



**UNITED STATES
NUCLEAR REGULATORY COMMISSION**

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

March 19, 2019

Mr. Joel P. Gebbie
Senior VP and Chief Nuclear Officer
Indiana Michigan Power Company
Nuclear Generation Group
One Cook Place
Bridgman, MI 49106

**SUBJECT: INFORMATION REQUEST TO SUPPORT UPCOMING PROBLEM
IDENTIFICATION AND RESOLUTION INSPECTION AT THE DONALD C. COOK
NUCLEAR POWER PLANT, UNITS 1 AND 2**

Dear Mr. Gebbie:

This letter is to request information to support our scheduled Problem Identification and Resolution (PI&R) inspection beginning July 15, 2019, at your Donald C. Cook Nuclear Power Plant, Units 1 and 2. This inspection will be performed in accordance with NRC baseline Inspection Procedure 71152.

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

The documents requested are copies of condition reports and lists of information necessary to ensure the inspection team is adequately prepared for the inspection. The information requested prior to the inspection may be provided in either CD-ROM/DVD (preferred) or hard copy format and should be ready for NRC review by June 10, 2019. Ms. Julie Boettcher, the Lead Inspector, will contact your staff to determine the best method of providing the requested information.

We have discussed the schedule for the inspection with your staff and understand that our regulatory contact for this inspection will be Mr. Steve Mitchell of your organization. If there are any questions about the material requested or the inspection in general, please contact Ms. Boettcher at 630-829-9651 or Julie.Boettcher@nrc.gov.

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

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

This letter and its enclosure will be made available for public inspection and copying at <http://www.nrc.gov/reading-rm/adams.html> and at the NRC Public Document Room in accordance with 10 CFR 2.390, "Public Inspections, Exemptions, Requests for Withholding."

Sincerely,

/RA/

Eric Duncan, Chief
Branch 4
Division of Reactor Projects

Docket Nos. 50-315; 50-316
License Nos. DPR-58; DPR-74

Enclosure:
Requested Info to Support PI&R Inspection

cc: Distribution via LISTSERV®

Letter to J. Gebbie from E. Duncan dated March 19, 2019

SUBJECT: INFORMATION REQUEST TO SUPPORT UPCOMING PROBLEM
IDENTIFICATION AND RESOLUTION INSPECTION AT THE DONALD C. COOK
NUCLEAR POWER PLANT, UNITS 1 AND 2

DISTRIBUTION:

Michael McCoppin

RidsNrrDorlLpl3

RidsNrrPMDCCook Resource

RidsNrrDirslrib Resource

Darrell Roberts

John Giessner

Jamnes Cameron

Allan Barker

DRPIII

DRSIII

ROPreports.Resource@nrc.gov

ADAMS Accession Number: ML19078A373

OFFICE	RIII						
NAME	EDuncan:lg						
DATE	3/19/2019						

OFFICIAL RECORD COPY

Requested Information to Support Problem Identification and Resolution Inspection

Please provide the information on a compact disc or thumb drive (one for each of four team members), if possible. Unless otherwise specified, the time frame for requested information is for the period of July 1, 2017, through the time the data request is answered. Please label any electronic files with file content information. If a list of condition reports (CRs) is requested, the list should be sortable electronically.

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

PROGRAM DOCUMENTS

1. Copies of current administrative procedures associated with the corrective action program. This should include procedures related to: (1) corrective action process; (2) operating experience program; (3) self-assessment program; (4) maintenance rule program; (5) operability determination process; (6) degraded/non-conforming condition reporting process (e.g., RIS 2005–20); (7) system health process or equivalent equipment reliability improvement programs; and (8) operational decision making (ODMI) process.
2. A current copy of the Employee Concerns Program/Ombudsman administrative procedure.
3. Description of any substantive changes made to the CAP since the last Problem Identification and Resolution (PI&R) Inspection. Please include the effective date with each listed change.

ASSESSMENTS

4. A copy of Quality Assurance (QA) audits of the CAP.
5. A copy of self-assessments and associated CRs generated in preparation for this PI&R inspection.
6. A list of all other QA audits completed.
7. The schedule of future QA audits.
8. A copy of completed CAP self-assessments and the plan/schedule for future CAP self-assessments.
9. A chronological list of department and site self-assessments completed (include date completed).
10. A list of CRs written for findings or concerns identified in self-assessments and audits. Include a short description/title of the finding, its status, and include a cross-reference to the audit or self-assessment number.

Enclosure

CORRECTIVE ACTION DOCUMENTS

11. A list of completed root cause evaluations with a brief description of the issue. Provide status of any actions developed as part of the evaluations. Include a reference, if not part of the root cause package, to the documents and/or CRs directing and tracking the actions.
12. A list of completed apparent cause evaluations with a brief description of the issue. Provide status of any actions developed as part of the evaluations. Include a reference, if not part of the apparent cause package, to the documents and/or CRs directing and tracking the actions.
13. A list of completed common cause evaluations with a brief description of the issue. Provide status of any actions developed as part of the evaluations. Include a reference, if not part of the common cause package, to the documents and/or CRs directing and tracking the actions.
14. A list of all open CRs sorted by significance level. Include CR number, the date initiated, a brief description/title, system affected if any, significance level, and anticipated completion date, if available.
15. A list of closed CRs sorted by significance level and then initiation date. Include CR number, a brief description/title, the date initiated and closed, assigned organization, system affected and whether there was an associated operability evaluation.
16. A list of open corrective actions, sorted by significance/priority level, with a brief description/title, initiating date and due date. The list should include the number of due date extensions and be grouped by department.
17. A list of CRs generated by the corporate office that involve or affect plant operation, sorted by significance level. Include the date initiated, a brief description/title, system affected, assigned organization, and status (if closed include date closed; if open, include scheduled date to be closed).
18. A list of completed effectiveness reviews with a brief description of the results. Include a cross-reference to the CRs for which the effectiveness review was conducted and, if applicable, CR numbers documenting any additional follow-up actions.
19. A list of CRs initiated for inadequate or ineffective corrective actions. Include the date initiated, a brief description/title, significance/priority level, system affected, assigned organization, and status (if closed include date closed; if open, include scheduled date to be closed). Include a cross-reference to the CR or evaluation that generated the original corrective action.
20. A copy of any performance reports or indicators used to track CAP effectiveness. The end-of-quarter data is sufficient; monthly reports are not required.

21. A data table (or similar format) showing the total number of CRs generated per year since 2016 sortable by department (i.e. operations, engineering, security etc.).
22. A data table showing the number of issues identified externally (NRC, INPO, other, etc.) per year compared to those identified internally since 2016.

TRENDS

23. A list of CRs initiated for trends of conditions adverse to quality. Include the date initiated, a brief description/title, significance/priority level, and status (if closed include date closed; if open, include scheduled date to be closed).
24. Copies of any completed trend reports for CRs. Quarterly trend reports are acceptable; copies of all monthly reports are not required.
25. Copies of all apparent, common and/or root cause evaluations regarding adverse human performance trends.

OPERATING EXPERIENCE

26. A copy of the most recent operating experience program effectiveness review.
27. A list of CRs initiated to evaluate industry and NRC operating experience, and NRC generic communications (e.g. bulletins, information notices, generic letters, etc.). Include date the CR was initiated, a brief description/title, and status (if closed, include date closed; if open, include scheduled date to be closed).

SYSTEMS AND COMPONENTS

28. A list of the top ten risk significant systems and top ten risk significant components.
29. A list of operability determinations/evaluations. Include a brief description/title, date initiated, date closed or date scheduled to be closed. Also include any open operability evaluations that were initiated prior to July 1, 2017.
30. Cause analysis, corrective actions documents, health reports, and trend analysis for systems and components considered Maintenance Rule (a)(1). Provide this information starting one year earlier from when the system or component entered (a)(1) status. Include dates when system/component entered (a)(1) status and, if applicable, returned to (a)(2) status. For recurring reports, quarterly reports are sufficient; monthly reports are not required.
31. A list of temporary modifications that were installed on or after July 1, 2017, with a brief description/title, installation date, and current status. Specifically highlight any in-place temporary modifications that were installed prior to July 1, 2017.

SCWE

32. Results of completed safety culture/safety conscious work environment surveys or self-assessments. Include reference to associated CRs and status of the CR actions. Also include schedule/plans for future surveys.

REGULATORY ISSUES

33. A list of CRs for issues (findings, violations, etc.) documented in NRC inspection reports. Include the CR number, brief description/title, date initiated and the status (if closed include date closed; if open, include scheduled date to be closed).
34. A list of CRs for licensee-identified violations that have been documented in NRC inspection reports. Include the CR number, brief description/title, date initiated and the status (if closed include date closed; if open, include scheduled date to be closed).
35. A list of CRs associated with NRC-identified issues. Include the CR number, brief description/title, date initiated and the status (if closed include date closed; if open, include scheduled date to be closed).
36. A list of degraded/non-conforming conditions. Include the CR number, brief description/title, date initiated and date closed or projected closeout date. Include open issues that were identified prior to July 1, 2017.
37. A list of current control room deficiencies and operator work-arounds, sortable by priority, with a brief description/title and corresponding CR and/or work order number.

5-YEAR REVIEW

38. A list of CRs regarding the Emergency Diesel Generator (EDG) system that have been generated on or after July 10, 2014. Include the CR number, brief description/title, level of evaluation (i.e. root cause, apparent cause, common cause etc.), date initiated, and the status (if closed include date closed; if open, include scheduled date to be closed). Group the CRs by EDG unit/train.
39. For the EDG system, a list of operability evaluations generated since July 1, 2014; the current system health report; list of all open items; and any current system action plans. Group these evaluations by EDG unit/train.
40. For the EDG system, include any Adverse Trends and/or Action Plans to address recurring issues that were generated on or after July 1, 2014. If these were captured in the CAP, provide the CR number, title, and date identified. Group these items by EDG unit/train.

ADMIN

41. A copy of the latest plant organizational chart and phone listing. Include contractors that have been working at the site for at least 6 months.

42. Scheduled dates, times, and locations for all meetings associated with implementing the CAP (e.g. CR screening meetings, corrective action review board meetings). Include work order screening/assessment meetings.

Documents requested to be available on-site during the inspection:

- a. Updated Final Safety Analysis Report.
- b. Technical Specifications.
- c. Procedures and procedure index.
- d. A copy of the QA manual.
- e. A list of issues brought to the ECP/ombudsman and the actions taken for resolution.
- f. A list of the codes used in the CAP.
- g. A copy of the most recent independent/offsite organization review of safety culture/safety conscious work environment and internal equivalent assessments if not provided as part of the requested data package.

Other:

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