b:\wp\approved\pgp\0PGP03-ZX-0002.060 Effective Date: 10/17/94 Print Date: 9/5/94	**0PGP03-ZX-0002**	**Rev. 6** General	Page 1 of 30
Condition Reporting Process			
Quality	Non Safety-Related	Usage: Referenced	Effective Date: 10/17/94

M. A. Covell	N/A	N/A	Nuclear Assurance
PREPARER	TECHNICAL	USER	COGNIZANT DEPT

Table of Contents

35

Table of Contents (continued)

1.0 Purpose and Scope

1.1 This procedure defines the process for identification, classification, trending, reporting, and timely correction of Conditions (hardware/programmatic) that could impact the safe and reliable operation of the plants. Conditions that involve Safeguards Information are excluded from this process.

1.2 This procedure defines a process to ensure that Conditions Adverse to Quality are identified, cause is determined, and corrected to prevent recurrence.

1.3 This procedure provides a method to ensure that all Conditions are identified and corrected at the lowest level of responsibility.

2.0 Definitions

2.1 Actions

2.1.1 Compensatory Action - Action taken to temporarily address a deficient condition until permanent corrective actions can be implemented.

2.1.2 Corrective Action - Action taken to prevent recurrence of a condition or event or to eliminate or minimize the identified causal factors of the condition.

2.1.3 Remedial Action - Action taken after a condition is identified that restores it to an acceptable condition or capability, but may not be the only actions needed to prevent recurrence of the condition.

2.2 Adverse Trend - Continuance of an identified trend beyond established thresholds of acceptance. Adverse trends are Significant Conditions Adverse to Quality.

2.3 Cause

2.3.1 Apparent Cause - The readily understood, evident, or obvious cause of a Condition.

2.3.2 Root Cause - Identified fundamental cause(s), that, if corrected, will prevent recurrence of a Condition.

2.4 Condition - The existence, occurrence, or observation of a situation that requires further review and/or evaluation for resolution.

2.4.1 Non-valid Condition - Determination made by a supervisor or the Condition Review Group regarding an observation or situation that is not based on logic, facts, or evidence.

2.4.2 Valid Condition - Determination made by a supervisor or the Condition Review Group regarding an observation or situation based on logic, facts, or evidence.

2.4.3 Condition Not Adverse to Quality (CNAQ) - A valid Condition which requires attention but does not meet the definition of a Condition Adverse to Quality. See Addendum 2 for examples.

2.4.4 Condition Adverse to Quality (CAQ) - Any failure, defect, deviation, malfunction, or deficiency of plant equipment/materials, procedures or personnel which has or would have an effect on the safe and/or reliable operation of the Station and/or its personnel.

2.4.4.1 Condition Adverse to Quality-Station Level (CAQ-S) - Conditions meeting the guidelines for Station level of significance as described in Addendum 2.

2.4.4.2 Condition Adverse to Quality-Department Level (CAQ-D) - Conditions meeting the guidelines for Department level of significance as described in Addendum 2.

2.4.5 Significant Condition Adverse to Quality (SCAQ) - Conditions that:

2.4.5.1 Are determined to be reportable (routine reports to the NRC or other agencies are excluded). Conditions that have a direct adverse effect on the safety and reliability of the Station per the Operating License and Technical Specifications are included. See Addendum 2 for examples.

2.4.5.2 Involve administrative, procedural or operational errors that demonstrate misunderstanding of or noncompliance with operational, regulatory, or nuclear safety requirements. See Addendum 2 for examples.

2.4.5.3 Have been determined to be an Adverse Trend.

2.5 Condition Report (CR) - A form used to identify Conditions.

2.6 Condition Review Group (CRG) - A management body, consisting of the Plant Managers and Managers or designees from the Licensing, Nuclear Assurance, Plant Operations, Maintenance, Technical Services, Design Engineering. and System Engineering Departments. The Group establishes procedures for and provides oversight of the Station Corrective Action Program.

2.7 Corrective Action Program (CAP) - A program that establishes the parameters for identification, reporting, correcting and trending of Conditions.

2.8 Department CAP Process - A process maintained by a department for handling the identification and disposition of Conditions.

2.9 Generic Implications - Commonalities between causal factors or conditions e.g., Common mode failures.

2.10 Investigator's Manual - A document that includes details on performing causal factor analyses, developing corrective actions, and formatting investigation reports.

2.11 Operability Review - The activity performed by the Shift Supervisor or designee to determine whether an identified Condition adversely affects the capability of a component required by Technical Specifications to perform its specified safety function.

2.12 Originator - Any person who identifies a condition.

2.13 Owner - The organization and individual responsible/accountable for resolution of Conditions including implementation and effectiveness monitoring of corrective actions.

2.14 Promptly - The need for action based on the safety significance. Typically, as soon as practical and within a given work shift.

2.15 Reportability Review - The process used to determine if a condition is reportable to an outside agency, usually documented by memorandum.

2.16 SCAQ Investigator - Any person attaining Certification 0169 or equivalent as approved by the CAP Administrator or designee.

3.0 Responsibilities

3.1 ANY PERSON, the Originator, who identifies a Condition is responsible for resolving that Condition or promptly reporting the Condition to a supervisor. If a supervisor is not available and operability or reportability concerns exist, promptly report the Condition to a Control Room Shift Supervisor. The Originator may keep apprised of the Condition through to final resolution by communication with the Condition Owner or review of the CAP Database.

3.2 Supervisors are responsible for reviewing, validating, and screening identified Conditions and taking action to correct those Conditions.

3.3 Shift Supervisors or designees are responsible for performing Operability/Reportability determinations, evaluating the Condition as a Mode Restraint, if applicable; and ensuring adequate compensatory/remedial actions are initiated to correct Conditions which affect operability.

3.4 Condition Review Group is responsible for condition significance determination, establishment of an Owner, approving extensions for Station Level CAQ and SCAQ evaluations/investigations and corrective actions, reviewing investigations conducted by an Event Review Team, reviewing Nuclear Assurance audits and surveillances of the Corrective Action Program, approving investigations of adverse trends, and review of Owner assessments of corrective actions.

3.5 Owners are responsible for the resolution of Conditions including implementation, effectiveness monitoring of all corrective actions, and retention of objective evidence of completed actions.

3.6 The CAP Administrator is responsible for administration of the Station Corrective Action Program and the establishment and maintenance of an event and cause trending database.

4.0 Procedure

> NOTE
> This Corrective Action process emphasizes correcting Conditions at the lowest level of responsibility.

4.1 Condition Identification

4.1.1 Upon identification of a Condition, the Originator substantiates that the Condition requires further attention. This is determined by his/her judgement, consultation with others who may have more knowledge of the Condition and its potential effect, and/or examples provided in Addendum 2.

4.1.2 If the Condition is determined to require no further attention, no action is required.

4.1.3 For Conditions needing attention, but determined not to require documentation, the Originator takes the appropriate action to correct the Condition.

4.1.4 For Conditions needing attention and requiring documentation, the Originator completes the information requested in the "Originator" section of a Condition Report (CR) form and presents the completed form to a supervisor or manager. See Addendum 6 for sample CR form.

4.1.5 For Conditions where security concerns are obvious or perceived, contact the Security Force Supervisor immediately and deliver the CR form to Security.

4.2 Condition Validation and Operability/Reportability Screening

4.2.1 The Supervisor promptly validates the Condition based on discussion with the Originator, his/her professional judgement, consultation with others who may have more knowledge of the Condition and its potential effect, and/or examples provided in Addendum 2. If applicable, check the appropriate sub-block (e.g., QA Finding, Regulatory Issue, Work Order, etc.) in the Supervisor block of the CR form.

4.2.2 The Supervisor, for CRs which he/she has determined to document a Non-Valid Condition, discusses his/her justification for the non-valid determination with the Originator.

4.2.2.1 If the Originator agrees with the Supervisor's Non-Valid Condition justification, no further action is required.

4.2.2.2 If the Originator disagrees with the Supervisor's Non-Valid Condition justification, then a written basis for the determination shall be attached to the CR form. The Supervisor shall have the CR form delivered to the Control Room. In addition, the Originator has the option to raise the issue with the next level of management or use any other concerns identification process.

4.2.3 The Supervisor promptly screens Valid Conditions for Operability and Reportability considerations based on his/her professional judgement, consultation with others who may have more knowledge of the Condition and its potential effect, and/or guidance provided in Addendum 3 and Addendum 4. Identified Operability or Reportability requirements shall be recorded in the appropriate blocks of the "Supervisor" section of the CR form.

4.2.4 The Supervisor determines the Condition level using the examples in Addendum 2. Condition level is recorded in the "Supervisor" section of the CR form.

4.2.5 The Supervisor determines the preliminary Condition Event Code(s) using the STP Trend Codes Book for the Condition and records this code in the "Supervisor" section of the CR form.

4.2.6 The Supervisor obtains a CR number and records it on the CR form. (CAP Database entries will be required to obtain a CR number.)

4.2.7 Process CRs categorized as a Condition Not Adverse to Quality (CNAQ) or CAQ-Department Level (CAQ-D) in accordance with Section 4.5.

4.2.8 For CAQ-Station Level (CAQ-S) CRs that have no Operability or Reportability requirements, the Supervisor determines the appropriate Department Owner and, upon acceptance by the Owner, forwards the CR to the Owner for processing in accordance with Section 4.6. The Owner's Department and individual accepting ownership for the Department are recorded in the appropriate blocks of the "Supervisor" section of the CR form.

4.2.9 The Supervisor ensures that CAQ-S CRs that may have Operability or Reportability requirements and SCAQ CRs are promptly hand delivered to the appropriate Control Room Shift Supervisor for processing. Telephone notification to the appropriate Control Room Shift Supervisor is required when there may be delays encountered in delivery of the CR form to the Control Room.

4.3 Operability and Reportability Determination

NOTE

The Shift Supervisor may obtain assistance from other organizations to make Operability and Reportability determinations. The responsibility for these determinations shall remain with the Shift Supervisor.

4.3.1 For all Conditions delivered to the Control Room, the Shift Supervisor shall determine Operability and Reportability. (See Addenda 3 and 4.) Identified Operability or Reportability requirements shall be recorded in the appropriate blocks of the "Shift Supervisor" section of the CR form. The reporting criteria and date of the notification shall be annotated on the form.

4.3.1.1 The time between validity determination of the nonconformance and the initial Operability screening shall be commensurate with the safety significance of the nonconformance, but should normally not exceed 72 hours. Initial Operability screening for conditions with allowed outage time less than 72 hours, and which have a shutdown action statement, should normally be completed within 24 hours. The allowed outage time for a condition found to be inoperable begins at the time that the Shift Supervisor determines the condition to be inoperable.

4.3.1.2 Reportability determinations shall normally be completed within 4 working days of identifying the Condition. The Shift Supervisor is responsible for making immediate notifications. Responsibility for other reports shall be established by the CRG.

4.3.1.3 The results of Operability or Reportability reviews performed in support of the Shift Supervisor may be presented verbally to the Shift Supervisor or by a written memorandum. Written memoranda shall contain the following information and be hand delivered or sent electronically to the Shift Supervisor.

4.3.1.3.1 Description - A brief description of the Condition for which the review is being performed.

4.3.1.3.2 Criteria - The review should indicate the criteria considered in making the review.

4.3.1.3.3 Determination - The review should clearly state the recommendation and include a brief basis for the decision.

4.3.1.3.4 Other notes - Include the name of the person making the review. Include any other information relevant to the review.

- Written Operability or Reportability reviews shall be attached to the original CR form.

4.3.2 The Shift Supervisor shall determine if the Condition described in the CR is a Mode Restraint, if applicable. Identified Mode Restraints shall be recorded in the appropriate blocks of the "Shift Supervisor" section of the CR form.

4.3.3 CRs for which Shift Supervisor requirements have been completed, shall be picked up from the Control Rooms by the CAP Administrative Group and forwarded to the CRG.

4.3.3.1 For CRs awaiting Operability or Reportability determination, copies shall be made for evaluation by the CRG. The original CR shall remain in the Control Room until all Shift Supervisor activities are completed.

4.3.3.2 For CRs that were initially determined by the Supervisor to be Non-Valid Conditions, but with which the Originator has disagreed and forwarded directly to the appropriate Control Room Shift Supervisor, the CAP Administrative Group shall make CAP Database entries.

4.4 CAQ Significance Determination and Establishment of Ownership

4.4.1 The CRG shall review the Condition (SCAQ/CAQ-S) to validate and determine the Condition significance. The CRG records the Condition significance in the appropriate blocks in the "CRG" section of the CR form.

4.4.2 The CRG, for CRs which they determined to be Non-Valid Conditions, shall forward a copy of the CR to the Originator via an appropriate level of management. Written justification for this determination shall be attached to the CR form. The CAP Administrative Group shall record the Non-Valid Condition justification and CR closure in the CAP Database, and submit the original CR form to RMS for retention.

4.4.3 Following validation and determination of the Condition significance, the CRG reviews any remedial and compensatory actions taken for adequacy and establishes the Condition Owner. The CRG records the Owner's Department, the individual accepting ownership for the Department, and the Condition evaluation/investigation completion due date in the appropriate blocks of the "CRG" section of the CR form.

4.4.4 The CAP Administrator enters the CAQ significance determination, ownership, and due date into the CAP Database.

4.4.5 CRs categorized as CAQ-S are processed in accordance with Section 4.6.

4.4 6 CRs categorized as SCAQ are processed in accordance with Section 4.7.

4.5 CAQ-Department Level (CAQ-D)/ Condition Not Adverse to Quality (CNAQ) Resolution

4.5.1 After validating, the Supervisor establishes ownership based on the identified Condition. The Owner's Department and individual accepting ownership for the Department are recorded in the appropriate blocks of the "Supervisor" section on the CR form.

4.5.2 The Owner validates the Condition Event Codes. The individual responsible for this action should interface with the Originator of the Condition and others responsible for corrective actions. The Condition Event Code(s) are recorded in the appropriate block of the "Owner Closure" section of the CR form.

4.5.3 The Owner ensures that information recorded in the "Originator", "Supervisor", and "Owner Closure" sections of the CR form is entered into the CAP Database to allow Condition tracking and trending.

4.5.4 The Owner resolves the Condition.

4.6 CAQ-Station Level (CAQ-S) Resolution

4.6.1 The Owner shall review the Condition described in the CR and assign for evaluation. The evaluation shall be completed within 30 days of the date the Condition was identified.

4.6.2 Evaluation of the Condition shall include event description, **APPARENT CAUSE** determination, and appropriate corrective actions and action due dates. The individual assigned responsibility to conduct the evaluation shall interface with the Originator and responsible implementing group(s). This information is recorded on the back of the CR form in the CAQ Evaluation Section.

4.6.3 For evaluations that will not be completed on time, the Owner shall request an extension from the CRG. If an extension is granted, the Owner shall update the CAP Database with the revised due date and explanation for the extension.

4.6.4 The Owner approves the completed evaluation and enters the Condition Event and Cause Codes and approval in the appropriate blocks in the "Owner Closure" section of the CR form.

4.6.5 The Owner of the CR obtains concurrence on corrective actions to be implemented by other organizations. This concurrence may be verbal or written, but the individual giving the concurrence must be documented.

4.6.6 The Owner ensures that information recorded in the "Originator", "Supervisor", "Owner Closure" and "CAQ Evaluation" sections of the CR form is entered into the CAP Database to allow condition tracking the trending.

4.6.7 The Owner shall forward the original CR form and attachments to the CAP Administrator for distribution.

4.6.8 Corrective actions shall be implemented in accordance with Section 4.8.

4.7 Significant CAQ Resolution

4.7.1 The Owner shall review the Condition described on the CR and assign an Investigator. If the Condition requires an Event Review Team for investigation, the investigation is conducted in accordance with 0PGP03-ZX-0006, "Event Review Team".

4.7.2 The SCAQ Investigator shall perform a **ROOT CAUSE** investigation of the Condition in accordance with the guidance contained in Addendum 5 and the Investigator's Manual. The individual assigned responsibility to conduct the investigation shall interface with the originator and responsible implementing group(s).

4.7.3 For investigations that will not be completed on time, the Owner shall request an extension from the CRG. If an extension is granted, the Owner shall update the CAP Database with the revised due date and explanation for the extension.

4.7.4 The Owner shall approve the completed investigation and enter the Condition Event and Cause Codes and approval in the appropriate blocks in the "Owner Closure" section of the CR form.

4.7.5 The Owner of the CR obtains concurrence on corrective actions to be implemented by other organizations. This concurrence may be verbal or written, but the individual giving the concurrence must be documented. The Owner then ensures corrective actions, responsible department and due dates are entered into the CAP Database.

4.7.6 The Owner ensures that information recorded in the "Originator", "Supervisor", and "Owner Closure" sections of the CR form is entered into the CAP Database to allow Condition tracking and trending.

4.7.7 The Owner of the CR shall forward the original CR form and completed investigation to the CAP Administrator for concurrence and distribution.

4.7.8 For those CRs that are Reportable Events or concern significant operating abnormalities or deviations from normal and expected performance of plant equipment or systems that affect nuclear safety, the CAP Administrator shall forward a copy of the completed investigation to the Plant Operations Review Committee.

4.7.9 Corrective actions shall be implemented in accordance with Section 4.8.

4.8 Corrective Action Implementation and Effectiveness Review (CAQ-S and SCAQ)

4.8.1 Each organization assigned a specific corrective action(s) shall initiate the appropriate activities to implement the corrective action. When the corrective action has been completed, the Owner shall be provided evidence of its completion.

4.8.2 The Owner shall review the status of the corrective actions to verify that the approved actions are implemented as planned. For corrective actions that will not be completed on time or are past due, the Owner shall address the reasons for the delay to the CRG to determine impact and course of action.

4.8.3 Upon verified completion of a corrective action, the Owner updates the CAP Database describing the action taken and referencing the action documentation. If the corrective action is a regulatory commitment, the Owner will retain objective evidence of its completion until the Condition Report is closed. Then, all objective evidence shall be submitted to RMS for retention with the Condition Report.

4.8.4 For SCAQs, upon completion of all corrective actions, the CAP Administrator shall perform a quality assessment and close the SCAQ in the CAP Database.

4.8.5 Following complete implementation of the corrective actions, the Owner reviews all actions for adequacy and effectiveness.

4.8.5.1 If the Owner assesses that corrective actions have been effective, as determined by validation of non-recurrence within historical recurrence time frames or usage frequencies, the satisfactory assessment shall be submitted by memorandum to the CAP Administrator for inclusion in the record for that CR.

4.8.5.2 A CR shall be initiated for implemented corrective actions found to be ineffective or likely to compromise the Condition resolution.

4.8.5.3 Objective evidence retained to document regulatory compliance shall be submitted to RMS for retention as part of the CR record.

5.0 Condition Tracking and Trending

5.1 The CAP Administrator shall evaluate Condition Event and Cause Codes in the CAP Database to determine if an Adverse Trend is developing based on occurrence level thresholds established at Department and Station levels. The CAP Administrator shall validate Adverse Trends.

5.2 Department Managers shall ensure that Condition Event Codes for CAQ-Ds are evaluated to determine if an Adverse Trend is developing.

6.0 Interfacing Processes

6.1 One or more of the following processes may be entered from the initiation of a Condition Report.

6.1.1	0PAP01-ZA-0102	Plant Procedures
6.1.2	0PGP03-ZA-0090	Work Process Program
6.1.3	0PGP03-ZA-0107	Security of STP
6.1.4	0PGP03-ZE-0031	Design Change Implementation
6.1.5	0PGP03-ZF-0012	Fire Fighting
6.1.6	0PGP03-ZF-0014	Fire Prevention Surveys
6.1.7	0PGP03-ZF-0017	Fire Protection Unanticipated Impairment
6.1.8	0PGP03-ZI-0022	Industrial Safety & Health Inspections
6.1.9	0PGP03-ZC-0020	Equipment Labeling
6.1.10	0PGP03-ZT-0152	Security Training and Qualification Program
6.1.11	0PGP04-ZA-0002	Condition Report Engineering Evaluation Program
6.1.12	0PGP04-ZA-0309	Design Change Package
6.1.13	0PGP04-ZA-0603	Material Testing Program
6.1.14	0PGP04-ZA-0108	Control of Vendor Documents
6.1.15	0PGP04-ZE-0310	Plant Modifications
6.1.16	0PGP05-ZN-0004	Changes to Licensing Basis Documents and Amendments to the Operating License
6.1.17	0PGP09-ZA-0002	Fitness for Duty Program
6.1.18	0POP01-ZQ-0032	Plant Operations Department Self-Assessment Program
6.1.19	0PRP01-ZR-0011	Radiological Occurrence Reporting

6.1.20 0SDP02-SE-0002 Probability Testing

6.1.21 0SDP02-SE-0006 Systems Trending Program

6.1.22 0SDP02-ZS-0024 Security Incidents

6.1.23 0SDP02-ZS-0034 Security Force Organization

7.0 References

7.1 NGP -131, Corrective Action Program

7.2 STP Business Plan

7.3 Investigator's Manual

7.4 Reporting Manual

7.5 0PGP05-ZN-0001 - Preparation of Requests for Enforcement Discretion

7.6 0PGP05-ZN-0005 - Justification for Continued Operation

7.7 NRC Generic Letter 91-18

7.8 Technical Specification 6.5.1.6 - Plant Operations Review Committee Responsibilities

7.9 0PGP03-ZX-0006 - Event Review Team

7.10 SPR 940338 (Operability and Reportability Reviews)

7.11 SOER 92-01 - Reducing the Occurrence of Plant Events Through Improved Human Performance

7.12 SPR 920201 (Delayed Entry into Tech. Spec. 3.0.3)

7.13 LER 88-063 (Vortex Breakers)

8.0 Support Documents

8.1 Addendum 1 - Process Flow Chart

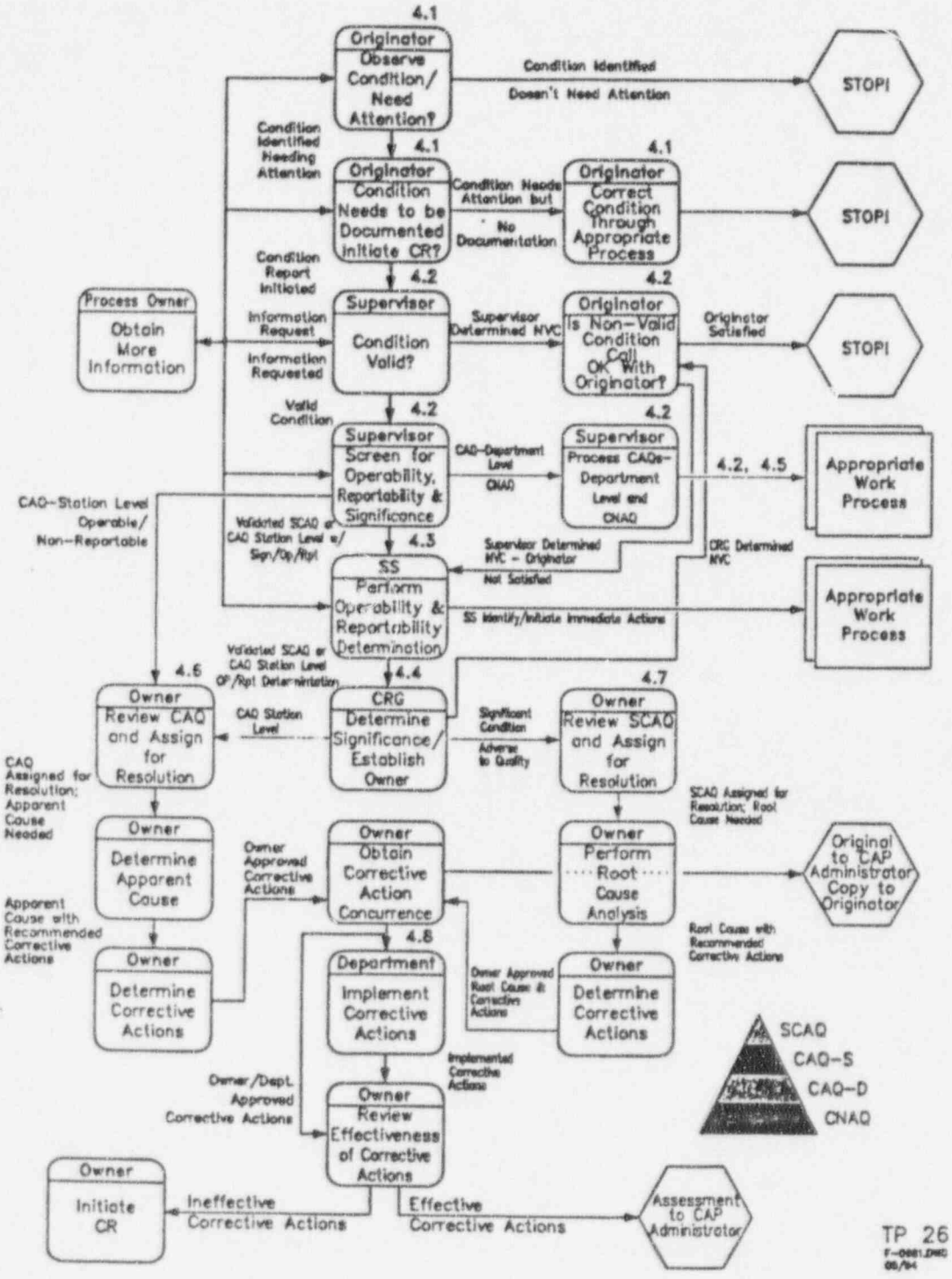
8.2 Addendum 2 - Condition Level Guidelines and Examples

8.3 Addendum 3 - Operability Determination Guidelines

8.4 Addendum 4 - Reportability Determination Guidelines

8.5 Addendum 5 - Guidelines for SCAQ Investigation and Reporting

8.6 0PGP03-ZX-0002-1 - Condition Report Form - Typical


4.1
Originator
Observe Condition/ Need Attention?
Condition Identified
Doesn't Need Attention
STOP!
Condition Identified Needing Attention
4.1
Originator
Condition Needs to be Documented Initiate CR?
Condition Needs Attention but
No Documentation
4.1
Originator
Correct Condition Through Appropriate Process
STOP!
Condition Report Initiated
4.2
Supervisor
Condition Valid?
Process Owner
Obtain More Information
Information Request
Information Requested
Supervisor Determined NVC
4.2
Originator
Is Non-Valid Condition Call OK With Originator?
Originator Satisfied
STOP!
Valid Condition
4.2
Supervisor
Screen for Operability, Reportability & Significance
CAQ-Department Level
CNAQ
4.2
Supervisor
Process CAQs-Department Level and CNAQ
4.2, 4.5
Appropriate Work Process
CAQ-Station Level Operable/ Non-Reportable
Validated SCAQ or CAQ Station Level w/ Sign/Op/Rpt
4.3
SS
Perform Operability & Reportability Determination
Supervisor Determined NVC - Originator Not Satisfied
CRC Determined NVC
SS Identify/Initiate Immediate Actions
Appropriate Work Process
Validated SCAQ or CAQ Station Level OP/Rpt Determination
4.6
Owner
Review CAQ and Assign for Resolution
CAQ Station Level
4.4
CRG
Determine Significance/ Establish Owner
Significant Condition
Adverse to Quality
4.7
Owner
Review SCAQ and Assign for Resolution
CAQ Assigned for Resolution; Apparent Cause Needed
Owner
Determine Apparent Cause
Owner
Obtain Corrective Action Concurrence
Owner
Perform Root Cause Analysis
SCAQ Assigned for Resolution; Root Cause Needed
Original to CAP Administrator Copy to Originator
Owner Approved Corrective Actions
Apparent Cause with Recommended Corrective Actions
Root Cause with Recommended Corrective Actions
Owner
Determine Corrective Actions
4.8
Department
Implement Corrective Actions
Owner Approved Root Cause & Corrective Actions
Owner
Determine Corrective Actions
Implemented Corrective Actions
Owner/Dept. Approved Corrective Actions
Owner
Review Effectiveness of Corrective Actions
SCAQ
CAQ-S
CAQ-D
CNAQ
Owner
Initiate CR
Ineffective Corrective Actions
Effective Corrective Actions
Assessment to CAP Administrator
TP 26
F-0001.DWG
09/94

Guidelines

1. Condition Not Adverse to Quality (CNAQ)

   Guidelines

   - Condition does not affect plant safety, reliability or public safety.
   - Trending this condition adds no value to improving station performance.

   Examples

   - Boards returned to warehouse without packing material.
   - Trash drum without a cover.
   - East parking lot lights off; switch off.
   - Procedure feedbacks that are enhancements.
   - Contamination monitor out of service due to high background.
   - Survey instrument malfunction.
   - Minor leakage in secondary steam systems which require routine maintenance to correct.
   - Instrument recalibration and adjustment to correct instrument drift, so long as Technical Specifications or design basis limits are not exceeded.
   - The need to correct typographical or grammatical errors, or updating organizational assignments, in procedures.
   - The need to make minor drawing changes which do not impact the technical content of the drawing.
   - Errors in a proposed design or design change (on drawings, in the calculations, in specifications, etc.) which are discovered during the procedural design process by independent or supervisory review.
   - "Actuated- Closed" power operated (motor, air, etc.) valves that have been back-seated, but which have a current engineering justification demonstrating that back-seating is acceptable.
   - Recommendations resulting from Audit Reports (AR) and Surveillance Reports (SR).

2. CAQ-Department Level (CAQ-D)

Guidelines

- Condition affects departmental personnel or processes.
- Condition requires documentation (e.g. design configuration control) for correction.
- Condition should be tracked for repeat occurrences and trending.
- Condition resolution can be effected by a single department even though assistance from other organizations may be required to facilitate resolution, (i.e., engineering support, evaluations, etc.).
- Non-consequential Conditions - Adverse Conditions that did not result in adverse consequences (near misses).

Examples

- Routine corrective maintenance activities.
- Condensate system valve tags do not agree with P&ID labels.
- Mechanic not qualified to work alone due to expiration of basic certification.
- PCF issued instead of Temp Mod to document a temporary plant condition.
- Badge for terminated employee was still active.
- Component returned to service without checklist signed by Shift Supervisor.
- Lost dosimeter.
- Lube oil temperature setpoint calculated incorrectly.
- P&ID incorrectly identified feedwater heater isolation valves.
- Security Incident Reports (SIR).
- Concerns resulting from Audit Reports (AR) and Surveillance Reports (SR).

3. CAQ-Station Level (CAQ-S)

Guidelines

- Condition could affect plant safety, reliability, or public safety.
- Station commitments, not reportable, were not adhered to.
- Correction of the Condition may require management level interdepartmental coordination.
- Apparent cause of the Condition needs to be determined.
- Condition corrective actions need to be evaluated for effectiveness.
- Plant Procedure(s) not adhered to.

Examples

- Increased rate of failure and corrective maintenance activities indicate reduced reliability of a piece of equipment.
- During power ascension, Main Steam to Deaerator valve drifted open unexpectedly resulting in an uncontrolled power increase of 2%.
- The ECO procedure was not adhered to.
- The wrong size fuse was installed in Class 1E MCC E12C.
- The setpoint for SDG 12 stator high temperature alarm is set incorrectly and current configuration may not be adequately controlled.
- Individual entered High Radiation Area on wrong RWP.
- Locked High Radiation Area door found open.
- Multiple problems were encountered with Main Feed Pumps during plant startup.
- A potential environmental release path for transformer oil has been identified from the Outage Transformer berm.
- Constant process flow for the Unit Vent noble gas monitor was undetected for 3 days; a repeat event.
- During performance of 0PSP03-MS-0003, low pressure turbine reheat stop valve and intercept valve failed to stroke.
- During investigation of Auxiliary Steam leak, it was identified that the condensate header between Units 1 and 2 and the auxiliary boilers was pressurized.
- Deficiencies resulting from Audit Reports (AR) and Surveillance Reports (SR).

4. Significant CAQ (SCAQ)

Guidelines

- Condition is reportable to outside authorities.
- If left uncorrected, could affect plant safety, reliability, or public safety.
- Condition is an adverse trend of previously documented Conditions.
- Procedural barriers intended for plant safety were violated.

Examples

- Individual worked more than 72 hours in a 168 hour week without prior approval.
- EDG 12 received a start signal that was not initiated by personnel or planned activity.
- While moving fuel assembly D44, a thimble plug was knocked over.
- Adverse Trend involving inadequate operational procedure accuracy.
- FOSAR found unexpected objects on lower core support plate.
- ESF Actuation - inadvertent start of Train A CCW pump due to personnel error.
- Component Failure Analysis Report showed a high rate of specific component failure at STP when compared to industry.
- Control Room staff performed PMT on DRPI using procedure as a guide and failed to perform a step in the procedure.
- Individual radiation exposure greater than administrative or regulatory limits.
- Significant deficiency resulting from Audit Reports (AR) and Surveillance Reports (SR).

The purpose is to determine if the Technical Specification related structure, system, or component (SSC) in question is capable of performing its specified function.

Verification of operability is supplemented by continuous and ongoing processes such as:

- Day-to-day operation of the plant
- Implementation of programs such as inservice testing and inspection
- Plant walkdowns or tours
- Observations from the control room
- QA activities such as audits and reviews
- Engineering design reviews.

Without any information to the contrary, once a SSC is established as operable, it is reasonable to assume that the SSC should remain operable, and the previously stated verifications should provide that assurance. However, whenever the ability of a SSC to perform its specified function is called in question, operability must be determined from a detailed examination of the nonconformance.

The determination of operability for SSCs is to be made promptly, with a timeliness that is commensurate with the potential safety significance of the nonconformance. If the Shift Supervisor initially chooses not to declare the SSC inoperable, he/she must have reasonable expectation that the system is operable and that the prompt determination process will support that expectation. If the non-conforming condition requires an operability review that is not made by the Shift Supervisor, operability review shall be completed in accordance with Section 4.3 of the procedure.

The measure of "reasonable" should be a function of the safety significance of the nonconformance and the magnitude of the uncertainty.

1. When reasonable technical judgement indicates that the nonconforming SSC is capable of performing its specified safety function if required, the equipment should remain operable.

   a. If there is reasonable assurance that the SSC is capable of performing its specified safety function and the determination process will support this expectation, but there are some remaining concerns or uncertainties, the equipment can remain operable until further evaluation can resolve the concerns.

b. If the initial evaluation indicates that the nonconformance is irrelevant to the safety function of the equipment, the equipment should remain operable.

c. If any immediate compensatory actions, such as temporary braces or other alternatives or "fixes," can be used quickly to provide reasonable assurance that the equipment will function until remedial action can be completed, the equipment should remain operable.

2. When reasonable technical judgement indicates that the nonconforming SSC is not capable of performing its specified safety function, the SSC should be declared inoperable. Then, perform one of the following:

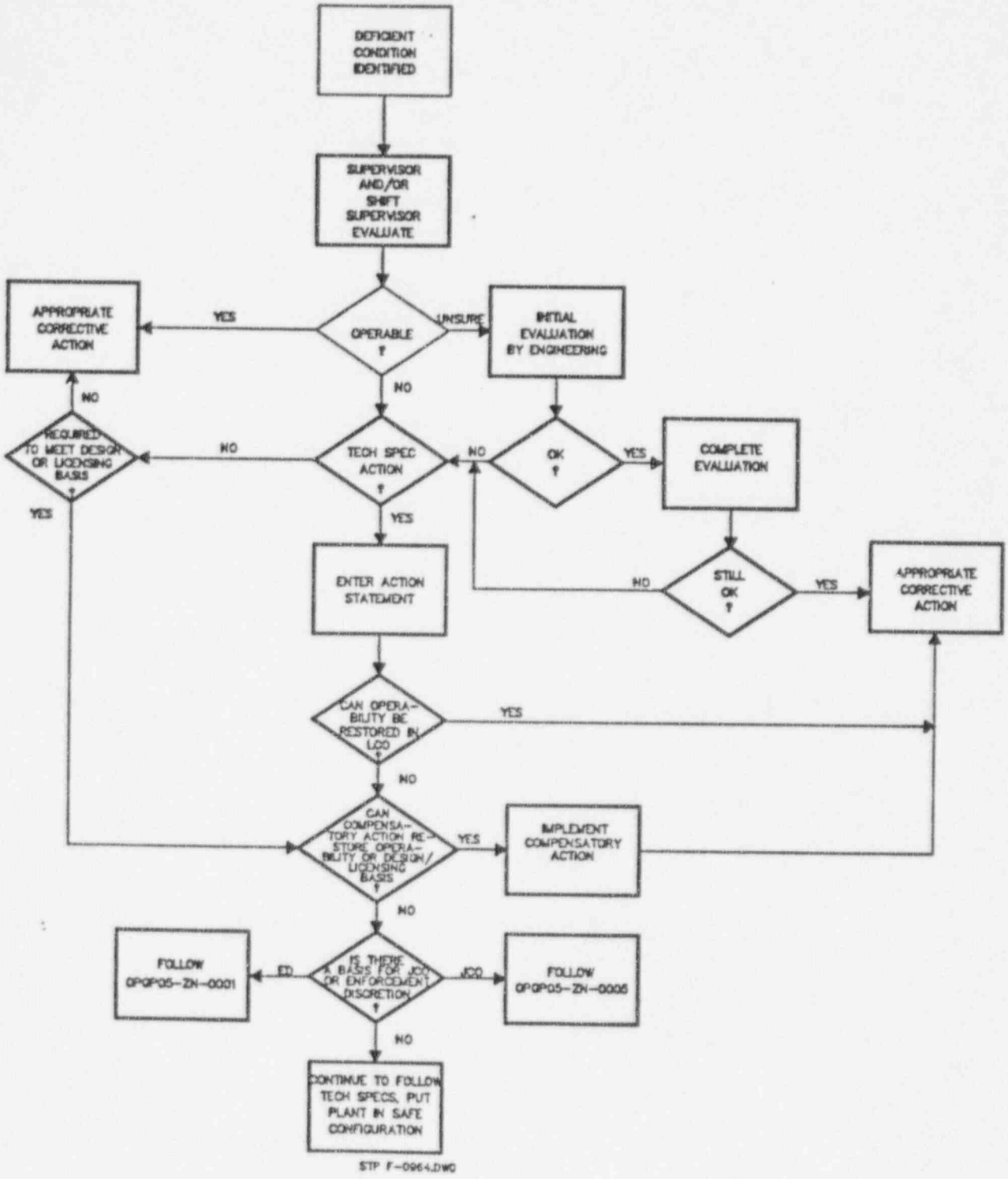
a. Initiate compensatory actions that will result in the plant operating:
- in a safe condition,
- within the licensing basis, and
- within the Technical Specifications.

b. Prepare a JCO (Reference 7.6) when the SSC Condition and the compensatory actions will result in the plant operating:
- in a safe condition,
- outside the licensing or design basis, and
- within the Technical Specifications.

c. Request an enforcement discretion (Reference 7.5) when the SSC Condition and compensatory actions will result in the plant operating:
- in a safe condition,
- outside the licensing or design basis, and
- outside the Technical Specifications.

3. The Shift Supervisor or station management may request additional support from other Departments to determine reportability and/or operability. Generic Letter 91-18 and Part 9900 of the NRC Inspection Manual provide additional detailed guidance on operability.

4. Resolution of the nonconformance shall follow the process shown in the flow chart in this Addendum.


DEFICIENT CONDITION IDENTIFIED
SUPERVISOR AND/OR SHIFT SUPERVISOR EVALUATE
OPERABLE ?
YES
UNSURE
NO
APPROPRIATE CORRECTIVE ACTION
INITIAL EVALUATION BY ENGINEERING
REQUIRED TO MEET DESIGN OR LICENSING BASIS ?
NO
YES
TECH SPEC ACTION ?
NO
YES
OK ?
YES
NO
COMPLETE EVALUATION
STILL OK ?
NO
YES
APPROPRIATE CORRECTIVE ACTION
ENTER ACTION STATEMENT
CAN OPERABILITY BE RESTORED IN LCO ?
YES
NO
CAN COMPENSATORY ACTION RESTORE OPERABILITY OR DESIGN/LICENSING BASIS ?
YES
IMPLEMENT COMPENSATORY ACTION
NO
IS THERE A BASIS FOR JCO OR ENFORCEMENT DISCRETION ?
ED
FOLLOW OPGP05-ZN-0001
JCO
FOLLOW OPGP05-ZN-0006
NO
CONTINUE TO FOLLOW TECH SPECS, PUT PLANT IN SAFE CONFIGURATION
STP F-0964.DWG

The purpose is to determine if the Condition identified is reportable to Federal, State, or local agencies.

When a Condition is identified to a Supervisor, the Supervisor shall screen the Condition for reportability. The tools available for this screening are the Supervisor's knowledge, discussion with another individual that may be more knowledgeable of the Condition, and/or reference to the Reporting Manual.

Types of events that may be reportable include:

Technical Specification violations
License / FSAR violations
Offsite Dose Calculation Manual violations
Radiological violations
Environmental concerns
Nuclear materials
Quality assurance violations
Design basis concerns
Configuration deficiencies

If the Condition falls into one of the above areas, refer to Section N of the Reporting Manual to determine if the Condition is immediately reportable. If the Condition is assessed to be immediately reportable, the Supervisor shall have the Condition Report hand delivered promptly or delivered electronically to the Control Room.

The Shift Supervisor should confirm the reportability assessment made by the Supervisor by identifying the specific regulatory requirement listed in the Reporting Manual.

The following guidelines shall be used when conducting an investigation for Significant CAQs.

NOTE

When investigations involve issues relating to personnel performance, the name of the individual(s) involved shall not be disclosed within the report.

One or more of the causal factor analysis methods described in the Investigator's Manual should be used to prepare the investigation. For SCAQs, supporting documentation used to conduct the investigation is to be included in the investigation package.

Report Format

The standard SCAQ investigation format includes the following sections:

I. Event Description
II. Event Significance
III. Event Analysis (NRC required reports only)
IV. Cause of Event
V. Generic Implications
VI. Corrective Actions
VII. Additional Information

I. The "Event Description" should include the following:

- The plant operating conditions before the event if the information is significant to event understanding.
- Factors leading up to the event.
- The dates and approximate time for all major occurrences.
- The method of discovery of each failure or deficiency.
- The status of any degraded o. inoperable component that affected the event outcome.
- A list of components or systems that were affected by each component failure or fault.

- All major personnel actions that affected the course or outcome of the event.
- Any procedural deficiencies that contributed to event outcome.
- All automatic or manually initiated Engineered Safety Feature (ESF) that occurred including those necessary to stabilize the plant.

II. The "Event Significance" section should include the following:

- A clear understanding of possible personnel injury, radiation exposure, offsite radiological releases, damage to important safety equipment, and other tangible effects due to this event.
- An evaluation of this event as a precursor to a more significant event.
- The barriers or conditions that prevented this event from being worse.
- The applicability of this event to other plant conditions and the significance.
- The similarity of this event to any previous events at STPEGS.

III. The "Event Analysis" section shall include the following:

- The reason the event was considered reportable. The specific reporting requirement SHALL be listed.
- The reason the component or system was considered inoperable. This should include an estimate of the length of time the component was inoperable prior to discovery.
- A validation of previous reportability/operability reviews issued in conjunction with the CR.

IV. The "Cause of Event" section should include the following:

- The causes or causal factors of the event. This includes contributing causal factors of the event or causal factors that did not prevent this event from occurring.
- A plan of action for determining the causes or causal factors for any item that is unknown at report issuance.
- The failure mode, mechanism, and effect of each failed component.

V. The "Generic Implications" section should include the following:

- A list of broader ramifications of the causal factors of the event. This should include information from previous CRs or documents supporting the generic implication or a plan of action to determine the scope of the generic implication.

VI. The "Corrective Actions" section should include the following:

- Remedial actions taken by plant personnel to stabilize the plant and place the plant in a safe configuration.
- Compensatory actions planned or taken to address the identified problem. Each action listed shall include the name of the person responsible for the action, a due date or expected completion date, and a complete description of the action.
- Corrective actions required to prevent recurrence of the event, the causal factors, the generic implications of the event,and the causal factors of the generic implications. Corrective actions shall be the outcome of an activity, not the activity itself. Each action listed shall include the name of the person responsible for the action, a due date or expected completion date, and a complete description of the action.

VII. The "Additional Information" section should include the following:

- A description of each failed component by manufacturer, model number, and other identifying characteristics.
- A statement of the previous LERs and CRs/SPRs that are similar to the described event. The review should be limited to the past three years.
- A statement of any NPRDS and maintenance history database items associated with the corrective actions and whether the item was reported on NPRDS.

Condition Reporting Process

Form 1 — Condition Report Form - Typical

CR # (DEPT #)

ORIGINATOR

TPNS#	PROCEDURE # REV #	DOCUMENT # REV#

UNIT	SYSTEM	BLDG	ROOM #	ELEV	DISCOVERY DATE	DISCOVERY TIME

CONDITION DESCRIPTION (INCLUDE INFORMATION PERTINENT TO OPERABILITY/ REPORTABILITY DETERMINATION AND ANY IMMEDIATE/ COMPENSATORY ACTIONS TAKEN)

☐ CONTINUED

ORIGINATOR NAME (PRINT)	SIGNATURE/ DATE/ TIME	DEPT	EXT.

SUPERVISOR

☐ QA FINDING ☐ FEEDBACK ☐ DESIGN CHANGE ☐ REGULATORY ISSUE ☐ WORK ORDER

OPERABILITY IMPACT	☐ YES	☐ NO	☐ INDETERMINATE	CORRECTED VIA:
REPORTABILITY IMPACT	☐ YES	☐ NO	☐ INDETERMINATE	REPORTABLE PER:
CONDITION LEVEL	☐ STATION	☐ DEPT	☐ CNAQ	OWNER DEPT:
SIGNIFICANT CAQ	☐ YES	☐ NO		OWNER NAME:

NON-VALID CONDITION ☐ (ATTACH DETERMINATION JUSTIFICATION) PRELIMINARY EVENT CODES(S):

SUPERVISOR (PRINT)	SIGNATURE/ DATE/ TIME/	EXT.

SHIFT SUPERVISOR

OPERABLE ☐ YES ☐ NO	REPORTABLE ☐ YES ☐ NO	MODE RESTRAINT ☐ YES ☐ NO
OTL#:	AGENCY:	
LCO EXP. (DATE/TIME):	NOTIFICATION DATE/TIME:	
	REPORTABILITY CRITERIA:	MODE:

COMMENTS:

☐ CONTINUED

SHIFT SUPERVISOR (PRINT)	SIGNATURE/DATE/TIME

CRG

☐ NON VALID CONDITION (ATTACH DETERMINATION JUSTIFICATION)
☐ SCAQ ☐ 20 DAY ☐ 30 DAY ☐ OTHER
☐ CAQ DUE DATE:
☐ OTHER

OWNER (DEPT/NAME):
CRG MEETING DATE:
CRG REVIEWER (PRINT):
CRG SIGNATURE:

OWNER CLOSURE

INVESTIGATOR (PRINT)	(SIGN/DATE)
APPROVAL (OWNER)	(SIGN/DATE)
CONDITION EVENT CODES	CONDITION CAUSE CODES
CAP ADMINISTRATOR (SCAQ)	☐ DATABASE UPDATED

Form 1 | Condition Report Form - Typical | Page 2 of 2

WORK ORDER EVALUATION

PRIORITY _____ OTL# _____ LCO. EXP. DATE/TIME _____
WSA _____ MODE _____ SPECIAL PROGRAM _____
NEED DATE _____ LCO (Y/N) _____ WAN _____
FCD MLST _____ WORK GRP _____ WORK TYPE _____

☐ VOID ☐ WORK ORDER ☐ MINOR MAINT. ☐ INVALID

COMMENTS/RECOMMENDATION: _____

FOR MINOR MAINTENANCE WSA NOTIFIED:
START _____ # PERSON-HRS _____ CLOSEOUT SIGNATURE: _____
COMPL _____ HOURS _____
DISCOVERY CODES STATUS _____ SYMPTOM _____ DETECTION _____

☐ ADDITIONAL PAGES

CAQ EVALUATION

ASSIGNED SUPERVISOR _____ INTERNAL DUE DATE _____
PPARENT CAUSE: _____

CAUSE CODES: _____
CORRECTIVE ACTIONS

_____ RESP PERSON: _____ DUE DATE: _____

_____ RESP PERSON: _____ DUE DATE: _____

_____ RESP PERSON: _____ DUE DATE: _____

DEPT APPROVAL: _____ DATE: _____ ☐ ADDITIONAL PAGE

FEEDBACK

PROCEDURE _____ CURRENT REV.: _____ TITLE: _____
ASSIGNED TO _____ DUE DATE _____
'ROBLEM RESOLUTION _____

REVIEWER _____ DATE _____ CLOSURE REF.: _____ REV. _____

H

STP 486 (04/93) REV 3

SOUTH TEXAS PROJECT ELECTRIC GENERATING STATION

OPGP03-ZX-0002

STATION PROBLEM REPORT

CAG | CATEGORY ☐1 ☐2 ☐3 ☐4 ☒5 ☐6 | SPR NO. 941460

PART 1: IDENTIFICATION OF CONCERN

A. UNIT # ☐ 1 ☐ COMMON ☒ 2 ☐ BOTH

INITIATED: NAME JOE R. ROCHA DEPT WORK CONTROL
POSITION I&C MAINT. SPEC. (SUMMER) PHONE NO. 8831
DATE 7/25/94 TIME 1355

DISCOVERY: DATE 7/25/94 TIME 1340

EVENT: DATE _____ TIME _____

IMMEDIATE SUPERVISOR: T. H. MILLER DATE _____ TIME _____
SIGNATURE (NOT REQUIRED)

COMMENTS _____

ORIGINATOR

B. PROBLEM DESCRIPTION

DURING EVALUATION OF S.R.# AN-33033 FOR PMT REQUIREMENTS IT WAS DISCOVERED THAT N2HE-TT-9594 WAS REWORKED BY I&C MAINTENANCE. IT WAS FURTHER DISCOVERED THAT THE SCOPE OF THE SERVICE REQUEST WAS BROADENED/CHANGED VIA PEN & INK CHANGE BY AN I&C WORK SUPERVISOR. THE DATE ON THE PEN & INK CHANGE WAS 7/22/94 WHILE WORK START WAS GIVEN ON 7/20/94. PER OPGP03-ZA-0090 STEP 3.5.2 A REVISION WAS REQUIRED FOR THE CHANGE AND REVISION CYCLE SIGNATURES NOT OBTAINED.

C. IMMEDIATE COMPENSATORY OR REMEDIAL ACTIONS TAKEN [ ] CONTINUATION SHEET ATTACHED

NONE REQUIRED

DEVELOP LESSONS LEARNED # 7264

D. IDENTIFICATION [ ] CONTINUATION SHEET ATTACHED

SYSTEM AN & HE

COMPONENT NO. N2HE-TT-9594

COMPONENT NAME SUPPLY AIR C.R. UNIT 3 FAN OUTLET TEMPERATURE TRANSMITTER

BLDG EAB ROOM E206

INSTRUCTIONS FOR PART 1 COMPLETION

DESCRIBE YOUR CONCERN GIVING AS MUCH INFORMATION AS POSSIBLE.
FILL IN ALL APPLICABLE SECTIONS OR ATTACH DOCUMENTATION.
INDICATE WHAT, WHEN, WHO, WHY, WHERE, HOW. LIST ANY REFERENCES.

DESCRIBE ALL IMMEDIATE COMPENSATORY/REMEDIAL ACTIONS TAKEN

NOTE: IF POTENTIALLY REPORTABLE, OR IF ANY DOUBT EXISTS REGARDING REPORTABILITY, THEN DELIVER IMMEDIATELY TO THE SHIFT SUPERVISOR. OTHERWISE, DELIVER TO THE CAG ADMINISTRATOR.

SPR No. 941460

SHIFT SUPERVISOR\LICENSING

PART 2: REPORTABILITY

	MODE	Rx Power	Rx Press	Rx Temp	Trip ?
A. UNIT 1	1	100	2235	593	N/A
UNIT 2	1	100	2235	593	N/A

ESF ACTUATION N/A INITIATING SIGNAL N/A

B. OPERABILITY/REPORTABILITY DETERMINATION

[ ] OPERABILITY REVIEW REQUIRED [ ] WITHIN 24 HOURS [ ] OTHER (See Comments)

[ ] REPORTABLE PER _____ WITHIN _____
LAW/PERMIT/LICENSE TIME: HOURS

[ ] REPORTABILITY REVIEW REQUIRED [X] NOT REPORTABLE

COMMENTS _____

NOTIFICATIONS

DUTY PLANT MANAGER	[✓] N/A	PERSON CONTACTED _____	DATE/TIME _____	INITIALS _____
NRC RESIDENT INSP	[✓] N/A	PERSON CONTACTED _____	DATE/TIME _____	INITIALS _____
NRC OPS CENTER	[✓] N/A	PERSON CONTACTED _____	DATE/TIME _____	INITIALS _____
OTHER	[✓] N/A	PERSON CONTACTED _____	DATE/TIME _____	INITIALS _____

SHIFT SUPERVISOR J C Grant DATE/TIME 7/25/94 1610

C. REPORTABILITY REVIEW

[ ] REPORTABLE PER _____ WITHIN _____ [✓] NOT REPORTABLE
LAW/PERMIT/LICENSE TIME: HOURS

LICENSING REPRESENTATIVE [illegible] DATE 7/26/94

D. WRITTEN REPORT TO NRC TYPE _____ DUE DATE _____

CAG

PART 3: ACTION ASSIGNMENT

CAG RECIEVED DATE 7/24/94 TIME 0637
EVENT CODES EA2D EJ21 EL1D

DEPARTMENT U-2 MAINT. ACTION ACTION DUE *

DEPARTMENT _____ ACTION _____ DUE _____

DEPARTMENT _____ ACTION _____ DUE _____

CAG/QA/QC/APPROVAL AUTHORITY

PART 4: ACTIONS TO BE COMPLETED

[Remedial/Compensatory (R) or corrective (C)]

The issue of work order intent/scope changes was discussed during shop mating on July 27, 1994 by I&C Division managers using guidelines of Lessons Learned Transmittal, no. 94.026 (Copy attached)

PRIORITY _____ DUE DATE _____ APP. AUTHORITY _____ DATE _____

PRIORITY _____ DUE DATE _____ APP. AUTHORITY _____ DATE _____

CATE. 5 CLOSURE James D. Luhr 7-28-94
APPROVAL AUTHORITY DATE

CATE. 5/6 CLOSURE _____ _____ _____ _____
QA/QC DATE

CAG 8/1/94
DATE

[ ] CONTINUATION SHEET ATTACHED

LESSONS LEARNED TRANSMITTAL

APPLICABLE DOCUMENT:

SECTION 1: DESCRIPTION OF EVENT

Service request MS-1-204912 on 1-MS-0019 was walked down by an Operations Work Control Group Mechanical Supervisor and a completed walkdown sheet recommending repacking was attached. Planning prepared a work package with scope of work reflecting the recommendations of the walkdown sheet. The assigned work supervisor reviewed the work order and added an "if required" pen and ink change to the steps requiring valve repacking. The supervisor based the change on the fact that WO MS-1-103919 had installed alternate static load valve packing with satisfactory PMT. The basis for the change was in the summary section of the work order. The remainder of the scope was performed and the valve was released awaiting PMT. When Unit-1 was returned to service, the installed packing leaked beyond the capability for packing adjustment to control.

SECTION 2: CAUSE OF EVENT

Inadequate document review and field walkdown prior to initiating pen and ink changes to a work document.

SECTION 3: LESSONS LEARNED

Fully understanding the equipment condition and history is necessary prior to making pen and ink changes to work documents to ensure the scope of work is not changed and necessary actions are taken to correct the deficiency.

Maintain a questioning attitude when making pen and ink changes. Ask yourself, "what effect on the scope will these changes make?" and more importantly, "what adverse effects on correcting the deficiency could this cause?"

LLT Author: _____ Date: 7/20/94

Unit 1 Maintenance Manager: _____ Date: 7/20/94

Unit 2 Maintenance Manager: _____ Date: 7/21/94

Source Document: _____

SPR SCREENING SHEET

SPR NUMBER 941460

YES	NO	CRITERIA
[ ]	[X]	Is the problem described in the SPR needed to comply with the STP Technical Specifications or other license commitments?
[ ]	[X]	Do the consequences of not correcting the problem affect the ability of a safety system to satisfy its design function?
[ ]	[X]	Do the consequences of not correcting the problem create or could create a condition that jeopardizes the safe or reliable operation of the Units?
[ ]	[X]	Do the consequences of not correcting the problem create or have the potential to create a condition that will or could affect the station's ability to effectively support unit operation or mitigate emergency situations?
[ ]	[X]	Does the problem described in the SPR impact the reliability of the system to perform its design function?
[ ]	[X]	Is the problem described in the SPR considered to be a mode restraint? (Which mode - 1[ ], 2[ ], 3[ ], 4[ ], 5[ ])

If the answer to any of the above criteria is "YES," the problem described in the SPR needs to be corrected prior to mode change or unit start-up, unless justification for deferral is provided.

COGNIZANT DEPT. M.E. (Maintenance) OPERATIONS [signature]

CAG DATABASE UPDATED Brenda Williams DATE 7-26-94

Rev. 1
April 16, 1993

PORC Review Evaluation

SPR 941460

Subject _____

_____

_____

_____

Does the subject SPR meet any of the following criteria:

		YES	NO
1)	Concerns a REPORTABLE EVENT?	___	X
2)	Concerns a significant operating abnormality or significant deviation from normal and expected performance of plant equipment or systems that affect nuclear safety?	___	X
3)	Concerns unanticipated deficiencies in the design or operation of structures, systems, or components that affect nuclear safety?	___	X
4) *	Concerns any accidental, unplanned, or uncontrolled radioactive release?	___	X
5)	Concerns the violation of: • Codes • Regulations • Orders • Technical Specifications • Operating Licensing Requirements having nuclear safety significance?	___	X
6)	Concern the abnormal degradation of systems designed to contain radioactive material?	___	X

If any of the above questions are answered YES, THEN the subject SPR SHALL be submitted to PORC.

Evaluator

8/1/94
Date

* An SPR that concerns uncontrolled radioactive release requires review and approval by the Plant Manager.