



**UNITED STATES
NUCLEAR REGULATORY COMMISSION**
REGION IV
1600 E. LAMAR BLVD.
ARLINGTON, TX 76011-4511

April 7, 2015

EA-13-152

Mr. Adam C. Heflin, President
And Chief Executive Officer
Wolf Creek Nuclear Operating Corporation
P.O. Box 411
Burlington, KS 66839

**SUBJECT: WOLF CREEK GENERATING STATION – NRC CHILLING EFFECT LETTER
FOLLOW-UP INSPECTION REPORT 05000482/2015008**

Dear Mr. Heflin:

On February 27, 2015, the U. S. Nuclear Regulatory Commission (NRC) completed a team inspection at Wolf Creek Generating Station (WCGS). The enclosed report documents the inspection findings, which were discussed during a February 27, 2015, exit meeting with Mr. Cleve Reasoner and other members of your staff.

The inspection examined activities conducted under your license as they relate to identification and resolution of problems, safety and compliance with the Commission's rules and regulations and with the conditions of your operating license. The inspection focused on the station's progress in addressing safety culture issues related to the NRC Chilling Effect Letter dated August 19, 2013, (ML13233A208). The team reviewed selected procedures and records, observed activities, and interviewed personnel.

The team determined that WCGS has taken appropriate actions to foster a workplace environment that encourages employees to raise safety concerns and to feel free to do so without fear of retaliation.

The team concluded that no chilling effect existed at WCGS, and that the station has made reasonable progress in addressing the issues leading up to the issuance of the CEL.

In accordance with Title 10 of the *Code of Federal Regulations* (10 CFR) 2.390, "Public Inspections, Exemptions, Requests for Withholding," a copy of this letter, its enclosure, and your response (if any) will be available electronically for public inspection in the NRC's Public Document Room or from the Publicly Available Records (PARS) component of the NRC's

A. Heflin

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Agencywide Documents Access and Management System (ADAMS). ADAMS is accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html> (the Public Electronic Reading Room).

Sincerely,

/RA/

Neil F. O'Keefe
Branch Chief, Projects Branch B
Division of Reactor Projects

Docket Nos. 50-482
License Nos. NPF-42

Enclosure: Inspection Report 05000482/2015008
w/ Attachment: Supplemental
Information

cc w/ encl: Electronic Distribution

A. Heflin

- 2 -

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OFFICIAL RECORD COPY

Letter to Adam C. Heflin from Neil F. O'Keefe dated April 7, 2015

**SUBJECT: WOLF CREEK GENERATING STATION – NRC CHILLING EFFECT
LETTER FOLLOW-UP INSPECTION REPORT 05000482/2015008**

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U.S. NUCLEAR REGULATORY COMMISSION

REGION IV

Docket: 05000482

License: NPF-42

Report: 05000482/2015008

Licensee: Wolf Creek Nuclear Operating Corporation

Facility: Wolf Creek Generating Station

Location: 1550 Oxen Lane NE
Burlington, Kansas

Dates: January 26 through February 27, 2015

Team Lead: David Proulx, Senior Project Engineer

Inspectors: Robert Hagar, Senior Project Engineer
Megan Williams, Reactor Inspector
Laura Micewski, Reactor Operations Engineer, NRO

Accompanying: Andrea Keim, Reactor Operations Engineer NRO

Approved By: Neil O'Keefe, Branch Chief
Projects Branch B
Division of Reactor Projects

SUMMARY

IR 05000482/2015008; 01/26/2015 – 02/27/2015; Wolf Creek Generating Station; Chilling Effect Letter Follow-up Inspection

The inspection described in this report was performed between January 26 and February 27, 2015, by three inspectors from the Nuclear Regulatory Commission's (NRC) Region IV office, and two inspectors from the NRC's Office of New Reactors. The significance of inspection findings is indicated by their color (Green, White, Yellow, or Red), which is determined using Inspection Manual Chapter 0609, "Significance Determination Process," dated June 2, 2011. Their cross-cutting aspects are determined using Inspection Manual Chapter 0310, "Aspects Within Cross-Cutting Areas," dated December 19, 2013. Violations of NRC requirements are dispositioned in accordance with the NRC Enforcement Policy. The NRC's program for overseeing the safe operation of commercial nuclear power reactors is described in NUREG-1649, "Reactor Oversight Process."

Assessment of Chilling Effects at Wolf Creek Generating Station

The team concluded that the licensee maintained a safety-conscious work environment in which personnel were willing to raise nuclear safety concerns without fear of retaliation. Appropriate self-assessments performed in response to the NRC's Chilling Effect Letter identified areas of concern, and the licensee initiated management changes and improvement plans to address these issues. Through focus group interviews, the team determined that improvement was evident. Actions were implemented to improve the Employee Concerns Program. The team concluded that the licensee made reasonable progress in implementing actions to address the Chilling Effect Letter and to improve the station's safety culture.

REPORT DETAILS

4. OTHER ACTIVITIES

4OA2 Problem Identification and Resolution (71152)

Background

On August 19, 2013, the NRC issued a letter that requested a response to potential work environment issues at Wolf Creek Generating Station. This Chilling Effect Letter (CEL) (ML13233A208) requested Wolf Creek Nuclear Operating Corporation (WCNOC) provide information concerning the actions the licensee planned take to ensure that a safety conscious work environment (SCWE) existed at Wolf Creek Generating Station following a discrimination concern with a contractor and chilled work environment concerns within the Quality Assurance (QA) department.

The team reviewed the completion status of each of the actions described in the licensee's 6-month response to the NRC's August 19, 2013, CEL (ML15076A470). The team then evaluated the effectiveness of those actions and assessed the current safety culture through a series of six focus group discussions. The team also reviewed each of the elements addressed in the licensee's 6-month response to the NRC's CEL against the elements contained in NRC Allegation Guidance Memorandum AGM 2012-01, "NRC Chilling Effect Letters." (ML12025A055)

The team based the following conclusions on the documentation of licensee actions and focus group interviews conducted during the onsite portion of the inspection from January 26 through 30, 2015, and in-office review through February 27, 2015.

.1 Assessment of the Elements of Allegation Guidance Memorandum (AGM) 2012-01 "NRC Chilling Effect Letters"

a. Inspection Scope

Using Section 5 of AGM 2012-01, the team reviewed the scope of the licensee's assessment of the work environment, the independence of those involved with the evaluation, the adequacy and the effectiveness of the corrective actions taken, and evaluated whether the licensee has made reasonable progress towards addressing the underlying issues that led to the CEL.

The team reviewed the licensee's response and progress against the following criteria in AGM 2012-01:

A. If the licensee conducted surveys or interviews, the staff should:

- Evaluate the results to verify that the questions encompassed potential reluctance to raise safety concerns, the reluctance to self-identify problems, workers' awareness of others that have received retaliation, management support for raising concerns, the effectiveness of the corrective action program (CAP), and the effectiveness of the employee concerns program (ECP).

- Evaluate the sample size of the interviews/surveys to determine if they included an appropriate cross-section of personnel.
- Consider follow-up interviews or focus groups to validate the licensee's self-assessment.

B. If the licensee's assessment indicated areas of weakness, the staff should evaluate the licensee's corrective actions and:

- Consider if the actions taken address the underlying problems were of sufficient scope and depth, and will be implemented in a timely fashion.
- Examine the adequacy of the effectiveness measures for monitoring results.
- Follow up, as appropriate to monitor the licensee's progress toward improving the SCWE.

a. Assessments

.1 Evaluation of Licensee Surveys

In response to the CEL, the licensee conducted surveys and followed up with focus group interviews. The licensee used independent peer and industry evaluators to tabulate the results and provide recommendations. The team determined that the licensee's survey questions were of sufficient scope and depth to encompass potential reluctance to raise safety concerns, the reluctance to self-identify problems, to assess workers' awareness of others that have received retaliation, perceptions about management support for raising concerns, the effectiveness of the CAP, and the effectiveness of the ECP. The questions also examined general culture attributes such as supervisory interactions and employee trust of management. Employees were also offered the option of making general comments concerning the SCWE at the site, which were also reviewed and tabulated.

Approximately 1100 licensee employees and supplemental workers responded to the surveys. The survey results identified work groups that had a significant number of negative responses. The licensee performed focus group interviews of QA, Security, Maintenance, Information Services, Performance Improvement, and Health Physics (HP) personnel. The team determined that this was a significant and representative sample of the site population.

To validate the licensee's results, the team conducted 6 focus group interviews that included a total of 54 site personnel. The team concluded that all personnel interviewed were willing to raise safety concerns by any of the avenues available to them (e.g. within the CAP, or to their supervisor, management, or the ECP) without fear of retaliation. Those interviewed generally expressed the opinion that safety culture improvements had been made and were effective. However, the team identified that some general work environment issues associated with supervisory styles and trust in management remain within the QA, Security and HP departments. In addition the majority of those interviewed expressed the

perception that the ECP, although easily accessible, was not always effective in correcting issues and communicating results. The team verified that licensee management was aware of these issues as a result of their safety culture assessment activities, and appropriate action was being taken in their safety culture improvement effort.

To supplement these interviews, the team interviewed the Employee Concerns Program Manager to assess his perception of the site employees' willingness to raise nuclear safety concerns. The team reviewed the Employee Concerns Program case log and select case files. The team noted an increase in the number of concerns reported to the ECP and the number of cases substantiated by ECP investigations. The team concluded that the licensee has made significant progress in improving the ECP, and that workers were willing to use the ECP as an avenue to report and address concerns.

This item was complete.

.2 Evaluation of Licensee Corrective Actions for Identified Areas of Weakness

a. Root Cause Analysis

Upon receipt of the CEL, the licensee initiated Condition report (CR) 00073241 to place the issue into the corrective action program. In response to the potential for a chilling effect on the SCWE to exist, the licensee conducted a root cause analysis to identify the causes for the underlying issues leading up to the issuance of the CEL. Root causes identified included 1) QA management was not sensitive to the consequences of their actions, and 2) Wolf Creek did not take action to prevent a potential chilling effect from the Enercon adverse action. The licensee identified a contributing cause that sufficient guidance for managing the ECP was not provided. The team concluded that the root cause analysis was performed by a qualified team of evaluators and, was of sufficient scope and depth to address the underlying issues, which were entered into the corrective action program through CR 00073241.

b. Evaluation of the Adequacy of the Effectiveness Measures for Monitoring Results

The licensee's final self-assessment, titled "Nuclear Safety Culture Assessment (NSCA)," identified three work groups that represented potential areas of weakness: (1) QA, (2) Security, and (3) HP, as well as other generic weaknesses and observations. The licensee initiated CR 00051132 to place these additional observations into the corrective action program.

The licensee conducted several plant surveys and peer reviews to monitor the progress and the results. In addition, the licensee also retained the services of a consultant to mentor and coach licensee management on maintaining a SCWE, including specific supervisors and managers for the targeted work groups. The team concluded that these actions were effective in improving licensee performance in this area.

The inspectors reviewed the charter, scope, meeting minutes and condition reports generated by the newly-created Nuclear Safety Culture Monitoring Panel. The inspectors determined that the Nuclear Safety Culture Monitoring Panel was effective in monitoring trends and taking actions for SCWE concern precursors.

c. Evaluation of the Licensee's Progress Toward Improving the SCWE

The licensee was aware of weaknesses in the general culture of the QA, Security and HP departments. The licensee took action to make key management changes to address these areas. Further action to use a consultant to provide mentoring and coaching for management improvement was in progress. The team determined that the actions in this area were appropriate and that the licensee had made reasonable progress to address the identified concerns.

The team noted that the licensee made significant effort in communicating its commitment to a SCWE to all site workers. The licensee provides initial training on the subject to new workers, and communicates through a licensee newsletter, all hands meetings, and annual requalification training to reiterate management's commitment to maintaining a SCWE. However, during focus group interviews, workers from two of the targeted groups (Security and HP), stated they were unaware that their work groups were areas of focus for improvement of site SCWE. As a result, they were unaware of improvement actions that were taking place to improve SCWE in their work group. The team noted that the focus groups interviewed were aware of and understood management's overall communication of their commitment to a SCWE.

The QA organization was the subject of significant management, organizational, programs and procedure revisions. A new QA manager was assigned, as well as new first level supervision. QA procedures were changed to allow QA workers to initiate condition reports independent of management input, and prior to the issuance of final reports. An independent consultant was retained to provide coaching and mentoring of QA management. Although the focus group interviews indicated that some QA personnel stated that they were not sure if they were ready to fully trust licensee management, the licensee has made reasonable progress in addressing the SCWE in the QA department.

The licensee created a Personnel Action Review board (PARB) to review any proposed adverse administrative personnel actions to ensure that discrimination for engaging in protected activities did not occur. Procedure AI 13C-003 "Personal Action Review Board," Revision 0, implemented this program. The team reviewed the PARB policies and procedure, and attended PARB meetings to assess its effectiveness. The team concluded that the PARB initiative was an effective tool in identifying adverse administrative personnel actions that could be perceived as affecting the SCWE at Wolf Creek.

In addition, the licensee identified several areas for improvement in the ECP. The ECP was evaluated against the industry standard of NECEP 08-002, "Nuclear Employee Concerns Program Evaluation Guidelines," Revision 0, to benchmark the Wolf Creek ECP and identify improvement items. The licensee initiated nine condition reports from this review. As a result, the licensee initiated significant action for improving the accessibility and the effectiveness of the ECP. This

included revising procedures, increased use of ECP posters throughout the site, creating an off-hours hotline, and the addition two new ECP staff members. The team noted that, although employees interviewed during focus groups stated reservations that the effectiveness of improvements to the ECP had not been fully demonstrated, the licensee has made reasonable progress in improving the ECP at Wolf Creek.

The team concluded that, based on the criteria listed in AGM 2012-01, the licensee has made reasonable progress in addressing the underlying issues that led to the CEL.

.2 Assessment of Licensee Progress of Commitments in the 6-month Chilling Effect Letter Response

a. Inspection Scope

The team reviewed the licensee's actions committed to in a letter dated January 24, 2014, "Six Month Response to NRC Letter Regarding Work Environment Issues at Wolf Creek Generating Station." The inspectors reviewed procedures, cause evaluations, condition reports, committee minutes, and self-assessments, then conducted focus group interviews to support this inspection.

b. Assessments

.1 Assessment of Actions Taken to Ensure that the OSHA Finding did not have an Effect on the Willingness Of Employees to Raise Safety Concerns

The licensee stated they would perform a survey to evaluate the status of employee willingness to raise safety concerns. The licensee completed this survey on October 15, 2013, and used independent peer and industry evaluators to tabulate the results and provide recommendations. The team concluded that the survey's questions were of sufficient scope and depth, and survey responses were obtained from a significant and representative sample of the site population.

The team was able to validate the survey results through multiple focus group interviews. The team concluded that all personnel interviewed would raise safety concerns by any of the avenues available to them without fear of retaliation.

This item was complete.

.2 Assessment of Wolf Creek Nuclear Operating Corporation's Action Plans to Address Existing Issues in the Quality Department and Throughout Wolf Creek

The licensee provided 11 discrete actions to address these plans. The team's assessments are as follows:

a. Review of CAP Policies and Procedures for Improvements

The licensee initiated CR 00075483 to place this item in the corrective action program. The licensee determined that their policies and procedures emphasized a low threshold for writing condition reports. The team concluded that their problem reporting threshold and number of CRs written were consistent with other

single unit sites. The licensee had a low number of anonymous CRs, indicating that employees were comfortable writing CRs. The team noted that the licensee's CAP procedures were consistent with industry norms.

This item was complete.

b. Clarify Policies for Condition Report Initiation for QA Audit Teams

The licensee determined that their procedures clearly stated that QA workers were permitted to write CRs independent of and in conjunction with audit findings. However, prior to receiving the CEL, the QA organization had had an internal policy that QA personnel could only initiate CRs following approval by their supervisor or manager. The licensee took significant action to ensure that QA organization policies and practices properly reflected site procedures and senior management expectations for initiation of CRs. Using a consultant, the licensee benchmarked their QA procedures against other peers, and determined that they were consistent. Subsequent licensee focus group interviews determined that QA personnel would not hesitate to write CRs to address safety concerns, and that barriers (i.e. QA management approval) to writing CRs have been removed. The team's results from independent focus group interviews validated this conclusion.

This item was complete.

c. Implement Improvements to CAP Software Interface to Facilitate CR Initiation.

The licensee made enhancements for initiating CRs and adding the ability to write anonymous CRs. The licensee also conducted training on these enhancements. Through focus group interviews, the team determined that, although some employees stated that the CR system was still cumbersome, they were able to use the system and were knowledgeable of how to write anonymous CRs.

This item was complete.

d. Complete a Root Cause Analysis to Address Elements of the Letter

The root cause analysis was completed as part of CR 00073241. Root causes identified included 1) QA management was not sensitive to the consequences of their actions, and 2) Wolf Creek did not take action to prevent a potential chilling effect from the Enercon adverse action. The licensee identified a contributing cause that sufficient guidance for managing the ECP was not provided. The team concluded that the root cause analysis was performed by a qualified team of evaluators and, was of sufficient scope and depth to address the underlying issues.

This item was complete.

e. Retain Third Party Resources to Analyze the Organizational Issues within the QA Department

The licensee hired an external facilitator/coach to perform an assessment of the QA organization. The individual performed this assessment in September 2013,

reported the findings, and provided a six-month action plan. The team interviewed the external facilitator and discussed NRC's observations with respect to the focus group interviews, which aligned with the facilitator's findings

This item was ongoing.

f. Evaluate the QA Organization's Reporting Relationships and Organizational Structure

The licensee hired a new Quality Assurance Manager on January 27, 2014, and had recently hired a new supervisor. In addition, QA organization was the subject of significant organizational, program and procedure changes. QA procedures were changed to allow QA workers to initiate condition reports independent of management input, and prior to the issuance of final reports. An independent consultant was retained to provide coaching and mentoring of QA management. Although the team's focus group interviews identified that some QA personnel stated that they were not sure they were ready to fully trust licensee management, QA personnel stated that they were willing to report problems. Thus, the licensee has made reasonable progress in addressing the SCWE in the QA department.

This item was complete.

g. Evaluate Current ECP Policies, Procedures, and Processes Against Best Industry Practices

The licensee had identified several areas for improvement in the ECP. The licensee compared the ECP against the industry standard of NECEP 08-002, "Nuclear Employee Concerns Program Evaluation Guidelines," Revision 0, to benchmark the Wolf Creek ECP and provide for corrective action. The licensee initiated nine condition reports from this review. As a result, the licensee initiated significant action for improving the accessibility and the effectiveness of the ECP. This included revising procedures, increased use of posters, an off-hours hotline, and the hiring of additional staff. The team noted that, although employees interviewed during focus groups stated that the ECP's effectiveness had not been fully demonstrated, the licensee has made reasonable progress in improving the ECP at Wolf Creek.

This item was complete.

h. Provide Training to WCNO Management and Supervision on Maintaining a SCWE at Wolf Creek

The licensee completed training of all supervisory and management personnel in four hour sessions in December 2013. The team reviewed the training material and the attendance and determined that they were sufficient to address this issue.

This item was complete.

i. Conduct Benchmarking with Other Licensees to Identify Best Practices for Maintaining SCWE Among Supplemental Workers

Based on the results of benchmarking with several other licensees, the licensee initiated action to: (1) strengthen contract language prohibiting retaliation for engaging in protected activities and maintaining a SCWE; (2) implement a review procedure for conduct of adverse actions against supplemental workers; and (3) implement an improved on-boarding process with emphasis on SCWE. The team reviewed the licensee actions to implement this line item and determined that they were satisfactory.

This item was complete.

j. Develop and Implement a Process for Evaluating Proposed Actions Against Employees

The licensee created a Personnel Action Review board (PARB) to review any adverse administrative actions to ensure that discrimination for engaging in protected activities did not occur. The team reviewed the PARB policies and procedures, and attended PARB meetings to assess its effectiveness. The team concluded that the PARB initiative was an effective tool in ensuring that personnel actions would not result in discrimination at Wolf Creek.

This item was complete.

k. Develop Provisions that Outline Contractor Obligations to Prohibit Retaliation for Engaging in Protected Activities, Cultivate a SCWE, and Cooperate with WCNOG in Maintaining a SCWE

The licensee revised their processes for developing terms and conditions of future contracts to address these issues. The team reviewed these provisions and determined that they were appropriate.

This item was complete.

.3 Assessment of Plans to Communicate Expectations and Policies of SCWE at Wolf Creek Generating Station

The team noted that the licensee has made a significant effort in communicating its commitment to maintaining a SCWE. The licensee used initial and annual training and a variety of communication methods to reiterate management's commitment to maintaining a SCWE. During focus group interviews, workers in two of the targeted groups (Security, and HP), stated they were unaware that they were areas of focus for improvement of site SCWE. However, the team noted that the focus groups interviewed were aware of and understood management's overall communication of their commitment to a SCWE. These actions were either complete or in progress. The team concluded that the licensee has made significant progress in communicating SCWE expectations and policies.

This item was complete.

.4 Assessment of WCNOC's Plan to Ensure Individuals Not Satisfied with Problem Resolution Can Pursue Other Avenues to Pursue Resolution

The licensee surveys and focus group interviews identified that individuals felt free to identify safety issues through any of the avenues available to them. However, self-assessments identified difficulties using the CAP software and that employees perceived that the ECP was not always an effective tool. During focus group interviews, the team validated that these perceptions still existed.

The licensee made enhancements for initiating CRs and added the ability to write anonymous CRs. The licensee conducted site-wide training on these enhancements. Although some employees stated that the CR system was still cumbersome, they were able to use the system for CRs and were knowledgeable of how to write anonymous CRs.

The licensee identified several areas for improvement in the ECP. The licensee compared the ECP against the industry standard of NECEP 08-002, "Nuclear Employee Concerns Program Evaluation Guidelines," Revision 0, and initiated significant action for improving the accessibility and the effectiveness of the ECP, including adding two staff members. These actions were either complete or in progress. The team noted an increase in the number of concerns identified and substantiated. The team concluded that the licensee has made significant progress in improving the ECP.

This item was ongoing.

.5 Assessment of Actions Taken or Planned to Ensure Actions Taken Against Individuals are Not Perceived as Retaliatory to Avoid a Further Chilling Environment at Wolf Creek

The licensee created a Personnel Action Review board (PARB) to review any adverse administrative actions to ensure that discrimination for engaging in protected activities did not occur. Procedure AI 13C-003 "Personal Action Review Board," Revision 0, implemented this program. The team reviewed the PARB policies and procedure, and attended PARB meetings to assess its effectiveness. The team concluded that the PARB initiative was an effective tool in ensuring that personnel actions would not result in discrimination at Wolf Creek.

This item was complete.

.6 Assessment of Licensee Plans to Inform the Licensee and Contractor Workforce of i) Issuance of the CEL, ii) the Current Status of SCWE at Wolf Creek and iii) the Action Plan to Address the SCWE Issue

The licensee implemented a significant communications plan to ensure that employees were aware of the CEL and management's commitment to SCWE. The team concluded that the licensee implemented effective communication tools to avoid a chilled work environment. However, the team noted that focus group interviewees were generally unaware of licensee action plans to address issues in their work groups. The licensee initiated action to include the action plans as part of their communications.

This item was complete.

40A6 Meetings, Including Exit

Exit Meeting Summary

On January 30, 2015, the team provided an initial debrief of the onsite inspection results to Mr. C. Reasoner, and other members of the licensee staff. The licensee acknowledged the issues presented. The licensee confirmed that any proprietary information reviewed by the inspectors had been returned or destroyed.

On February 27, 2015, the team performed a telephonic exit of the final inspection results to Mr. C. Reasoner, and other members of the licensee staff. The licensee acknowledged the issues presented. The licensee confirmed that any proprietary information reviewed by the inspectors had been returned or destroyed.

SUPPLEMENTAL INFORMATION

KEY POINTS OF CONTACT

Licensee Personnel

A. Heflin, President and CEO
C. Reasoner, Site Vice President
A. Stull, Vice President and Chief Admin Officer
J. McCoy, Vice President, Engineering
D. Hendell, General Counsel
S. Smith, Plant Manager
D. Dees, Supervisor, Operations Support
D. Mand, Manager, Design
R. Flannigan, Manager, Nuclear
L. Ratzlaff, Manager Maintenance
M. Skiles, Manager Health Physics
W. Muilenburg, Supervisor Licensing
J. Yunk, Manager Corrective Action
D. Erbe, Manager Security
S. Koenig, Regulatory Affairs Manager
E. Ray, Manager, Training
E. McIntyre, Manager, Human Resources
L. Rockers, Licensing Engineer
M. Whiting, Evaluation Specialist
T. Wilson, Supervisor, Performance Improvement
C. Bailey, Senior Human Resources Business Partner
N. Good, Licensing

NRC Personnel

D. Dodson, Acting Senior Resident Inspector
C. Henderson, Acting Senior Resident Inspector
R. Stroble, Resident Inspector

LIST OF ITEMS OPENED, CLOSED, AND DISCUSSED

None

LIST OF DOCUMENTS REVIEWED

40A2 Problem Identification and Resolution (71152)

Procedures

<u>Number</u>	<u>Title</u>	<u>Revision</u>
AI 28D-001	Coaching and Observation Program	28
AI 13C-003	Personnel Action Review Board	1
AI 13E-001	Performance Management Program	26
AI 13E-015	Wolf Creek Leadership and Accountability Model	5A
AI 28A-010	Screening Condition Reports	18
AI 28A-018	Corrective Action Review Board	0
AI 28A-100	Cause Analysis	8
AI 28A-100	Condition Report Resolution	9
AI 36-001	Nuclear Safety Culture Monitoring	2
AI 36-002	Nuclear Safety Culture Assessment	1
AP 18A-001	Employee Concerns Program	5
AP 20E-001	Industry Operating Experience Program	25
AP 24B-001	Control of Site Contractor Services	19
AP 26C-004	Operability Determination and Functionality Assessment	29
AP 28A-001	Corrective Action Program	22
AP 28A-100	Condition Reports	21
AP 28-001	Operability Evaluations	23
AP 36-001	Nuclear Safety Culture	4

Condition Reports (CRs)

62053	62170	69366	69367	72161
78148	78959	79140	79252	79406
79446	79407	80901	81626	82274
82275	82276	82277	83163	85170
85204	85348	85975	85977	85978

85979	85981	85983	85986	85996
73241	75483	76347	76352	76355
76357	76359	76360	76361	76363
76366	76369	76370	76372	76373
76507	76377	76383	66222	72288
79633	76141			

Miscellaneous

WCNOC Corporate Policy Manual, Revision 16

- WCNOC "The Crucial Times," Volume II, No. 94, dated Tuesday, August 27, 2013
- WCNOC "The Crucial Times," Volume II, No. 96, dated Thursday, August 29, 2013
- WCNOC "The Crucial Times," Volume II, No. 104, dated Friday, September 13, 2013
- WCNOC "The Crucial Times," Volume II, No. 123, dated Wednesday, October 2, 2013
- WCNOC "The Crucial Times," Volume II, No. 126, dated Tuesday, October 8, 2013
- WCNOC "The Crucial Times," Volume II, No. 132, dated Thursday, October 17, 2013
- WCNOC "The Crucial Times," Volume II, No. 135, dated Wednesday, October 23, 2013
- WCNOC "The Crucial Times," Volume II, No. 136, dated Thursday, October 24, 2013
- WCNOC "The Crucial Times," Volume II, No. 139, dated Wednesday, October 30, 2013
- WCNOC "The Crucial Times," Volume II, No. 151, dated Wednesday, November 20, 2013
- WCNOC "The Crucial Times," Volume II, No. 152, dated Thursday, November 21, 2013
- WCNOC "The Crucial Times," Volume III, No. 12, dated Wednesday, January 22, 2014
- WCNOC "The Crucial Times," Volume III, No. 19, dated Tuesday, February 4, 2014
- WCNOC "The Crucial Times," Volume III, No. 31, dated Tuesday, February 25, 2014
- WCNOC "The Crucial Times," Volume III, No. 38, dated Monday, May 19, 2014
- WCNOC "The Crucial Times," Volume III, No. 114, dated Thursday, October 2, 2014
- WCNOC "Daily Howl," Mid-Cycle 20, No. 8, March 15, 2014
- WCNOC "Daily Howl," Mid-Cycle 20, No. 24, March 31, 2014
- WCNOC "Daily Howl," Mid-Cycle 20, No. 34, April 10, 2014

Personnel Action Review Board meeting minutes, PARB meeting #14 (Employee JPA rating of "Needs Improvement"), January 13, 2014

Personnel Action Review Board meeting minutes, PARB meeting #21 (Employee Suspension), February 25, 2014

Personnel Action Review Board meeting minutes, PARB meeting #28 (Employee Termination), April 9, 2014

Wolf Creek Corporate Policy Manual, revision 15, dated January 15, 2014
 Enclosure 2 of WM 14-0002, SCWE Communication Plan, revision 1
 Initial Assessment Report for Wolf Creek Security, by Executive Consulting, Inc., dated June 2014

PS1331270, "LEADING WCNOC TO A STRONG SAFETY CONSCIOUS WORK ENVIRONMENT", Rev. 1

Nuclear Safety Culture Monitoring Panel meeting minutes, dated January 8, 2013
Nuclear Safety Culture Monitoring Panel meeting minutes, dated February 21, 2013
Nuclear Safety Culture Monitoring Panel meeting minutes, dated May 16, 2013
Nuclear Safety Culture Monitoring Panel meeting minutes, dated May 22, 2013
Nuclear Safety Culture Monitoring Panel meeting minutes, dated July 22, 2013
Nuclear Safety Culture Monitoring Panel meeting minutes, dated August 8, 2013
Nuclear Safety Culture Monitoring Panel meeting minutes, dated October 21, 2013
Nuclear Safety Culture Monitoring Panel meeting minutes, dated October 23, 2013
Nuclear Safety Culture Monitoring Panel meeting minutes, dated October 29, 2013
Nuclear Safety Culture Monitoring Panel meeting minutes, dated January 7, 2014
Nuclear Safety Culture Monitoring Panel meeting minutes, dated March 13, 2014
Nuclear Safety Culture Monitoring Panel meeting minutes, dated March 18, 2014
Nuclear Safety Culture Monitoring Panel meeting minutes, dated April 25, 2014
Nuclear Safety Culture Monitoring Panel meeting minutes, dated July 8, 2014
Nuclear Safety Culture Monitoring Panel meeting minutes, dated December 15, 2014
Nuclear Safety Culture Senior Leadership Team meeting minutes, dated January 31, 2013
Nuclear Safety Culture Senior Leadership Team meeting minutes, dated February 28, 2013
Nuclear Safety Culture Senior Leadership Team meeting minutes, dated April 22, 2013
Leadership Alignment Meeting minutes / Sept. 16, 2013
Leadership Alignment Meeting minutes / Nov. 11, 2013
Lesson Plan PT1235520, Supplemental Worker On-Boarding, Rev. 001