



UNITED STATES  
NUCLEAR REGULATORY COMMISSION  
WASHINGTON, D.C. 20555-0001

May 8, 1996

LICENSEE: Entergy Operations, Inc.  
FACILITY: Grand Gulf Nuclear Station, Unit 1  
SUBJECT: APPEAL MEETING ON THE LICENSEE'S PROPOSED AUDIT TOPIC-FREQUENCY  
CHANGES TO THE QUALITY ASSURANCE PROGRAM

A meeting was held on Wednesday, April 4, 1996, for the licensee to appeal the decision by the Nuclear Regulatory Commission (NRC) staff, in its letter of January 3, 1996, that certain changes in Revision 14 of the Grand Gulf Quality Assurance (QA) program involved with audit topics and frequency of audits (i.e., audit topic-frequency changes) are considered to reduce the licensee's commitments for the QA program and, in accordance with 10 CFR 50.54(a), can not be implemented without NRC staff approval. The meeting was held at NRC headquarters in Rockville, Maryland, with representatives of the licensee. A notice of this meeting was issued by the NRC staff on March 14, 1996.

The licensee appealed the staff's decision concerning 50.54(a) to the Associate Director for Technical Review (ADT) of the Office of Nuclear Reactor Regulation, NRC. This document is a summary of the important issues discussed in the meeting and the decision of the ADT. Attachment 1 is the list of attendees and Attachment 2 is the handout presented by the licensee in the meeting.

BACKGROUND:

The regulations in 10 CFR 50.54 require certain conditions in every license authorizing a licensee to operate a nuclear power plant. One of these conditions, delineated in 50.54(a), is that such a licensee must have a QA program which is described in the Final Safety Analysis Report (FSAR) for that nuclear power plant. Under 50.54(a)(3), it is stated that licensees may make a "change to a previously accepted quality assurance program description ... provided the change does not reduce the commitments in the program description ...." It is further stated that "changes to the quality assurance program description that do reduce the commitments must ... receive NRC approval prior to implementation." These statements are the change criteria in 50.54(a) that were discussed in this meeting.

As explained in the licensee's letters of November 6 and December 18, 1995, the commitment to conduct 14 specific audits at specific frequencies were to be deleted from the QA program, and replaced by a commitment to perform audits according to a performance-based audit scheduling program which the licensee stated would focus limited audit resources on areas of plant operation important to safety and in need of attention. Additionally, audit subject areas which previously had not been considered would be included in the audit scheduling program. The licensee stated that it had evaluated these changes in accordance with 50.54 and had determined that they enhanced QA commitments

DFOL 11

and increased the effectiveness of the audit program while maintaining compliance with 10 CFR Part 50, Appendix B requirements for QA programs.

The licensee also explained these changes to the staff in the meeting of November 16, 1995, at NRC Region IV in Arlington, Texas. A meeting summary was issued by the staff on December 4, 1995.

The requirements to conduct these audits at certain frequencies had previously been listed in the Grand Gulf Technical Specifications (TSs) and were recently approved by the NRC to be transferred to the FSAR for the plant in Grand Gulf License Amendment No. 120 dated February 21, 1995, which stated that these requirements would be placed in the FSAR and would be under the controls of 50.54. These requirements did not appear in Revision 9 of the FSAR, which was submitted December 11, 1995. This was the first revision to the FSAR since Amendment No. 120.

The licensee concluded under 50.54(a), as described in its letters to NRC of November 6 and December 18, 1995, that removing these requirements from the FSAR was not a reduction in commitments and, therefore, could be implemented without staff review and approval. The licensee's letter of December 18, 1995, submitted Revision 14 of the Grand Gulf QA program which included the audit topic-frequency changes. Although the requirements would have been in the FSAR, they are by reference part of the QA program.

The staff responded in its letter of January 3, 1996, that it had reviewed the audit topic-frequency changes described in the letter of November 6, 1995, and discussed in the meeting of November 16, 1995. The staff stated that it appreciated the manner in which the licensee presented the proposed changes to the staff so that it would understand the changes; however, the staff concluded that the elimination of the required audit topics and frequencies was a reduction in the QA program commitments.

Attachment 3 is a copy of the performance-based audit topic-frequency changes to the QA program provided by the licensee as an attachment to its letter of November 6, 1995. All of the QA program changes were presented in the licensee's letter of December 18, 1995 (i.e., Revision 14 of the QA program). The lines through the text in Attachment 3 denote the text to be removed from the QA program. The bold-faced text is the text being added to the QA program.

In response to the staff's letter of January 3, 1996, the licensee submitted its letter of February 12, 1996, and stated the following:

- The staff's evaluation is in terms of what commitments were being eliminated without recognizing that the audit topic-frequency changes involved the substitution of a more comprehensive commitment to a performance-based scheduling process.
- The licensee's evaluation of the changes are based upon safety improvements.

MEETING SUMMARY:

The meeting was begun with statements by the NRC project manager for Grand Gulf which provided the background for the meeting, which is discussed above. It was also stated that the agenda would be the following:

- Licensee presenting its proposed QA audit topic-frequency changes and its basis that these changes may be made without prior NRC approval under the change criteria in 50.54(a),
- NRC staff presenting its basis that these changes may not be implemented without prior NRC approval under 50.54(a),
- Final questions from the ADT,
- Adjourn the meeting for the ADT to caucus with the staff, and
- Reconvene the meeting for the decision by the ADT.

The licensee's presentation is described in its handout in Attachment 2. In the first part of its presentation, the licensee presented an overview of its performance-based QA audit scheduling process and the purpose of the audit topic-frequency changes. The licensee stated that the performance-based scheduling program was to avoid rote audit topics, focus the limited audit resources on known problem areas, factor safety significance into topic selection, and ensure all areas important to safety are considered. The licensee further stated that the process would use an expert panel to weight information on plant activities from all possible sources to determine the best application of the QA program audit resources.

Tables in the licensee's proposed performance-based audit scheduling program (Attachment 2) showed the following:

- Performance would be assessed based on licensee audits (quality deficiencies, root cause analyses, self assessments, procedure reviews, and monitorings), Institute of Nuclear Power Operations (INPO) inspection results, licensee event reports (LERs), and NRC inspections.
- There are 449 different plant activities to be considered for audits with each one having a separate Activity Code (5 pages).
- The Activity Rating Scale is 7 levels from exceptional performance to significant deficiency or notice of violation.
- There are 126 Group Codes for defining the different organizations involved (1 page).
- The recommended actions would be to reduce oversight, maintain normal oversight, or increase oversight.

- The current Evaluation Schedule identifies the specific broad subject areas to be considered for audits each month and assures that these areas are considered every year.
- Examples of the audits, assessments, monitoring, and inspections to be conducted during the first and second quarters of 1996 at Grand Gulf Nuclear Station (2 pages).

The licensee concluded its presentation with a discussion of its basis that the proposed audit topic-frequency changes did not meet the change criteria in 50.54(a) that requires prior NRC approval before the implementation of QA program changes. The licensee stated that the staff in its interpretation of 50.54(a) has concluded the following:

- An individual commitment change must meet the reduction test in 50.54(a) without consideration of the compensating effects of related changes.
- Deletion of specific information that describes how requirements of Appendix B of 10 CFR Part 50 will be met is considered a reduction commitment.
- Substituting an equivalent or better commitment is not allowed.
- Safety improvement has no bearing on 50.54(a).

The licensee stated that all changes to a QA program involve a deletion of specific information from the program and, therefore, could not meet the change criteria of 50.54(a). It described several examples of QA program changes that it believed would constitute reduced commitments based on the staff's view of 50.54(a).

The licensee stated that the term "commitments" should refer to the net change and not to a portion of a change out of context with the entire change and that the term reduction has no meaning unless it is interpreted with respect to the change in safety at the plant. The licensee concluded its presentation with the statements that the proposed audit topic-frequency changes in the QA program:

- Do not reduce commitments.
- Increase overall safety.

In its presentation, the staff stated 10 CFR 50.54 was amended by the NRC in 1983 because changes to approved QA programs were not being reported to the NRC, and some changes were believed to increase risk to the public health and safety, and to not conform to NRC regulations. Therefore, in the rulemaking, the Commission decided that some changes should require staff review and approval before implementation. The standard imposed in 50.54(a) for determining the need for staff approval has become an interpretation of what

constitutes a reduction in licensee's commitments rather than its safety significance because the terms "commitments" and "reductions in commitments" are not defined in 10 CFR Part 50. The safety significance of the proposed change would be the basis for the staff's evaluation of the change.

The staff indicated that the licensee had provided an accurate description of the change control provisions of 50.54(a). It then explained that, while much information had been presented during meetings with the licensee on the performance-based audit scheduling program, only one sentence exists in the QA program to describe this method (i.e., "Audits shall be scheduled on the basis of the status and importance of the activities to be audited."). This sentence had been in the QA program prior to Revision 14 and, therefore, was not part of the audit topic-frequency changes. The staff stated that, therefore, the net effect of Revision 14 was an elimination of specific audit frequencies and audit topics without any enhancements being made to the QA program.

The staff explained that not all changes to QA programs are considered reductions in commitments and the need for staff approval does not mean that the proposed change is incorrect or unsafe, or the proposed change will not be accepted. The need for staff approval only means that the staff should review the change before it is implemented. The staff stated that some of the licensee's examples of changes constituting reduced commitments, discussed above and described in Attachment 2, may not be reductions in commitments because the changes, without a detailed description, appeared to be expanding rather than reducing the original commitments.

The staff concluded its presentation by stating that the revised QA program, involved with audit topics and frequencies, consisted of only material being deleted from the QA program and that the changes constituted a reduction in commitments when compared to the previous approved program. Therefore, NRC prior approval would be needed to implement the changes.

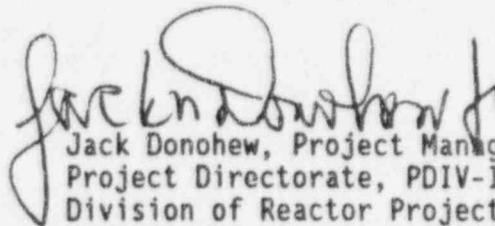
The NRC Office of the General Counsel (OGC) provided a view of what a reduction in commitments means. It stated that the staff's determination of whether a change to a QA program results in a reduction in commitments is a technical matter to be determined by the technical staff, not OGC. OGC, however, noted that the licensee in its presentation had confused QA commitments containing separate requirements with those permitting acceptable actions at the licensee's option. If the QA program commitments being changed defined requirements on the licensee and a particular requirement is eliminated by the change, there is a reduction in commitments. Also, if the commitments being changed define what the licensee is allowed to do and a new allowed option is added by the change, there is also a reduction in commitments. However, if a new requirement is added, or a previously allowed option is deleted, there is no reduction in commitments. Further, OGC stated that if, in fact, a new commitment is equivalent to an eliminated commitment, there is also no reduction in commitments. Therefore, changes can be made to the QA program that do not result in reductions in commitments.

There was a further discussion regarding the licensee's four examples of QA program changes that would constitute reduced commitments under the licensee's understanding of the staff's position in the staff's January 3, 1996, letter. These examples are near the end of Attachment 2. OGC stated that it believed that three of the four examples do not represent reductions in commitments. The discussion then focussed on the remaining example in Attachment 2 which the licensee characterized as a reduction of commitment under OGC's analysis discussed in the previous paragraph. However, OGC stated that it could not make a determination on whether that example did, in fact, represent a reduction in commitment, because the determination must be based on the specific details of the change which are not presented in Attachment 2. OGC ended the discussion stating that it is the responsibility of the licensee to make a determination in the first instance as to whether a specific QA program change involves a reduction in commitments. The staff would then make its determination in reviewing the submittal of the proposed change or through the inspection process.

OGC concluded its presentation by stating that it had no reason to disagree with the staff that the specific changes proposed by the licensee reduce commitments made in the QA program.

The meeting was adjourned for the staff to caucus. The meeting was reconvened and the ADT stated his decision. The ADT stated that the decision only affects the specific audit topic-frequency changes proposed by the licensee in its letter of November 6, 1995, and the licensee has made several good points about the effectiveness of the proposed changes. However, it is clear that 50.54(a) does require staff review and approval of changes reducing commitments to the QA program even though the changes will increase the safety of the plant and the changes proposed by the licensee do reduce the QA program commitments. Therefore, the proposed changes do need staff review and approval before implementation.

The meeting ended with the licensee's statement that it would respond to the request for additional information in the staff's January 3, 1995, letter before the end of April 1996. It also stated that it requested a quick review by the staff because it believed, as stated in the meeting, that the changes when implemented will enhance the safety of the plant. The licensee submitted its response on April 22, 1996.



Jack Donohew, Project Manager  
Project Directorate, PDIV-1  
Division of Reactor Projects III/IV  
Office of Nuclear Reactor Regulation

Docket No. 50-416

Attachments: 1. List of Meeting Attendees  
2. Licensee's Handout  
3. Performance-based audit topic-frequency changes

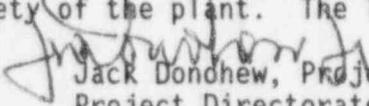
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ATTENDEES AT THE APPEAL MEETING OF APRIL 4, 1996

AUDIT TOPIC-FREQUENCY CHANGES TO THE QUALITY ASSURANCE PROGRAM

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R. Hutchinson	EOI - Grand Gulf
C. Hayes	EOI - Grand Gulf
G.A. Zinke	EOI - River Bend
R. Weisman	NRC/OGC
J. Moore	NRC/OGC
A. Thadani	NRC/NRR/ADT
E. Ford	NRC/NRR/HQMB
W. Haass	NRC/NRR/HQMB
R. Gramm	NRC/NRR/HQMB
S. Black	NRC/NRR/HQMB
R.L. Spessard	NRC/NRR/DRCH
B. Boger	NRC/NRR/DRCH
W. Beckner	NRC/NRR/PDIV-1
J. Donohew	NRC/NRR/PDIV-1
C. Grimes	NRC/NRR/TSB
N. Chapman	Bechtel SERCH

DRCH = Division of Reactor Controls and Human Factors  
EOI = Entergy Operations, Inc.  
HQMB = Quality Assurance and Maintenance Branch  
NRC = Nuclear Regulatory Commission  
NRR = Office of Nuclear Reactor Regulation  
OGC = Office of the General Counsel  
PDIV-1 = Project Directorate IV-1  
TSB = Technical Specifications Branch



# **Grand Gulf Performance-Based Audit Scheduling Program**

***April 3, 1996***

***C. C. Hayes - Director, Quality Programs***

***C. R. Hutchinson - Vice President, Operations***

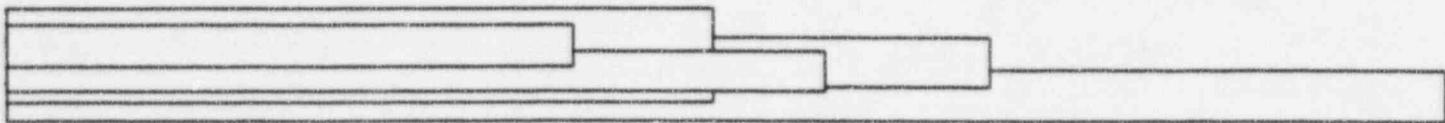
***M. J. Meisner - Director, Nuclear Safety & Regulatory Affairs***

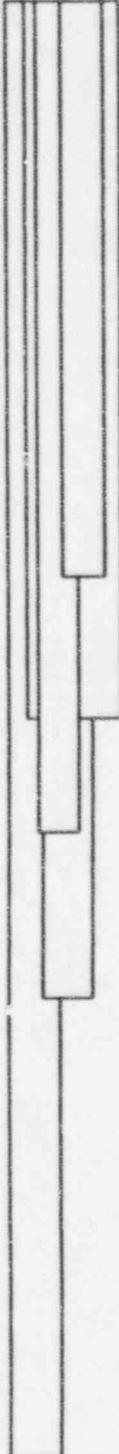


# Meeting Outline

- ◆ **Introduction** **M. J. Meisner**
- ◆ **Overview of performance-based audit scheduling process** **C. C. Hayes**
- ◆ **10CFR50.59 - Reduction in commitments** **M. J. Meisner**
- ◆ **Basis for change**
- ◆ **Conclusions**

# Introduction

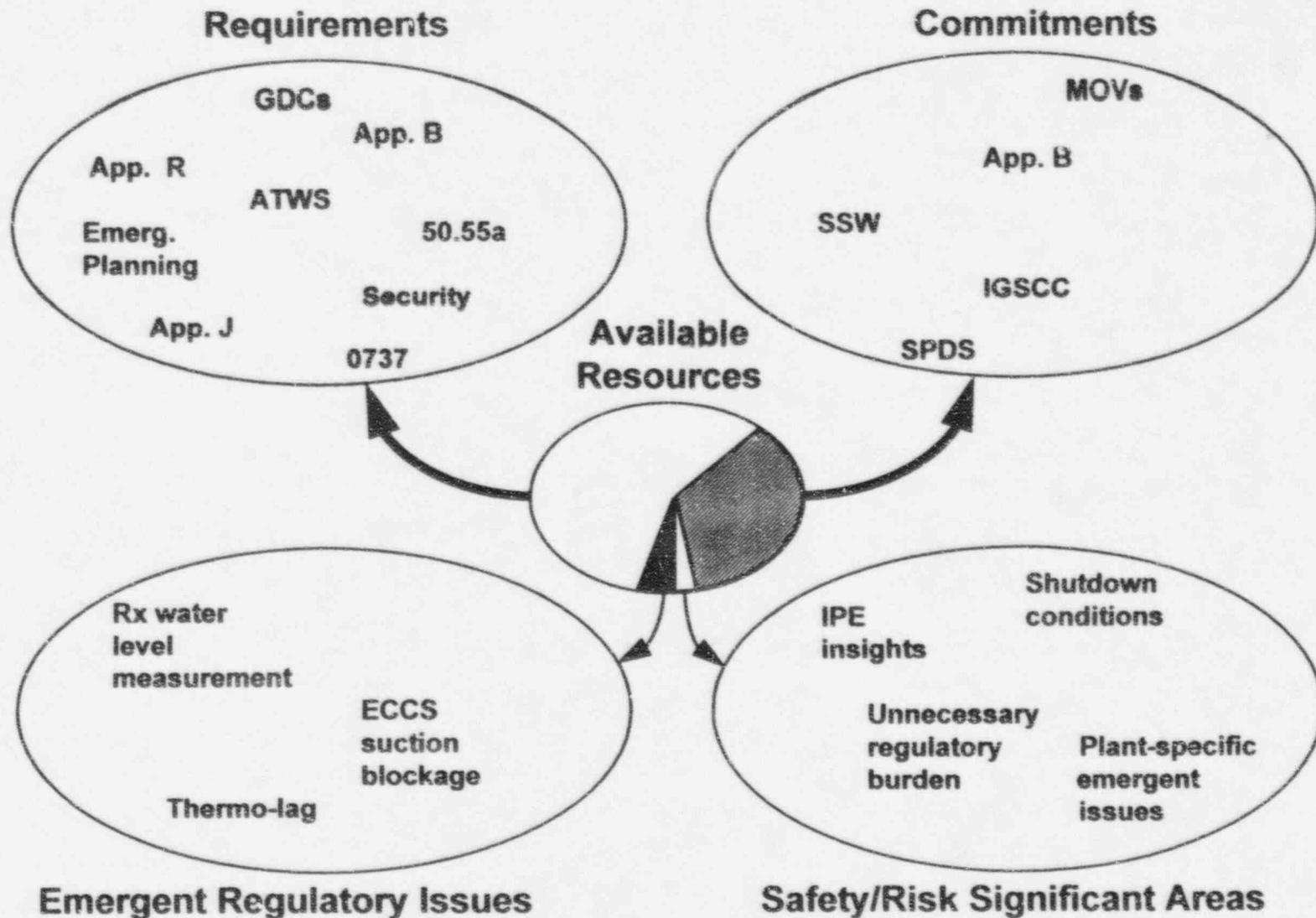




# Background

- ◆ **Improved Tech Spec implementation (3/95)**
  - Relocated audit topics and frequencies to licensee control
  - Change mechanism agreed to be 10CFR50.54 for audit topics
- ◆ **Relocated Tech Specs reviewed to ensure proper balance between safety benefit and resource allocation**
- ◆ **QA program change to enable performance-based audit scheduling program implemented in November, 1995 and presented to NRC**

# Resource Allocation Based on Requirement





# **Audit Scheduling Program Purpose of Change**

- ◆ **Current program - rote audit topics**
  - adds little safety value for mature, high performing activities
  - consumes large majority of audit resources
- ◆ **Performance-based scheduling program**
  - audit resources focus on known problem areas
  - safety significance is factored into topic selection
  - ensures areas important to safety (that are not rote audit topics) are considered

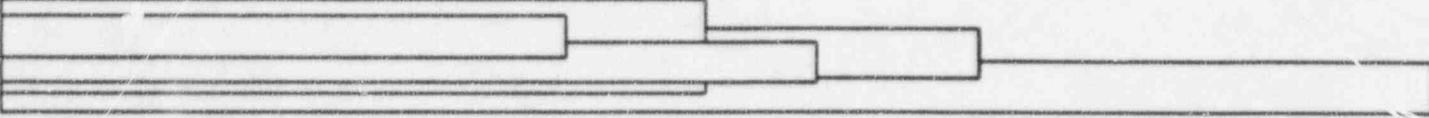


# Elements of Performance-Based Audit Scheduling

- ◆ Selection of audit subject areas
  - Important to safety
  - Plant-specific
- ◆ Assessment indicators reflecting performance with respect to:
  - Safety
  - QA program effectiveness
- ◆ Audit scheduling based on review of assessment indicators

*Performance-based audit scheduling is focused  
on what to audit, not how to audit.*

# Performance-Based Audit Scheduling Process



**GRAND GULF  
NUCLEAR STATION**

**PERFORMANCE  
DATA  
SYSTEM**

**Curtley C. Hayes  
Director of Quality**

# **WHY PERFORMANCE DATA?**

## **PREDICT:**

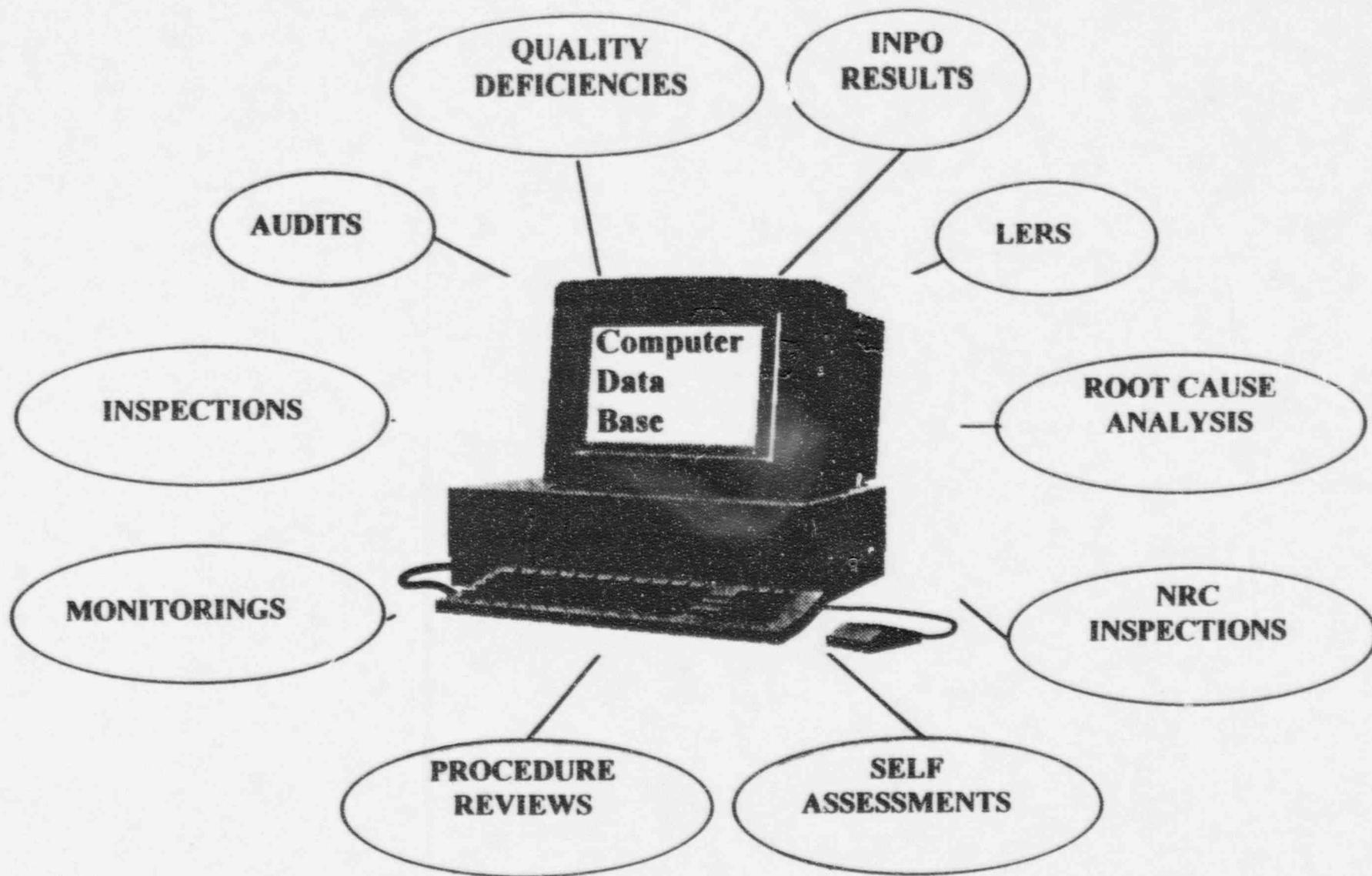
- **Activities to be Audited**
- **Items to Inspect**
- **Procedures to Review**
- **Areas to Monitor**
- **Declining Performance Trends**

# **PROGRAM CHANGES**

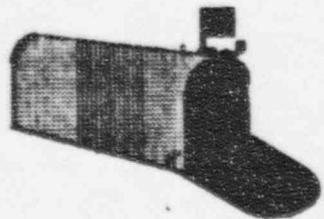
## **ELIMINATE/REDUCE:**

- **Required Audit Frequencies**
- **Required Witness/Hold Points**
- **Established List of Procedures to be Reviewed by Quality**

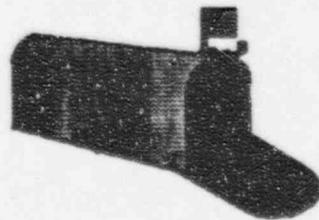
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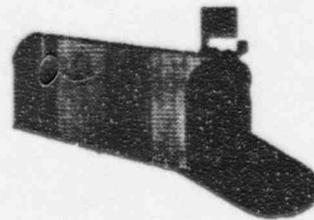
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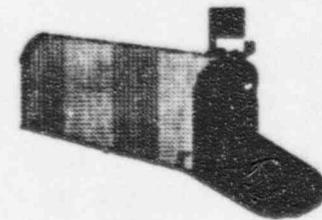
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(CODE 38)**



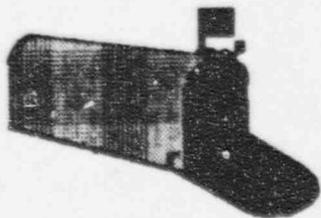
**TEMPORARY  
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(CODE 146)**



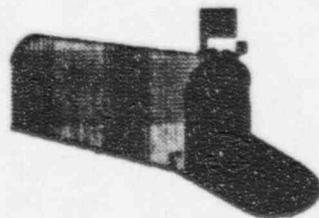
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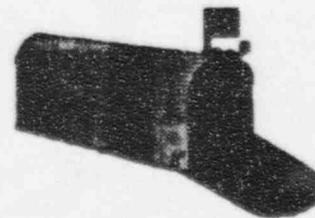
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(CODE J6)**



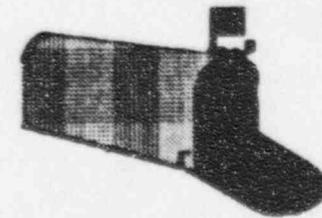
**ATTENTION TO  
DETAIL (CODE 24)**



**MATERIAL  
UTILIZATION  
(CODE 72)**



**CLEARANCE/  
PROTECTIVE  
TAGGING  
(CODE 143)**



**VALVE OPERATION  
(CODE C17)**

## ACTIVITY CODES

## Attachment C

<b>Chemistry/Environmental</b>	<b>B</b>
Reg Guide 4 15	B1
Offsite Dose Calculation Manual	B2
Environmental Protection Plan	B3
Chemical Reagent Control	B4
Sampling Program	B5
Laboratory Activities Waste Control	B6
Chemical Control Program	B7
Hazardous Materials Program	B8
Water Chemistry	B9
<b>Computer Software</b>	<b>X</b>
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Database Control	X5
Computer Equipment	X6
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<b>Fire Protection</b>	<b>F</b>
Combustible Storage/Control / Ventilation	
/Permit/Transit	F1
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Emergency Lighting	F3
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Attentiveness	J3
Professionalism	J4
Turnover	J5
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red line changes initialed	56A7
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revision bars	56A11
procedure format	56A12
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S. # and/or I's	56A15
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<u>Editorial</u>	56C1
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procedure steps are clearly written (fog index)	56C3
spelling	56C4
typo's, missing words, grammatical errors	56C5
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## ACTIVITY CODES

## Attachment C

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Wavers Training	T12
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Certification	T16
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# **ACTIVITY RATING SCALE**

- 1 Exceptional Performance/Strength**
- 2 Fully Acceptable**
- 3 Acceptable But Could Be Improved**
- 4 Minor Deficiency - Corrected During Observation**
- 5 Non-Significant QDR/Non-Cited Violation**
- 6 Significant QDR/Notice Of Violation**

# **ACTIVITY RATING SCALE**

- 1 Exceptional Performance/Strength**
- 2 Fully Acceptable**
- 3 Acceptable But Could Be Improved**
- 4 Minor Deficiency - Corrected During  
Observation**
- 5 Non-Significant QDR/Non-Cited  
Violation**
- 6 Deficiency Associated with a Safety  
Significant System/Component**
- 7 Significant QDR/Notice of Violation**

# **GROUP CODES (TOTAL 126)**

## **EXAMPLES:**

### **MAINTENANCE**

**MECHANICAL**

**MME**

**ELECTRICAL**

**MEL**

**I&C**

**MIC**

**Etc.**

### **OPS**

**LICENSED OPERATORS** **OL**

**RADWASTE**

**OR**

**FIRE PROTECTION**

**OF**

**Etc.**

## GROUP CODES

### ADM SERVICES

Admin Serv. Supt.  
Records Mgt  
Doc Control  
Tech Publ

### CONTRACTORS/VENDORS

### DESIGN ENGINEERING

Director Design Engineering  
(A) Electrical I&C  
Procurement  
Electrical Systems  
Projects  
I&C  
(B) Mechanical  
Piping  
NSSS Systems  
Programs  
Safety Analysis  
(C) Civil  
Configuratio Mgmt  
Support  
STRL/Qual  
STRL/Projects  
(D) Planning & Control

### EMERGENCY RESPONSE

#### ORGANIZATION

Technical Support Center  
Emergency Operations Facility  
Operations Support Center  
Field Monitoring Teams  
Emergency News Media Center  
Emergency Life Center  
State & Local BOC

### HUMAN RESOURCES

### MANAGEMENT

General Manager/Plant Staff

### MAINTENANCE

Manager Maint.  
Mechanical  
Electrical  
I&C  
Plant Services  
Planning/Sched Supt  
Mech Planning  
Elect Planning  
I&C Planning  
Maint. Scheduling  
M&TE Janitor/Tool Room

### MATERIALS PURCHASING/CONTRACTS

Manager Matl. Purc. Contracts  
Contracts  
Purchasing  
Inventory Control  
Stores  
Materials Technical  
Materials Project Coordinator

### NUCLEAR SAFETY & REG AFFAIRS

Director NS&RA  
Plant Licensing  
Licensing Basis  
Safety Issues  
Operating Exper.  
Safety Assessment

### OPERATIONS

Manager Plant Operations  
(A) Operations Supt.  
Licensed Operators  
Non-Licensed Operators  
Trainers  
Radwaste  
Shift Enginners  
Fire Protection  
(B) CHEMISTRY  
Environmental  
Plant Chemistry (Chem Supt)  
Chemistry Tech Support  
(C) RADIATION CONTROL  
HP Dosimetry  
Program  
HP Plant (HP Supt)  
HP Radwaste  
HP ALARA  
RP & Int.  
(D) OUTAGE SCHEDULING  
(E) SAFETY ADMINISTRATION

### PLANT WALKTHROUGH

### PROJECTS & SUPPORT

Director Projects and Support  
Project Management  
Site Business Services  
Mod & Construction (PM&C)  
Emergency Preparedness  
IS & Telecommunications

### QUALITY PROGRAMS

Director Quality/Quality  
Audits  
Reviews  
NDE  
Inspection  
Trending  
Program  
Supplier Quality

### INDUSTRY/OUTSIDE GROUPS

NRC Inspection Report  
NRC Bulletins/Information Notices  
NRC SALP  
INPO  
Nuclear Network  
EPRJ  
Publications  
Vendor Identifical  
Word of Mouth

PMO  
PC  
PP  
PI  
PS  
PT  
PM

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RCP  
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RR  
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RTS  
SA

PW

PSD  
PSM  
PSS  
PMC  
PSE  
PST

QD  
QA  
QR  
QN  
QI  
QT  
QP  
QS

INI  
INB  
INS  
INP  
INN  
IEP  
IPB  
IVD  
IMO

## Attachment B

### SECURITY

Medical  
FFD  
Plant Security

### SYSTEM ENGINEERING

Manager P&SE  
Systems  
Root Cause  
Work Control  
Reactor Engineering  
Engineering Support  
Maint Rulemaking Coordinator  
ISI

### TRAINING

Manager Training  
Manager Nuclear Training  
Simulator  
Ops Request  
Ops Initial  
Maintenance  
Chemistry  
HP  
Accreditation  
ESP

### Corporate Support

Information Services  
HP Inst.  
Human Resources  
Security  
Total Quality  
Communications  
Nuclear Assurance

### Vice President/Site Staff

### Vice President, Engineering

SM  
SFD  
SF

EMP  
ES  
ERC  
EC  
ERE  
ESP  
EMR  
EIS

TMG  
TMN  
TS  
TR  
TI  
TM  
TC  
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TA  
TP

CTS  
CHP  
CHR  
CSE  
CTQ  
CCO  
CNO

VPO  
VPE

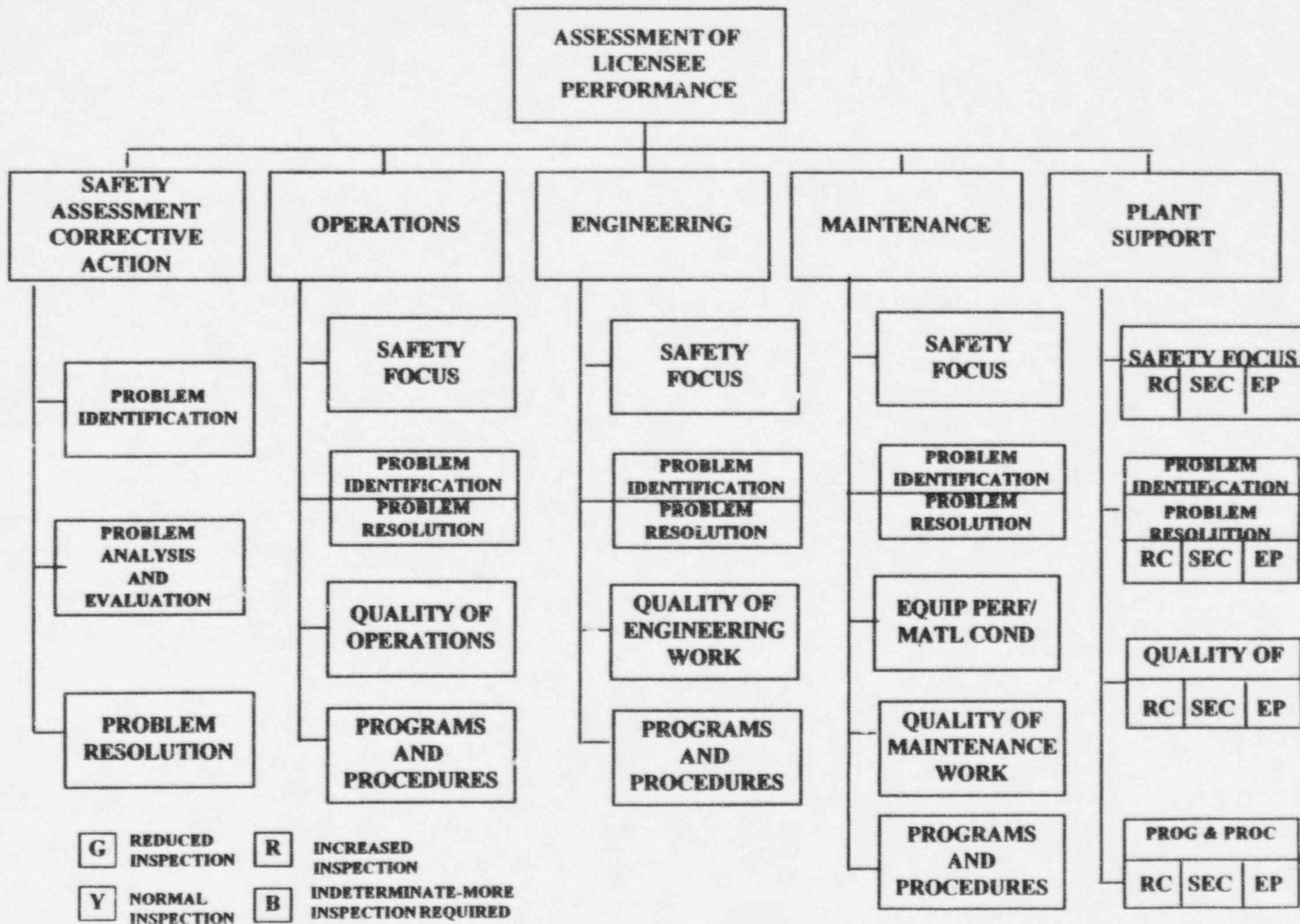
## LOCATION CODES

LOCATION	CODES
Auxiliary Building	AB
Contaminant Building	CT
Control Building	CB
Control Room	CR
Diesel Building	DG
Drywell	DW
Energy Services Center	EC
Inside Protective Area	IA
Maintenance Shop	MS
Off Gas	OG
Outside Protective Area	OA
Radwaste Building	RW
Standby Service Water	SSW
Steam Tunnel	ST
Turbine Building	TB
Warehouse	WH
Water Treatment Building	WB

# TECHNICAL SPECIFICATION REQUIRED AUDITS

<u>SUBJECT</u>	<u>FREQ.</u>
• TECH SPEC/LICENSE CONDITIONS	12 MTHS
• PERFORMANCE/TRAINING/QUALIFICATIONS	12 MTHS
• EFFECTIVENESS OF CORRECTIVE ACTIONS	6 MTHS
• QA PROGRAM	24 MTHS
• EMERGENCY PLAN	12 MTHS
• SECURITY PLAN	12 MTHS
• SRC/MGT REQUESTED	
• BIENNIAL FIRE PROTECTION	24 MTHS
• ANNUAL FIRE PROTECTION	12 MTHS
• TRIENNIAL FIRE PROTECTION	36 MTHS
• RADIOLOGICAL ENVIRON MONITORING	12 MTHS
• OFFSITE DOSE CALCULATION MANUAL	24 MTHS
• PROCESS CONTROL PROGRAM	24 MTHS
• REG GUIDE 4.15	12 MTHS

## PERFORMANCE ASSESSMENT/INSPECTION PLANNING TREE



# **INTEGRATED PERFORMANCE EVALUATION PROCESS**

- **COLLECT DATA** (AUDITS, NRC INSPECTIONS, SELF ASSESSMENTS, MONITORING, DEFICIENCY DOCUMENTS, WITNESS/ HOLD POINT INSPECTIONS, ETC.)
- **ANALYZE DATA** (NEGATIVE, POSITIVE, SIGNIFICANT, INSIGNIFICANT, AMOUNT OF DATA, LACK OF DATA)
- **FINAL ANALYSIS** (RECOMMEND INCREASED, NORMAL OR DECREASED OVERSIGHT)
- **DOCUMENT RESULTS** (TRACK ON OPEN ITEMS LIST)

# **PROGRAMS/SUBJECTS TO BE EVALUATED**

- **MEASURING AND TEST EQUIPMENT**
- **PLANT CONDITIONS**
- **OPERATION ACTIVITIES**
- **PLANT SAFETY**
- **PROCUREMENT CONTROL**
- **QUALITY ACTIVITIES**
- **RECORDS**
- **RADIOLOGICAL PROTECTION**
- **RADWASTE**
- **SECURITY**
- **SPECIAL PROCESSES**
- **STATUS INDICATION**
- **TECH. SPEC COMPLIANCE**
- **TEST CONTROL**
- **TRAINING**
- **SAFETY**

# PROGRAMS/SUBJECTS TO BE EVALUATED

• **CHEMISTRY/ENVIRONMENTAL**

• **COMPUTER SOFTWARE**

• **CORRECTIVE ACTION PROCESS**

• **DESIGN CONTROL**

• **DOCUMENT CONTROL**

• **EMERGENCY PREPAREDNESS**

• **FIRE PROTECTION**

• **GENERAL ACTIVITIES**

• **HANDLING STORAGE AND SHIPPING**

• **IDENTIFICATION AND CONTROL**

• **INSPECTION**

• **INSTRUCTIONS PROCEDURES AND DRAWINGS**

• **LICENSING ACTIVITIES**

• **MAINTENANCE ACTIVITIES**

• **MATERIAL CONTROL**

<u>CHEMISTRY/ ENVIRONMENTAL</u>	<u>REDUCED</u>	<u>NORMAL</u>	<u>INCREASED</u>
<u>ELEMENTS</u>			
• B1 - Reg. Guide 4.15	X		
• B2 - Offsite Dose Calculation	X		
• B3 - Environmental Protection Plan			X
• B4 - Chemical Reagent Control		X	
• B5 - Sampling Program			X
• B6 - Laboratory Activities Waste Control			X
• B7 - Chemical Control Program			X
• B8 - Hazardous Materials Control			X
• B9 - Water Chemistry		X	

# IPEP EXAMPLES

<b>CHEMISTRY/ ENVIRONMENTAL</b>	<b>RECOMMENDATION</b>	<b>RATIONALE</b>
Elements		
<ul style="list-style-type: none"> <li>● B2 - Offsite Dose Calculation</li> </ul>	Reduce Oversight	38 data points analyzed: 35 fully acceptable, 2 non-significant deficiencies (QDR)
<ul style="list-style-type: none"> <li>● B3 - Environmental Protection Plan</li> </ul>	Increase Oversight	41 data points analyzed: 35 fully acceptable, 2 recommended enhancements, 3 non-significant deficiencies (QDR) 1 significant deficiency (NCV)
<ul style="list-style-type: none"> <li>● B4 - Chemical Reagent Control</li> </ul>	Normal Oversight	4 data points analyzed: 2 fully acceptable, 2 recommended enhancements

# EXPERT PANEL

DIRECTOR, QUALITY

TREND COORDINATOR

QP TECHNICAL  
EXPERT

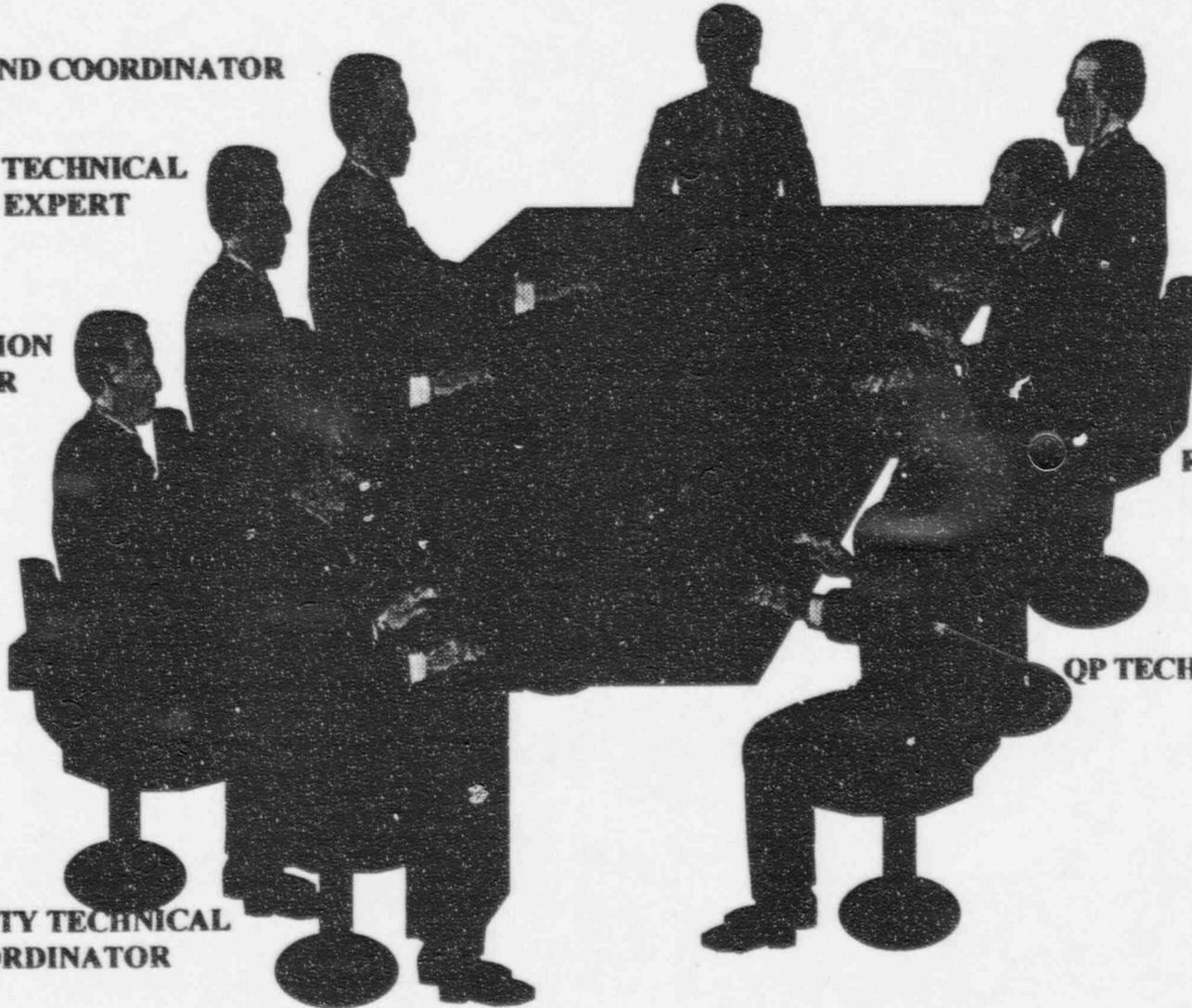
AUDIT SUPV.

NDE/INSPECTION  
SUPERVISOR

REVIEW SUPV.

QP TECHNICAL EXPERT

QUALITY TECHNICAL  
COORDINATOR



## EVALUATION SCHEDULE

<b>JAN</b>	<b>Training Computer Software Procurement Control</b>	<b>JULY</b>	<b>Operations Activities Licensing Activities</b>
<b>FEB</b>	<b>Design Control Corrective Action Process Test Control</b>	<b>AUG</b>	<b>Document Control Measuring &amp; Test Control Status Indication</b>
<b>MARCH</b>	<b>Identification &amp; Control Emergency Preparedness</b>	<b>SEPT</b>	<b>Radiological Protection Plant Conditions Radwaste</b>
<b>APRIL</b>	<b>Maintenance Activities Fire Protection</b>	<b>OCT</b>	<b>Chem/Environmental Inspection Attributes</b>
<b>MAY</b>	<b>Procurement Doc Control General Activities Security</b>	<b>NOV</b>	<b>Material Control Plant Safety Tech Spec Compliance</b>
<b>JUNE</b>	<b>Inst Proced &amp; Dwgs Handling Storage &amp; Shipping Special Process</b>	<b>DEC</b>	<b>Safety Quality Activities</b>

# 10 CFR AUDITS

<u>AUDIT TOPIC</u>	<u>REQUIREMENT</u>	<u>FREQUENCY</u>
Emergency Preparedness	10CFR50.54(t)	Annual
Security (Safeguards)	10CFR50.54(p)(3)	Annual
Security Program	10CFR73.55(g)	Annual
Security Access Authorization	10CFR73.56(g)	Bi-ennial
Fitness for Duty	10CFR26.80	Annual
Radiation Protection	10CFR20	Annual
Special Nuclear Material	10CFR70.58(c)(2)	Annual

# **QUARTERLY OVERSIGHT SCHEDULE**

## **FIRST QUARTER 1996**

### **AUDITS:**

- MAINTAINING PROCEDURES CURRENT
- EMERGENCY PLAN
- SECURITY AND SAFEGUARDS

### **ASSESSMENTS/MONITORING/INSPECTION:**

- DOCUMENT CONTROL
  - PROCEDURE CONTROL
  - VENDOR MANUAL CONTROL
  - DOCUMENT UPDATES
  - ENGINEERING CALCULATION CONTROL
  - OPERATING LICENSE CONTROL
  - UFSAR/TRM CONTROL
  - 50.59 PROCESS ASSESSMENT
- REPORTABLE OCCURRENCES
- ENVIRONMENTAL PROTECTION PLAN

# **QUARTERLY OVERSIGHT SCHEDULE**

## **SECOND QUARTER 1996**

### **AUDITS:**

- **HP PROGRAM**  
(INCREASED OVERSIGHT OF:)
  - **DOSIMETRY**
  - **EXPOSURE AND CONTAMINATION CONTROL**
  - **RADIATION PROTECTIVE CLOTHING**
  - **RADIOACTIVE MATERIAL CONTROL**
- **FITNESS FOR DUTY**
- **SPECIAL NUCLEAR MATERIAL**

### **ASSESSMENTS/MONITORING/INSPECTION:**

- **CHEMICAL/ENVIRONMENTAL:**
  - **CHEMICAL SAMPLING PLAN**
  - **LAB. ACTIVITIES WASTE CONTROL**
  - **CHEMICAL CONTROL PROGRAM**
  - **HAZ. MATERIAL CONTROL**
  - **RADWASTE PROCESS CONTROL**
  - **RADWASTE ON SITE STORAGE**



**10CFR50.54**  
**Reduction in Commitments**

## **50.54(a) Rulemaking (1981-1983)**

- ◆ **Purpose - correct the following:**
  - **No reporting requirement for QA program changes**
  - **Licensees made changes that were not in compliance with Appendix B**
- ◆ **Proposed rule - “... licensees may make changes... provided the change does not decrease the effectiveness of the program such that the revised program no longer meets the criteria of Appendix B...”**
- ◆ **Final rule**
  - **“To preclude potential confusion or misinterpretation of ‘effectiveness’”, the term was changed to “not reduce the commitments”**

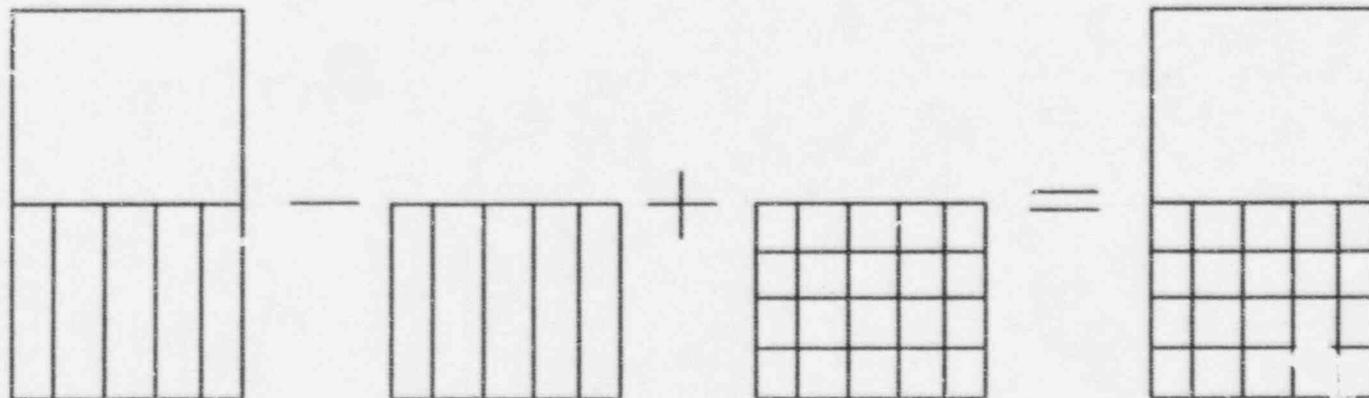


# **Reduction in Commitments QA Branch Viewpoint**

- ◆ **An individual commitment change must meet the reduction test without consideration of the compensating effects of related changes**
  - **“Deletion of specific information that describes how the requirements of Appendix B will be met is considered a reduction in commitment”**
  - **Substituting an equivalent or better commitment is not allowed**
- ◆ **Safety improvement has no bearing on the issue**

# Typical QA Program Change

With few exceptions, all QA program changes involve “deletion of specific information that describes how the requirements of Appendix B will be met”





**Examples of QA Program Changes  
That Would Constitute Reduced  
Commitments Using QA Branch  
Viewpoint**

## 10.0 INSPECTION

### 10.3 APPLICABILITY

The requirements of this Policy apply to all inspections performed on safety-related structures, systems or components during the operational phase of nuclear power plant activities.

#### OLD

10.5.13 Inspections need not be performed for each specific work activity. Procedures used for assigning inspections shall require the following to be evaluated in assignment of inspections.

10.5.13.1 Complexity, magnitude or criticality of the work.

10.5.13.2 Documented engineering inspection requirements.

10.5.13.3 Design organization inspection requirements.

10.5.13.4 Components safety impact.

#### NEW

10.5.13 Inspections ~~shall be need not be~~ performed for each specific work activity. ~~Procedures used for assigning inspections shall require the following to be evaluated in assignment of inspections.~~

~~10.5.13.1 Complexity, magnitude or criticality of the work.~~

~~10.5.13.2 Documented engineering inspection requirements.~~

~~10.5.13.3 Design organization inspection requirements.~~

~~10.5.13.4 Components safety impact.~~

## 13.0 HANDLING, STORAGE AND SHIPPING

### 13.2 SCOPE

This Policy delineates responsibilities and defines requirements for handling, storage and shipping, including cleaning, packaging and preservation of safety-related items in order to assure that the requisite quality of the items is maintained until they are used or incorporated into the nuclear power plant.

#### OLD

13.5.9 Storage procedures shall provide for methods of storage and the control of items in storage which will minimize the possibility of damage or deterioration during storage. Periodic inspections of storage areas shall be performed and documented to verify compliance with storage procedures. Release of items for installation shall also be procedurally controlled.

#### NEW

13.5.9 Storage procedures shall provide for methods of storage and the control of items in storage which will minimize the possibility of damage or deterioration during storage. ~~Periodic~~ Continuous inspections of storage areas shall be performed and documented to verify compliance with storage procedures. Release of items for installation shall also be procedurally controlled.

**15.0 NONCONFORMING MATERIALS, PARTS OR COMPONENTS**  
(Including Items, Services and Activities)

**15.2 SCOPE**

This Policy delineates responsibilities and defines requirements for the identification and control of nonconforming safety-related items, services or activities in order to assure that the nonconforming conditions do not compromise quality or safety.

**OLD**

15.5.5 Nonconforming items, services or activities shall be reviewed and dispositioned in accordance with documented procedures. Items may be dispositioned in the following ways:

15.5.5.1 Accept-as-is;

15.5.5.2 Scrap;

15.5.5.3 Rework to conform to a drawing or specification;

15.5.5.4 Repair in accordance with an engineering approved procedure.

Items received without the necessary documentation shall be controlled. Acceptance of such items will be withheld pending receipt of required documentation or the items will be considered nonconforming.

**NEW**

15.5.5 Nonconforming items, services or activities shall be reviewed and dispositioned in accordance with documented procedures. Items may be dispositioned in the following ways:

~~15.5.5.1 Accept as is;~~

15.5.5.2 Scrap;

~~15.5.5.3 Rework to conform to a drawing or specification;~~

~~15.5.5.4 Repair in accordance with an engineering approved procedure.~~

Items received without the necessary documentation shall be controlled. Acceptance of such items will be withheld pending receipt of required documentation commercial grade dedication in accordance with 10CFR21 or the items will be considered nonconforming.

## 1.0 ORGANIZATION

### 1.3.3 Director, Quality

The Director, Quality, reports directly to the Vice President, Operations GGNS and is delegated the overall authority and responsibility for establishing, controlling and verifying the implementation and adequacy of the Operational Quality Assurance Program. The Director, Quality, through his staff, is responsible for the establishment of quality assurance policies, goals and objectives.

The primary duties and responsibilities of the Director, Quality include:

#### OLD

1.3.3.9 Planning and performing receipt inspections;

#### NEW/REVISION 14 IMPLEMENTED THIS CHANGE

1.3.3.9 ~~Planning and performing receipt inspections~~

## 7.0 CONTROL OF PURCHASED MATERIAL, EQUIPMENT AND SERVICES

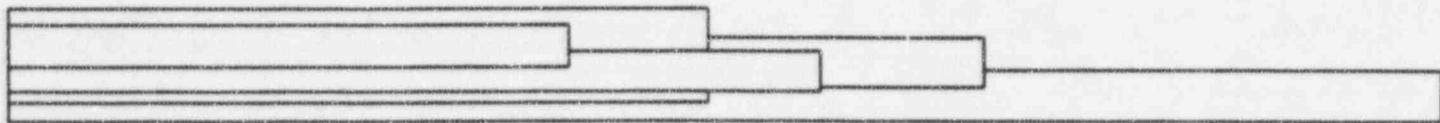
#### OLD

7.4.5 The Vice President, Operations Support, is responsible for assuring the implementation of the Operational Quality Assurance Program requirements relative to procurement activities, including: the quality evaluation of suppliers and source verification, as described in Policy 18.0 of this manual to verify conformance with the Operational Quality Assurance Program requirements, including the requirements of this Policy.

#### NEW/REVISION 14 IMPLEMENTED THIS CHANGE

7.4.5 The Vice President, Operations Support, is responsible for assuring the implementation of the Operational Quality Assurance Program requirements relative to procurement activities, including: receipt inspection, as described in Policy 10 of this manual, and the quality evaluation of suppliers and source verification, as described in Policy 18.0 of this manual to verify conformance with the Operational Quality Assurance Program requirements, including the requirements of this Policy.

# Grand Gulf Change Basis

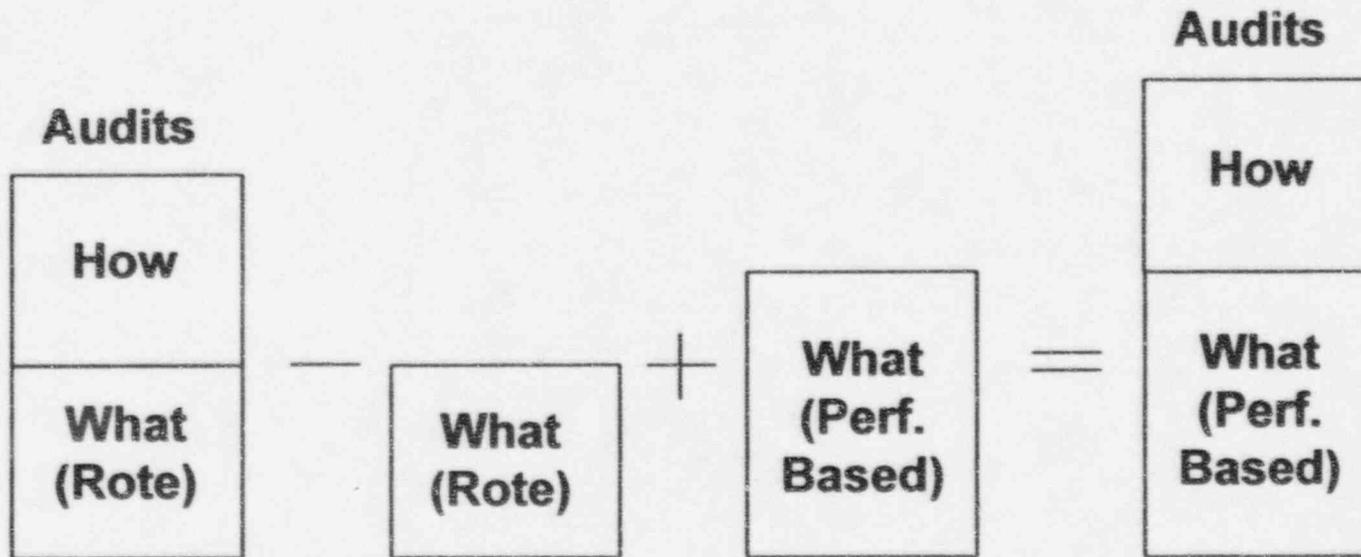


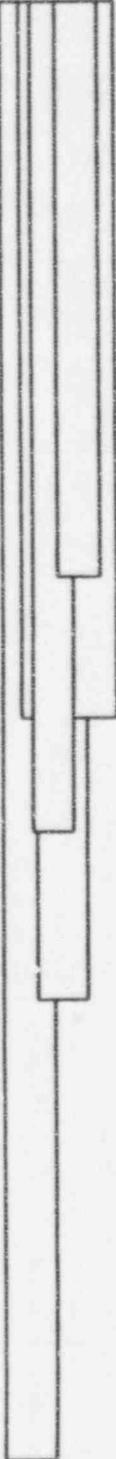


# Reduction in Commitments Grand Gulf Viewpoint

- ◆ The term “commitments” refers to the net result of a change, not to a portion of a change taken out of context
- ◆ The term “reduction” has no meaning unless it is interpreted with respect to safety

# Grand Gulf Audit Program Change





# **Quality Assurance Audit Program Change Overall Increase in Safety**

**Overall effect on safety is related to two factors:**

**1. Is there a decrease in safety? No**

- ◆ **While resources allocated to audit areas with good performance will be reduced,**
- ◆ **If performance declines in a good performing area it becomes a candidate for audit**

**2. Is there an increase in safety? Yes**

- ◆ **Increased audit resources will be applied to areas with declining performance**
- ◆ **Areas important to safety that were previously not audited will now become audit subjects and be monitored**

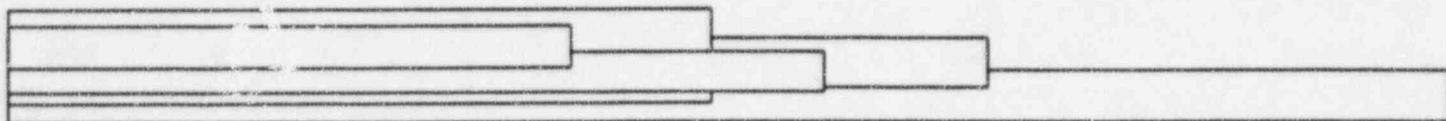


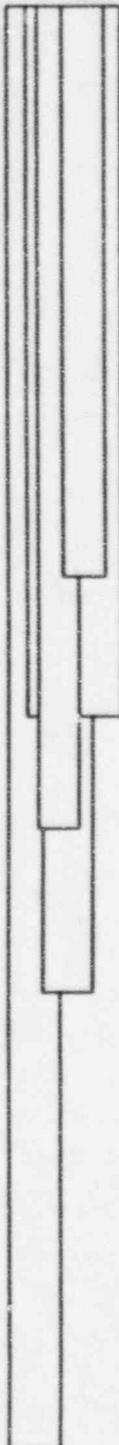
# **Basis for Changes to QA Audit Program**

**10CFR50.54 evaluation concluded:**

- ◆ **No reduction in commitments**
  - **Still meet 10CFR50 Appendix B Section XVIII**
  - **Increase in safety and commitments**
  - **Other CFR required audits are still performed**
  - **SRC oversight is broadened to include audit schedule**
  
- ◆ **Overall increase in safety**
  - **Increased audit resources in problem areas**
  - **Decreased audit resources in good areas**
  - **Areas previously not audited will be audited**
  - **Previous audit areas will still be audit subject areas**

# Conclusions





# Conclusions

- ◆ **“Reduction in commitments” must be determined**
  - **considering the entire change - not individual components of the change**
  - **with respect to safety**
- ◆ **Performance-based audit scheduling programs will deliver enhanced value compared to rote audit topics/frequencies**
- ◆ **Grand Gulf’s QA program change is an increase in commitments**



**ENTERGY**

ATTACHMENT 3

Entergy Operations, Inc.  
P.O. Box 756  
Port Gadsden, MS 39760  
Tel: 601-437-2800

November 6, 1995

**C. R. Hutchinison**  
Vice President  
Operations  
Grand Gulf Nuclear Station

U.S. Nuclear Regulatory Commission  
Mail Station P1-37  
Washington, D.C. 20555

Attention: Document Control Desk

Subject: Grand Gulf Nuclear Station  
Docket No. 50-416  
License No. NPF-29  
Operational Quality Assurance Manual Change

GNRO-95/00119

Gentlemen:

For the past several years Grand Gulf has conducted performance-based audits to supplement the traditional compliance-based audits. This approach has contributed to strong performance in many areas of plant operation.

To continue to enhance strong performance, we feel it necessary to apply a performance-based approach to our scheduling process. Consequently, we have implemented changes to our Operational Quality Assurance Manual (OQAM) and Technical Requirements Manual (TRM) to eliminate required audit frequencies and audit topics and replace them with a performance-based audit scheduling program.

We have evaluated these changes in accordance with 10CFR50.54 and have determined that these changes enhance quality assurance commitments and increase the effectiveness of the audit program while maintaining compliance with 10CFR50 Appendix B requirements.

Problematic areas will receive increased quality oversight such as auditing. Good performing areas will receive less scrutiny; should performance later decline it will become a candidate for audit. Audit subject areas previously not considered due to resource limitations will be included in the audit scheduling program. Overall, these changes will result in increased flexibility to focus limited audit resources on areas of plant operation important to safety and in need of attention.

November 6, 1995

GNRO-95/00119

Page 2 of 4

Normally we would docket this quality assurance program change later along with our periodic submittal of other QA program changes. In this case, however, we felt it appropriate to highlight the change separately and initiate dialogue with NRC staff. Therefore, please find attached, in accordance with 10CFR50.54, a change to the Grand Gulf Operational Quality Assurance Manual and Technical Requirements Manual. (The TRM is our repository of relocated Technical Specifications.) Upcoming revision 14 to the OQAM and revision 9 to the Updated Final Safety Analysis Report will incorporate the changes we have attached to this letter.

Although, we have implemented the changes in the OQAM and TRM, we do not expect to immediately implement the new audit scheduling process, but will phase it in over the next 6 to 12 months. We would encourage NRC feedback over this period. For this purpose we have requested a meeting with NRC staff, including NRR and Region IV personnel, on the afternoon of November 16, 1995. At the meeting, we intend to present:

- Our rationale for proceeding with performance-based audit scheduling,
- Grand Gulf program specifics,
- River Bend program specifics.

We look forward to meeting with you on November 16th.

Yours truly



CRH/MJL

attachment: Grand Gulf Operational Quality Assurance Program  
and Technical Requirements Manual Changes

cc: (See Next Page)

18.4 (Continued):

18.4.3 Organizations supplying material, equipment or services are responsible for auditing their internal operations and their contractors and suppliers, as stipulated in the appropriate procurement documents, in order to verify compliance with the quality assurance program requirements specified in the procurement documents.

18.4.4 The section deleted in Revision 5.

18.5 REQUIREMENTS

18.5.1 A comprehensive program of planned and documented audits shall be established and implemented by Quality Programs, and the off-site Quality Organization to verify compliance with all aspects of the Operational Quality Assurance Program. The audit program shall be carried out in accordance with written approved procedures which address the requirements of this Policy.

18.5.2 The audit program shall provide for both internal and external audits. Internal audits shall include audits of the procedures and performance of all licensee organizations whose activities affect the quality of safety-related structures, systems and components. External audits shall include audits of the practices, procedures and instructions of contractors and suppliers who provide safety-related material, equipment or services.

18.5.3 Audits shall provide an objective evaluation of quality related practices, procedures, instructions, activities, and items; and review of documents and records.

18.5.4 ~~Audits of operating plant activities shall include, as a minimum, those specified in the CGNS Technical Specifications. This section is deleted.~~

18.5.5 Audits shall be performed by trained, qualified personnel not having direct responsibilities in the areas being audited. Qualification and training requirements for auditors shall be established and documented and records of auditor qualifications shall be maintained and kept current. Personnel selected for quality assurance audit assignments shall have experience or training commensurate with the scope, complexity, or special nature of the activities to be audited.

18.5.6 An audit schedule shall be developed, maintained, reviewed and updated, as necessary. ~~The audit schedule shall address the following minimum requirements:~~ Audits shall be scheduled on the basis of the status and importance of the activities to be audited.

18.5.6 (Continued):

~~18.5.6.1 Auditing shall be initiated as early in the life of an activity as practical to assure timely implementation of quality assurance program requirements.~~

~~18.5.6.2 Audits shall be scheduled on the basis of the status and importance of the activities to be audited.~~

~~18.5.6.3 Those specified in the CCNS Technical Specifications.~~

18.5.7 Individual audits shall be performed in accordance with documented plans and checklists which describe the audit and provide for an objective evaluation of the status and adequacy of the areas being audited.

The "objective evaluation" referenced is not to be confused with the evaluation statement in ANSI N45.2.12 to which the licensee has provided a clarification. See Appendix A.

18.5.8 Audit results, including conditions adverse to quality detected during the audit, shall be documented and reviewed with the supervisor or manager having responsibility in the areas audited. Distribution of audit reports shall include management of the audited organization and appropriate licensee management.

18.5.9 Management of the audited organizations shall be responsible for correcting conditions adverse to quality identified during an audit. They shall assure that corrective action is scheduled, accomplished as scheduled, and documented. The corrective action shall be designed to prevent the recurrence of significant conditions adverse to quality. (See also Appendix A, Regulatory Guide 1.144, Item 11.)

18.5.10 Deficient areas shall be reviewed or reaudited on a timely basis to verify implementation of corrective action.

18.5.11 Audit results shall be analyzed to detect adverse quality trends and to evaluate the effectiveness of the Operational Quality Assurance Program. Results of such analyses which indicate adverse quality trends shall be reported to appropriate management for review and assessment.

18.5.12 Records shall be generated and retained for all audits, including individual audit plans, audit reports, written replies, and records of corrective action. (See also Appendix A, Regulatory Guide 1.144, Item 13.)

18.5 (Continued):

18.5.13 The licensee interprets the requirements of ~~Technical Specification 6.5.2.8~~, the Updated Final Safety Analysis Report, Chapter 16, Appendix 16B, section 7.4.2.8, which requires that audits shall be performed under the cognizance of the SRC, to be met by the following: The SRC shall review the results of audits of nuclear related activities conducted in accordance with the GGNS Operational Quality Assurance Program, and maintain cognizance of the audit schedule." ~~Audits shall be conducted and results shall be reviewed in the areas listed in Technical Specification 6.5.2.8.~~

NRC Regulatory Guide 1.30 - Section 6 (Continued):

calibration and identity of person that performed the calibration, can be readily determined. Such information may also be contained on tags or labels which may be attached to installed instrumentation."

Section 7 - Data Analysis and Evaluation will be implemented as stated herein after adding the clarifying phrase "where used" at the beginning of that paragraph.

Section 8 - Records will be implemented by conformance with Policy 17 of the Operational Quality Assurance Program and ANSI N45.2.9 as set forth in Appendix A to that Program.

---

NRC Regulatory Guide 1.33 - "Quality Assurance Program Requirements (Operation)" (Rev. 2, 2/78) - Endorses ANSI N18.7 - 1976.

The Operational Quality Assurance Program complies with the requirements of this Guide with the following clarifications:

- 1) Paragraph C.3 of Regulatory Guide 1.33 (and Section 4.3.4 of ANSI N18.7 which it references) will be implemented as required by the applicable nuclear facility Technical Specifications which define "Subjects Requiring Independent Review."
- 2) Paragraph C.4 ("Audit Program") of Regulatory Guide 1.33 (and Section 4.5 of ANSI N18.7 - 1976 which it references).

Audit frequencies will be implemented as required by the applicable Code of Federal Regulations, Updated Final Safety Analysis Report, and commitments by various correspondence to the NRC. All other audit frequencies will be ~~implemented as required by applicable current Technical Specifications or on a schedule based on performance results and importance of the activity relative to safety. ~~and risk significance~~~~

- 3) Paragraph C.5.a of Regulatory Guide 1.33 (and Section 4.4 of ANSI N18.7 which it references) will be implemented with the clarification that the Plant Safety Review Committee shall perform this activity.
- 4) Paragraph C.5.d of Regulatory Guide 1.33 (and Section 5,2.7.1 of ANSI N18.7 which it references) will be implemented by adding the clarifying phrase "Where practical" in front of the fourth sentence of the fifth paragraph. The Regulatory Guides changing of the two uses of the word , 'should' in this sentence to "shall" unnecessarily restricts the licensee's options on repair or replacement parts. It is not always practical to test parts prior to use. For modifications where these requirements are not considered practical, a review in accordance with the provisions of 10CFR50.59 will be conducted and documented.

GGNS  
UFSAR

- 7.4.2.5 The SRC shall meet at least once per calendar quarter during the initial year of unit operation following fuel loading and at least once per six months thereafter.
- 7.4.2.6 The quorum of the SRC necessary for the performance of the SRC review and audit functions of these Technical Specifications shall consist of the Chairman or his designated alternate and at least 7 SRC voting members including alternates. No more than a minority of the quorum shall have line responsibility for operation of the unit.
- 7.4.2.7 The SRC shall review:
- a. The safety evaluations for (1) changes to procedures, equipment or systems and (2) tests or experiments completed under the provision of Section 50.59, 10 CFR, to verify that such actions did not constitute an unreviewed safety question.
  - b. Proposed changes to procedures, equipment or systems which involve an unreviewed safety question as defined in Section 50.59, 10 CFR.
  - c. Proposed tests or experiments which involve an unreviewed safety question as defined in Section 50.59, 10 CFR.
  - d. Proposed changes to Appendix A Technical Specifications or this Operating License.
  - e. Violations of codes, regulations, orders, Technical Specifications, license requirements, or of internal procedures or instructions having nuclear safety significance.
  - f. Significant operating abnormalities or deviations from normal and expected performance of unit equipment that affect nuclear safety.
  - g. All REPORTABLE EVENTS.
  - h. All recognized indications of an unanticipated deficiency in some aspect of design or operation of structures, systems, or components that could affect nuclear safety.
  - i. Reports and meetings minutes of the PSRC.
  - j. Written reports from audits of the ~~ALARA program~~ nuclear related activities.
- 7.4.2.8 Audits of unit activities shall be performed under the cognizance of the SRC. ~~These audits shall encompass~~ This will be accomplished by the SRC conducting reviews of the results of audits of nuclear related activities conducted in accordance with the GGNS Operational Quality Assurance Program, and maintaining cognizance of the audit schedule.

GGNS  
UFSAR

- a. ~~The conformance of unit operation to provisions contained within the Appendix A Technical Specifications and applicable license conditions at least once per 12 months.~~
- b. ~~The performance, training and qualifications of the entire unit staff at least once per 12 months.~~
- c. ~~The results of actions taken to correct deficiencies occurring in unit equipment, structures, systems or method of operation that affect nuclear safety at least once per 6 months.~~
- d. ~~The performance of activities required by the Operational Quality Assurance Program to meet the criteria of Appendix "B", 10 CFR 50, at least once per 24 months.~~
- e. ~~The Emergency Plan and implementing procedures at least once per 12 months.~~
- f. ~~The Security Plan and implementing procedures at least once per 12 months.~~
- g. ~~Any other area of unit operation considered appropriate by the SRC or the Vice President, Operations GGNS.~~
- h. ~~The Fire Protection Program and implementing procedures at least once per 24 months.~~
- i. ~~An independent fire protection and loss prevention inspection and audit shall be performed at least once per 12 months utilizing either qualified offsite licensee personnel or an outside fire protection firm.~~
- j. ~~An inspection and audit of the fire protection and loss prevention program shall be performed by an outside qualified fire consultant at intervals no greater than 36 months.~~
- k. ~~The radiological environmental monitoring program and the results thereof at least once per 12 months.~~
- l. ~~The Offsite Dose Calculation Manual and implementing procedures at least once per 24 months.~~
- m. ~~The Process Control Program and implementing procedures for solidification of radioactive wastes at least once per 24 months.~~
- n. ~~The performance of activities required by the Quality Assurance Program to meet the criteria of Regulatory Guide 4.15, February 1979, at least once per 12 months.~~