UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION II
245 PEACHTREE CENTER AVENUE N.E., SUITE 1200
ATLANTA, GEORGIA 30303-1200

July 20, 2023

R. Keith Brown
Regulatory Affairs Director
Southern Nuclear Company 3535
Colonnade Parkway
Birmingham, AL 35243

SUBJECT: EDWIN I. HATCH NUCLEAR PLANT–NOTIFICATION OF INSPECTION AND REQUEST FOR INFORMATION FOR NRC PROBLEM IDENTIFICATION AND RESOLUTION INSPECTION

Dear Mr. Brown:

The purpose of this letter is to notify you that the U.S. Nuclear Regulatory Commission (NRC) Region II staff will conduct a problem identification and resolution (PI&R) inspection at Hatch Nuclear Plant, Units 1 and 2 during the weeks of September 11-15, 2023, and September 25 - 30, 2023. The inspection team will be led by Mr. Christian Scott, a Senior Project Engineer from the NRC's Region II office. This inspection will be conducted in accordance with the baseline inspection procedure, 71152, Problem Identification and Resolution, issued December 14, 2021.

The biennial PI&R inspection and assessment of the licensee's Corrective Action Program (CAP) complements and expands upon the resident baseline inspections of routine daily screening of all Corrective Action Program issues, quarterly focused issue reviews, and semiannual trend PI&R reviews.

On July 17, 2023, Mr. Scott confirmed with Mr. Jimmy Collins, Licensing Manager, the details, and expectations for the two weeks of the inspection.

The enclosure lists documents that will be needed prior to the inspection. Please have the referenced information available no later than August 28, 2023. Contact Mr. Scott with any questions concerning the requested information. The inspectors will try to minimize your administrative burden by specifically identifying only those documents required for inspection preparation. If additional documents are needed, they will be requested when identified.

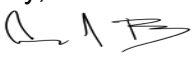
Prior to the inspection, Mr. Scott will discuss, with your staff, the following inspection support administrative details: availability of knowledgeable plant engineering and licensing personnel to serve as points of contact during the inspection; method of tracking inspector requests during the inspection; and other applicable information.

The NRC inspection team requests that your staff be prepared to support these efforts. Additionally, the inspection team is open to any suggestions regarding communications and coordination such that the overall effort from both the NRC inspection team and Hatch Nuclear Plant, Units 1 and 2 support staff may be the most efficient while also prioritizing public health and safety.

In accordance with Title 10 of the Code of Federal Regulations (10 CFR) 2.390 of the NRC's "Rules of Practice," a copy of this letter will be available electronically for public inspection in the NRC Public Document Room or from the Publicly Available Records (PARS) component of NRC's document system (ADAMS). ADAMS is accessible from the NRC Web site at http://www.nrc.gov/reading-rm/adams.html (the Public Electronic Reading Room).

Thank you for your cooperation in this matter. If you have any questions regarding the information requested or the inspection, please contact Mr. Scott at (404) 997- 4403.

Sincerely,



Signed by Blamey, Alan
on 07/20/23

Alan Blamey, Chief
Reactor Projects Branch 2
Division of Reactor Projects

Docket No. 05000321 and 05000366
License No. NPF-57, NPF-5

Enclosure:
Information Request for Edwin I. Hatch Nuclear Plant
Problem Identification and Resolution Inspections

cc: Distribution via LISTSERV

SUBJECT: EDWIN I. HATCH NUCLEAR PLANT–NOTIFICATION OF INSPECTION AND REQUEST FOR INFORMATION FOR NRC PROBLEM IDENTIFICATION AND RESOLUTION INSPECTION DATED JULY 20, 2023

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OFFICE	RII/DRP	RII/DRP			
NAME	C. Scott	A. Blamey			
DATE	07/19/2023	07/20/2023			

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INFORMATION REQUEST FOR EDWIN I. HATCH NUCLEAR PLANT PROBLEM IDENTIFICATION AND RESOLUTION INSPECTION
(September 11-15, 2023, and September 25-30, 2023)

This inspection will cover the period from July 1, 2021, through September 30, 2023. All requested information is limited to this period or to the date of this request unless otherwise specified. To the extent possible, the requested information should be provided electronically in word-searchable Adobe PDF (preferred) or Microsoft Office format. If you determine that any information requested is sensitive, the specific handling of this information should be discussed in advance between the NRC inspectors and Hatch Nuclear Plant representatives assigned to the Problem Identification and Resolution Inspection to ensure appropriate handling.

All requested documents should be provided electronically (e.g., Certrec's IMS) where possible. If an online inspection management system is used to provide the requested information, please ensure that all uploaded documents are searchable by title and/or identification number (for example, condition reports (CR) 1234567).

Lists of documents ("summary lists") should be provided in Microsoft Excel or a similar sortable format. Please be prepared to provide any significant updates to this information on August 28, 2023, and as new information becomes available throughout the inspection. As used in this request, "corrective action documents" refers to corrective action types/products as defined in your Corrective Action Program procedures (e.g., Corrective Action Reports (CARs), Technical Evaluations (TEs) used to track CAP Corrective Actions to Preclude Repetition (CAPR), Corrective Actions (CA), Effectiveness Reviews (EFFRs), and Work Orders (WOs) to implement corrective action condition reports).

1. Document Lists

   Note: For these summary lists, please include, if applicable, the document/reference number, the type (i.e., TE, CAPR, CAR, WO, etc.,) document title, long-text description (i.e., not short summary) of the issue, affected system (location ID), initiation date, status, due date, priority/severity level, responsible organization/department, and associated condition report.

   a. Summary list of all corrective action documents related to significant conditions adverse to quality that were opened, closed, or evaluated during the period.

   b. Summary list of all corrective action documents related to conditions adverse to quality that were opened or closed during the period.

   c. Summary list of all CRs related to non-conditions adverse to quality that were opened or closed during the period.

   d. Summary list of all apparent cause evaluations (or equivalent causal determinations) performed during the period.

   e. Summary list of all conditions adverse to regulatory compliance (CARC) (as defined in your CAP procedure NMP–GM-002-001) identified during the period.

f. Summary list of all corrective maintenance WOs and modifications (if not included as part of request item 1.a) for safety-related structures, systems, and components (SSCs) and any work considered "high risk." Include the WO/modification number, brief description, affected system, date of initiation, date of completion (if completed), and associated CR (if applicable).

g. Summary list of all CRs that have been canceled during the period. Provide the CR number, brief problem description, and reason for canceling.

h. Summary list of all currently backlogged corrective action documents.

i. Summary list of all corrective action documents that were upgraded or downgraded in priority/significance during the period (these may be limited to those downgraded from, or upgraded to, apparent cause level or higher).

j. Summary list of all corrective action documents initiated during the period that identify an adverse or potentially adverse trend in (1) safety-related or risk- significant equipment performance and (2) in any aspect of the plant's safety culture.

k. Summary lists of operator workarounds, operator burdens, temporary modifications, control room deficiencies, active standing orders and APCMs (1) currently open and (2) that were evaluated and/or closed during the period; this should include the date that each item was opened and/or closed. Include corresponding condition report and/or WO number.

l. Summary list of all prompt operability determinations or other engineering evaluations to provide reasonable assurance of operability; if fewer than approximately 20, provide full documents and attachments.

m. Summary list of plant safety issues raised or addressed by the Employee Concerns Program (or equivalent) (**sensitive information should be made available by appropriate means after discussion with the team lead**).

n. Summary list of all SSCs which were classified as (a)(1) in accordance with the Maintenance Rule during the period. Include date of classification in (a)(1), reason for being placed in (a)(1), and planned actions and their status.

o. Summary list of all Maintenance Preventable Functional Failures (MPFF), Condition Monitoring Events (CME), Repetitive Maintenance Preventable Functional Failures (RMPFF), Maintenance Rule Evaluation (MREVAL), as applicable. Include identification number, brief description, associated system, actions completed, and status.

p. Summary list of CRs related to equipment aging issues identified during the period (e.g., system erosion and/or corrosion problems; electronic component aging or obsolescence of circuit boards, power supplies, relays, etc.; environmental qualification). Provide CR number, brief problem description, priority/severity level, associated system, and status. Summary list of training deficiencies, requests for training improvements, and simulator deficiencies for the period.

2. Full Documents with Attachments

   a. All root cause determinations/evaluations completed during the period; include a list of any planned or in progress.

   b. Quality Assurance Program audits and/or assessments performed during the period, including the last two audits/assessments of the Corrective Action Program.

   c. Functional area/department self-assessments and non-NRC third-party assessments (e.g., peer assessments performed as part of routine or focused station self- and independent assessment activities; do not include INPO/WANO assessments) that were performed or completed during the period; include a list of those that are currently in progress.

   d. The last two biannual safety culture assessment reports at Hatch Nuclear Plant including any safety culture survey results.

   e. Corrective action program documents related to cross-cutting issues (human performance, problem identification and resolution, and safety conscious work environment (SCWE)) identified via trending, self-assessments, safety review committee or other oversight methods.

   f. Corrective action documents generated during the period associated with the following:

      i. NRC findings and/or violations issued to Hatch Nuclear Plant

      ii. Licensee Event Reports issued by Hatch Nuclear Plant

      Please provide a crosswalk or key tying corrective action documents to specific findings or violations.

   g. Corrective action documents generated for the following:

      i. NRC Information Notices, Bulletins, and Generic Letters issued or evaluated during the period.

      ii. Part 21 reports issued or evaluated during the period.

      iii. Vendor safety information letters (or equivalent) issued or evaluated during the period.

      iv. Other external events and/or operating experience evaluated for applicability during the period.

   h. Corrective action documents generated for the following:

      i. Adverse trends in equipment, processes, procedures, or programs that were evaluated during the period.

      ii. Action items generated or addressed by offsite review committees during the period

3. Logs and Reports

Note: For item 3.c–3. d, if there is no log or report maintained separate from the Corrective Action Program, please provide a summary list of Corrective Action Program items for the category described.

a. If already compiled, copy of departmental trend reports, and corrective action trend reports, including any human performance and equipment reliability trends.

b. If not included as part of request item 3.a, a copy the latest Corrective Action Program statistics such as the number of CRs initiated by department, human performance errors by department, and others as may be available.

c. Radiation protection event logs during the period.

d. Security event logs and security incidents during the period (sensitive information should be made available during the team's first week—**do not provide electronically**)–Handling of this item will need additional discussion.

e. Employee Concerns Program (or equivalent) logs (sensitive information should be made available during the team's first week of inspection—**do not provide electronically**)

f. System health reports, system design basis documents, maintenance rule functions and status, and system description information for the top ten risk-significant systems.

4. Procedures

Note: For these procedures, include all revisions that were in effect at any time during the period.

a. Corrective action program procedures, to include initiation and evaluation procedures, operability determination procedures, cause evaluation procedures, and any other procedures that implement the Corrective Action Program at the plant, including applicable corporate procedures.

b. QA self-assessment and audits program procedures.

c. Operability determination and functionality assessment procedures.

d. Employee Concerns Program (or equivalent) procedures.

e. Procedures that implement/maintain a SCWE.

f. Conduct of Operations procedure (or equivalent) and any other procedures or policies governing control room conduct, operator burdens and workarounds, etc.

g. Maintenance rule procedures and any procedures implementing any portion of the maintenance rule at the station.

h. Operating experience program procedures and any other procedures or guidance documents that describe the site's use of operating experience information.

i. Procedures associated with the 10 CFR Part 21 program.

j. System health process or equivalent equipment reliability improvement program procedures.

k. Preventive maintenance deferral process.

5. Other

a. List of risk-significant components and systems, ranked by risk worth; if the list uses system designators, provide a list of the associated equipment/system names.

b. List of top ten risk-significant operator manual actions. Organization charts for plant staff and long-term/permanent contractors.

c. Electronic copies of the Updated Final Safety Analysis Report (or equivalent), technical specifications, and technical specification bases.

d. For each day the team is inspecting, provide the following:

i. Planned work/maintenance schedule for the station.

ii. Schedule of management, maintenance rule, correction action related, or corrective action review meetings (e.g., operations focus meetings, condition report screening meetings, Corrective Action Review Boards, Management Review Meetings, challenge meetings for cause evaluations, etc).

iii. Agendas and materials for these meetings.

Note: Please provide the items listed in 5.e on a daily basis.

Additionally, please note that system or areas for increased inspection focus will be identified following receipt of this initial information request, and additional documentation may be requested.