



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION II
245 PEACHTREE CENTER AVENUE N.E., SUITE 1200
ATLANTA, GEORGIA 30303-1200

June 27, 2019

Mr. Daniel G. Stoddard
Senior Vice President and
Chief Nuclear Officer
Innsbrook Technical Center
5000 Dominion Blvd., Floor: IN-2SW
Glen Allen, VA 29060

SUBJECT: VIRGIL C. SUMMER NUCLEAR STATION – BIENNIAL PROBLEM
IDENTIFICATION AND RESOLUTION INSPECTION REPORT
05000395/2019011

Dear Mr. Stoddard:

On May 23, 2019, the U.S. Nuclear Regulatory Commission (NRC) completed a problem identification and resolution inspection at your Summer Unit 1 and discussed the results of this inspection with Mr. George Lippard and other members of your staff. The results of this inspection are documented in the enclosed report.

The NRC inspection team reviewed the station's corrective action program and the station's implementation of the program to evaluate its effectiveness in identifying, prioritizing, evaluating, and correcting problems, and to confirm that the station was complying with NRC regulations and licensee standards for corrective action programs. The team also evaluated the station's processes for use of industry and NRC operating experience information and the effectiveness of the station's audits and self-assessments. Based on the samples reviewed, the team determined that your staff's performance in each of these areas adequately supported nuclear safety.

Finally, the team reviewed the station's programs to establish and maintain a safety-conscious work environment, and interviewed station personnel to evaluate the effectiveness of these programs. Based on the team's observations and the results of these interviews the team found no evidence of challenges to your organization's safety-conscious work environment. Your employees appeared willing to raise nuclear safety concerns through at least one of the several means available.

The NRC inspectors documented one finding of very low safety significance (Green) in this report. The finding did not involve a violation of NRC requirements.

If you disagree with a cross-cutting aspect assignment or a finding not associated with a regulatory requirement in this report, you should provide a response within 30 days of the date of this inspection report, with the basis for your disagreement, to the U.S. Nuclear Regulatory Commission, ATTN: Document Control Desk, Washington, DC 20555-0001; with copies to the Regional Administrator, Region II; and the NRC Resident Inspector at Summer.

This letter, its enclosure, and your response (if any) 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/

Randall A. Musser, Chief
Reactor Projects Branch 3
Division of Reactor Projects

Docket No.: 05000395

License No.: NPF-12

Enclosure:

As stated

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**U.S. NUCLEAR REGULATORY COMMISSION
Inspection Report**

Docket Number: 05000395

License Number: NPF-12

Report Number: 05000395/2019011

Enterprise Identifier: I-2019-011-0035

Licensee: Dominion Energy

Facility: Virgil C. Summer Nuclear Station

Location: Jenkinsville, SC

Inspection Dates: May 6, 2019 to May 23, 2019

Inspectors: Carey Read, Senior Resident Inspector (Team Leader)
Eliza Hilton, Resident Inspector
Katie McCurry, Fuel Facilities Inspector
Phil Niebaum, Senior Project Engineer

Approved By: Randall A. Musser, Chief
Reactor Projects Branch 3
Division of Reactor Projects

Enclosure

SUMMARY

The U.S. Nuclear Regulatory Commission (NRC) continued monitoring the licensee's performance by conducting a biennial problem identification and resolution inspection at Virgil C. Summer Nuclear Station in accordance with the Reactor Oversight Process. The Reactor Oversight Process is the NRC's program for overseeing the safe operation of commercial nuclear power reactors. Refer to <https://www.nrc.gov/reactors/operating/oversight.html> for more information.

List of Findings and Violations

Failure to Follow Corrective Action Program Procedure			
Cornerstone	Significance	Cross-Cutting Aspect	Report Section
Mitigating Systems	Green FIN 05000395/2019011-01 Open/Closed	[P.3] - Resolution	71152B
An NRC-identified Green finding was identified for the licensee's failure to follow their corrective action process for condition report CR-12-02287. Specifically, the licensee failed to properly recognize this issue as a condition affecting regulatory compliance (CARC), initiate a level 2 corrective action, and follow the established completion date targets as required by SAP-0999, Rev. 17.			

Additional Tracking Items

None.

INSPECTION SCOPES

Inspections were conducted using the appropriate portions of the inspection procedures (IPs) in effect at the beginning of the inspection unless otherwise noted. Currently approved IPs with their attached revision histories are located on the public website at <http://www.nrc.gov/reading-rm/doc-collections/insp-manual/inspection-procedure/index.html>. Samples were declared complete when the IP requirements most appropriate to the inspection activity were met consistent with Inspection Manual Chapter (IMC) 2515, "Light-Water Reactor Inspection Program - Operations Phase." The inspectors reviewed selected procedures and records, observed activities, and interviewed personnel to assess licensee performance and compliance with Commission rules and regulations, license conditions, site procedures, and standards.

OTHER ACTIVITIES – BASELINE

71152B - Problem Identification and Resolution

Problem Identification and Resolution (1 Sample)

The inspectors performed a biennial assessment of the licensee's corrective action program, use of operating experience, self-assessments and audits, and safety conscious work environment.

- Corrective Action Program Effectiveness: The inspectors assessed the corrective action program's effectiveness in identifying, prioritizing, evaluating, and correcting problems.
- Operating Experience, Self-Assessments and Audits – The inspectors assessed the effectiveness of the station's processes for use of operating experience, audits and self-assessments.
- Safety Conscious Work Environment – The inspectors assessed the effectiveness of the station's programs to establish and maintain a safety-conscious work environment.

INSPECTION RESULTS

Observation: Corrective Action Program	71152B
<u>Corrective Action Program Assessment</u> Based on the samples reviewed, the team determined that the licensee's corrective action program (CAP) complied with regulatory requirements and self-imposed standards. The licensee's implementation of the CAP adequately supported nuclear safety.	
<u>Effectiveness of Problem Identification:</u> The inspectors determined that the licensee was effective in identifying problems and entering them into the CAP at the appropriate threshold. This conclusion was based on a review of the requirements for initiating Condition Reports (CRs) as described in licensee procedure SAP-0999, "Corrective Action Program," and management's expectation that employees were encouraged to initiate CRs for any reason. Additionally, site management was actively involved in the CAP and focused appropriate attention on significant plant issues. The inspectors performed walk downs, reviewed CRs, and reviewed system health trending for Diesel Generators, DC Batteries, the Component	

Cooling System, and the Emergency Feedwater System. Based on the inspectors' reviews and walkdowns of accessible portions of those systems, the inspectors determined that deficiencies were being identified and placed in the CAP.

Effectiveness of Prioritization and Evaluation of Issues: Based on the review of CRs sampled by the inspection team during the onsite period, the inspectors concluded that problems were generally prioritized and evaluated in accordance the CAP requirements. The inspectors determined that adequate consideration was given to system or component operability and associated plant risk. The inspectors determined that plant personnel had generally conducted root cause and apparent cause analyses in compliance with the licensee's CAP procedures, including appropriate cause determinations, and performed adequate levels of analysis based on the significance of the issues being evaluated. A variety of formal causal-analysis techniques were used to evaluate CRs depending on the type and complexity of the issue consistent with the applicable cause evaluation procedures.

Effectiveness of Corrective Actions: Based on a review of corrective action documents, interviews with licensee staff, and verification of completed corrective actions, the inspectors determined that generally corrective actions were effective, timely, and commensurate with the safety significance of the issues. For significant conditions adverse to quality, the corrective actions directly addressed the cause and effectively prevented recurrence. The team reviewed performance indicators, CRs, and effectiveness reviews, as applicable, to verify that significant conditions adverse to quality had not recurred. Effectiveness reviews for corrective actions to prevent recurrence (CAPRs) were sufficient to ensure corrective actions were properly implemented and were effective. Inspectors identified several issues associated with condition report or corrective action closure for conditions adverse to quality. Specific issues are identified in this report as a finding, minor performance deficiencies, and an observation. Inspectors identified instances where CRs were closed without proper actions, resulting in delayed corrective actions or the potential to lose track of corrective actions. Inspectors also identified traceability issues resulting from creating multiple CRs on the same issue, which created vulnerabilities to losing track of corrective actions.

Observation: Operating Experience, Self-Assessments and Audits

71152B

The inspectors examined the licensee's program for obtaining and using industry operating experience. This included review of procedure SAP-1351, "Operating Experience (OE) Program," selected corrective action program action requests, and the licensee's operating experience (OE) database to assess the effectiveness of how external and internal OE data was evaluated at the plant. Additionally, the inspectors selected OE documents such as NRC generic communications, licensee event reports, vendor notifications, and plant internal OE items which had been issued since January 2016 to verify whether the licensee had appropriately evaluated each notification for applicability to the station, and whether issues identified through these reviews were entered into the CAP.

The inspectors determined that licensee's processes for the use of industry and NRC operating experience information and for the performance of audits and self-assessments were effective and complied with all regulatory requirements and licensee standards. The implementation of these programs adequately supported nuclear safety. The inspectors concluded that operating experience was adequately evaluated for applicability and that appropriate actions were implemented to address lessons learned as needed. The inspectors determined that the licensee was effective at performing self-assessments and audits to

identify issues at a low level, properly evaluated those issues, and resolved them commensurate with their safety significance.

Observation: Safety Conscious Work Environment | 71152B

Based on a sample of 16 people interviewed from a cross-section of plant employees, the team found no evidence of challenges to a safety-conscious work environment. Employees interviewed appeared knowledgeable of avenues to raise safety concerns and appeared willing to raise nuclear safety concerns through at least one of the several means available.

Minor Performance Deficiency | 71152B

Minor Performance Deficiency: In January 2014, during the preventive maintenance (PM) task of the refurbishment of Service Water (SW) pump XPP0039B, the licensee found out of tolerance gaps on the seismic restraints and initiated CR-14-00112. The apparent cause evaluation (ACE) associated with the CR determined that an extent of condition (EOC) inspection should be performed on the other trains of SW pumps (XPP0039A and XPP0039C), and existing PM tasks, Work Orders (WO) 1301830 and 1100910, were selected to inspect those seismic restraints. However, the WO for the 'A' pump was closed with no work being performed due to a change in the preventative maintenance frequency, and a later due date was established. The new WO (1709218), generated to perform that maintenance, was completed in February 2019, and found three seismic gaps out of tolerance, resulting in CR-19-00393. The operability determination stated that it this condition likely existed since the pump re-build performance in September 2002. Therefore, had the EOC inspection been adequately performed through the initial WO, this issue would have been identified sooner.

SAP-1356, "Cause Determination," Section 7.2.3, states in part, "the ACE shall perform an extent of condition determination using SAP-1356 CDG-01." SAP-1356 CDG-01, "Cause Determination Guidelines," states in part, "it is expected that once the scope of the Extent of Condition has been identified, it may be reduced only based on the actual or potential nuclear safety consequence. Document the basis for a reduction in the scope of the EOC." Contrary to SAP-1356 CDG-01 and SAP-1356, the licensee failed to complete an adequate EOC inspection for several years. A contributing cause was the missing tie between the EOC of the CR and the implementing procedures.

Screening: The inspectors determined the performance deficiency was minor. The performance deficiency was screened in accordance with Inspection Manual Chapter 0612 Appendix B and determined to be minor because the pump was determined to be operable but degraded with substantial safety margin in the gaps analyzed. This issue was captured in CR-19-01910.

Observation: CR Action Traceability | 71152B

The inspectors found two examples of CRs that identified actions that were not completed before CR closure. In both cases, the CR actions were addressed in different CRs and not tied back coherently to the original CR before closure. Specifically:

1. CR-17-02713 was initiated to capture leaking tube welds associated with Emergency Feedwater (EF) System modifications. The evaluation adequately identified a cause,

but the CR was closed without initiating an action to address the cause. However, adequate corrective actions were later taken in CRs 17-03479 and 17-04657, but those CRs were not traceable back to the original CR.

2. CR-17-00662, associated with surface rust observed on EF piping, assigned an action to perform ultrasonic testing. The CR was closed without adequate justification for why the testing was not performed. Justification was later provided in CR-18-04549, but that CR was not readily traceable back to the original CR.

By not having complete traceability between CRs, the site was vulnerable to corrective actions being missed and inadequate CR closure. This observation was captured in CR-19-01906.

Minor Performance Deficiency	71152B
<p>Minor Performance Deficiency: The licensee completed an Equipment Apparent Cause Evaluation (E-ACE) in CR-17-05860 on a reactor trip that was caused by the failure of an inverter gate drive card. A level 2 corrective action (action 9) from the E-ACE was created to replace the card in the next refueling outage. SAP-0999, "Corrective Action Program," Enclosure D prevents the licensee from closing level 2 actions to work orders that have not been completed. Contrary to the requirement, the licensee closed a level 2 action that was assigned from the E-ACE without the work being completed in WO1705755. By closing the level 2 action, the station lost administrative corrective action program controls over timely completion of corrective actions.</p> <p>Screening: The inspectors determined the performance deficiency was minor. The performance deficiency was screened in accordance with Inspection Manual Chapter 0612 Appendix B and determined to be minor because the licensee completed the work in the next refueling outage, and there were no additional equipment failures. This issue was captured in CR-19-01907.</p>	

Minor Performance Deficiency	71152B
<p>Minor Performance Deficiency: In January 2017, the licensee completed an Apparent Cause Evaluation for condition report CR-16-06015, which identified a process deficiency when addressing minor work activities on safety-related components. The corrective action to fix the process deficiency was closed on February 14, 2019, without revising or issuing new procedures to resolve the deficiency.</p> <p>SAP-0999, "Corrective Action Program," Section 6.3.9 requires that "when performing evaluations or documenting actions taken, do not use open-ended or promissory type statements to close the issue." Contrary to SAP-0999, the licensee closed CR-16-06015 Action 1 to a promissory statement for a procedure that was under development. The licensee subsequently expanded an existing nonconformance procedure to cover the process deficiency.</p> <p>Screening: The inspectors determined the performance deficiency was minor. The performance deficiency was screened in accordance with Inspection Manual Chapter 0612 Appendix B and determined to be minor because since January 2017, no safety-related components had been adversely affected. This issue was documented in CR-19-01899.</p>	

Failure to Follow Corrective Action Program Procedure			
Cornerstone	Significance	Cross-Cutting Aspect	Report Section
Mitigating Systems	Green FIN 05000395/2019011-01 Open/Closed	[P.3] - Resolution	71152B
<p>An NRC-identified Green finding was identified for the licensee's failure to follow their corrective action process for condition report CR-12-02287. Specifically, the licensee failed to properly recognize this issue as a condition affecting regulatory compliance (CARC), initiate a level 2 corrective action, and follow the established completion date targets as required by SAP-0999, Rev. 17.</p>			
<p><u>Description:</u></p> <p>Condition report CR-12-02287 was created on June 5, 2012, to review the impacts of revision 3 of RG 1.160, "Monitoring the Effectiveness of Nuclear Power Plants." On March 12, 2013, Action 005 was created to conduct the evaluation to scope non-safety related (NSR) structures, systems, and components (SSCs) used in emergency operating procedures (EOPs) into the maintenance rule. Action 005 stated in part, "compare non safety related SSCs used in the EOPs against current maintenance rule scoping to ensure our maintenance rule scoping is correct." The inspectors found that action 005 was extended 23 times over approximately 5 years even though there was enough information as early as March 2013 for the station to recognize this maintenance rule scoping issue as a potential regulatory non-compliance. Paragraph 6.3.1 of licensee procedure SAP-0999, revision 17, also stated that if new issues are identified, separate CRs should be initiated to capture these (new) issues. The inspectors determined that the licensee could have initiated another CR to identify the potential regulatory non-compliance with the maintenance rule. A newly initiated CR would have been subjected to a screening review process which could have screened this issue into a higher category. Action 005 of CR-12-02287 was closed on January 25, 2018, and this action did not completely resolve the issue. Additional actions were opened and closed under this CR to continue to evaluate and determine the need to scope non-safety related SSCs used in the station's EOP within the maintenance rule.</p> <p>On January 12, 2018, revision 17 of licensee procedure SAP-0999, "Corrective Action Program," became effective at the station. This version introduced the condition adverse to regulatory compliance (CARC) and established a 240-day completion time for level 2 actions that are expected to correct the CARC. The inspectors determined that upon implementation of SAP-0999, revision 17, the issue described in CR-12-02287 should have been recognized as a CARC, and a level 2 corrective action should have been completed to address the CARC within 240 days as stated in Enclosure B. This would have driven the licensee to complete the maintenance rule evaluations to scope non-safety related SCCs used in the EOPs by September 9, 2018. The inspectors acknowledged that the target completion dates of level 2 actions can be extended per SAP-0999, but extensions are controlled administratively by the management review team (MRT) or the corrective action review board (CARB). During their review, the inspectors found that Action 010 of CR-12-02287 was open with a planned completion date of June 26, 2019. Because Action 010 was characterized as a level 3 action, it could be extended indefinitely by the same group responsible for closing the action.</p>			

Corrective Actions: The licensee initiated a new condition report and planned to create an level 2 action to ensure the necessary scoping evaluations are reviewed by the maintenance rule expert panel in accordance with the timeliness targets stated in licensee procedure, SAP-0999, "Corrective Action Program."

Corrective Action References: CRs-19-01897 and 19-01898.

Performance Assessment:

Performance Deficiency: Failure to follow the station's CAP procedure, SAP-0999, Rev. 17 was the PD. CR-12-02287 was not identified as a CARC upon implementation of this procedure on January 12, 2018. As a result, a level 2 corrective action was not created and the associated timeliness targets (or appropriate due date extension controls) of Enclosure B were not followed.

Screening: The inspectors determined the performance deficiency was more than minor because if left uncorrected, it would have the potential to lead to a more significant safety concern. The licensee has not completed the MR scoping effort of NSR SSCs used in the EOPs and cannot sufficiently demonstrate monitoring of the functions/components have been effective.

Significance: The inspectors assessed the significance of the finding using Appendix A, "Significance Determination of Reactor Inspection Findings for At - Power Situations." The finding was screened using Exhibit 2, "Mitigating Systems Screening Questions" since CR-12-02287 was related to SSCs used in the EOPs to mitigate events. The inspectors determined the finding screened to Green, very low safety significance, because the associated screening questions were answered "No."

Cross-Cutting Aspect: P.3 - Resolution: The organization takes effective corrective actions to address issues in a timely manner commensurate with their safety significance. The finding has a cross-cutting aspect of "resolution" in the problem identification and resolution (PI&R) area (P.3) because action 005 was extended 23 times over an approximately 5 year period even though there was sufficient information as early as March 2013 to reasonably conclude that this issue was a potential regulatory non-compliance associated with the maintenance rule. This issue should have been resolved before the implementation of Rev. 17 of SAP-0999, which would have prevented this finding.

Enforcement: Inspectors did not identify a violation of regulatory requirements associated with this finding.

EXIT MEETINGS AND DEBRIEFS

The inspectors verified no proprietary information was retained or documented in this report.

- On May 23, 2019, the inspectors presented the biennial problem identification and resolution inspection results to Mr. George Lippard and other members of the licensee staff.

DOCUMENTS REVIEWED

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
71152B	Corrective Action Documents	CR-12-00771 CR-12-02287 CR-14-00112 CR-16-00972 CR-16-01863 CR-16-04546 CR-16-04550 CR-16-04621 CR-16-04645 CR-16-04664 CR-16-04946 CR-16-05107 CR-16-06015 CR-17-00223 CR-17-00537 CR-17-00662 CR-17-00719 CR-17-01602 CR-17-01611 CR-17-01956 CR-17-02095 CR-17-02097 CR-17-02428 CR-17-02586 CR-17-02587 CR-17-02713 CR-17-02759 CR-17-02797 CR-17-03086 CR-17-03117 CR-17-03479 CR-17-03492		

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
		CR-17-03614		
		CR-17-03942		
		CR-17-04096		
		CR-17-04261		
		CR-17-04460		
		CR-17-04657		
		CR-17-05192		
		CR-17-05231		
		CR-17-05095		
		CR-17-05300		
		CR-17-05534		
		CR-17-05588		
		CR-17-05860		
		CR-17-05877		
		CR-18-00571		
		CR-18-00623		
		CR-18-00685		
		CR-18-00686		
		CR-18-00872		
		CR-18-01088		
		CR-18-01112		
		CR-18-01116		
		CR-18-01394		
		CR-18-01427		
		CR-18-01428		
		CR-18-01475		
		CR-18-02378		
		CR-18-03105		
		CR-18-03208		
		CR-18-03442		
		CR-18-03940		
		CR-18-04083		
		CR-18-04237		
		CR-18-05037		

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
		CR-18-05336 CR-19-00337 CR-19-00393 CR-19-01213 CR-19-01436 CR-19-01653 CR-19-01735		
71152B	Corrective Action Documents	RCA-16-04801	Inadequate Isolation Between Chiller Room and Chilled Water Pump Room	11/01/2016
71152B	Corrective Action Documents	RCA-17-04195	Issues with Licensed Operator Training Programs	1/22/2018
71152B	Corrective Action Documents Resulting from Inspection	CR-19-01707 CR-19-01732 CR-19-01735 CR-19-01738 CR-19-01817 CR-19-01867 CR-19-01868 CR-19-01870 CR-19-01891 CR-19-01896 CR-19-01897 CR-19-01898 CR-19-01899 CR-19-01906 CR-19-01907 CR-19-01910		
71152B	Drawings	D-302-085	Piping System Flow Diagram - Emergency Feedwater	51
71152B	Drawings	D-302-611	Piping and System Flow Diagram - Component Cooling	41
71152B	Drawings	D-302-612	Piping and System Flow Diagram - Component Cooling	28
71152B	Drawings	D-302-613	Piping and System Flow Diagram - Component Cooling	21
71152B	Drawings	D-302-614	Piping and System Flow Diagram - Component Cooling	16
71152B	Drawings	E-206-061	Vital AC-DC System, Sheets 1, 2 and 3	
71152B	Drawings	E-206-062	Electrical One Line and Relay Diagram, Vital DC System,	

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
			Sheets 3 and 4	
71152B	Engineering Changes	ECR 50695E	EFW Flow Margin Improvement	07/07/2016
71152B	Miscellaneous		Welder Performance Qualification Record for Welded ID No. SI-68	04/03/2017
71152B	Miscellaneous		System Health Reports for Emergency Feedwater	03/14/2017, 08/21/2017, 03/26/2018, 09/13/18, 02/28/2019
71152B	Miscellaneous		Cycle 23 Maintenance Rule 50.65(a)(3) Evaluation	10/06/2018
71152B	Miscellaneous		System Health Report - DC Distribution	08/01/2016
71152B	Miscellaneous		2019 Pre-PI&R Self-Assessment	4/2/2019
71152B	Miscellaneous		VC Summer Unit 1 Quality Assurance Program Description	4
71152B	Miscellaneous		System Health Reports for Component Cooling System	3/14/2017, 8/21/2017, 3/22/2018, 9/13/2018, 2/28/2019
71152B	Miscellaneous	QA-AUD-201810	Quality Assurance Audit of Station Operations	10/2/2018
71152B	Operability Evaluations	CR-17-05534, Action 001		
71152B	Procedures	EMP-115.005	Removal and Reinstallation of Battery Cells	7
71152B	Procedures	ES-0514	Implementation of the Maintenance Rule	7
71152B	Procedures	ES-0514D	Maintenance Rule - Performance Monitoring	7
71152B	Procedures	ES-0514G	Maintenance Rule - Periodic (a)(3) Assessment	1
71152B	Procedures	MMP-101.002	Minor Corrective Maintenance	4
71152B	Procedures	MMP-320.001	Component Alignment and Coupling Maintenance	15
71152B	Procedures	NL-102	Processing Regulatory Documents	25
71152B	Procedures	OEG-01	Operating Experience Guidelines	6
71152B	Procedures	PMP-300	ECR Work Order Development and Planning	4
71152B	Procedures	QSG-011	Employee Concerns Program Process	3
71152B	Procedures	QSP-106	Nuclear Oversight Audit and Surveillance Activities	22

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
71152B	Procedures	QSP-204	Quality Control Inspection	16
71152B	Procedures	SAP-0133	Design Control Implementation and Interface	16
71152B	Procedures	SAP-0157	Maintenance Rule Program	2
71152B	Procedures	SAP-0999	Corrective Action Program	Revs 11 and 14 through 18
71152B	Procedures	SAP-0999 CAPG-01	Corrective Action Program Guidelines	19 and 20
71152B	Procedures	SAP-0999B	CR Review Team (CRRT)	0 and 1
71152B	Procedures	SAP-0999C	Management Review Team (MRT)	1
71152B	Procedures	SAP-0999D	Resolution of Quality Assurance Issues	1 and 2
71152B	Procedures	SAP-0999E	Corrective Action Review Board (CARB)	4
71152B	Procedures	SAP-1306	Employee Concerns Program	3
71152B	Procedures	SAP-1350	Self-Assessment and Benchmarking	10 and 11
71152B	Procedures	SAP-1351	Operating Experience (OE) Program	12
71152B	Procedures	SAP-1356	Cause Determination	7 and 8
71152B	Procedures	SAP-1356 CDG-01	Cause Determination Guideline	17 through 20
71152B	Procedures	SOP-210	Feedwater System	22
71152B	Procedures	SOP-211	Emergency Feedwater System	14
71152B	Procedures	SOP-311	125 VDC System	13
71152B	Procedures	STP-220.002	Turbine Driven Emergency Feedwater Pump and Valve Test	9
71152B	Procedures	VCS-NL-102	Processing Regulatory Documents	0
71152B	Procedures	WM-1.0	Welding Manual Procedure	16
71152B	Self-Assessments		SAP-1351 Operation Experience Program Self-Assessment	10/08/2018
71152B	Self-Assessments		Maintenance Rule Program Health Reports	June 2016, Sept. 2016, Jan. 2018, June 2018
71152B	Self-Assessments		Station Trend Report, Third Trimester 2018, Aggregate Analysis	
71152B	Work Orders	WO1705755	Work order to replace inverter gate drive card during outage	