

### REACTOR OVERSIGHT PROCESS SELF-ASSESSMENT REGIONAL PEER REVIEWS

Effective Date: 07/15/2016

#### 0307C-01 PURPOSE

The Reactor Oversight Process (ROP) self-assessment program evaluates the overall effectiveness of the ROP in meeting its pre-established goals and intended outcomes. This procedure provides the process for assessing regional effectiveness and consistency in implementing the ROP in accordance with ROP self-assessment process described in Inspection Manual Chapter (IMC) 0307, ROP Self-Assessment Program.

#### 0307C-02 OBJECTIVES

- 02.01 Identify strengths, weaknesses, areas for improvement, and best practices among the regions.
- 02.02 Ensure predictable, reliable, and consistent ROP implementation across regions.
- 02.03 Determine the adequacy of NRR support provided to the regional offices to carry out their functions related to the ROP.

#### 0307C-03 RESPONSIBILITIES AND AUTHORITIES

##### 03.01 Director, Division of Inspection and Regional Support (DIRS), Office of Nuclear Reactor Regulation (NRR)

- a. Oversees implementation of the regional peer reviews.
- b. Reviews, approves, and issues reports on the results of the annual regional peer reviews.
- c. Reviews, approves, and issues the charters for the annual regional peer reviews.

##### 03.02 Regional Directors, Branch Chiefs, and Staff, Divisions of Reactor Safety and Reactor Projects

- a. Ensure applicable regional data is collected and submitted to facilitate the regional peer reviews.

- b. Helps coordinate the peer review team's office visit and provides office and meeting space to facilitate the regional peer review team.
- c. Review and provide comments on the draft charter.
- d. Ensures findings from all regional peer reviews are assessed for applicability in assigned region.
- e. Provides staff for the regional peer review team.

03.03 Chief, Performance Assessment Branch (IPAB)

- a. Monitors the effectiveness of corrective actions and improvements to the ROP that are developed in response to the regional peer reviews.
- b. Develops the charters for the annual regional peer reviews.
- c. Provides staff for the regional peer review team.

03.04 Chief, Reactor Inspection Branch (IRIB)

- a. Provides staff for the regional peer review team.

0307C-04      REQUIREMENTS

The ROP self-assessment program will include peer reviews on regional implementation of the ROP to identify strengths, weaknesses, areas for improvement, and best practices among the regions and to ensure predictable, reliable, and consistent ROP implementation across all regions.

04.01 Scope and Process

- a. Implementation Procedure

The regional peer reviews will be conducted annually and focus on one specific region each year. The region that is being reviewed will rotate each year and in lieu of a peer review, a comprehensive independent evaluation of the ROP will be performed every fifth year in all regions to get an unbiased review of ROP effectiveness. As such, over a five-year period, each region will receive one implementation assessment and the overall program will be subjected to one comprehensive independent evaluation.

The NRR program office will draft a charter for each year's regional peer review that outlines which elements are going to be assessed during that year's review. The draft charter will be shared with the region that is being reviewed to get feedback before the charter is finalized. The charter for the peer review will typically consist of several standard elements as well as some specific elements based on particular areas of interest. Identified problem areas from previous peer reviews are generally of particular interest.

The regional peer reviews will be performed by a team consisting of the necessary expertise to adequately evaluate the areas assigned by the NRR program office in the charter. The team should include a member from each region not being reviewed and a member from both IPAB and IRIB. Consideration should be given to have the team leader be someone from the region scheduled for the following year's regional peer review to help that region prepare for the upcoming review.

The team leader of the regional peer review will contact the appropriate region to arrange an optimal time for the office visit. The team leader will conduct an entrance meeting with applicable regional personnel upon arrival to help facilitate the review. The office visit will typically be one week, with some support needed for preparation and documentation to facilitate the effectiveness of the onsite week. Additional visits to the regional office may be scheduled if necessary to meet the objectives of the peer review, but efforts should be made to limit the office visit to one week.

The review team will evaluate the strengths, weaknesses, areas for improvement, and best practices of delegated ROP functions within the region as well as the support and guidance provided to the regional offices by NRR. For those ROP functions where definitive requirements have been previously established, the evaluation will be based on objective measurements of performance against those requirements.

An exit meeting will be scheduled at the end of the regional peer review to discuss the findings of the review team. Throughout the week, the team leader will discuss the team's findings with the appropriate regional management.

b. Schedule

The office visit for the regional peer review will typically be scheduled between May (after the Agency Action Review Meeting) and September of a given year. Consideration should be given to schedule the office visit to minimize the impact on regional operations and maximize the effectiveness and efficiency of the review team activities.

Preliminary results will typically be summarized and discussed with the regional division director counterparts during routinely scheduled meetings or phone calls.

04.02 Documentation Required

a. Draft Report

A draft report will be prepared by the team leader, with inputs from the team members, within 45 days of the exit meeting. This report will summarize the findings of the assessment team regarding the effectiveness and consistency of program implementation by the regional office and any areas where the program office can provide additional support for the regional office. The report will be from the DIRS Director to the appropriate regional division director and other appropriate regional office personnel based on the scope of the peer review. Prior to final distribution of the report, a preliminary copy will be sent to the regional office for review and comment. The regional office's comments will be considered for inclusion in the final report.

The draft report will be shared with the other regional offices for their review and evaluation and to compare to their own program implementation. The purpose of this review is to determine if the noted strengths and weaknesses are unique to the region being reviewed or whether they are widespread across the regions. The responses from the other regions are due 30 days after issuance of the draft report and will be included as enclosures to the final report.

b. Final Report

The final report is due by mid-January and will include an assessment of the objectives listed in this IMC as well as any specific items listed in the charter. The final report will summarize the strengths and weaknesses of regional program implementation, highlighting best practices and noting potential areas for improvement. The report will also include the staff's resolution of any issues and/or plans to address those issues moving forward. A summary of the final report will be made publicly available.

c. Follow-up

The results of the regional peer reviews will be referenced in the annual ROP self-assessment report and presented to senior NRC management at the Agency Action Review Meeting. Lessons learned and recommended program improvements will be entered into the ROP feedback form process as applicable.

END

Attachment 1: Revision History for IMC 0307 Appendix C

Commitment Tracking Number	Accession Number Issue Date Change Notice	Description of Change	Description of Training Required and Completion Date	Comment and Feedback Resolution Accession Number (Pre-Decisional, Non-Public)
	ML16147A455 07/15/16 CN 16-016	Initial issuance. Created to address self-assessment process changes. Researched commitments for the last four years and found none.	None	ML16148A045