCM
N. Mamish, AO
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G. Ellmers, OEDO

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ML12122A177

Commissioner Periodics During the Week of April 23 - 27, 2012

The DEDO's Met with the Chairman

Virgilio

- Vogtle Units 3&4 (The consortium is issuing a stop work order based on the deviation associated with the rebar).
- Final GEIS and rulemaking on environmental impacts on license renewal.

Weber

- Inaugural training in the International Executive Seminar series.
- Saltstone (Performance Assessment).
- Part 61 (Staff is currently pursuing a strategy that best accomplishes the various SRMs that have been received).
- Land Contamination/Economic Consequences.
- Korean INES report on the February Station Black Out event at Kori - 1.

The Corporate Office Directors Met with the Chairman

ADM

- The various bills being introduced in Congress to limit agency spending on conferences, as currently proposed, require agency-level approvals at funding levels below what NRC spends on RIC (OCA has been asked to keep ADM informed).
- Staff is meeting with LCOR/Turner to review in detail the proposed schedule leading up to the Nov 30 completion of 3WEN.
- The SSG approved 2 remaining procurements to implement the acquisition system today.

CSO

- Waiting on final results of the Blue Team testing, expected in about 2 weeks from NSA. No schedule yet for Red Team testing.
- The quarterly PH/SHMe test should begin May 1.

OIS

- The Project on Government Oversight requested North Anna documents from the public document room.

SBCR

- Summarized the quarterly White House small business meeting.

Michael Weber Met with Commissioner Ostendorff

- Highlights of the Agency Action Review Meeting and Senior Staff Leadership Meeting.
- International Commission on Radiological Protection (ICRP) Report 103 recommendations (SECY 2012-0064).
- Part 61 (Staff is currently pursuing a strategy that best accomplishes the various SRMs that have been received).

Enclosure

May 7, 2012

NOTE TO COMMISSIONERS' ASSISTANTS

OCM/GBJ

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FROM: Nader L. Mamish /BA/
Assistant for Operations, OEDO

SUBJECT: LIST OF TOPICS RAISED BY SENIOR STAFF IN PERIODIC MEETINGS WITH
THE COMMISSION

For your information, the enclosure lists the topics raised by senior staff in periodic meetings
with the Commission, for the period of April 30 – May 4, 2012.

Enclosure
As stated

cc: R. W. Borchardt, EDO
M. Weber, DEDMRT
J. Wiggins, DEDR (A)
D. Ash, DEDCM
N. Mamish, AO
K. Brock, OEDO
G. Ellmers, OEDO

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ML12128A310

Commissioner Periodics During the week of April 30 – May 4, 2012

The DEDO's Met with the Chairman

Johnson

- Update on the planning for the next public meeting between the Fukushima Steering Committee and the industry steering committee.

Ash

- Recent interagency emergency exercise last week (the exercise was successful and did not identify any follow-up assignments that we owe to agencies outside of the NRC).

Weber

- Results of the DHS briefing on information security.
- Fuel Cycle Oversight Process Revisions (staff is on track to deliver the project plan requested by the Commission by July).
- Plans for the public meeting on Cumulative Effects of Regulation.
- Action on the Risk Management Framework.

The Corporate Office Directors Met with the Chairman

ADM

- Meeting with LCOR, Turner, HOK and several subcontractors to resolve pricing issues with the subcontractors on Three White Flint North.

CSO

- PHISHMe exercise started on schedule.

HR

- Public Service Recognition Week. FEVS participation is 45% (same rate as this time last year).
- OPM selected 17 SES plans to review for certification.

OIS

- Supporting regional move (will be running parallel operations at current and new locations).
Staff going to meet with OMB & Federal CIO to discuss NRC activities in support of PortfolioStat.

SBCR

- Introduced Jerome Murphy as new associate director.
- National Older American month luncheon.
- July 11, "No Fear" author will be guest speaker at NRC.

Enclosure

The Program Office Directors Met with the Chairman:

NRR:

- NextERA withdrew the emergency tech spec change request related to the inoperability of two (out of four) EDGs due to inability of the associated exhaust pipes to withstand the licensing basis tornado.
- The solicitation for the Grow Your Own PRA Specialist program has closed. Nine per applications were received.

NRO:

- Continuing progress in addressing the Vogtle construction issue related to base-mat re-bar placement and related issues of working out clear distinctions between inspection and licensing activities.

NMSS:

- Staff released for public comment its draft report entitled "Identification and Prioritization of the Technical Information Needs Affecting Potential Regulation of Extended Storage and Transportation of Spent Nuclear Fuel."

FSME:

- Very successful several-hour webinar training for Agreement State personnel and NRC staff on current guidance for permanent implant brachytherapy.
- Meeting with the GAO as a follow up to the source security draft report and Congressional hearing in order to discuss some of the GAO misperceptions.
- Staff briefed the ACRS subcommittee on the SECY and staff recommendations on Part 20 in a closed meeting.

NSIR:

- National Exercise Program ("capabilities" that should be tested during the 2013-2014 national exercise program).
- River Bend Status (the SGI materials have yet to be found).
- Intelligence "Bag" (how decisions were being made on what intelligence materials are included in "the Bag").

Darren Aas met with Commissioner Ostendorff

- National Level Exercise.
- The filling of vacancies in ADM, OIS and CSO.
- NSA Blue Team Testing (results of the recent testing by NSA).

Eric Leeds met with Commissioner Ostendorff

- Decommissioning Funding SECY (The Commission did not accept any of the staff's recommended paths forward for handling net present value in decommissioning funding assurance. Therefore, the status quo remains.)
- Filtered vents (Discussed trip to Limerick).

Jim Wiggins met with Commissioner Apostolakis

- Small modular reactor security requirements
- Risk Task Force
- ISFSI Security Rulemaking
- Integrated Response Process

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