UNCONTROLLED COPY

ARIZONA PUBLIC SERVICE COMPANY

CORPORATE QUALITY ASSURANCE DEPARTMENT

PROCEDURES

QADP 16.0

CORRECTIVE ACTION

Revision 1

Approved: _____ Date: 5/6/84

Corporate QA Manager

3121Q/2018L

1.0 PURPOSE

This procedure establishes the measures to be used by Corporate QA Department personnel to:

a. Identify and control nonconformances and conditions adverse to quality.

b. Require that corrective action be defined and implemented by the responsible organization.

c. Evaluate the adequacy of proposed corrective action, which is subject to Corporate QA acceptance.

d. Verify that corrective action has been implemented.

e. Document the preceding items.

These measures include the use of Quality Assurance Observations; Corrective Action Reports; Hold-On-Shipment Notifications; Hold Tags; Stop Work Notices; and Management Corrective Action Reports.

This procedure supplements QAD 15.0 and QAD 16.0 for PVNGS design and construction activities, and meets the applicable requirements of the Operations QA Criteria Manual, Criterion 16, for start-up and operation activities.

2.0 DEFINITIONS AND ABBREVIATIONS

Terms, abbreviations, and definitions used in this procedure are:

2.1 Abbreviations

a. QAO - Quality Assurance Observation

b. CAR - Corrective Action Report

c. M-CAR - Management Corrective Action Report

d. HTIN - Hold Tag Issue Notification

e. SWN - Stop Work Notice

f. HOSN - Hold-On Shipment Notification

g. "A" - Quality Audit/Monitoring Department

h. "C" - Quality Control Department

i. "E" - Quality Systems and Engineering Department

j. "P" - Procurement Quality Department

2.2 Deviation/Noncompliance

A nonconformance or departure of a characteristic from specified requirements. A failure to comply with or lack of conformance to procedures, instructions, guidelines, FSAR commitments (other than the Technical Specifications) or applicable guides, codes, standards, or accepted industry practices. This includes, but is not limited to, conditions which:

a. Are due to the work procedure being used, and for which continued use of the procedure would increase the severity of the condition;

b. Constitute a failure to comply with the applicable regulatory or contractual requirements which may require an extensive evaluation of its quality impact;

c. Are repetitions and/or have previously been brought to the attention of the responsible organization with no, or inadequate, corrective action; or

e. Involve a failure to comply with the technical specifications or operating license.

2.3 Significant Condition

Significant conditions adverse to quality are conditions which have an effect or are likely to have an effect on, or influence, the safe operation of the plant in an adverse manner.

3.0 RESPONSIBILITIES

3.1 The Corporate Quality Assurance Manager is responsible for ensuring that the requirements in this procedure are adhered to by all Corporate Quality Assurance personnel.

3.2 The Quality Audit/Monitoring Manager is responsible for the numbering, logging, tracking and control of corrective action documents generated by all Corporate Quality Assurance Departments.

3.3 The Quality Systems and Engineering Manager is responsible for:

a. Validation of Corrective Action Reports generated by all Corporate Quality Assurance Departments (with the exception of CAR's issued to vendors by the Procurement Quality Department).

b. Performance of reportability evaluation of CAR's, HOSN's, SWN's and M-CAR's generated in accordance with this procedure.

c. Performance of trend analysis of documents issued in accordance with this procedure.

3.4 Corporate Quality Assurance Department Managers/Supervisors are responsible for ensuring timely corrective action by:

a. Following up on delinquent corrective action documents.

b. Evaluating responses within 5 working days of receipt of response.

° Notifying the responsible organization of the evaluation results.

° Establishing new due date if the response is unacceptable.

c. Evaluating corrective action, and action taken to prevent reccurrence, within 10 working days of being notified that corrective action has been completed.

° Notifying the responsible organization of the evaluation results.

° Establishing new due date if the corrective action is unacceptable.

d. Closing out corrective action documents, updating the tracking system, and notifying the responsible organization of document closures.

3.5 Managers/Supervisors of responsible organizations are responsible for ensuring timely corrective action by:

a. Reviewing and investigating adverse conditions to determine corrective action.

b. Scheduling corrective action including action to prevent reccurrence.

c. Responding to QA on or before established due dates.

d. Providing a scheduled date for corrective action if the responsible organization is unable to complete corrective action by the response due date.

e. Providing follow up reports as necessary, stating corrective action and date completed, if corrective action was not completed by the response due date.

f. Assuring corrective action is accomplished as scheduled.

4.0 PROCEDURE

NOTE: In lieu of issuing documents identified in this procedure, and when appropriate, a nonconformance report shall be issued for nonconforming conditions that can be corrected/controlled in accordance with:

a. Nonconformance control programs established in the station manual procedures; and/or

b. Work plan procedures/quality control inspections (WPP/QCI's).

4.1 Quality Assurance Observations

4.1.1 Quality Assurance Observations (Attachment A) are used to document an item of concern, a consideration for improvement, or a minor departure from procedural requirements (having no effect on quality at the present time) identified during a Corporate Quality Assurance Department review, surveillance (monitoring), inspection or audit.

4.1.2 Quality Assurance Observations shall be prepared in accordance with Attachment A and forwarded to the responsible organization for their review. The responsible organization shall complete the Response Section of the form and return it to Corporate Quality Assurance for evaluation.

4.1.3 Quality Assurance Observations (QAO's) that identify concerns that could eventually have an adverse affect on quality related activities are subject to being upgraded to Corrective Action Report (CAR) status, if adequate timely corrective action is not effected by the responsible organization.

4.1.4 Monitoring reports may be used as an alternative to quality assurance observations during monitoring activities. See QADP 18.1 for the specific use of monitoring reports.

4.1.5 Quality Assurance Observations will be numbered, logged and tracked in accordance with Appendix I of this directive.

4.1.6 Attachment "J" identifies a minimum distribution list to be used in establishing appropriate distribution of this document.

4.2 Corrective Action Reports

4.2.1 Corrective Action Reports (CAR'S)(Attachment B) are used to document deviations or noncompliances having a more serious quality impact than those documented on QAO's that are

brought to the attention of the Corporate QA Department or are identified during a Corporate QA Department review, surveillance (monitoring), inspection or audit.

4.2.2 The individual preparing the Corrective Action Report (CAR) shall review the condition with the appropriate Quality Assurance Supervisor and a responsible individual within the organization responsible for correcting the adverse condition. If mutual agreement on the identified condition cannot be reached at this level, the preparer shall so inform the QA Supervisor. The QA Supervisor shall contact appropriate supervision of the responsible organization and attempt to resolve any disagreement concerning the CAR. The QA Supervisor shall also:

a. Ensure that the CAR is completed in accordance with Attachment B;

b. Determine if a Hold-On-Shipment, Hold Tags or a Stop Work Notice is also warranted;

c. Transmit the Corrective Action Report to the Quality Systems and Engineering Manager. The QS&E Manager, or his designee, shall:

° Perform CAR validation (with the exception of CAR's issued to Vendors by the Procurement Quality Department)

° Review for duplicate CAR's.

° Perform a reportability evaluation.

° Return the CAR to the issuing supervisor, within 24 hours.

d. Ensure that the CAR is numbered and logged in accordance with Appendix I.

e. Establish a date, which is consistent with the seriousness and complexity of the situation, that the responsible organization is to respond/return the CAR (not to exceed thirty ( ) after the CAR is issued).

4.2.3 The Corrective Action Report shall be transmitted to the management of the responsible organization for review and corrective action. The responsible organization shall review and investigate the adverse condition to determine and schedule appropriate corrective action, including action to prevent recurrence, and shall respond as requested by the report, giving results of the review and investigation. The

response shall clearly state the corrective action taken or planned to prevent recurrence. In the event that corrective action cannot be completed by the established response due date, the responsible organization's response shall include a scheduled date for completing the corrective action. They shall also take appropriate action to assure that corrective action is accomplished as scheduled. The responsible organization should provide a followup report stating the corrective action taken and the date corrective action was completed. The Corrective Action Report shall be returned to the issuing QA/QC Department for review, acceptance, and verification.

4.2.4 Three working days prior to the CAR established due date the appropriate QA department may remind the responsible organization that a CAR response is due.

4.2.5 If a CAR response is not received by QA the next business day after the established due date the appropriate QA Supervisor may verbally notify the responsible organization that a response is overdue. The supervisor may further notify the responsible organization that an overdue notice shall be issued if a CAR response is not received within three working days (including the day verbal notification given).

4.2.6 If a CAR response is not received by QA at the end of the third business day past the established due date a Delinquent Corrective Action Response notice shall be issued by the appropriate QA supervisor to the responsible organization. As a minimum, the following positions shall be copied on the Delinquent notice:

- Corporate QA Manager
- QA Department Manager
- Next higher level of management of responsible organization.

The delinquent notice shall require the responsible organization to submit a CAR response within 5 working days of the notice transmittal date.

4.2.7 Beginning with the issue of the Delinquent Corrective Action Response notice the appropriate QA department manager may verbally notify any management level of the responsible organization that a CAR response is overdue. The manager may further notify the responsible organization that the next higher management level of the responsible organization shall be issued an Overdue Corrective Action Response notice if the CAR response is not received by the date established in 4.2.6.

4.2.8 If a CAR response is not received by QA at the end of the business day established in 4.2.6, the appropriate QA department manager shall issue an Overdue Corrective Action Response notice. The notice shall be issued to the next higher level of management of the responsible organization. As a minimum, the following positions shall be copied on the Overdue notice:

- Corporate QA Manager
- Next higher management level of responsible organization.

The overdue notice is to apprise management of the delinquent status and to solicit aid in resolving the adverse condition.

4.2.4 If an acceptable corrective action response is not provided by the responsible organization within 60 days of CAR issuance, the CAR will be up graded to "Management" condition status and re-issued as a M-CAR per Section 4.6 of this directive.

4.2.9 If acceptable corrective action and action to prevent recurrence has not been completed within 30 days of scheduled implementation date. The CAR will be upgraded to "Management Condition" status and re-issued as an M-CAR per Section 4.6 of this directive.

4.2.10 Corrective Action reports will be numbered, logged and tracked in accordance with Appendix I of this Directive.

4.2.11 Attachment "J" identifies a minimum distribution list to be used in establishing appropriate distribution of this document.

4.3 Hold-on Shipment Notification

4.3.1 When a Procurement Quality Department review, surveillance or audit of vendor activities identifies an adverse condition which requires corrective action and verification prior to shipment, a Hold-On-Shipment Notification (Attachment C) shall be prepared by the individual identifying the condition, approved by the Procurement Quality Manager, or his designee, and transmitted to the APS Purchasing Department. The APS Purchasing Department is responsible for formally transmitting the Hold-On-Shipment Notification to the vendor. The Hold-On-Shipment will be removed only after the vendor has taken the appropriate corrective action, and the corrective action has been verified by the Procurement Quality Department.

4.3.2 Hold on shipment notifications will be numbered, logged and tracked in accordance with Appendix I of this directive.

4.3.3 Attachment "J" identifies a minimum distribution list to be used as a guide in establishing appropriate distribution of this document.

4.4 APS Hold Tags

4.4.1 When a condition is identified that requires immediate and effective action to avoid further processing, an APS Hold Tag shall be issued by the cognizant Corporate Quality Assurance Department. Issuance of a hold tag is warranted under conditions which include, but are not limited to, the following:

a. Continuing work would result in a nonconformance which cannot be corrected to an acceptable condition, or would require extensive repair or rework to correct.

b. Work currently being performed is in violation of drawings, specifications, ASME code or regulatory requirements or approved procedures.

c. Nonconforming hardware/material (identified and tagged) is being used or installed without approval for conditional release.

d. Quality verification documentation is insufficient, incorrect, nonexistent or is nonconforming with applicable procurement or engineering requirements.

4.4.2 The QA/QC Department issuing a Hold Tag shall verbally notify the organization responsible for correcting the nonconformance that the Hold Tag (s) has been hung

4.4.3 The issuing QA/QC department shall also formally notify the responsible organization that Hold Tag(s) have been placed by issuing a "Hold Tag Issue Notification" (Attachment "D").

4.4.4 The issuing QA/QC Department shall assure that the Hold Tag(s) remain in place until the nonconformance is resolved. Once assigned, a Hold Tag may only be removed by the issuing QA/QC Department.

4.4.5 For a unit in operation - When a condition is identified that affects an operating system, or backup system, that requires immediate and effective action to correct the condition, the following occurs. In lieu of issuance of QA Hold Tags, the shift supervisor shall be verbally notified of the situation. The shift supervisor shall also be given recommendation to effect controls in accordance with the technical specifications and/or station manual procedures. A follow up Hold Tag Issue Notification shall be sent to the Director of Nuclear Operations. The Director of Nuclear Operations shall document the action taken to control the condition on the Hold Tag Issue Notification and return it to the issuing QA department.

4.4.6 Hold Tag Issue Nofications will be numbered, logged and tracked in accordance with Appendix I of this directive.

4.4.7 Each APS Hold Tag issued shall be prepared in accordance with Attachment "E" and affixed to the nonconforming item. If it is impractical to tag the item, the Hold Tag shall be posted in a conspicuous place adjacent to the item. Where the nonconformance involves more than one item, each item (or a container for bulk items) shall be tagged.

4.4.8 Each QA/QC Department issuing hold tags shall maintain a log of the APS Hold Tags they have issued. The log shall include:

a. Hold Tag Serial Number - See Attachment D;

b. Total Number of Tags issued with the same serial number;

c. The person who prepared the Hold Tag(s);

d. The date the Hold Tag is prepared;

e. Location and reason for Hold Tag;

f. Responsible organization, and date and time they were verbally notified;

g. Means used to resolve the nonconformance, such as "scrapped" or "repaired." If the nonconformance is documented on a Bechtel NCR, an APS NCR or an APS Stop Work Notice (SWN), the APS Hold Tag may be removed, and the NCR or SWN number referenced in the Hold Tag Log under "Resolution".

h. Date the Hold Tag is closed.

4.4.9 Attachment "J" identifies a minimum distribution list to be used in establishing appropriate distribution of the Hold-Tag Issue Notification.

4.5 Stop Work Notice

4.5.1 When an adverse condition is identified which warrants a general or generic work stoppage, a Corporate QA Department Stop Work Notice (Attachment E) shall be prepared by the individual identifying the condition and approved by the appropriate QA Manager or designee. The issuing department QA Manager or designee shall verbally notify the Corporate QA Manager and management of the responsible organization that a Stop Work Notice is being issued. The Stop Work Notice shall be issued to the management of the organization involved, and distributed to the Vice President, Nuclear, the Nuclear Safety Group (NSG) Supervisor, the Corporate QA Manager and the management of any other affected organizations (e.g., Bechtel Project Manager or APS Construction Manager). A Stop Work Notice is warranted under conditions which include, but are not limited to, the following:

a. Procedures and instructions are inadequate to assure compliance with applicable and mandatory Regulatory requirements;

b. Continued work could result in a substantial safety hazard per 10CFR Part 21 or a significant deficiency per 10CFR50.55(e) (see Reference 2.4);

c. A specific type of work or testing is being performed either without approved procedures required to control the work, or in violation of those procedures.

The Stop Work Notice will be removed only after the appropriate corrective action has been taken and verified by the issuing QA Department.

4.5.2 A Stop Work is not warranted if the condition affects a single item or activity that can be controlled/corrected through the use of QA Hold Tags (as defined in Section 4.0), or the Nonconformance Control Program.

4.5.3 For a unit in operation - When a condition is identified that affects an operating system or backup system that requires immediate and effective action to correct the condition, the following occurs. In lieu of requiring that physical work stop, the shift supervisor shall be verbally notified of the situation. The shift supervisor shall also be given recommendation to effect controls in accordance

with the technical specifications and/or station manual procedures. If immediate action is not effected to correct the adverse condition, the Corprate QA Manager and Vice President, Nuclear shall be so informed for further action. As a follow up a Stop Work Notice shall be issued to the Director of Nuclear Operations. The Stop Work Notice shall indicate that no work stoppage has been effected, and request that the Director of Nuclear Operations document the action taken to correct the condition. No QA Start Work approval is required for this situation.

4.5.4 Stop work notices will be numbered, logged and tracked in accordance with Appendix I of this directive.

4.5.5 Attachment "J" identifies a minimum distribution list to be used in establishing appropriate distribution of this document.

4.6 Management Corrective Action Report

4.6.1 Management Corrective Action Reports (M-CAR's) (Attachment "G") are used to document and appraise APS Management of significant conditions adverse to quality that require prompt action by responsible organizations and direct management involvement to correct the condition.

4.6.2 Sections 5.6 and 5.7 of this directive and the following establishes the criteria for determining issue of an M-CAR. The condition:

a. Involves a failure to comply with the Technical Specifications or Operating License.

b. Identifies incomplete or incorrect implementation of a licensing commitment which would cause the quality of an item or activity to be unacceptable or indeterminate.

c. Is a failure to have approved work procedures available for quality related activities prior to the performance of the activity.

d. Is repetitious and/or has been brought to the attention of the responsible organization, with no response or with inadequate response.

e. Is a recurrence of a condition that has been previously corrected, indicating that the corrective action taken has not been effective in preventing recurrence.

4.6.3 The individual preparing the Management Correct Action Report (M-CAR) shall review the condition with the appropriate Quality Assurance Manager. The QA Manager shall:

A. Determine if an M-CAR is appropriate.

B. Ensure that the M-CAR is completed in accordance with Attachment G.

C. Ensure that the M-CAR is numbered, logged, and tracked in accordance with Appendix I.

D. Ensure that a reportability evaluation has been performed, in accordance with QADP 16.1

E. Determine if a Hold-On-Shipment, Hold Tags or stop work notice is warranted.

F. Establish a maximum 15 Day "Date Reply Due" that the responsible organization is required to respond/ return the M-CAR, and approve issuance.

4.6.4 The Management Corrective Action Report shall be transmitted to the manager of the responsible organization for review and corrective action. The responsible organization shall promptly review and investigate the adverse condition to determine and schedule appropriate corrective action including action to prevent recurrence and shall respond as requested by the report, giving results of the review and investigation. The response shall clearly state the corrective action taken or planned to prevent recurrence. In the event that corrective action cannot be completed by the established response due date, the responsible organization's response shall include a scheduled date for completing the corrective action. The responsible organization should provide a followup report stating the corrective action taken and the date corrective action was completed. The Corrective Action Report shall be returned to the issuing QA/QC Department for review, acceptance and verification.

4.6.5 If an acceptable corrective action response is not received by the established response due date, the Vice President, Nuclear and the Corporate Quality Assurance Manager will be appraised of the delinquent status for further action.

4.6.6 If acceptable corrective action is not accomplished within 30 days of M-CAR issuance, the activities encompassing the adverse condition is subject to issuance of a stop work notice.

4.6.7 Management corrective action reports will be numbered, logged, and tracked in accordance with Appendix I of this directive.

4.6.8 Attachment "J" identifies a minimum distribution list to be used in establishing appropriate distribution of this document.

4.7 Trends

The Quality Systems and Engineering Manager, or a designee, shall evaluate conditions adverse to quality identified by the Corporate QA Department for trends, in accordance with QADP 16.3.

5.0 REFERENCES

5.1 Implementing

5.1.1 QADP 16.1, "Initial Review of Conditions Adverse to Quality for 10 CFR Part 21 and 10 CFR 50.55(e) Reportability."

5.1.2 QADP 16.2, "Evaluating Conditions Adverse to Quality for Resportability in Accordance with 10 CFR Part 21."

5.1.3 QADP 16.3, "Trending."

5.2 Developmental

5.2.1 ANSI N45.2.12-1977, "Requirements for Auditing of Quality Assurance Programs for Nuclear Power Plants"

5.2.2 OQACM, - Criterion 16.0, "Corrective Action".

5.2.3 QAD 15.0 "Nonconformance Materials, Parts Components and Services".

5.2.4 QAD 16.0, "Corrective Action".

6.0 FORMS AND ATTACHMENTS

Attachments	Forms	Title
A	--	Instructions for Preparing the Quality Assurance Observation
	QAF-3A	Quality Assurance Observation
B	--	Instructions for Preparing the Corrective Action Report
	QAF-4A	Corrective Action Report
	--	Instructions for Preparing the Corrective Action Report Continuation Sheet
	QAF-4B	Corrective Action Report Continuation Sheet
C	--	Instructions for Preparing the Hold-On-Shipment Notification
	QAF-5A	Hold-On-Shipment Notification
D.	--	Instructions for Preparing the APS Quality Assurance Hold Tag issue notification
	QAF-6A	Hold Tag Issue Notification
E.	--	Instructions for Preparing the APS Quality Assurance Hold Tag
	F-QAD-15.1-1	APS Quality Assurance Hold Tag
F.	--	Instructions for Preparing the Stop Work Notice
	QAF-7A	Stop Work Notice
	--	Instructions for Preparing the Stop Work Notice Continuation Sheet
	QAF-7B	Stop Work Notice Continuation Sheet
G.	--	Instructions for preparing Management Corrective Action Reports
	QAF-8A	Management Corrective Action Report

	--	Instructions for Preparing the Management Corrective Action Report Continuation Sheet
	QAF-8B	Management Corrective Action Report Continuation Sheet
H.	--	Deliquent Corrective Action Response Notice (Example)
I.		Overdue Response Notice (Example)
J.		Minimum Document Distribution List

APPENDICES	Title
I	Document Numbering and Tracking Systems

ATTACHMENT A

INSTRUCTIONS FOR PREPARATION
QUALITY ASSURANCE OBSERVATION

Note: All entries shall be typed or legibly printed.

1. Enter the Quality Assurance Observation Number.

2. Check appropriate box to indicate the activity that was being conducted when the unsatisfactory condition was discovered (if applicable, enter the audit number).

3. Enter the name of the organization responsible for responding to the Observation.

4. Enter the date the condition was discovered.

5. Enter the date the responsible organization must respond by.

6. Enter the name(s) of the individual(s) identifying the condition.

7. Enter affected subsystem(s).

8. Enter the title of the document(s) which sets forth the requirement (if applicable).

9. Describe the unsatisfactory condition. If corrected during the auditor surveillance, so indicate, and mark items 9 and 10 "N/R" (Not Required).

10. Describe the QA recommendations deemed necessary to correct the condition.

11. The responsible organization completes this Section to define what action will be taken.

12. The evaluator (normally the same individual who initiated the Observation) checks appropriate box to indicate results of response evaluation and then signs and dates form.

APS - CORPORATE QUALITY ASSURANCE DEPARTMENT
QUALITY ASSURANCE OBSERVATION

Discovered: ☐ Audit No. (2) ☐ Surveillance (Monitoring) ☐ Other			QAO No. (1)
Organization Responsible: (3)		Date Discovered: (4)	Date Reply Due: (5)
Initiator(s): (6)	Subsystem(s) (7)	Controlling Document: (8)	
Observation: (9)			
Recommendation: (10)			
Response: (11) Prepared By: _____ Date: _____			
Response Evaluation: ☐ Acceptable ☐ Not Acceptable (12) Evaluator: _____ Date: _____			

QAF-3A-(Rev. 1)

ATTACHMENT B

INSTRUCTIONS FOR PREPARATION
CORRECTIVE ACTION REPORT (CAR)

Note: All entries shall be typed or legibly printed.

Preparer

1. Enter the CAR number (obtain from Audits/Monitoring department).

2. Enter the total number of pages.

3. Enter the name of the organization responsible for correcting the adverse condition.

4. Check appropriate box to indicate the activity that was being conducted when the condition was discovered. (If the condition was discovered during an audit, enter the audit number; if "Other" is checked, enter type of activity, e.g., "Review," "Monitoring," etc.).

5. Check appropriate box to indicate results of initial reportability evaluation (see QADP 16.1) and initial and date. If it is reportable (or potentially reportable), enter the Reportability Evaluation Report (RER) number (Reference QADP 16.1) on the Ref. Doc. line.

6. Enter affected subsystem(s).

7. Enter the date the adverse condition was documented.

8. Enter the date the responsible organization must respond by.

9. Enter names of person(s) discovering/reporting the adverse condition. (The initiator(s) shall sign or initial next to their names.)

10. Enter the title of the document(s) and specific procedure(s) including the appropriate paragraph or section, which sets forth the specific requirements.

11. Enter the name(s) of the members of the responsible organization with whom the condition was discussed.

12. Enter the specific requirement (from the controlling document) which has been violated.

13. Describe the violation of the requirements. (Be specific)

ATTACHMENT B (Cont'd)

INSTRUCTIONS FOR PREPARATION
CORRECTIVE ACTION REPORT (CAR)

14. Describe the QA/AC recommendations deemed necessary to correct the adverse condition including action to prevent recurrence. If the initiator does not desire to make a recommendation, enter N/A (Not Applicable). Forward the CAR to the approprite supervisor, who will submit the CAR to the Quality Systems and Engineering Manager for validation and reportability evaluation.

15. Review the CAR to assure that it meets the criteria for a deviation/noncompliance. Sign and initial the indicated block.

16. If the CAR is potentially reportable, confirm that an RER has been initiated and so indicated in the appropriae block, and return the CAR to the issuing supervisor.

17. Ensure that the "Date Reply Due" is realistic in light of the date the CAR is to be transmitted.

Responsible Organization

18. The responsible organization completes this section to define what action will be taken to resolve the existing condition and what action will be taken to prevent a recurrence.

Assigned QA Engineer

19. Check the appropriate boxes and note comments, as applicable. If the Corrective Action is not acceptable, enter the specific reason in this space.

20. Check appropriate boxes and note comments, as appropriate. If the Corrective Action is acceptable, identify in this space the objective evidence evaluated. If the Corrective Action is not acceptable, enter the reason in this space.

    Note: If Blocks 19 or 20 are checked "Not Acceptable," document follow-up activities on the CAR Continuation Page, and include duplicates of Blocks 18 and 19 so that the CAR can be closed out once the corrective action is accepted and verified.

APS - CORPORATE QUALITY ASSURANCE DEPARTMENT
CORRECTIVE ACTION REPORT

Organization Responsible: (3)			CAR NO. (1) Page (2) of
How Discovered: ☐ Audit No. (4) ☐ Other		Potentially Reportable? No ☐ Yes ☐ (5) & (16) Initial/Date Ref. Doc. No.	
Subsystem(s): (6)	Validation: Date (15) Initials	Date Documented: (7)	Date Reply Due: (8) & (17)
Initiator(s): (9)	Controlling Document: (10)		Discussed With: (11)
Requirement: (12)			
Description of Adverse Condition: (13)			
Recommended Corrective Action: (14)			
Corrective Action - Including Action To Prevent Recurrence: (18) Prepared By:_____ Authorized By:_____ Date:_____			
Corrective Action Evaluation: (19) Acceptable Yes ☐ No ☐ Evaluator:_____ Date:_____			
Corrective Action Verification: (20) Acceptable Yes ☐ No ☐ Evaluator:_____ Date:_____			

QAF-4A-(Rev. 1)

ATTACHMENT B (Cont'd)

INSTRUCTIONS FOR PREPARATION
CORRECTIVE ACTION REPORT
CONTINUATION SHEET

The Corrective Action Report Continuation Sheet shall be used when the space provided in the Corrective Action Report is not sufficient to complete the CAR.

1. Enter the name of the organization responsible for the corrective action.

2. Enter the CAR Identification Number from the Corrective Action Report form.

3. Enter the appropriate page number.

4. Enter whatever information that could not be completed on the Corrective Action Report form.

APS - CORPORATE QUALITY ASSURANCE DEPARTMENT
CORRECTIVE ACTION REPORT
CONTINUATION SHEET

Organization Reponsible: (1)	CAR No. (2)
	Date _____ Page (3) of ___

(Continued Section(s)):

(4)

QAF-48-(Rev. 1)

ATTACHMENT C

INSTRUCTIONS FOR PREPARING
HOLD-ON-SHIPMENT NOTIFICATIONS

Note: All entries shall be typed or legibly printed.

(Items 1-7 To Be Completed by Individual Identifying Adverse Condition)

1. Enter the name and location of the vendor.

2. Enter the Notification Number.

3. Enter the date the Hold-On-Shipment is prepared.

4. Enter the total number of pages.

5. Check appropriate box to indicate results of initial reportability evaluation (see QADP 16.1). If it is reportable (or potentially reportable), enter the REF No. (See QADP 16.1). This section need not be completed prior to issuance of the notification.

6. Signature and date of the individual identifying the condition.

7. Signature and date of the Quality Systems and Programs Manager or his designated representative.

8. Enter the Shipment to be stopped. Insure the Shipment is specifically described, including the material and/or equipment involved.

9. Enter the reason the Shipment must be stopped, including a brief statement as to what procedures/specification/standard is being violated.

10. Enter action required to resolve the problem described in Item 6.

11. This Section will be completed by the responsible organization to describe the action taken to resolve the problem, including signature and date of person responding.

12. Signature and date of the Procurement Quality Manager or his designated representative, signifying that the Procurement Quality Department has verified that appropriate corrective action has been taken and the Shipment is allowed to proceed.

13. Distribution - As a minimum, the Hold-On-Shipment Notification will be distributed to the vendor involved, the Vice President, Nuclear, the NSG Supervisor, and the management of any other affected organization (e.g., APS Construction Manager).

APS - CORPORATE QUALITY ASSURANCE DEPARTMENT
HOLD-ON SHIPMENT NOTIFICATION

Vendor/Location (1)	Notice No: (2) Date: (3) Page (4) of ___
Reportability Evaluation: |__| Not Reportable |__| REF Doc. No. (5)	Initial/Date
Prepared By: (6) Date:	Approved By: (7) Date:
Shipment Affected: (8)	
Reasons for Hold-On Shipment: (9)	
Actions Required To Release Shipment: (10)	
Actions Taken By Vendor: (11) Signature of Responsible Authority / Date	
Hold Released By: (12) Signature / Date	
Distribution: (13)	

QAF-5A-(Rev. 1)

ATTACHMENT D

INSTRUCTIONS FOR PREPARING APS QA
HOLD TAG ISSUE NOTIFICATIONS

Note: All entires shall be typed or legibly printed.

1. Enter hold tag numaber - (This is the serial number).

2. Enter total number of tags issued for this hold tag number.

3. Enter page number.

4. Enter issuing department and its telephone extension.

5. Enter Responsible Organization.

6. Enter affected subsystem(s) or enter N/A if no subsystem is affected.

7. Enter the nonconforming material/equipment and its physical location (north, east, elevation).

8. Enter description of deficiency including the controlling documents.

9. Enter action required to correct the nonconforming condition.

10. Enter action taken by responsible organization to correct nonconforming condition. Responsible organization member signifies action taken by signing and dating.

11. Identify the corrective action that was verified. QA department member signifies corrective action verification by signing and dating.

12. Enter individual who issued hold tag, including date and telephone extension.

13. Enter responsible organization recipient of verbal notification, including date.

14. Enter the number of tags and date tags removed.

15. Enter distribution list for this notification.

APS CORPORATE QUALITY ASSURANCE DEPARTMENT
HOLD TAG ISSUE NOTIFICATION

Issuing Department _____ (4) Telephone Ext. _____	Hold Tag No.: _____ (1) Total Issued _____ (2) Page _____ (3) of _____
Subsystems: _____ (6)	Organization Having Jurisdictional Control: _____ (5)

Nonconforming Material/Equipment - Location(s) Tag(s) Hung:

(7)

Document(s) Establishing Requirements - Description of Deficiency(s):

(8)

Action Required to Correct/Control The Nonconforming Material/Equipment:

(9)

Action Taken To Correct/Control The Nonconforming Material/Equipment:

(10)

_____ Signature _____ Date

Corrective Action Verified:

(11)

_____ Signature _____ Date

Issued By: _____ (12) Date _____ Ext. ____	Verbal Notification To: _____ (13) Date _____ Ext. ____	Hold Tag(s) Removed: _____ (14) Date _____ Ext. ____

Distribution:

(15)

QAF-9A-(Rev. 0)

ATTACHMENT E

INSTRUCTIONS FOR PREPARING
APS QUALITY ASSURANCE HOLD TAGS

Note: All entries shall be typed or legibly printed.

1. Enter the tag serial number from the Hold Tag Log.

2. Enter the tag sequential number and total number of tags with the same serial number (i.e., 1 of 1, 2 or 5, etc.).

3. Enter the date the tag was prepared.

4. Enter name of the QA/QC personnel preparing the tag.

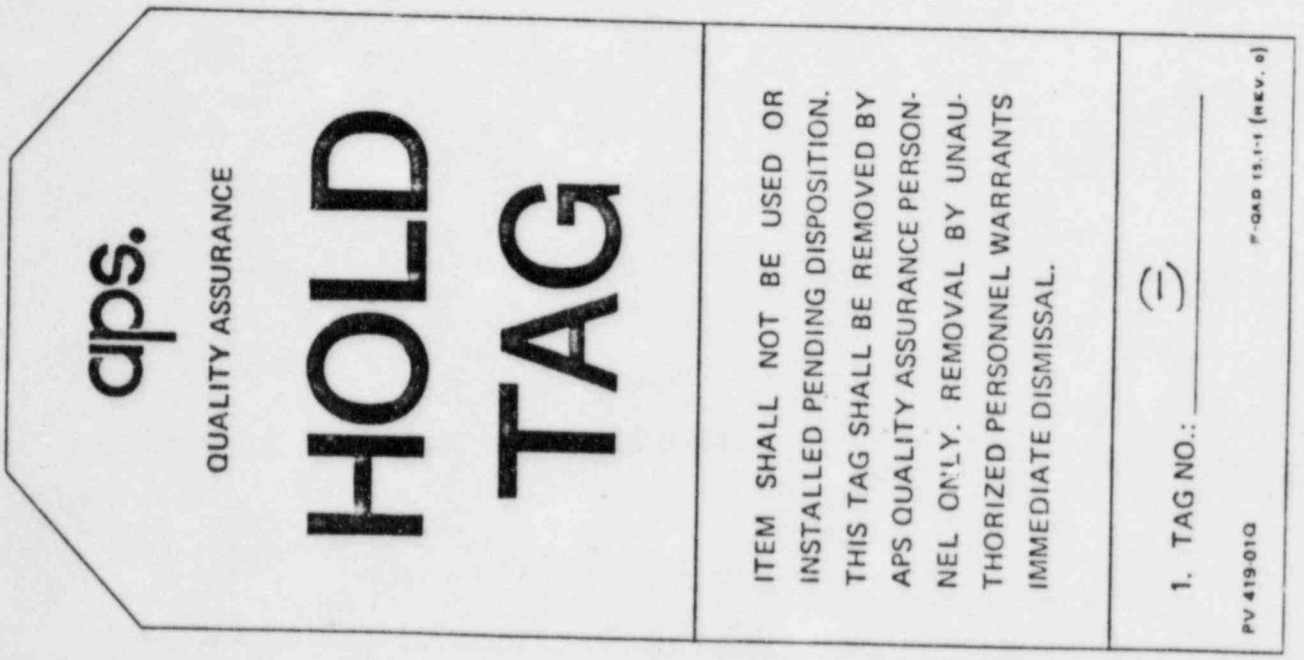
5. Enter the telephone number of the QA/QC personnel preparing the tag.

6. Enter the description of the nonconformance and/or reference a Stop Work Notice, Corrective Action Report, or Bechtel NCR.

F-QAD-15.1-1

SAMPLE APS HOLD TAG

(Later)



APS QUALITY ASSURANCE HOLD TAG

1. TAG NO.: (1) 2. TAG (2) OF _____

3. DATE: (3) 4. ANPP QA REP.: (4)

5. TELEPHONE NO.: (5) 6. DESCRIPTION: (6)

ATTACHMENT F

INSTRUCTIONS FOR PREPARING
STOP WORK NOTICES

Note: All entries shall be typed or legibly printed.

(Items 1-10 To Be Completed by Individual Identifying Adverse Condition)

1. Enter the title of the organization responsible for correcting the condition that resulted in Stop Work Notice being issued.

2. Enter the Stop Work Notice Number.

3. Enter the date the Stop Work Notice is prepared.

4. Enter the page number and total number of pages.

5. Enter the project name.

6. List subsystems affected.

7. Check appropriate box to indicate results of initial reportability evaluation (see QADP 16.1). If it is reportable (or potentially reportable), enter the REF No. (See QADP 16.1). This section may be completed after the SWN is issued.

8. Enter the work activities to be stopped. Insure the work activity is specifically described, including who is performing the work.

9. Enter the specific reason the work must be stopped, including a brief statement as to what procedures/specifications/standards are being violated.

10. Enter action required to resolve the problem described in Item 9.

11. This Section will be completed by the responsible organization to describe the action taken to resolve the problem, including signature and date of person responding.

12. Signature and date of the appropriate QA Manager/Supervisor or his designee.

13. The appropriate QA Manager, or his designee, will enter the name of the responsible individual and the date and time the individual was notified that a Stop Work Notice would be issued.

ATTACHMENT F (Cont'd)

INSTRUCTIONS FOR PREPARING
STOP WORK NOTICES

14. Enter action verified/accepted to permit resumption of work. If follow up controls are needed, identify documents generated to track/control. Signature and date of the appropriate QA Manager or his designated representative signifies Corporate Quality Assurance has verified that appropriate corrective action has been taken and work is allowed to proceed.

NOTE

Distribution - As a minimum, the Quality Assurance Stop Work Notice will be distributed to the Vice President, Nuclear, the Nuclear Safety Groups Supervisor, and the management of any other affected organization (e.g., APS Construction Manager, responsible work organization).

APS CORPORATE QUALITY ASSURANCE DEPARTMENT
STOP WORK NOTICE

Organization Responsible for Corrective Action: (1)		Notice No.: (2) Date (3) Page (4) of ___
Project: (5)	Subsystem(s): (6)	Potentially Reportable? No ☐ Yes ☐ Initial/Date (7) Ref. Doc. No.
Work Activities To Be Stopped: (8)		
Reason For Work Stoppage: (9)		
Action Required To Start Work: (10)		
Action Taken: (11) Signature Date		
Issued By: (12) Date Ext.	Verbal Notice Given To: (13) Date Ext	
Action Verified/Accepted to Permit Resumption Of Work: (14)		QA Start Work Approval: Date: Ext.

QAF-7A-(Rev. 1)

ATTACHMENT F (Cont'd)

INSTRUCTIONS FOR PREPARING THE
STOP WORK NOTICE
(CONTINUATION SHEET)

1. Enter the title of the organization responsible for correcting the condition that resulted in the Stop Work Notice being issued and project name.

2. Enter the Stop Work Notice Serial Number.

3. Enter the date the Stop Work Notice was prepared.

4. Enter the page number, and the total number of pages.

5. Enter information which could not be completed on Form QAF-6A.

APS - CORPORATE QUALITY ASSURANCE DEPARTMENT
STOP WORK NOTICE
CONTINUATION SHEET

Organization Reponsible for Corrective Action and Project: (1)	Notice No. (2)
	Date (3) Page (4) of

(Continued Section(s)):

(5)

QAF-7B-(Rev. 1)

ATTACHMENT G

INSTRUCTIONS FOR PREPARING
MANAGEMENT CORRECTIVE ACTION REPORTS

Note: All entries shall be typed or legibly printed.

1. Enter the M-CAR number.

2. Enter the total number of pages.

3. Check appropriate box to indicate the activity that was being conducted when the condition was discovered. (If the condition was discovered during an audit, enter the audit number; if "Other" is checked, enter type of activity, e.g., "Review," "Monitoring," etc.).

4. Enter affected subsystem(s).

5. Check appropriate box to indicate results of initial reportability evaluation (see QADP 16.1). If it is reportable (or potentially reportable), enter the REF number (Reference QADP 16.1). This section may be compelted after the CAR is issued.

6. Enter the name of the organization responsible for correcting the adverse condition.

7. Enter the date the adverse condition was documented.

8. Enter the date the responsible organization must respond by.

9. Enter names of person(s) discovering/reporting the adverse condition. (The initiator(s) shall sign or initial next to their names.)

10. Enter name of issuing department supervisor/manager (signature required).

11. Enter the title of the document(s) and specific procedure(s) including the appropriate paragraph or section, which sets forth the specific requirements.

12. Enter the name(s) of the members of the responsible organization with whom the condition was discussed.

13. Enter the specific requirement (from the controlling document) which has been violated.

14. Describe the violation of the requirements. (Be specific)

15. Describe the action necessary to correct the adverse condition including action to prevent recurrence. If the initiator does not desire to make a recommendation, enter N/A (Not Applicable).

ATTACHMENT G (Cont'd)

INSTRUCTIONS FOR PREPARING
MANAGEMENT CORRECTIVE ACTION REPORTS

16. The responsible organization completes this section to define what action will be taken to resolve the existing condition and what action will be taken to prevent a recurrence.

17. Check the appropriate boxes and note comments, as applicable. If the Corrective Action is not acceptable, enter the specific reason in this space.

18. Check appropriate boxes and note comments, as appropriate. If the corrective action is acceptable, identify in this space the objective evidence evaluated. If the Corrective Action is not acceptable, enter the specific reason in this space.

    Note: If Blocks 17 or 18 are checked "Not Acceptable," document follow-up activities on the CAR Continuation Page, and include duplicates of Blocks 16 and 17 so that the CAR can be closed out once the corrective action is accepted and verified.

INSTRUCTIONS FOR PREPARATION
MANAGEMENT CORRECTIVE ACTION REPORT
CONTINUATION SHEET

The Management Corrective Action Report Continuation Sheet shall be used when the space provided in the Management Corrective Action Report is not sufficient to complete the M-CAR.

1. Enter the name of the organization responsible for the corrective action.

2. Enter the M-CAR Identification Number from the Management Corrective Action Report form.

3. Enter the appropriate page number.

4. Enter whatever information that could not be completed on the Management Corrective Action Report form.

APS - CORPORATE QUALITY ASSURANCE DEPARTMENT
MANAGEMENT CORRECTIVE ACTION REPORT

THE RESPONSIBLE ORGANIZATION IS REQUIRED TO TAKE IMMEDIATE ACTION TO CORRECT THE ADVERSE CONDITION IDENTIFIED. FAILURE TO EFFECT PROMPT CORRECTIVE ACTION AND ACTION TO PRECLUDE RECURRENCE HAS THE POTENTIAL OF VIOLATING LICENSING AND QUALITY ASSURANCE PROGRAM COMMITMENTS	S-CAR No. (1) Page (2) of ____

How Discovered: ☐ Audit No. (3) ☐ Other ____	Subsystem(s) (4)	Potentially Reportable? (5) No ☐ Yes ☐ Initial/Date ____ Ref. Doc. No. ____

Organization Responsible: (6)	Date Documented: (7)	Date Reply Due: (8)

Initiator(s): (9)	Manager (10)	Controlling Document: (11)	Discussed With: (12)

Requirement:

(13)

Description of Adverse Condition:

(14)

Recommended Corrective Action:

(15)

Corrective Action - Including Action To Prevent Recurrence

(16)

Prepared By: ____ Authorized By: ____ Date: ____

Corrective Action Evaluation:

Acceptable? Yes ☐ No ☐

(17)

Authorized By: ____ Date: ____

Corrective Action Verification:

Acceptable? Yes ☐ No ☐

(18)

Evaluator: ____ Date: ____

QAF-8A-(Rev. 0)

APS - CORPORATE QUALITY ASSURANCE DEPARTMENT
MANAGEMENT CORRECTIVE ACTION REPORT
CONTINUATION SHEET

Organization Reponsible: (1)	M-Car No. (2)
	Date _____ Page (3) of ___

(Continued Section(s)):

(4)

QAF-8B-(Rev. 0)

ATTACHMENT H

(EXAMPLE)
DELINQUENT CORRECTIVE ACTION RESPONSE NOTICE

- -

TO: DATE:

FROM:

SUBJECT: DELINQUENT CORRECTIVE ACTION RESPONSE

A Correction Action Response to _____ was due on _____. As of _____, subject response has not been received, a response is to be submitted to the undersigned by _____. A reasonable extension of time may be granted if the request is deemed justified, your prompt action is required.

_____
PVNGS _____ Manager
(Supervisor)

Attachments:

ATTACHMENT I

(EXAMPLE)
OVERDUE RESPONSE NOTICE

- -

TO:

FROM:

SUBJECT: OVERDUE RESPONSE TO CORRECTIVE ACTION REPORT(S)

The Corrective Action Report(s) listed below are delinquent. A response from the responsible organization(s) has not been received by the _____ Department. Your assistance in expediting the completion of this/these Corrective Action Report(s) is necessary to assure the effectiveness of the Quality Assurance Program.

Car Number	Responsible Organization	Date Due	Date Delinquent Notice Sent	Delinquent Notice Due Date

PVNGS _____ Manager
(Supervisor)

Attachments:

* Denotes distribution required if the document identifies problem in their area of responsibility

DOCUMENT	STATUS	Executive Vice Pres. ANPP	Vice President Nuc.	APS Corporate QA M.	* Director of Nuclear Operations	* APS Startup Manag.	PVNGS Transition	Combustion Engine. * Project Manager	Manager - Respons. Organization/Vend.	APS Quality Audit Surveillance Man.	APS Quality Syst. Engineering Mana.	Supervisor - Res. Organization
QA Observation	Document Issue			X	*	*	X	*	X	X	X	X
	Response Acceptance			X	*	*		*	X	X		X
	Response Rejection			X	*	*		*	X	X	X	X
	Verification Rejection											
	Document Closure			X	*	*	X	*	X	X	X	X
Corrective Action Report	Document Issue		X	X	*	*	X	*	X	X	X	X
	Response Acceptance			X	*	*	X	*	X	X	X	X
	Response Rejection		X	X	*	*	X	*	X	X	X	X
	Verification Rejection		X	X	*	*	X	*	X	X	X	X
	Document Closure	X	X	X	*	*	X	*	X	X	X	X
Hold-on-Shipment Notices	Document Issue	X	X	X	*	*	X	*	X	X	X	X
	Response Acceptance			X	*	*	X	*	X	X	X	X
	Response Rejection		X	X	*	*	X	*	X	X	X	X
	Verification Rejection											
	Document Closure	X	X	X	*	*	X	*	X	X	X	X
Hold Tag Issue Notices	Document Issue	X	X	X	*	*	X	*	X	X	X	X
	Response Acceptance											
	Response Rejection		X	X	*	*	X	*	X	X	X	X
	Verification Rejection	X	X	X	*	*	X	*	X	X	X	X
	Document Closure											
Stop Work Notice	Document Issue	X	X	X	*	*	X	*	X	X	X	X
	Response Acceptance			X	*	*	X	*	X	X	X	X
	Response Rejection		X	X	*	*	X	*	X	X	X	X
	Verification Rejection		X	X	*	*	X	*	X	X	X	X
	Document Closure	X	X	X	*	*	X	*	X	X	X	X
Management Corrective Action Report	Document Issue	X	X	X	*	*	X	*	X	X	X	X
	Response Acceptance	X	X	X	*	*	X	*	X	X	X	X
	Response Rejection	X	X	X	*	*	X	*	X	X	X	X
	Verification Rejection	X	X	X	*	*	X	*	X	X	X	X
	Document Closure	X	X	X	*	*	X	*	X	X	X	X

ATTACHMENT J

QA DOCUMENTS MINIMUM DISTRIBUTION LIST

* Denotes distribution required if the document identifies problem in their area of responsibility

DOCUMENT	STATUS	MINIMUM DISTRIBUTION REQUIREMENTS										
		Executive Vice President APP	Vice President Nuclear	APS Corporate QA Manager	* Director of Nuclear Operations	* APS Startup Manager	PVNGS Transition Manager	Combustion Engineering * Project Manager	Manager - Responsible Organization/Vendor	APS Quality Audit/ Surveillance Manager	APS Quality Systems and Engineering Manager	Supervisor - Responsible Organization
QA Observation	Document Issue			X	*	*	X	*	X	X	X	X
	Response Acceptance			X	*	*		*	X	X		X
	Response Rejection			X	*	*		*	X	X	X	X
	Verification Rejection											
	Document Closure			X	*	*	X	*	X	X	X	X
Corrective Action Report	Document Issue		X	X	*	*	X	*	X	X	X	X
	Response Acceptance			X	*	*	X	*	X	X	X	X
	Response Rejection		X	X	*	*	X	*	X	X	X	X
	Verification Rejection		X	X	*	*	X	*	X	X	X	X
	Document Closure	X	X	X	*	*	X	*	X	X	X	X
Hold-on-Shipment Notices	Document Issue	X	X	X	*	*	X	*	X	X	X	X
	Response Acceptance			X	*	*	X	*	X	X	X	X
	Response Rejection		X	X	*	*	X	*	X	X	X	X
	Verification Rejection											
	Document Closure	X	X	X	*	*	X	*	X	X	X	X
Hold Tag Issue Notices	Document Issue	X	X	X	*	*	X	*	X	X	X	X
	Response Acceptance											
	Response Rejection											
	Verification Rejection		X	X	*	*	X	*	X	X	X	X
	Document Closure	X	X	X	*	*	X	*	X	X	X	X
Stop Work Notice	Document Issue	X	X	X	*	*	X	*	X	X	X	X
	Response Acceptance			X	*	*	X	*	X	X	X	X
	Response Rejection		X	X	*	*	X	*	X	X	X	X
	Verification Rejection		X	X	*	*	X	*	X	X	X	X
	Document Closure	X	X	X	*	*	X	*	X	X	X	X
Management Corrective Action Report	Document Issue	X	X	X	*	*	X	*	X	X	X	X
	Response Acceptance	X	X	X	*	*	X	*	X	X	X	X
	Response Rejection	X	X	X	*	*	X	*	X	X	X	X
	Verification Rejection	X	X	X	*	*	X	*	X	X	X	X
	Document Closure	X	X	X	*	*	X	*	X	X	X	X

APPENDIX I

DOCUMENT NUMBERING AND TRACKING SYSTEMS

Purpose

The purpose of this appendix is to describe the numbering and tracking systems to be used on all corrective action documents. Corrective action documents are QAO's, CAR's, SWN's, HTIN's, HOSN's, and MCAR's.

Numbering System

The numbering system for corrective action documents shall consist of a seven character alpha-numeric identification code. Each document number shall identify: document type, issuing organization, issue year, and sequential number. The following provides the numbering system details:

NOTE: Only one sequence per type of document.

Character =	1	2	3	4	5	6	7	8
Sample Number =	C	A	8	4	0	0	0	1

Character 1 - Identification of issued document. The following alphabetic characters shall be used:

Q = Quality Assurance Observation
C = Corrective Action Report
N = Stop Work Notice
H = Hold Tag Issue Notice
P = Hold On Shipment Notification
M = Management Corrective Action Report

Character 2 - Issuing Organization. The following alphabetic characters shall be used:

C = Quality Control Department
A = Quality Audit/Monitoring Department
E = Quality Systems and Engineering Department
P = Procurement Quality Department

Characters 3 and 4 - Year of issue

Characters 5, 6, 7 and 8 - Sequential number

Tracking System

The Quality Auditing/Monitoring Department is responsible for numbering, logging, and tracking corrective action documents.