



POLICY ISSUE

(Information)

May 1, 2020

SECY-20-0040

FOR: The Commissioners

FROM: Margaret M. Doane
Executive Director for Operations

SUBJECT: REACTOR OVERSIGHT PROCESS SELF-ASSESSMENT FOR
CALENDAR YEAR 2019

PURPOSE:

This paper presents the results of the U.S. Nuclear Regulatory Commission (NRC) staff's annual self-assessment of the Reactor Oversight Process (ROP) for calendar year (CY) 2019 and the staff's plans for the CY 2020 ROP self-assessment. As described in SECY-19-0037, "Reactor Oversight Process Self-Assessment for Calendar Year 2018," dated April 12, 2019 (Agencywide Documents Access and Management System (ADAMS) Accession No. ML19042A100), the staff performed a limited ROP self-assessment program for CY 2019. This paper does not address any new commitments or resource implications.

SUMMARY:

The objective of the annual ROP self-assessment program is to evaluate the effectiveness of the ROP and to identify any lessons learned for improvements. The results of the CY 2019 self-assessment indicate that the ROP was effective because it was implemented in accordance with applicable governance documents, met its intended outcomes, and met its goals of providing objective, risk-informed, understandable, and predictable oversight. As stated in SECY-19-0037, the staff performed a limited ROP self-assessment for CY 2019, to include ROP

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performance metrics, program area evaluations, and one effectiveness review only. This enabled the staff to complete a holistic review of the ROP self-assessment program as documented in SECY-20-0039, "Revisions to the Reactor Oversight Process Self-Assessment Program," dated April 30, 2020 (ADAMS Accession No. ML19218A133). The CY 2019 ROP performance metrics indicate that the ROP was implemented in accordance with program governance documents, and the ROP program area evaluations indicate that all four ROP program areas (inspection, assessment, significance determination process (SDP), and performance indicators (PIs)) continue to be effective. The staff is also currently conducting an effectiveness review of the 2015 changes to the cross-cutting issues (CCI) program.

BACKGROUND:

The ROP is an important feature of the NRC's approach to ensuring that U.S. commercial nuclear power plants operate safely and securely. A leading contributor to the effectiveness of the ROP is the opportunity for continuous feedback from both internal and external stakeholders. An important source of internal stakeholder feedback on implementation and effectiveness of the ROP is the self-assessment program. The ROP self-assessment program has been in place since the ROP was first implemented in April 2000, as approved by the Commission in Staff Requirements Memorandum (SRM)-SECY-00-0049, "Results of the Revised Reactor Oversight Process Pilot Program (Part 1)," dated March 28, 2000 (ADAMS Accession No. ML16180A453).

The ROP self-assessment program applies to all seven ROP cornerstones, (initiating events, mitigating systems, barrier integrity, emergency preparedness, public radiation safety, occupational radiation safety, and security) which are the essential safety and security aspects of plant operation measured by the ROP, and to all processes and procedures used to implement the ROP. The program includes an annual assessment to ensure that the staff reliably and consistently implement the ROP across all four NRC regional offices and NRC Headquarters.

As stated in SECY-19-0037, while the staff identified areas for improvement in the ROP self-assessment program and thus commenced a holistic review, the staff maintained that the current ROP self-assessment program was effective. Accordingly, the staff used the existing program governance documents to evaluate ROP effectiveness. Specifically, the CY 2019 ROP self-assessment was conducted using Inspection Manual Chapter (IMC) 0307, "Reactor Oversight Process Self-Assessment Program," dated November 23, 2015 (ADAMS Accession No. ML15216A347), and its appendices (Appendix A, "Reactor Oversight Process Self-Assessment Metrics," dated August 25, 2017; Appendix B, "Reactor Oversight Process Baseline Inspection Procedure Reviews," dated August 25, 2017; and Appendix C, "Reactor Oversight Process Self-Assessment Regional Peer Reviews," dated July 15, 2016) (ADAMS Accession Nos. ML17186A115, ML17165A508, and ML16147A455, respectively).¹

The ROP self-assessment consists of three program elements. The first element measures the effectiveness and implementation of the current ROP through the analysis of metrics and the performance of program area evaluations. The second element directs staff to monitor long-term revisions to the ROP and to perform effectiveness reviews of recent changes to the process. The third and final element directs the staff to perform focused assessments of

¹ These Inspection Manual documents have been revised to implement program improvements described in SECY-20-0039. The newly revised versions of IMC 0307 and its appendices will be used moving forward for the CY 2020 ROP self-assessment.

selected aspects of the ROP, including baseline inspection procedure (IP) assessments, and to conduct formal peer reviews of regional offices.

The staff issues an annual Commission paper containing the results of the staff's ROP self-assessment for the preceding CY. Additionally, NRC senior management briefs the Commission annually on the results of the ROP self-assessment and other topics related to the ROP following the Agency Action Review Meeting. This annual self-assessment fulfills the programmatic requirements in IMC 0307 and its appendices, as well as the requirements described in Appendix C, "Planned Program Reviews," to the NRC Strategic Plan, NUREG-1614, Volume 7, "Strategic Plan: Fiscal Years 2018–2022," issued February 2018 (ADAMS Accession No. ML18032A561).

CALENDAR YEAR 2019 ROP SELF-ASSESSMENT RESULTS:

The staff performed a limited-scope ROP self-assessment as described in SECY-19-0037. The results of the CY 2019 self-assessment indicate that the ROP was implemented in accordance with applicable governance documents, met its intended outcomes, and provided objective, risk-informed, understandable, and predictable oversight. The discussion below, categorized by self-assessment program element, details the CY 2019 ROP self-assessment results.

Element 1: Measure the Effectiveness of and Adherence to the Current ROP

The staff found that 22 of the 26 ROP performance metrics met the Green threshold, which is expected performance. The staff determined that the two metrics evaluated at the Red threshold did not indicate programmatic weaknesses. These two metrics are discussed in more detail below.

ROP Performance Metrics

The staff measured the effectiveness of, and adherence to, the current ROP program using objective metrics that are aligned with the NRC's Principles of Good Regulation (independence, openness, efficiency, clarity, and reliability) and described in IMC 0307, Appendix A. Appendix A to IMC 0307 employs a graded approach to measure performance with Green (expected performance), Yellow (performance requiring further evaluation), and Red (unexpected performance requiring staff action to correct) criteria for each metric. The ROP Performance Metric Report for CY 2019, dated March 11, 2020 (ADAMS Accession No. ML20064G913), provides data and staff analysis for each ROP metric.

The staff found the metric associated with "Responsiveness to ROP Feedback Forms" (efficiency performance metric 6 (E-6)) to be Red, but with significant improvement from the previous 2 years (when the metric was also Red). The staff received 47 new feedback forms in CY 2019 and dispositioned 29 of them within 12 months (62 percent, compared to the Green criterion of 90 percent). This closure rate for CY 2019 is almost three times the CY 2018 closure rate of 22 percent. As of February 1, 2020, 114 feedback forms remain in the backlog, about a 50 percent decrease from CY 2018. As discussed in SECY-19-0037, the current metric for ROP feedback forms is not an effective measure of staff efficiency in dispositioning internal stakeholder feedback. Accordingly, starting with CY 2020, the staff will measure its efficiency in this area via the new ROP data trending program, and has removed ROP metric E-6 from the formal set of ROP performance metrics. Any significant positive or negative trends in this focus area will be discussed in the annual ROP self-assessment SECY paper.

Throughout CY 2019, staff acted to decrease the feedback form backlog by issuing revisions to IMCs and IPs that had several feedback forms associated with them, as well as piloting of an improved feedback form process. Inspection Manual document revisions with the largest impact on lowering the backlog included IMC 0612, "Issue Screening," dated December 12, 2019 (ADAMS Accession No. ML19214A243) and its appendices and exhibits, and a number of attachments and appendices to IMC 0609, "Significance Determination Process," dated October 23, 2018 (ADAMS Accession No. ML18187A187). In November 2019, the staff successfully piloted a revised process that incorporates a semiannual regional screening and prioritization process for all feedback forms. This process change fosters relationship-building between program office and regional staff and aligns staff resources to address those proposed changes to IMCs or IPs that are expected to have the largest impact in increasing efficiency or improving implementation of the ROP inspection program. The staff continues to emphasize improvement in this area through timely revisions to Inspection Manual documents and continued improvement to the ROP feedback form process.

The second Red metric for CY 2019 was E-5, "Completion of Final Significance Determinations," which measures whether the staff finalizes inspection finding significance within 90 days from the date the licensee was notified of the preliminary significance. The Green criterion for the metric requires that the staff finalize 95 percent of Greater-than-Green (GTG) findings within 90 days or less. Because there were only two GTG findings for CY 2019, any one finding that exceeded the E-5 timeliness goal would turn the metric to Red. In CY 2019, one White finding at Clinton Power Station (ADAMS Accession No. ML19092A212) was finalized in more than 90 days. The staff extended the review timeline to appropriately consider over 2,000 pages of supplemental information provided by the licensee after the Regulatory Conference. Accordingly, the staff determined that this Red metric did not represent a programmatic weakness in the SDP. As described in SECY-20-0039, for CY 2020 and beyond, this metric has been revised to (1) measure the timeliness of the entire SDP (255 days), (2) update the metric thresholds to count discrete numbers of findings instead of percentages, and (3) include the population of potentially GTG findings in the metric count. The White finding at Clinton Power Station also would have exceeded the 255-day timeliness goal.

The single Yellow metric for CY 2019 was Openness (O)-5, "Issuance of ROP Public Meeting Notices and Summaries," which measures regional and headquarters staff timeliness in posting public meeting notices and summaries in accordance with the requirements in Management Directive 3.5, "Attendance at NRC Staff-Sponsored Meetings," dated December 4, 2019 (ADAMS Accession No. ML19350A643). For CY 2019, the staff noticed and summarized public meetings within established timeliness goals 91 percent of the time (the Green criterion is 95 percent). The large proportion of missed timeliness goals occurred because of inconsistencies for how less-formal public engagement activities (e.g., poster sessions, open houses) allowed by the performance-based requirements of IMC 0305, "Operating Reactor Assessment Program," dated November 25, 2019 (ADAMS Accession No. ML19256A191), are handled in terms of meeting notices and summaries. The staff has received clarification from the Office of Public Affairs and provided guidance on proper public meeting noticing and administration procedures for less-formal public engagement activities for plants in Columns 1 and 2 of the ROP Action Matrix. IMC 0305 will be revised in CY 2020 to clarify the requirements for noticing less-formal public engagement activities.

Lastly, the staff identified that the criteria for metric Clarity (C)-4, "Maintenance of ROP Governance Documents," was not well defined, had been measured differently over the past several years, and conflicted with the guidance in the Office of Nuclear Reactor Regulation (NRR) Office Instruction OVRST-102, "NRR Procedures for Processing Inspection Manual

Documents” (ADAMS Accession No. ML19309C259), that provides for a five-year IMC/IP review frequency, instead of the four-year frequency stated in ROP metric C-4. Accordingly, the staff did not evaluate metric C-4 for CY 2019. The staff has taken action to (1) revise metric C-4 to align with the review frequency stated in OVRST-102 (part of the changes to the ROP metrics described in SECY-20-0039), (2) educate IMC and IP owners on the IP/IMC review requirements, and (3) better identify and track all IMCs and IPs that require periodic reviews in CY 2020 to ensure that they are completed in a five-year interval or as otherwise required.

ROP Program Area Evaluations

The staff completed the ROP program area evaluations in accordance with the second aspect of Element 1 of the self-assessment process. The staff used the annual ROP metrics report and other relevant feedback to evaluate the effectiveness of each of the four major program areas of the ROP: the PI program; the inspection program; the SDP; and the assessment program. The program area evaluations also summarize changes to the program, current and future focus areas, and recommendations for improvement. The discussion below summarizes the ROP program area evaluations, and the enclosure to this paper provides the evaluations in full.

The PI program continued to provide insights into plant safety and security in CY 2019. NRC inspectors independently verified that plants were operated safely and securely. NRC inspectors completed the baseline inspection program for all four NRC regions and the Office of Nuclear Security and Incident Response within the allocated resources. The SDP continued to be an effective, risk-informed process for determining the safety and security significance of inspection findings identified in the ROP. As of February 25, 2020, the NRC documented 422 inspection findings (includes licensee-identified findings) for CY 2019, with more than 99 percent determined to be of very low safety or security significance (Green).² The assessment program continued to ensure that the NRC and licensees provided appropriate regulatory oversight to address performance issues commensurate with their significance. No deviations to the ROP Action Matrix were issued during the year. During CY 2019, Pilgrim Nuclear Power Station transitioned from Column 4 to Column 1 of the ROP Action Matrix on March 4, 2019, and permanently ceased operations on May 31, 2019.

Element 2: Monitor ROP Revisions and Assess Effectiveness of Recent Program Changes

Element 2 of the ROP self-assessment program monitors the status of longer term ROP changes resulting from evaluations of selected supplemental and reactive inspections. Additionally, Element 2 of the program assesses the effectiveness of recent changes to the ROP to ensure that the intended results have been realized and to evaluate any unintended consequences. The effectiveness review topic for the CY 2019 ROP self-assessment was the cross-cutting issues program. The results of this review are described below.

Monitoring ROP Revisions and ROP Lessons Learned

As required by IMC 0307, the staff monitored the status of longer term ROP programmatic changes resulting from more complex ROP feedback, including recommendations from independent evaluations, internal and external audit reports, supplemental and reactive

² See the “Inspection Finding Trends and Monitoring via Data Analytics” section of this SECY for more information regarding the staff’s analysis of the downward trend in inspection findings.

inspection lessons learned reports, regional peer review reports, and other significant feedback. The staff tracks the status of these longer-term program recommendations in the ROP Lessons Learned Tracker with a focus on timely evaluation and disposition. In CY 2019, the staff closed a significantly higher number of program recommendations than were closed in CY 2018. Specifically, the staff closed 35 program recommendations from the tracker in CY 2019, including those from a recent special inspection team at LaSalle County Station, a 2014 SDP review, recent regional peer reviews, and various supplemental inspection evaluations. In the second year of implementation of the tracker, the staff continues to see improved efficiency and effectiveness in dispositioning this important feedback for the ROP. This lessons-learned tracker, in conjunction with the ROP feedback form process, ensures that ROP improvement recommendations are gathered, assessed, and tracked to completion.

Effectiveness Review of the Cross-Cutting Issues Program

In CY 2019, the staff reviewed the effectiveness of changes made to the CCI program in 2015. The CCI program is governed by IMC 0305 and IMC 0310, "Aspects within the Cross-Cutting Areas," dated February 25, 2019 (ADAMS Accession No. ML19011A360). The team reviewed ROP program data, plant-specific performance data, and CCI information, and sought extensive internal stakeholder feedback. The review team also provided opportunities for public comment on the CCI program during the August, September, and November 2019 ROP monthly public meetings, then again at a January 2020 public meeting designated to discussions of preliminary outcomes of the CCI program effectiveness review. This review is ongoing.

Element 3: Perform Focused Assessments

As stated in SECY-19-0037, the staff performed a limited ROP self-assessment for CY 2019, to include ROP performance metrics, program area evaluations, and one effectiveness review only. Accordingly, the staff did not perform a focused assessment in CY 2019.

Other Related Activities

Inspection Finding Trends and Monitoring via Data Analytics

In CY 2018, NRR's Operating Experience Branch staff initiated an analysis of inspection finding trends, having noted a downward trend in ROP inspection findings per reactor unit since 2011. The staff summarized its initial analysis in response to SRM-M190620, "Staff Requirements— Briefing on Results of the Agency Action Review Meeting," dated June 26, 2019 (ADAMS Accession No. ML19178A030), the substance of which appears in a memo titled "Analysis of Inspection Findings Trend at Nuclear Power Reactors between 2015 and 2018," dated August 15, 2019 (ADAMS Accession No. ML19225D281). The downward trend continued through CY 2019 as the NRC documented approximately 6.3 inspection findings per operating reactor site, compared with approximately 12.4 inspection findings per operating reactor site in 2015. The downward trend is evident across the baseline IPs, the seven ROP cornerstones, and all four NRC regions.

The number of baseline inspection hours has not changed. Inspectors continue to monitor licensee performance, communicate their observations to licensees, and identify performance deficiencies that are entered into licensee corrective action programs for further evaluation regardless of whether they screen through the process as inspection findings. Further, in the NRC's "Accident Sequence Precursor (ASP) Program 2019 Annual Report," dated February 2020 (ADAMS Accession No. ML20049G017), the staff noted that a review of the ASP program

data and trends for the past decade indicates that current agency oversight programs remain effective, as shown by decreasing 10-year trends in the occurrence rate of all precursors and the decreasing overall risk from precursors. The report also stated that the number of licensee event reports and potential precursors identified continues to decrease to historical lows.

The staff identified several factors that may be contributing to the downward trend in inspection findings. These factors include but are not limited to: several ROP adjustments; increased engagement by internal and external stakeholders during the findings process; improved licensee performance; and implementation of MD 8.4, "Management of Backfitting, Forward Fitting, Issue Finality, and Information Requests," dated September 20, 2019 (ADAMS Accession No. ML18039B087). The staff cannot quantify the relative contributions of these factors to the aforementioned trend. As discussed in this paper, analysis of the ROP performance metrics and the results of the ROP self-assessment program continue to indicate that the ROP is effective and being implemented in accordance with program governance documents.

The staff continues to monitor disputed violations, self-revealed findings versus NRC-identified findings, and look for additional data-driven ways to monitor licensee performance and the health of the ROP. To support this effort, the staff continues to support the core team of the Mission Analytics Portal project headed by Embark Venture Studio in NRR. Working with staff from the Office of the Chief Information Officer, the staff has developed prototype dashboards for inspection findings, operating experience, and industry scram trends. The staff is also developing prototype dashboards to visualize ROP program data and enable continuous monitoring of relevant ROP program data by IP leads, resident inspectors and regional staff, staff supporting ROP self-assessment activities, and eventually publicly available data analytics. The continuous monitoring of data indicative of ROP health ensures that any significant trends are identified and addressed in a timely manner. This was an area of emphasis for the staff in CY 2019 and will continue to be so in the future to ensure continued effective implementation of the ROP.

Construction ROP and Transition to New Reactor Oversight

As discussed in SECY-19-0039, "Construction Reactor Oversight Process Self-Assessment for Calendar Year 2018," dated April 21, 2019 (ADAMS Accession No. ML19037A311), SECY papers communicating the Construction ROP (cROP) self-assessment beyond CY 2019 will focus on cROP development activities and emerging issues related to new reactor construction sites, instead of repeating information associated with the Vogtle Electric Generating Plant (Vogtle), Units 3 and 4. Going forward, the reduced-scope cROP self-assessment discussed in SECY-19-0039 will be included in the annual ROP self-assessment SECY paper.

The staff established the Vogtle Project Office (VPO) as part of the merger of the Office of New Reactors and NRR. VPO is responsible for the licensing, project management, and inspection, test, analysis, and acceptance criteria (ITAAC) resources to support activities related to construction and startup of Vogtle, Units 3 and 4. VPO has been identifying and mitigating risks to the first successful completion of the process described in Title 10 of the *Code of Federal Regulations* (10 CFR) Part 52, "Licenses, Certifications, and Approvals for Nuclear Power Plants." To aid its efforts, VPO developed an interactive dashboard using real-time data and metrics to modernize, inform, and streamline its decision-making process.

The staff has performed over 39,000 direct inspection hours at Vogtle, Units 3 and 4, with no findings of GTG significance. The staff met all applicable cROP self-assessment program

metrics for 2019. With dynamic changes in the licensee's construction activities, the staff is optimizing its inspection planning, consistent with the NRC's Principles of Good Regulation. The staff described recent adjustments to enhance inspection flexibility at Vogtle in a memorandum titled "Update to Targeted Inspection, Tests, Analyses and Acceptance Criteria for Vogtle Electric Generating Plant, Units 3 and 4," dated February 10, 2020 (ADAMS Accession No. ML19329C875). This enhanced inspection flexibility will help ensure that resources are focused on risk-significant areas that provide the most safety benefit.

With the first potential completion of the 10 CFR Part 52 process at Vogtle, valuable lessons learned for the AP1000 will be incorporated to further improve the cROP and facilitate knowledge management for use in new and advanced reactors. The experience gleaned from the Vogtle construction highlights that adopting a more flexible approach to ITAAC inspections allows the staff to better focus on risk-significant activities, maintain adequate coverage of the broad range of ITAAC-related activities, and more efficiently conduct inspections. Additionally, the staff realizes value in the real-time data and analysis provided through the Vogtle dashboard to apply modern, risk-informed, and timely approaches to decision-making. Finally, the staff will consolidate lessons learned and best practices from Vogtle construction to improve the cROP going forward.

ROP for New Reactors

In SECY-18-0091, "Recommendations for Modifying the Reactor Oversight Process for New Large Light Water Reactors with Passive Safety System Such as the AP1000 (Generation III+ Reactor Designs)," dated September 12, 2018 (ADAMS Accession No. ML17166A238), the staff recommended eliminating Mitigating Strategies Performance Index (MSPI) PIs for new reactors, while maintaining the other 12 PIs that were previously confirmed to readily apply to new reactor designs with minimal revision to the PI guidelines in Nuclear Energy Institute (NEI) 99-02, "Regulatory Assessment Performance Indicator Guidelines," Revision 7, dated August 31, 2013 (ADAMS Accession No. ML13261A116). The staff recommended that no new PIs be developed to replace the MSPIs, pending availability of more AP1000 performance data. The staff also recommended minimal changes to the baseline inspection program in terms of samples and some inspection procedures frequencies, since the AP1000 design has fewer components to select as samples, the components have lower baseline risk estimates, and many components are only accessible during refueling outages. In SRM-SECY-18-0091, dated February 24, 2020 (ADAMS Accession No. ML20055G004), the Commission approved the staff's recommendations. The staff will make the necessary revisions to the baseline inspection program after notifying the Commission in accordance with the requirements in MD 8.13, "Reactor Oversight Process," dated January 16, 2018 (ADAMS Accession No. ML17347B670).

Resolution of Very Low Safety Significance Issues

The Very Low Safety Significance Issue Resolution (VLSSIR) process began as an initiative under ROP Enhancement but transitioned to a separate working group in November 2018 because the scope of the effort extended beyond ROP into licensing and backfit. A cross-functional working group, which included NRC Headquarters and regional staff, developed recommendations for the resolution of very low safety significance issues. The VLSSIR working group developed these recommendations based on suggestions from both internal and external stakeholders to improve NRC processes so that very low safety significance issues are promptly resolved without an excessive use of resources, thereby enabling the NRC and licensees to better focus resources on issues of greater safety significance.

As a result of this work, the staff revised IMC 0612, Appendix B, “Additional Issue Screening Guidance,” and IMC 0611, “Power Reactor Inspection Reports,” to close very low safety significance issues that involve licensing basis questions that cannot be resolved without significant effort early in the inspection process. The NRC issued the revisions to IMC 0612, Appendix B, on December 12, 2019, (ADAMS Accession No. ML19247C384), and to IMC 0611 on January 7, 2020 (ADAMS Accession No. ML19317F647). These revisions went into effect on January 1, 2020, and January 7, 2020, respectively, so that they would be in place for the entire CY 2020 inspection cycle. The staff plans to conduct an effectiveness review on the VLSSIR process beginning in CY 2021.

Modernizing ROP Inspection and Assessment through Automation and Data Analytics

In January 2019, the staff introduced the capability to automatically generate inspection reports from data entered into the Reactor Program System (RPS)—Inspections data management system. Previously, the staff created inspection reports in Microsoft Word and manually entered report information into RPS—Inspections to track inspection completion and results. That information was audited for accuracy, including annual verification of baseline inspection completion for all operating reactors. The automated inspection report generator feature in RPS—Inspections has allowed the staff to streamline the inspection report creation and approval process, ensure consistency in formatting between regions, provide in-depth tracking of samples, eliminate the need to manage a separate inspection findings database, and enable the building blocks for future improvements in the management and use of ROP program data for data-driven decision-making. Throughout CY 2019, the staff continued to improve the inspection report generator by incorporating feedback from headquarters and regional staff. The staff also introduced the capability to automatically generate security-related and supplemental inspection reports.

In addition to the automated inspection report function, the staff completed several major RPS—Inspections system revisions in CY 2019 that increased the reportability and processing efficiency of ROP program data. Increased system functionality included the capability to document items that fall under the VLSSIR process, as well as several new customizable data reports. These reports improve program office and regional staff capability to monitor ROP program performance data efficiently and effectively and to support external data reporting requirements.

The staff also continues to develop interactive dashboards to monitor and trend data for a variety of ROP program areas, as discussed in the “Inspection Finding Trends and Monitoring via Data Analytics” section of this paper. The staff has also worked with the Office of the Chief Information Officer to conduct a pilot program to provide resident inspectors at select operating reactor sites in each region with portable tablets. The aim of this demonstration is to increase the efficiency and effectiveness of on-site inspection through increased accessibility of licensee information and NRC governance documents such as IMCs and IPs.

CALENDAR YEAR 2019 ROP SELF-ASSESSMENT CONCLUSIONS:

The self-assessment results for CY 2019 indicate that the ROP provided effective oversight of operating reactors by meeting the program goals, achieving its intended outcomes, and identifying areas for improvement. The ROP ensured openness and effectiveness in supporting the agency’s mission and its strategic goals of safety and security, and the staff completed the planned program reviews in accordance with IMC 0307 and its appendices, as well as

Appendix C to the NRC Strategic Plan for 2018—2022 (NUREG-1614, Volume 7).

PLANNED ROP SELF-ASSESSMENT ACTIVITIES IN CALENDAR YEAR 2020

The staff issued SECY-20-0039 to notify the Commission of planned improvements to the ROP self-assessment program and plans to implement the revised program in CY 2020. Under Element 1, the staff will implement the revised ROP performance metrics, ROP data trending program, ROP program area evaluations, and the new ROP implementation audit in Region 4 (the last regional peer review under the previous self-assessment program was completed in Region 3 in 2018). Under Element 2, the staff will conduct effectiveness reviews of significant ROP changes and evaluate supplemental and reactive inspections as necessary and as required by ROP governance documents. Specifically, the staff plans to conduct an effectiveness review of recent changes to the degraded cornerstone column (Column 3) of the ROP Action Matrix. Under Element 3, the staff will continuously monitor the baseline inspection program for any significant trends and take necessary action to address any identified issues. The first baseline inspection program review is scheduled for CY 2021.

COORDINATION:

The Office of the General Counsel has reviewed this Commission paper and has no legal objection. The Office of the Chief Financial Officer has reviewed this Commission paper for resource implications and has no objections.

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Enclosure:
Reactor Oversight Process
Program Area Evaluations

SUBJECT: REACTOR OVERSIGHT PROCESS SELF-ASSESSMENT FOR CALENDAR
YEAR 2019 DATED: MAY 1, 2020

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*Via email SECY-012

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