

COMANCHE PEAK STEAM ELECTRIC STATION
UNITS 1 AND 2

PROGRAM PLAN
AND
ISSUE-SPECIFIC ACTION PLANS

REVISION 1
NOVEMBER 19, 1984

TEXAS UTILITIES GENERATING COMPANY
A DIVISION OF
TEXAS UTILITIES ELECTRIC COMPANY

COMANCHE PEAK STEAM ELECTRIC STATION

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COMANCHE PEAK RESPONSE TEAM

PROGRAM PLAN

Rev.	Description	Prepared by Program Manager	Date	Approved by Senior Review Team	Date
0	Original Issue Revised to Reflect	<i>J. Stewart</i>	10/5/84	<i>27 Fiken</i>	<i>10/27/84</i>
1	NRC Comments	N/A		<i>27 Fiken</i>	11/16/84

Comanche Peak Steam Electric Station
Comanche Peak Response Team
Program Plan

I. INTRODUCTION

The Nuclear Regulatory Commission (NRC) established a Technical Review Team (TRT) to review certain aspects of the Comanche Peak Steam Electric Station (CPSES). The purpose of the TRT is to evaluate certain technical issues and allegations of improper construction practices at CPSES. In July, 1984, the TRT began onsite activities as part of its review plan using a team divided into five groups: electrical/instrumentation, civil/mechanical, QA/QC, protective coatings, and test programs.

On September 18, 1984, a public meeting was held in the NRC's offices in Bethesda, Maryland, at which NRC management and the TRT presented Texas Utilities Electric Company (TUEC) with a request for additional information. This request was based on the results of the TRT efforts to date in the electrical/instrumentation, civil, and testing program areas. The TRT stated that they required additional information in order to make a determination of the safety significance of certain concerns.

The TRT request for information was documented in an attachment to an NRC letter dated September 18, 1984. The request was divided into three primary areas and several sub-areas, each representing a subject of concern to the TRT.

TUEC developed a Program Plan and individual Action Plans for each of the issues identified in the September 18, 1984, letter. The Program Plan and the Issue-Specific Action Plans were submitted to the NRC by letter dated October 8, 1984. Subsequently, public meetings were held at the NRC's Bethesda, Maryland, offices on October 19 and 23 at which TUEC made verbal presentations of the Program Plan and the Action Plans, obtained verbal NRC comments, and provided clarifications by answering questions.

As a result of the meetings with the NRC, TUEC has revised the Program Plan and is in the process of revising the Issue-Specific Action Plans. These revisions reflect consideration of the NRC's comments and observations, clarifications needed to respond to questions that were raised, and experience gained during the initial stages of implementation of the original version of the Program Plan and the Action Plans.

The overall Program Plan, as revised, is presented below. The revised Issue-Specific Action Plans will be provided in a future revision to Appendix A. Similar Issue-Specific Action Plans will be developed to respond to any additional TRT issues identified to TUEC in the future.

II. PROGRAM PLAN OBJECTIVES

TUEC continues to be committed to the safe, reliable, and efficient design, construction, and operation of CPSES and will cooperate fully with the NRC and its TRT to resolve the identified issues. The Program Plan described in this document is intended to establish a framework for responding to the TRT's requests for additional information and to assist in dispositioning the associated issues. Where necessary, corrective action will be taken. Appropriate action will also be taken to preclude similar deficiencies from occurring in the future. Therefore, the objectives of the Program Plan are to:

- Evaluate and respond to the issues raised by the TRT
- Identify the root cause and evaluate the generic implications of identified deficiencies
- Evaluate the collective significance of identified deficiencies
- Define necessary corrective actions for identified deficiencies
- Define steps necessary to preclude similar occurrences in the future

III. PROGRAM PLAN PRINCIPLES

To ensure that the Program Plan objectives are met, the program was developed using the following principles:

A. Thorough Reviews

The NRC's September 19, 1984, letter and its attachment identified specific requests for additional information and provided specific examples of potential deficiencies.

It is recognized that the specific examples identified by the NRC-TRT may be representative of an underlying concern. Accordingly, each of these issues will be thoroughly evaluated, even if a preliminary assessment of the specific examples indicates that they have no safety significance.

The NRC-TRT used sampling techniques in the performance of its reviews. In some cases it will be appropriate to expand the size of the sample to explore the issues identified by the NRC-TRT more thoroughly. This will enable TUEC to obtain a more complete understanding of root causes, potential generic implications, and safety significance of any identified deficiencies and to achieve a higher degree of confidence in the Program Plan results.

Some of the issues identified by the NRC-TRT are directly related to similar questions currently before the Comanche Peak Atomic Safety and Licensing Hearing Board (ASLB). For those instances where TUEC is aware of additional information that has been presented to the Board (or matters raised directly by the Board) and that is directly relevant to an issue identified by the NRC-TRT, the Issue-Specific Action Plans will appropriately include consideration of such information.

B. Root Cause Determinations

Root causes will be determined for each issue identified by the NRC-TRT and for all valid deficiencies identified by the NRC-TRT or by TUEC. Such determinations will enable TUEC to identify potential generic implications, to establish appropriate expanded scopes of review, and to define appropriate corrective actions.

In some cases, preliminary determinations of root causes can be made during the development of the Issue-Specific Action Plans and, where appropriate, reflected in an expanded scope of review in an Issue-Specific Action Plan. However, in most cases, the root causes of potential or actual deficiencies cannot be immediately determined. The Issue-Specific Action Plans are being developed to include tasks that are intended to identify root causes of identified deficiencies. These tasks are oriented both at specific testing of initial root cause hypothesis as well as more general exploratory efforts that will lead to new root cause hypothesis. The Action Plans will provide a description of the iterative actions and alternatives used to identify root causes.

It is recognized that the determinations of root causes may result in a need for changes to the Issue-Specific Action Plans. The Action Plans will be structured to eliminate the need for unnecessary revisions. TUEC will strive to identify the root causes conclusively as soon as possible for each Issue-Specific Action Plan.

C. Generic Implications Evaluations

At such time as the root causes of identified deficiencies have been determined, an evaluation will be performed to identify any associated potential generic implications. Such evaluations will enable TUEC to determine whether the deficiencies represent isolated occurrences, non-isolated or generic weaknesses within a particular area, or generic weaknesses that are programmatic in nature.

The results of such evaluations, in conjunction with an assessment of the safety-significance of the deficiencies and weaknesses, will enable TUEC to define appropriate expanded scopes of review and to identify appropriate corrective actions.

D. Safety Significance Evaluations

The safety-significance of identified deficiencies, both specific and generic/programmatic, will be evaluated to facilitate the definition of the scope of appropriate expanded reviews and the definition of appropriate corrective action.

E. Collective Significance Evaluation

The Collective Significance Evaluation will focus on the integrated impact of the identified deficiencies, both specific and generic/programmatic, on the CPSES project.

This evaluation will be based primarily on the information developed through the root cause determinations, generic implications evaluations, and safety significance evaluations. It will include a determination as to whether the existence of multiple, apparently isolated and relatively minor deficiencies indicates a common shortcoming in the programs and procedures applicable to the CPSES project. It will also identify "lessons learned" as they apply to future activities at CPSES Units 1 and 2.

F. Corrective Actions

Appropriate corrective actions will be defined and implemented to resolve all specific deficiencies identified by the NRC-TRT and by TUEC during the course of this review and evaluation program.

In addition to corrective actions designed to resolve specific deficiencies, actions will be identified to prevent the future occurrence of similar deficiencies at CPSES Units 1 and 2. Such actions will be developed using the results of the evaluations of root causes, generic implications, and collective significance. Accordingly, the focus of these corrective actions will be to resolve actual or potential weaknesses that are generic or programmatic in nature.

G. Objectivity

The Program Plan submitted to the NRC staff by TUEC on October 8, 1984, included a number of features that were intended to provide assurance regarding the objectivity of the Program. Nonetheless, during subsequent public meetings with the NRC staff, it became apparent that it would be necessary to incorporate additional features to further ensure the objectivity and credibility of the Program. Accordingly, additional programmatic features have been implemented to ensure that the Program is conducted in such a manner that its objectivity and credibility will be beyond question.

As described in Section IV, the CPRT Program Organization includes a substantial number of participants in key decision-making positions who are affiliated with organizations external to TUEC. Three of the six members of the Senior Review Team and all five Review Team Leaders are experienced nuclear-industry consultants who have not been previously involved with the CPSES activities that they will now be reviewing. The Review Team Leaders, subject to Senior Review Team review and approval, have the authority and responsibility to establish the scope and content of the Issue-Specific Action Plans and to determine how and by whom the Issue-Specific Action Plans will be implemented. The members of the SRT and the Review Team Leaders have access to all plant areas, documentation, calculations, files, and personnel as they deem necessary to meet the Program Objectives.

The Senior Review Team has established the following guidelines with respect to the objectivity in implementation of the Action Plans:

- Analyses and calculations either will be performed by an organization not previously responsible for the technical subject area for the CPSES project or an engineering design verification of the analysis/calculation will be performed by a third-party organization.

- Inspections either will be performed by qualified inspectors not previously affiliated with the CPSES project and not currently affiliated with TUEC or its principal contractors for the CPSES project or the inspections will be performed by qualified inspectors who were not personally involved in the inspection activities in question and an inspection validation program will be conducted on a sampling basis by third-party inspection personnel.
- Selection of personnel for inspection activities will be mutually agreed upon by the responsible Review Team Leader and the Review Team Leader for the QA/QC area.
- Records reviews and evaluations either will be performed by third-party personnel or by CPSES project personnel with a third-party validation on a sampling basis.
- Testing and NDE activities (other than preoperational testing) will be conducted and test results will be certified by third-party personnel.

H. Personnel Qualifications/Training

Issue-Specific Action Plan implementation activities (such as analyses, inspections, records reviews, and testing) will be performed by personnel selected by the Review Team Leaders on the basis of technical competence and subject to the objectivity guidelines noted above. (For Action Plan activities performed prior to the adoption of Revision 1 of the Program Plan, each Review Team Leader will determine the acceptability of that work relative to the additional objectivity and other requirements contained in Revision 1.) Where applicable, such personnel will also receive training on the procedures to be utilized and will be qualified/certified in accordance with the existing CPSES QA Program provisions.

I. Sampling

Issue-Specific Action Plan implementation activities may include the use of sampling techniques. The bases for using sampling and the sampling method will be documented in each Issue-Specific Action Plan when sampling is used.

In general the following guidelines will apply:

- Samples will be randomly selected from populations or subpopulations of concern (e.g. of concern to safety) for the purpose of identifying the existence and/or the extent of potential deficiencies.
- MIL-STD 105D, or other appropriate procedures, will be used to determine sample size. Sampling programs will be designed to include a limiting quality of 5 percent with an acceptance probability of 0.05 (i.e. at least 95% of the population is in conformance with the acceptance criteria at the 95% confidence level).
- Acceptance/rejection criteria will be explicitly defined.

Mr. John Reed of Jack Benjamin & Associates will be used as a third-party engineering statistics consultant to provide an objective evaluation of the adequacy of the design of each sampling program and to ensure consistency in the interpretation of results.

J. Records and Quality Assurance

The Program Plan requires that the activities performed in accordance with each Action Plan be documented appropriately along with the results of the Action Plan. The resulting records will be maintained in auditable form.

Action Plan activities that otherwise would be subject to the CPSES QA program shall be performed in accordance with the applicable portions of that program.

Utilizing the general principles presented above, revised Issue-Specific Action Plans are being developed for each issue identified in the September 18, 1984, letter with consideration given to comments received at the October 18 and 23 meetings. These revised Action Plans will be provided as a revision to Appendix A of this document. Similar Issue-Specific Action Plans will be developed to respond to TRT questions in the mechanical, QA/QC, and protective coatings areas when they are identified to TUEC.

IV. PROGRAM ORGANIZATION AND FUNCTIONAL RESPONSIBILITIES

A. Introduction

The organization established by TUEC to develop and implement this Program Plan has been designated as the Comanche Peak Response Team (CPRT). A chart depicting the organizational structure and principal members of the CPRT is presented as Attachment 1. The personnel assignments to this project reflect the importance that TUEC has attributed to its successful conduct and completion.

B. Team Members -- Roles and Responsibilities

1. Senior Review Team

A Senior Review Team, consisting of senior TUGCO line managers and senior nuclear-industry consultants, has been established with overall responsibility for the development, implementation, and management of the CPRT Program.

The Senior Review Team (SRT) for the CPRT Program consists of the following members:

Mr. Lou F. Fikar, Executive Vice-President,
Engineering, TUGCO

Mr. Billy R. Clements, Vice-President, Nuclear
Operations, TUGCO

Mr. John W. Beck, Manager, Nuclear Licensing,
TUGCO

Mr. John C. Gilbert, Consultant; Manager,
Nuclear Safety & Licensing, TERA Corporation

Mr. Anthony R. Buhl, Consultant; President,
Energx Corporation

Mr. John L. French, Consultant; Vice-President,
Delian Corporation

The specific responsibilities of the Senior Review Team include the following:

- Development of the CPRT Program Plan, and any subsequent revisions thereof
- Establishment of CPRT Program standards for personnel qualifications and objectivity

- Assignment of CPRT Program Review Team Leaders
- Review and approval of Issue-Specific Action Plans, and any subsequent revisions thereof
- Ensuring that necessary resources are provided to support the successful implementation of the CPRT Program
- Ensuring that "root cause" and "generic implications" evaluations are conducted as soon as possible for each issue identified by the TRT
- Review and approval of "root cause" determinations and "generic implications" assessments, including evaluations of the adequacy of the Action Plans to address these matters
- Monitoring the status of the implementation of the Issue-Specific Action Plans
- Review and approval of the Issue-Specific Action Plan Results Reports
- Review and approval of the Collective Significance Evaluation Report
- Advising the President of TUGCO regarding the adequacy and status of the implementation of the CPRT Program

Mr. Fikar is chairman of the SRT. The SRT chairman has assigned additional responsibilities to certain SRT members. Mr. Beck will serve as the principal interface with the NRC staff's TRT Program Director for CPRT/TRT matters. Mr. Guibert will be responsible for the development of the Collective Significance Evaluation Report.

2. Senior Review Team Support Group

In order to assist the SRT in the execution of its responsibilities, an SRT Support Group has been established. The functions of the SRT Support Group fall within the two general categories of project coordination and project administration and include the following specific activities:

- Assisting the Review Team Leaders in obtaining access to CPSES project personnel, project documentation, and project physical spaces

- Providing necessary on-site clerical and administrative support to the SRT and to the Review Team Leaders
- Maintaining the CPRT Project Central File
- Developing programmatic procedures and guidelines at the request and for the approval of the SRT
- Assisting the SRT in monitoring the implementation schedules for the Issue-Specific Action Plans
- Other support functions as assigned by the SRT

3. Review Team Leaders

Review Team Leaders have been assigned to develop and manage the implementation of the Issue-Specific Action Plans within each of the six general areas evaluated by the NRC's TRT. Each of the Review Team Leaders is a member of an organization external to TUEC.

Review Team Leaders were selected by the Senior Review Team using the following criteria:

- Knowledge and experience in quality assurance, nuclear safety, and the review area subject matter, as appropriate.
- Managerial competence based on experience in managing technical projects and reviews
- Integrity of both the individuals and the organizations with which they are affiliated based upon their reputation and standing within the nuclear industry
- Objectivity of both the individuals and the organizations with which they are affiliated based upon their demonstrated capability and reputation for providing objective, dispassionate technical judgements on the basis of technical merit.
- Objectivity of both the individuals and the organizations with which they are affiliated based upon the lack of previous involvement in the CPSES project activities in question

The specific Review Team Leader assignments are as follows:

Mr. Howard A. Levin; Manager, Engineering, TERA Corporation; Review Team Leader for the Civil, Structural, and Mechanical Areas

Mr. John L. Hansel; Director, Energy & Environmental Science Division, Evaluation Research Corporation; Review Team Leader for the Quality Assurance/Quality Control Area

Mr. Martin B. Jones, Jr.; Private Consultant; Review Team Leader for the Electrical/Instrumentation Area

Mr. E. P. Stroupe; Director, Technical Services Division, Technology for Energy Corporation; Review Team Leader for the Protective Coatings Area

Mr. Monte J. Wise; President, Wise & Associates; Review Team Leader for the Testing Programs Area

The specific responsibilities of the Review Team Leaders include the following:

- Serving as the principal interface with the NRC-TRT Leaders in their respective areas for the purpose of ensuring that additional clarifying information is obtained (where necessary), for obtaining feedback on the adequacy of Action Plans within their area, and for ensuring that responses to NRC questions regarding implementation of Action Plans within their area are provided
- Development of the Issue-Specific Action Plans within their area, and any subsequent revisions thereof, using the format and content guidelines set forth in Attachment 2
- Ensuring that personnel implementing the Action Plans (including personnel performing validations or design verifications described in Section III.G, above) within their area meet CPRT Program standards for personnel qualifications and objectivity
- Assignment of Issue Coordinators
- Identifying and obtaining necessary resources to implement the Action Plans within their area
- Ensuring that the Action Plans within their area are being implemented appropriately
- Providing periodic status reports to the Senior Review Team on the implementation of the Issue-Specific Action Plans within their area

- Determining "root causes" and "generic implications" of identified deficiencies within their area; ensuring that these determinations are adequately addressed in the associated Action Plans or ensuring that the Action Plans are appropriately revised
- Identifying and defining corrective actions for any identified deficiencies within their area
- Identifying and defining necessary actions to preclude occurrence of similar deficiencies in the future
- Developing Issue-Specific Action Plan Results Reports, using the format and content guidelines set forth in Attachment 3
- Maintaining a Project Working File for each Action Plan within their area
- Transferring Project Working Files to the Project Central File at such time that each Action Plan is completed (i.e., Action Plan Results Report reviewed and approved by the Senior Review Team)

4. Issue Coordinators

In order to assist the Review Team Leaders in implementing the Issue-Specific Action Plans within their area, they have been authorized to assign Issue Coordinators for each of their specific Action Plans. Review Team Leaders also have the option of assigning themselves as Issue Coordinator for some or all of the Action Plans within their area.

The criteria for selection of Issue Coordinators is essentially the same as that for selection of Review Team Leaders. In cases where an Issue Coordinator has had some degree of previous involvement in the CPSES project activities in question, specific provisions will be established in the Action Plan to ensure that the objectivity guidelines of Section III.G are met.

Issue Coordinators are responsible for assisting the Review Team Leaders in Issue-Specific activities as directed by the Review Team Leaders.

V. PROGRAM PROCESS

The overall process for the development and implementation of this Program Plan and its associated individual Action Plans was presented, to a large extent, in the preceding sections.

A summary of the key elements of the overall program process is presented in Attachment 4.

Additional information related to the process for developing Issue-Specific Action Plans is presented in Attachment 2. While each Action Plan is unique, the programmatic guidelines set forth in Attachment 2 and the Action Plan review and approval process ensure that each Action Plan is developed and implemented in a manner that meets the Program Plan Objectives and the Program Plan Principles. Each Action Plan includes a description, where applicable, of the following:

- scope and methodology
- identification of procedures and checklists
- participating personnel
- qualifications of participating personnel
- training of participating personnel
- sampling plan
- relevant standards
- applicable acceptance criteria, and
- applicable decision criteria.

Additional information related to the process for developing Issue-Specific Action Plan Results Reports is presented in Attachment 3. The programmatic guidelines set forth in Attachment 3 and the Results Report review and approval process ensure that the following subjects are adequately addressed where appropriate during the implementation of the Action Plan:

- identification of root causes of identified deficiencies,
- an evaluation of the safety significance of any identified deficiencies,
- a determination regarding potential generic implications and a description of how they were addressed,
- identification of necessary corrective actions to resolve identified deficiencies,
- identification of necessary action to preclude recurrence in the future.

To the maximum extent possible, the scope of the Issue-Specific Action Plans will be based on a preliminary assessment of the root cause and potential generic implications of the identified deficiencies. Action Plans will be sufficiently broad to identify and assess root causes, generic implications, and safety significance. Accordingly, most of the Issue-Specific Action Plans will utilize iterative or phased implementation approaches that include an initial phase which is exploratory in nature. Conclusive determinations of root causes and potential generic implications will be made as soon as possible. Determinations with respect to the safety significance of identified or potential deficiencies will also be reached. The adequacy of the scope of the associated Issue-Specific Action Plans will be reassessed in light of these determinations. If an Action Plan is determined not to be sufficiently broad to meet program requirements, it will be appropriately revised and new Action Plans may be developed (if appropriate) to ensure that the potential generic implications of identified deficiencies are properly investigated and addressed.

VI. PROGRAM OUTPUTS

The principal outputs of the CPRT Program will be the Action Plan Results Reports. The format and content to be utilized in the development of these Reports is presented in Attachment 3. Specific conclusions will be reached regarding root cause, safety significance, and generic implications. Necessary corrective actions will be identified to resolve deficiencies, including any corrective actions necessary to preclude recurrence of similar deficiencies in the future.

An additional report documenting the results of the Collective Significance Evaluation will be developed. This report will, in large measure, be based upon an integrated assessment of the Action Plan Results Reports. The principal focus of this evaluation will be to identify additional programmatic "lessons learned" which should be reflected in future project-related activities for both Comanche Peak Unit 1 and Comanche Peak Unit 2.

At the conclusion of the CPRT Program, a Final Report summarizing the results and conclusions of the Program will be submitted to the NRC. Interim status reports or briefings will be provided to the NRC staff as requested.

VII. PROGRAM QUALITY ASSURANCE

Activities associated with the implementation of individual Action Plans will be conducted within the framework of the existing CPSES QA Program. Existing procedures, revised or supplemented as necessary to address special requirements, will be used to perform reassessment activities, reinspection activities, and rework activities performed by engineering, construction, and QA/QC personnel.

VIII. PROGRAM RECORDS

In order to ensure that an auditable record of the CPRT Program is available, the documentation described below will be developed and maintained.

A. Project Central File

The Project Central File will be maintained by the SRT Support Group. At the completion of the CPRT Program, it will contain all project documentation, including the Project Working Files maintained by the Review Team Leaders during the conduct of the Program. During the conduct of the Program, the Project Central File will contain the following material:

- A copy of the Program Plan submitted to the NRC and any subsequent revisions thereof
- A copy of the individual Action Plans submitted to the NRC and any subsequent revisions thereof
- A copy of the individual Action Plan Results Reports
- A copy of the individual Action Plan Working File for all Action Plans which have been completed (i.e., Action Plan Results Reports reviewed and approved by the Senior Review Team).

B. Project Working Files

Project Working Files will be maintained by the Review Team Leaders for each Action Plan under their cognizance until such time as the Action Plan has been completed. At that time, the Project Working File for the completed Action Plan will be transferred to the Project Central File. The specific material contained in each Project Working File will vary, depending upon the nature of the associated Action Plan; where applicable, it will contain, at a minimum, the following material:

- Copies of letters, memoranda or reports documenting the results of analysis performed as part of the Action Plan, including any associated documentation related to the evaluation of such results.
- Copies of letters, memoranda, or reports documenting the results of testing performed as part of the Action Plan, including any associated documentation related to the evaluation of such results.
- Copies of procedures or checklists used in the performance of testing.
- Copies of letters, memoranda, reports, drawings or other means of documenting the results of inspections performed as part of the Action Plan, including any associated documentation related to the evaluation of such results.
- Copies of procedures or checklists utilized in the performance of inspections.
- Copies of letters, memoranda, or reports documenting the results of record reviews performed as part of the Action Plan, including any associated documentation related to the evaluation of such results.
- Copies of procedures or checklists utilized in the performance of record reviews.
- A record of personnel qualifications and a record of training for personnel participating in the implementation of the Action Plan.

IX. SCHEDULE

At the present time, it is impractical to accurately estimate the schedule for completion of the entire CPRT Program. This is primarily due to two elements of uncertainty:

- Several of the Action Plans utilize a phased approach for resolution, consequently the full scope of the necessary review effort cannot be determined until preliminary results become available; and
- The TRT questions in the areas of mechanical, QA/QC, and protective coatings have not yet been provided to TUEC, consequently the nature of the Action Plan activities necessary to respond to these questions (and their associated schedule) cannot be determined until a later date.

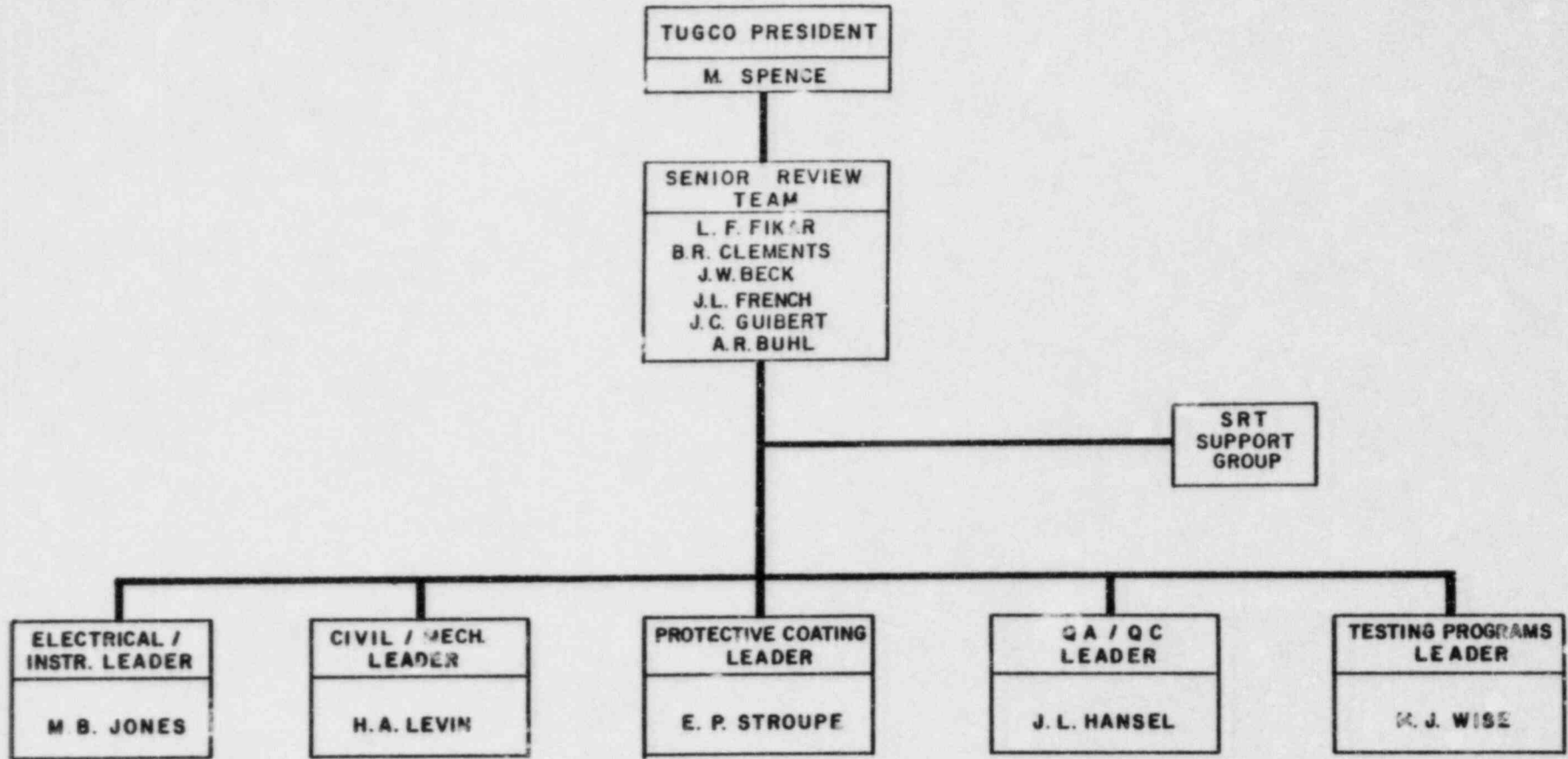
The Action Plans presented in Appendix A address, to the extent practicable at the present time, the current status and projected schedules for completion of selected elements of the individual Action Plans and, in a few cases, the schedule for completion of the entire Action Plan. As additional information becomes available regarding projected completion schedules for individual Action Plans and for the entire CPRT Program, it will be provided to the NRC staff.

TUEC is committed to a thorough and complete review of the safety-related issues identified by the TKT. A satisfactory resolution of these issues which potentially affect the safe operation of the Comanche Peak Units takes precedence over schedule concerns.

As the implementation of the CPRT Program proceeds and after the additional TRT questions have been received and additional Action Plans have been developed to address them, TUEC intends to perform an evaluation to determine, at that time, whether a safety basis exists to support authorization for fuel loading and precritical testing at Comanche Peak Unit 1 prior to the completion of the entire CPRT Program. TUEC will inform the NRC staff of the results of this evaluation.

COMANCHE PEAK RESPONSE TEAM

(CPRT)



ATTACHMENT 2

ACTION PLAN FORMAT

ITEM NUMBER _____

(Short Title)

1. Description of Issue Identified by NRC
 - Verbatim statement of the TRT issue as stated in the enclosure to the NRC issue transmitted letter
 - Develop a separate Action Plan for each numbered TRT item
2. Action Identified by NRC
 - Verbatim statement of NRC - directed action as stated in the enclosure to the NRC issue transmitted letter
3. Background
 - Relevant information which clarifies the issue definition
 - Relevant information to provide additional perspective and understanding of the issue (including consideration of relevant information before the ASLB)
 - An explanation (where applicable) of why TUEC has decided to pursue the approach described under Section 4.0 below, where alternative approaches were available
 - If possible, a statement regarding the preliminary determination of root cause and potential generic implications of identified deficiencies
4. TUEC Action Plan
 - Scope and Methodology
 - Describe approach (phased, if applicable)
 - tasks to be performed without conditions
 - tasks to be performed under certain conditions (e.g., "If we find "x", then we will take the following additional action...")
 - tasks to be performed as part of an expanded review (where applicable and where this has already been determined)
 - describe how potential generic implications are being considered (where applicable and where this has already been determined)

-Procedure(s) to be used

- reference existing procedures
- describe any new or revised procedures

-Participant's Roles and Responsibilities

- which organizations are involved
- scope for each organization
- identify lead individual

-Qualifications of Personnel

- state qualifications of personnel implementing the Action Plan
- reference these qualifications to existing requirements
- discuss training of personnel which will be conducted

-Sampling Plan

- if performing a 100% review, state that a 100% review is being done
- if sampling is used, provide information relevant to the sampling plan, and provide justification for the sample size
- Describe any other features of the sampling plan (e.g. random sampling of the universe, random sampling of each discipline, etc.)
- Provide the definition of a "reject"

-Standards/Acceptance Criteria

- describe the standards (e.g., FSAR, IEEE, Reg. Guides, etc.) against which you are performing the review

-Decision Criteria

- describe the criteria to be used for going to the next phase of a phased-approach review or for expanding the sample size for a review using sampling techniques

-Describe the criteria for closing out this item
(this is related to the standards/acceptance
criteria and the criteria for subsequent phases)

5. Schedule/Status

Describe schedule and current status, to the extent possible. Reference the schedule to the phases where appropriate. If a schedule for a phase cannot be provided until additional information is obtained, state that a schedule will be developed at the completion of the previous phase.

ATTACHMENT 3

ACTION PLAN RESULTS REPORT FORMAT

ITEM NUMBER _____

(Short Title)

1. Description of Issue Identified by NRC
(same as Action Plan)
2. Action Identified by NRC
(same as Action Plan)
3. Background
(same as Action Plan)
4. TUEC Action Plan
 - Scope and Methodology
 - Same as Action Plan except:
 - where conditional phases were implemented, reword the conditional statement so that it is clear that the phase had been implemented
 - where a conditional phase was determined not to be necessary, state that it was not needed and provide a reference to a subsequent part of the report which justifies the decision not to implement the conditional phase
 - describe any other substantive changes to the Action Plan and why the changes were necessary
5. Discussion of Results
 - Comparison of results against standards/acceptance criteria
 - Comparison of results against decision criteria
 - Discussion of corrective actions for any identified deficiencies (e.g., any reinspections, rework, reanalysis, etc.)

6. Conclusions

- Identification of root cause of any deficiencies
- Evaluation of safety significance of identified deficiencies
- Evaluation of generic implications
 - where applicable, describe expanded scope of review to address them
 - demonstrate linkage to the root cause
 - where applicable, describe basis for conclusion that no generic implications exist

7. Ongoing Activities

- Describe any activities still in progress
- State whether these on-going activities have safety significance
- State schedule for completing activities. State whether the work must be completed by fuel load, initial criticality, or power above 5%.

8. Action to Preclude Occurrence in the Future

- Training, Procedural changes, etc.

ATTACHMENT 4

SUMMARY OF PROGRAM PROCESS

1. Receipt of NRC-TRT request for additional information.
2. Preliminary review of issue by Senior Review Team and appropriate Review Team Leader.
3. Review Team Leader obtain additional, clarifying information from NRC-TRT to ensure full understanding of the concern (if necessary).
4. Review Team Leader make a preliminary determination of root cause and potential generic implications of identified deficiencies (if possible)
5. Review Team Leader develop Action Plan to resolve concern using guidance provided in Attachment 2.
6. Action Plan approved by Senior Review Team.
7. Review Team Leader implement Action Plan.*
8. Review Team Leader make a conclusive determination of root cause and potential generic implications of identified deficiencies.
9. Review Team Leader obtain concurrence of Senior Review Team in root cause definition and potential generic implications assessment.
10. Review Team Leader develop revised Action Plan to reflect the conclusive determination of root cause and potential generic implications (if applicable).
11. Revised Action Plan approved by Senior Review Team (if applicable).
12. Review Team Leader implement Revised Action Plan (if applicable).*
13. Review Team Leader define necessary corrective action for identified deficiencies (if applicable).
14. Review Team Leader define necessary corrective action to prevent recurrence of similar deficiencies in the future (if applicable).
15. Review Team Leader develop Action Plan Results Report using guidance provided in Attachment 3.
16. Action Plan Results Report approved by Senior Review Team.

17. SRT assess Action Plan Results Report as part of Collective Significance Evaluation.
18. SRT define necessary corrective actions stemming from the Collective Significance Evaluation
19. Submit Final Report to NRC, including implementation schedule for necessary corrective actions.
20. TUEC implement necessary corrective action.

*Action Plans and revised Action Plans will be submitted to the NRC staff for review and comment at the time they have been approved by the SRT; however, implementation of Action Plans will not be delayed pending receipt of NRC staff comments. Any necessary changes to Action Plans resulting from NRC review and comments will be incorporated expeditiously.

APPENDIX A

ISSUE-SPECIFIC ACTION PLANS

(Revision 1 to be submitted
under separate cover)