UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION IV
611 RYAN PLAZA DRIVE, SUITE 400
ARLINGTON, TEXAS 76011-4005

September 10, 2007

Randall K. Edington, Senior Vice
President, Nuclear
Arizona Public Service Company
P.O. Box 52034
Phoenix, AZ 85072-2034

SUBJECT: MEETING SUMMARY FOR PALO VERDE NUCLEAR GENERATING STATION PUBLIC MEETING

Dear Mr. Edington:

On September 6, 2007, the NRC held a quarterly 95003 supplemental inspection status meeting with the Palo Verde Nuclear Generating Station at Region IV in Arlington, Texas. During this meeting, Palo Verde management discussed the status of their preparation for the supplemental inspection, and the development and implementation of their improvement plan to address plant performance issues. The meeting attendance list and Palo Verde's presentation are enclosed.

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter and its enclosures will be made 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).

Should you have any questions concerning this matter, we will be pleased to discuss them with you.

Sincerely,

Troy Pruett, Chief
Project Branch D
Division of Reactor Projects

Dockets: 50-528, 50-529, 50-530
Licenses: NPF-41, NPF-51, NPF-74

Enclosures:
1. Meeting Attendance List
2. Palo Verde Nuclear Generating Station Presentation

cc w/enclosures:
Steve Olea
Arizona Corporation Commission
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Phoenix, AZ 85007

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Southern California Edison Company
Law Department, Generation Resources
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Chairman
Maricopa County Board of Supervisors
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Phoenix, AZ 85003

Aubrey V. Godwin, Director
Arizona Radiation Regulatory Agency
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Southern California Public Power Authority
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John Taylor
Public Service Company of New Mexico
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Southern California Edison Company
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San Clemente, CA 92672

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Salt River Project
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Scottsdale, AZ 85251

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Public Utility Commission
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Karen O'Regan
Environmental Program Manager
City of Phoenix
Office of Environmental Programs
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Phoenix, AZ 85003

Matthew Benac
Assistant Vice President
Nuclear & Generation Services
El Paso Electric Company
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Chief, Radiological Emergency Preparedness Section
National Preparedness Directorate
Technological Hazards Division
Department of Homeland Security
1111 Broadway, Suite 1200
Oakland, CA 94607-4052

Electronic distribution by RIV:
Regional Administrator **(EEC)**
DRP Director **(ATH)**
DRS Director **(DDC)**
DRS Deputy Director **(RJC1)**
Senior Resident Inspector **(GXW2)**
Branch Chief, DRP/D **(TWP)**
Senior Project Engineer, DRP/D **(GEW)**
Team Leader, DRP/TSS **(CJP)**
RITS Coordinator **(MSH3)**

SUNSI Review Completed: _____ ADAMS: ☒ Yes ☐ No Initials: _____
☒ Publicly Available ☐ Non-Publicly Available ☐ Sensitive ☒ Non-Sensitive

R:_REACTORS\PV\2007\PV Meeting Summary 9_6_07.doc

RIV:SPE:DRP/D	C:DRP/D			
GEWerner	TWPruett			
09/10/2007	09/10/2007			

OFFICIAL RECORD COPY T=Telephone E=E-mail F=Fax

PUBLIC MEETING ATTENDANCE

LICENSEE/FACILITY	Palo Verde Nuclear Generating Station
DATE/TIME	September 6, 2007 9:00 a.m.
CONFERENCE LOCATION	Region IV Training Conference Room 611 Ryan Plaza Drive, Suite 400 Arlington, TX 76011

NAME (PLEASE PRINT)	ORGANIZATION	TITLE
Neil O'Keefe	RIV	Sr Rx Insp
Eric Ruesch	RIV	Rx Insp
Joseph Bashore	RIV	Project Engineer
Victor Dricks	RIV	PAO
Greg Werner	RIV	Senior Project Eng.
Tom Hiltz	NRR	Branch Chief
Roy Caniano	RIV	Deputy Director DRS
A. Vegel	RIV	D D DRP
E Collins	RIV	RA
Art Howell	RIV	D DRP
Troy Pruett	RIV	Branch Chief
Greg Warnick	RIV	SRI PBD

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NAME (PLEASE PRINT)	ORGANIZATION	TITLE
Dwayne Carnes	APS	Nuclear Assurance Director
Mark Fallon	APS	Comm Consultant
George Andrews	APS	Performance Imp. Director
Scott Bauer	APS	Director, Reg. Affairs
Randy Edington	APS	SVP/CNO
Jeanne Copsey	APS	ECP DL
Michael Colvin	APS	Shift Manager
Maria Lacal	APS	Director, Exec. Projects
Dwight Mims	APS	VP, Reg Affairs & Plant Imp.

PUBLIC MEETING ATTENDANCE

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NAME (PLEASE PRINT)	ORGANIZATION	TITLE
Mike Shea	APS	Dir / Im. PACT
Geoff Cook	SCE	Project Manager
Eric Shouse	EPE	Representative
Mr. Ice Markley	NRC	NRR Project Manager

Performance Improvement & Sustainability

Randy Edington

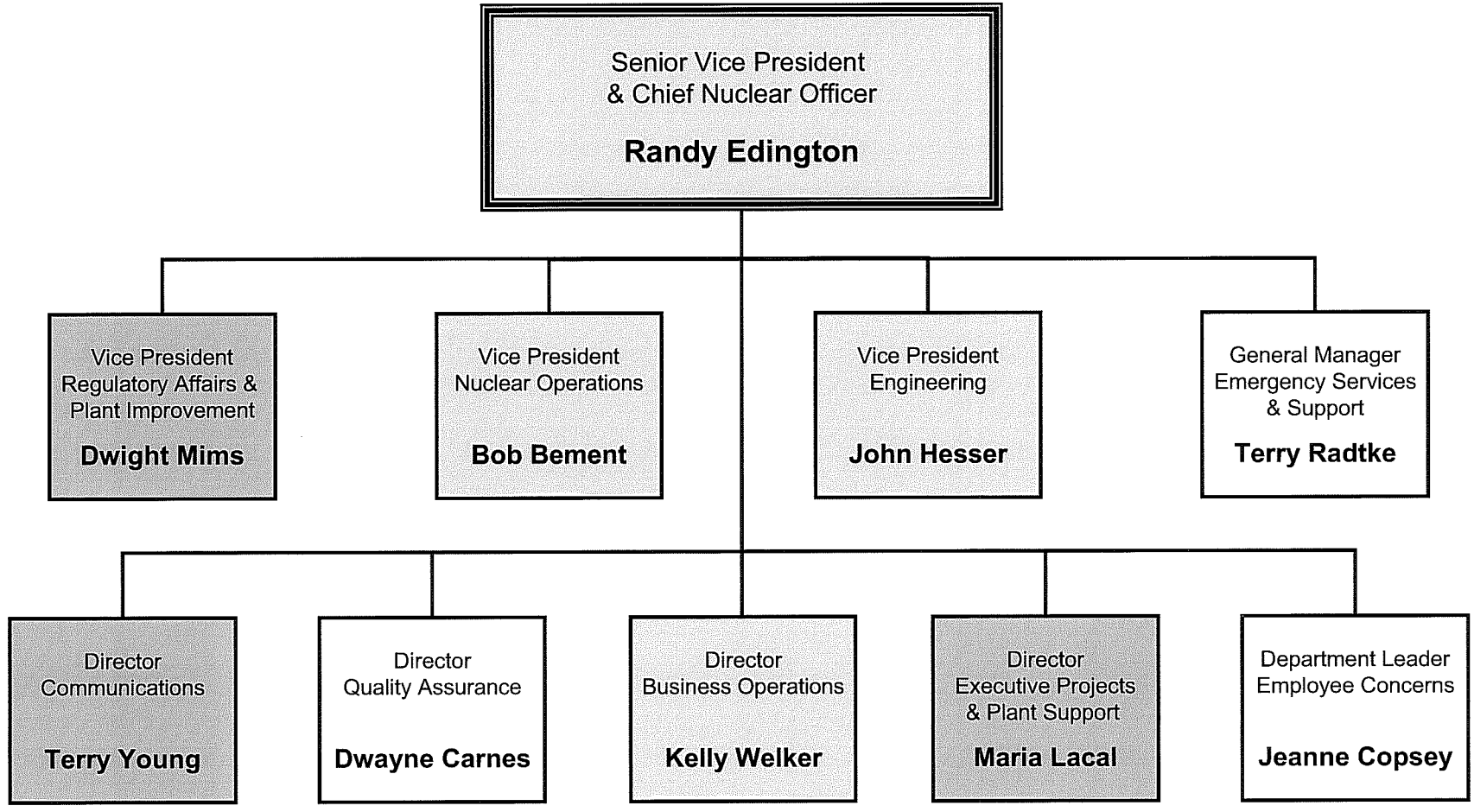
Senior Vice President - Nuclear
& Chief Nuclear Officer

September 6, 2007

History + New + Change = Palo Verde Way

Controlled change at deliberate speed

Palo Verde Organization



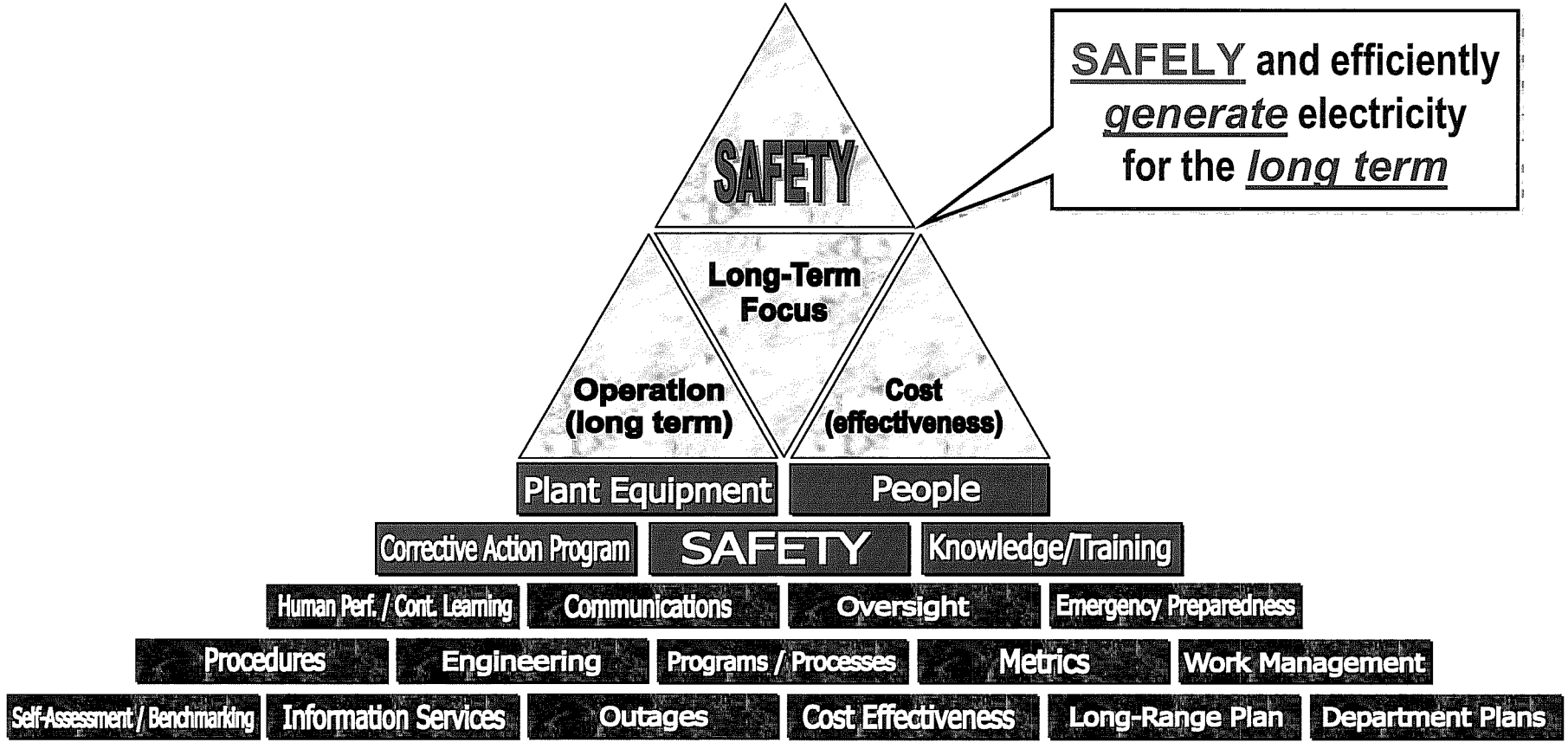
History + New + Change = Palo Verde Way

Map and understand

Then choose...

- ***execution***
- ***evolution***
- ***revolution***

Palo Verde Foundation

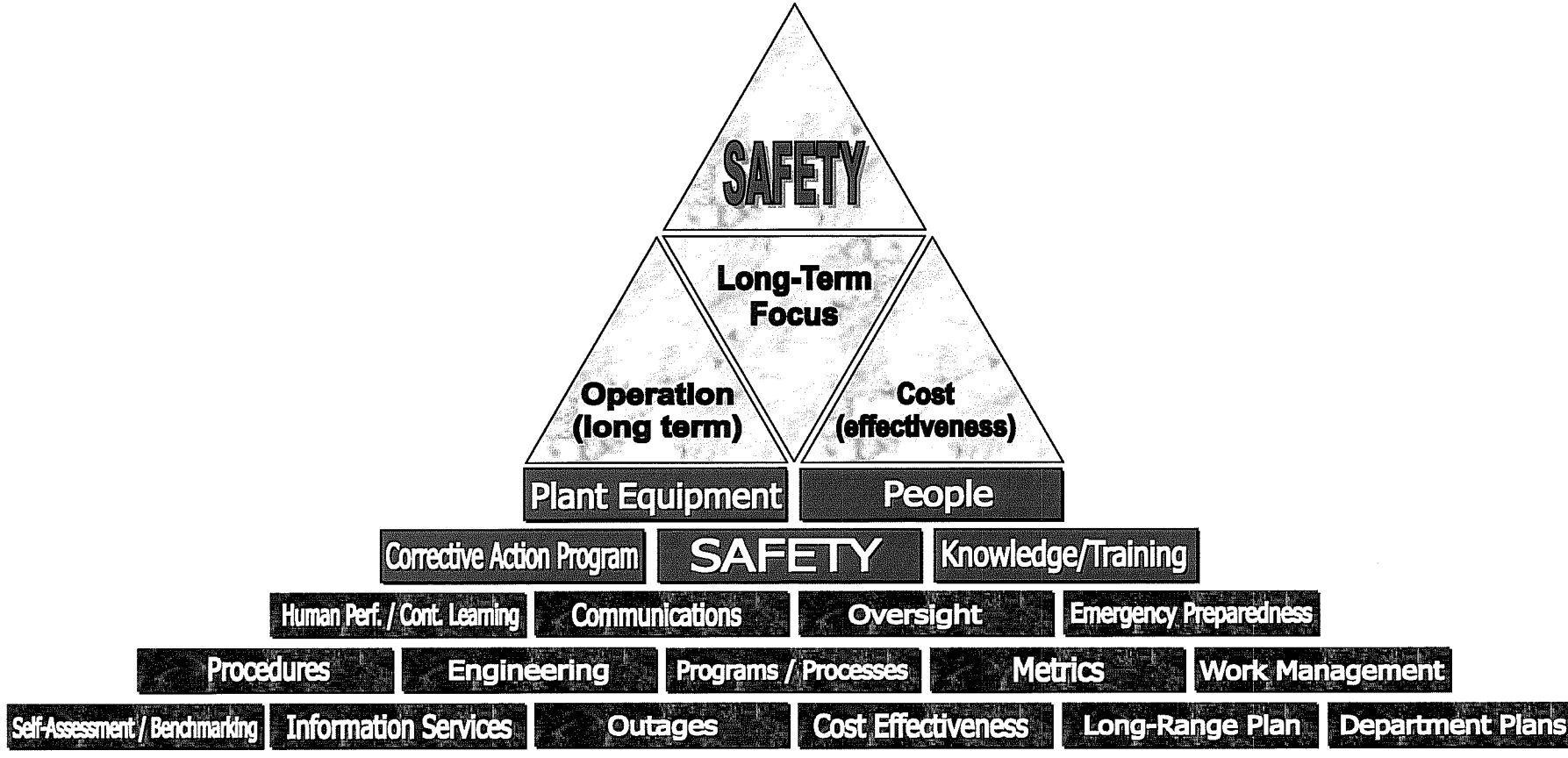


Site Integrated Business Plan

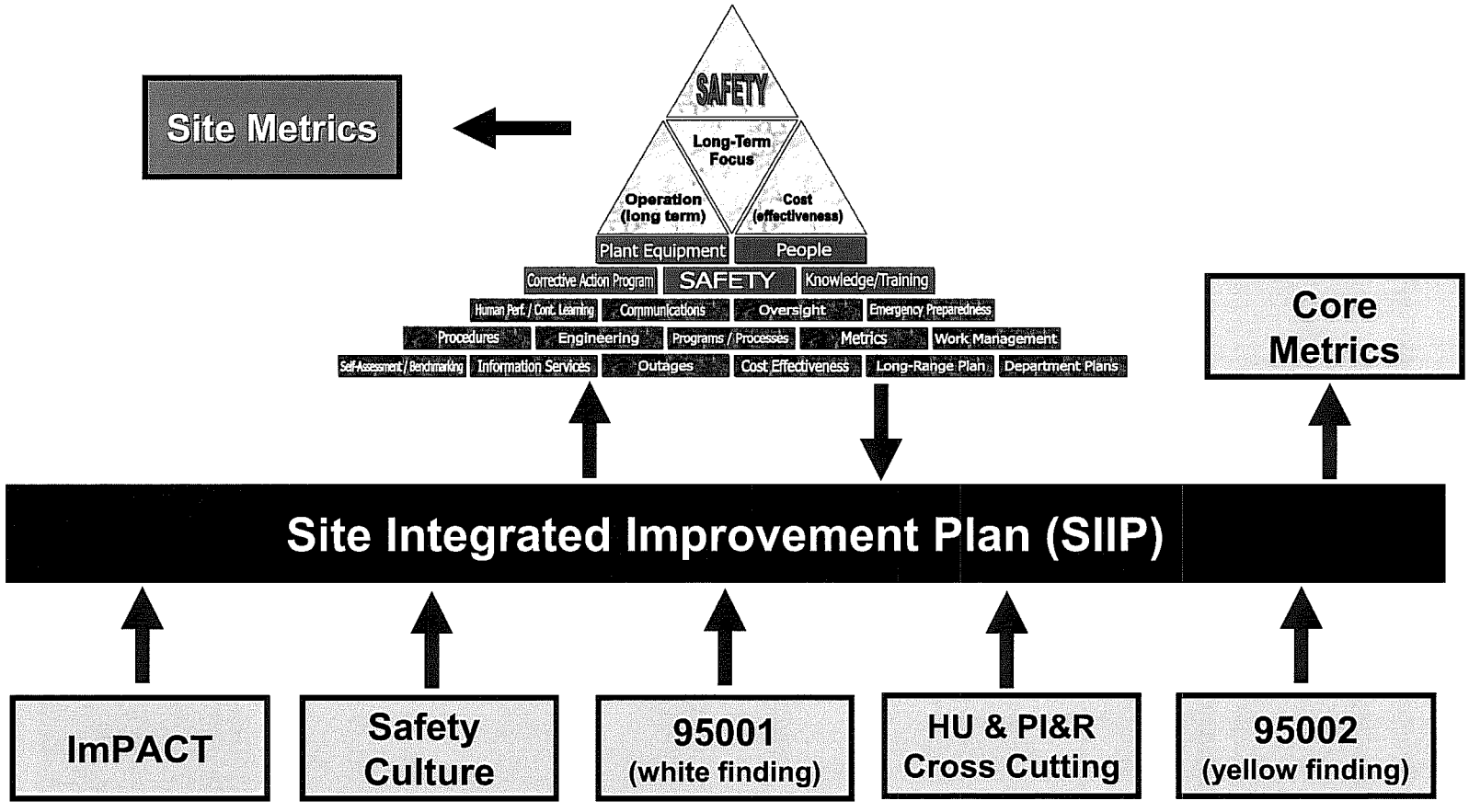
Maria Lacal

Director, Executive Projects &
Plant Support

Palo Verde Foundation



Site Integrated Business Plan (SIBP)



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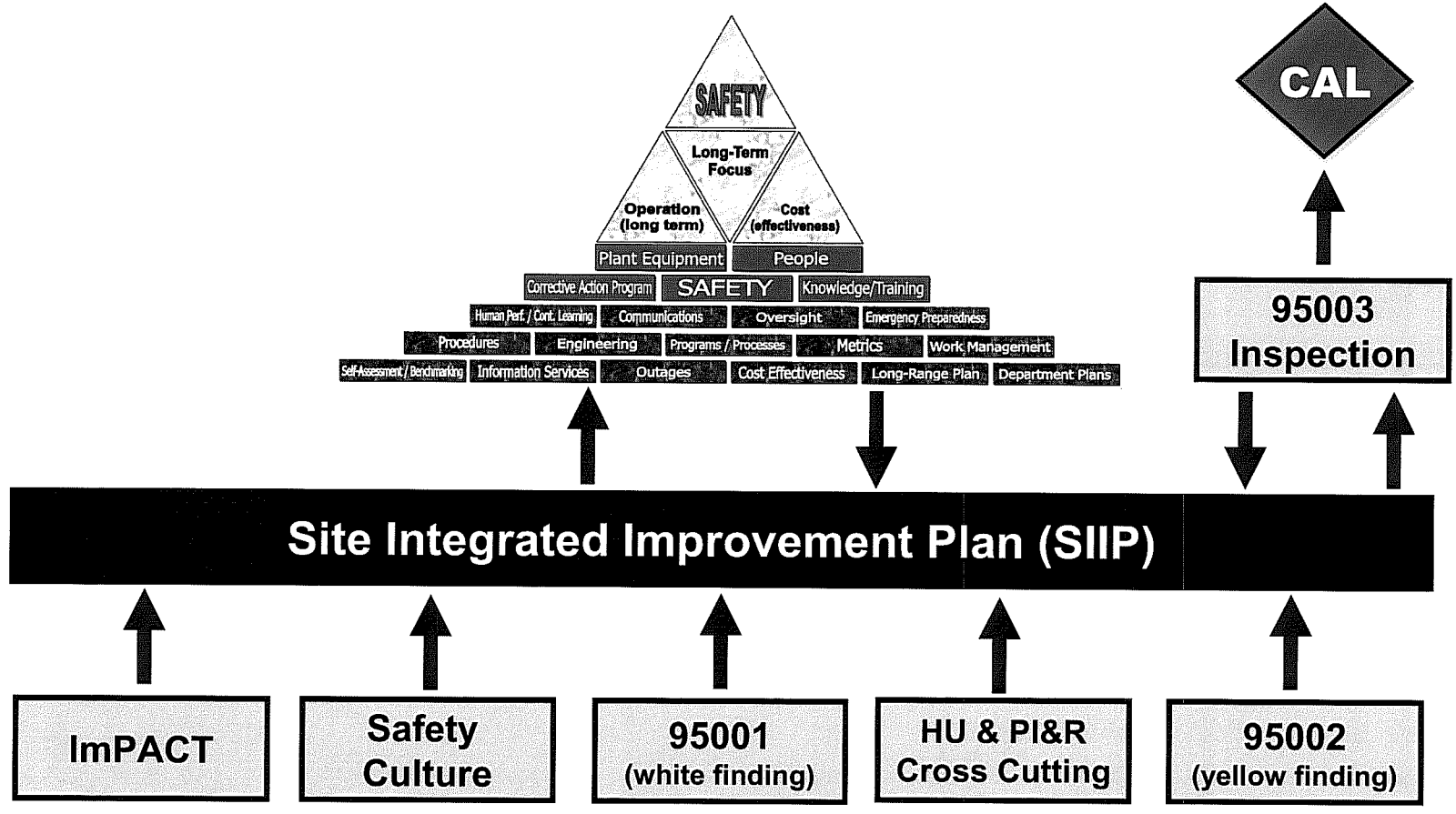

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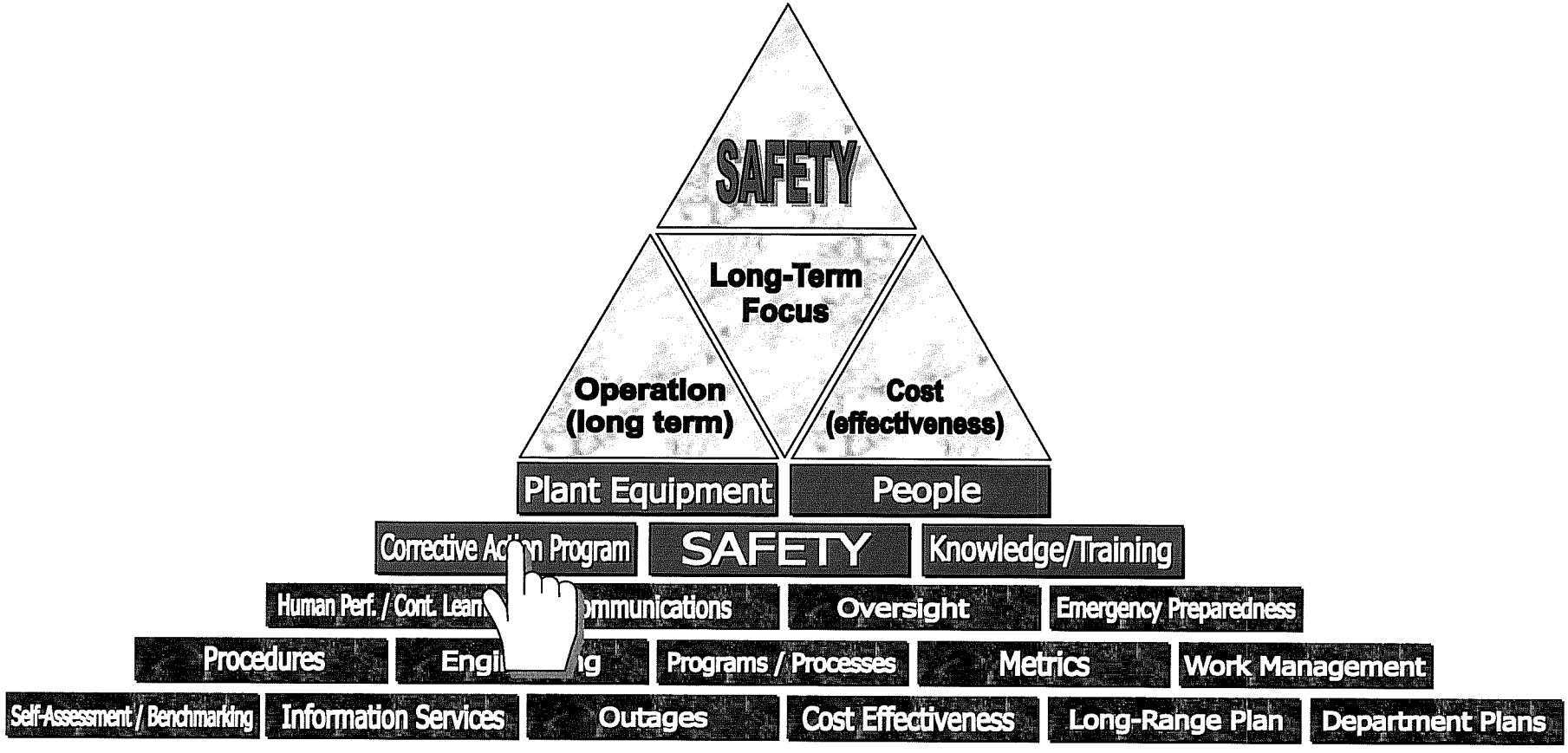
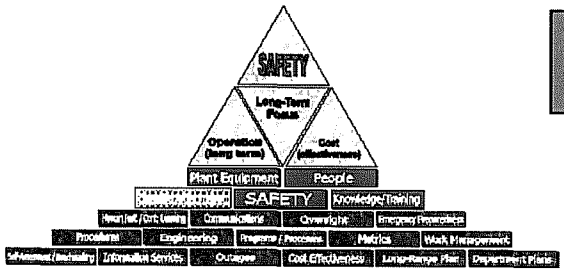


Building Block 3
Corrective Action Program

PVAR # 3022602 **Executive Sponsor: Dwight Mims**



Current State

The Corrective Action Program (CAP) consists of processes used to identify, evaluate, prioritize, correct, monitor effectiveness, and prevent recurrence of significant conditions adverse to quality. These programs include the Palo Verde Action Request (PVAR), Condition Report Disposition Request (CRDR), Operability Determination/Functional Assessment (OD/FA), Warehouse Deficiency Notice (WDN) processes, and the *Work Control Processes (Planning, Prioritization, Scheduling, Maintenance).*

Palo Verde has not consistently used the CAP as a proactive learning process. Consequently, issues are not consistently identified for effective trending and monitoring to drive proactive actions to resolve issues before they become self-revealing events. Initial condition descriptions (problem statements) are sometimes unclear when entered into the CAP. Some less-than-thorough and untimely evaluations and corrective actions have resulted in a number of self-revealing events and/or repeat problems that could have been prevented.

Behaviors with regard to quality CAP implementation have not been consistently demonstrated. The current training, tools, and procedures require improvement. Changes have been made to the Performance Indicators (PI) used to monitor the critical aspects of the CAP process and health. The use of data resulting from the revised PIs by station leaders is an area of continued focus for improved monitoring and management of the CAP.

Goal

Station personnel use the Corrective Action Program to identify, document, evaluate, and trend problems and to develop and implement appropriate actions to correct problems. The Palo Verde management team promotes a clear vision of the corrective action process by consistently supporting and encouraging problem identification, timely and thorough evaluation of conditions, and development and implementation of effective and timely corrective actions. Effectiveness reviews, performed during and following completion of corrective actions, rigorously evaluate whether corrective actions will or have adequately resolved the condition adverse to quality.

The Corrective Action Program provides focus on and helps maintain visibility of issues to the station. Station personnel are fluent in the CAP requirements which are clearly and concisely delineated in governing procedures. Evaluations are performed in a thorough and timely manner to identify appropriate corrective actions that prevent recurrence of significant conditions. Performance indicators provide early detection of specific areas within the Corrective Action Program that are not meeting expectations and/or have a declining trend. Trending, operating experience, and self assessments and/or audits are used to identify and correct organizational and programmatic concerns before they become issues.

Major Initiatives

3.1 Evaluation Initiative

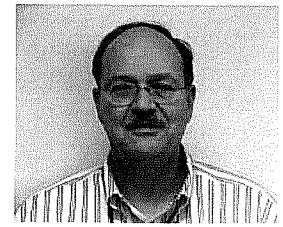
3.2 Culture and Behavior Improvement Initiative

3.3 Knowledge/Skill Initiative

3.4 Process Improvement Initiative

3.5 Metrics/Effectiveness Initiative

Actions Completed Prior to 2007



How We Measure Success

Metrics

- Inventory and Backlog of Condition Report Disposition Requests (CRDR) and Condition Report Action Items (CRAI)
- CRDR evaluation age
- Repeat Significant events
- CRAI closed by due date
- Inventory and Backlog of Operability Determinations (OD)
- CRDR quality
- *Inventory and Backlog of Degraded/Nonconforming Conditions (DEG/NC)*
- CRAI extensions (# and duration)

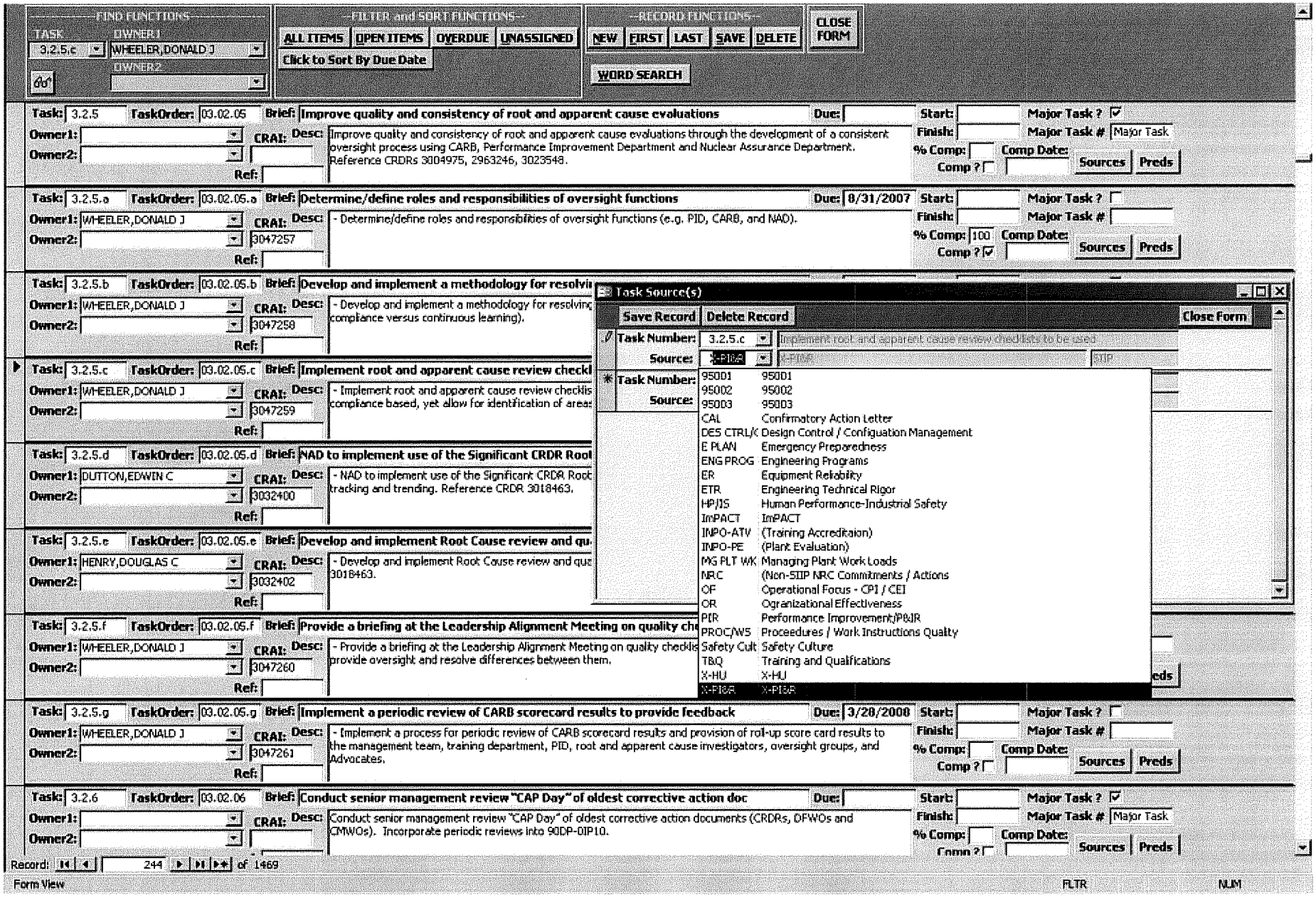
Effectiveness Reviews

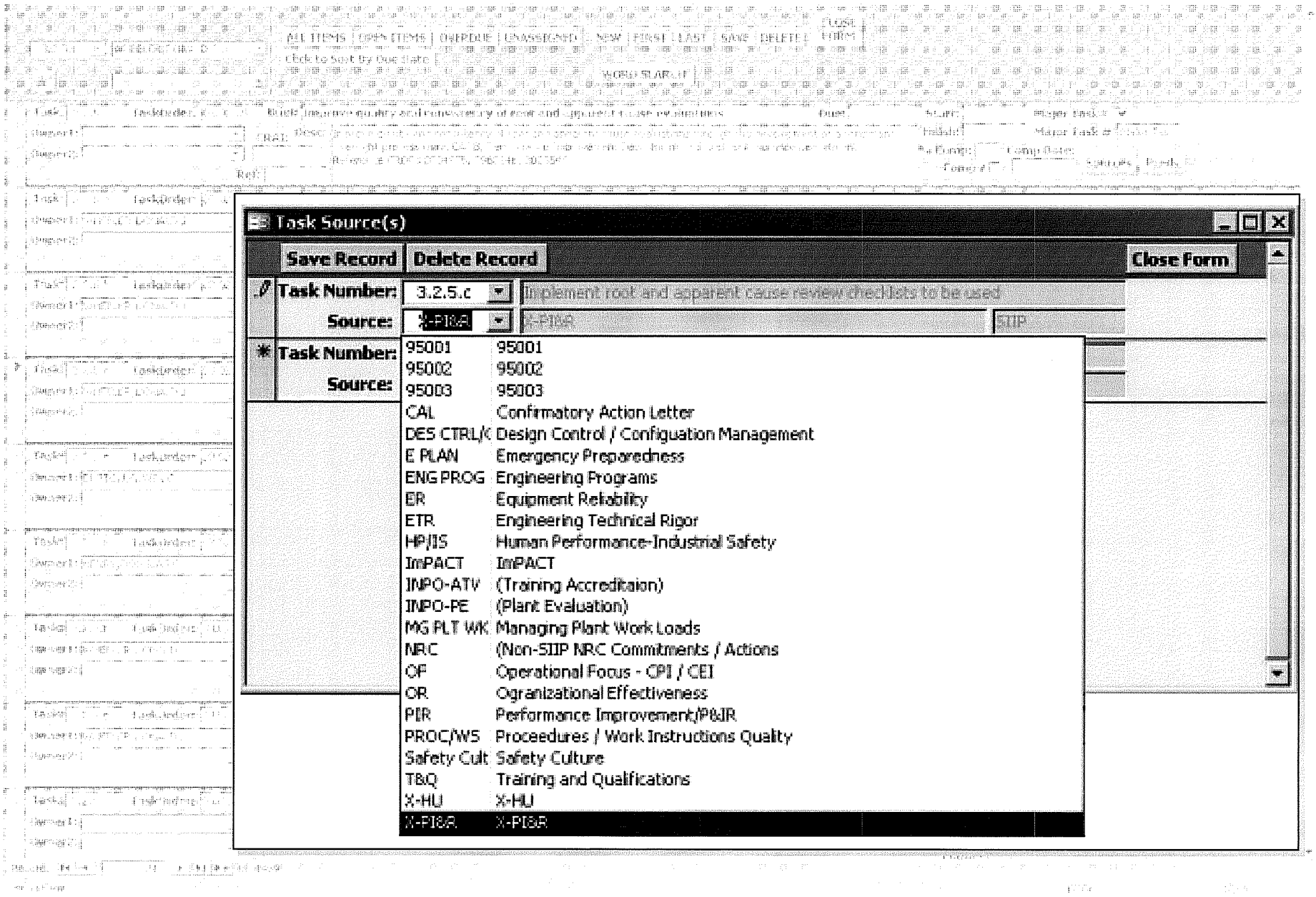
- CRDR 2992761

INITIATIVE: 3.2	Culture and Behavior Improvement Initiative		
Lead: WHEELER,DONALD J	CRDR: 3022621	Date Due: 8/8/2008	

CURRENT STATE: Palo Verde has not consistently used the CAP as a proactive learning process. Consequently, issues are not consistently identified for effective trending and monitoring to drive proactive actions to resolve issues before they become self-revealing events.

Task #	CRAI	Description	Owner	Due Date	2007	2008	2009	2010	2011	Source	% Comp
3.2.5	Major Task	Improve quality and consistency of root and apparent cause evaluations through the development of a consistent oversight process using CARB, Performance Improvement Department and Nuclear Assurance Department. Reference CRDRs 3004975, 2963246, 3023548.									
3.2.5.a	3047257	- Determine/define roles and responsibilities of oversight functions (e.g. PID, CARB, and NAD).	WHEELER,DONALD J								100%
3.2.5.b	3047258	- Develop and implement a methodology for resolving differences between oversight group conclusions (e.g. compliance versus continuous learning).	WHEELER,DONALD J	12/28/2007							
3.2.5.c	3047259	- Implement root and apparent cause review checklists to be used by PID, CARB, and NAD. Checklists should be compliance based, yet allow for identification of areas for improvement.	WHEELER,DONALD J	2/1/2008						X-PI&R	
3.2.5.d	3032400	- NAD to implement use of the Significant CRDR Root Cause evaluation grade sheet and provide to the CAP for tracking and trending. Reference CRDR 3018463.	DUTTON,EDWIN C	1/31/2008							
3.2.5.e	3032402	- Develop and implement Root Cause review and quality grading training for CARB and NAD. Reference CRDR 3018463.	HENRY,DOUGLAS C	11/30/2007						X-PI&R	
3.2.5.f	3047260	- Provide a briefing at the Leadership Alignment Meeting on quality checklists and how oversight groups will provide oversight and resolve differences between them.	WHEELER,DONALD J	2/1/2008							
3.2.5.g	3047261	- Implement a process for periodic review of CARB scorecard results and provision of roll-up score card results to the management team, training department, PID, root and apparent cause investigators, oversight groups, and Advocates.	WHEELER,DONALD J	3/28/2008							
3.2.6	Major Task	Conduct senior management review "CAP Day" of oldest corrective action documents (CRDRs, DFWOs and CMWOs). Incorporate periodic reviews into 90DP-0IP10.									
3.2.6.a	3047262	- Develop methodology for conducting CAP Day – data sets, participants, expectations, and schedule – and establish CAP Day Coordinator function.	WHEELER,DONALD J	9/14/2007							
3.2.6.b	3047265	- Evaluate incorporation of periodic review "CAP Day" process into 90DP-0IP10 or other station document. Revise applicable station document, as necessary.	HENRY,DOUGLAS C	11/30/2007							
3.2.7	Major Task	Provide feedback to senior management on casual analysis quality.									


FIND FUNCTIONS
TASK
3.2.5.c
OWNER1
WHEELER,DONALD J
OWNER2
FILTER and SORT FUNCTIONS
ALL ITEMS
OPEN ITEMS
OVERDUE
UNASSIGNED
Click to Sort By Due Date
RECORD FUNCTIONS
NEW
FIRST
LAST
SAVE
DELETE
CLOSE FORM
WORD SEARCH
Task: 3.2.5 TaskOrder: 03.02.05 Brief: Improve quality and consistency of root and apparent cause evaluations Due: Start: Major Task ?
Owner1: CRAI: Desc: Improve quality and consistency of root and apparent cause evaluations through the development of a consistent oversight process using CARB, Performance Improvement Department and Nuclear Assurance Department. Reference CRDRs 3004975, 2963246, 3023548.
Owner2: Ref: Finish: Major Task # Major Task
% Comp: Comp Date: Comp ? Sources Preds
Task: 3.2.5.a TaskOrder: 03.02.05.a Brief: Determine/define roles and responsibilities of oversight functions Due: 8/31/2007 Start: Major Task ?
Owner1: WHEELER,DONALD J CRAI: 3047257 Desc: - Determine/define roles and responsibilities of oversight functions (e.g. PID, CARB, and NAD).
Owner2: Ref: Finish: Major Task # % Comp: 100 Comp Date: Comp ? Sources Preds
Task: 3.2.5.b TaskOrder: 03.02.05.b Brief: Develop and implement a methodology for resolvi
Owner1: WHEELER,DONALD J CRAI: 3047258 Desc: - Develop and implement a methodology for resolving compliance versus continuous learning).
Owner2: Ref:
Task: 3.2.5.c TaskOrder: 03.02.05.c Brief: Implement root and apparent cause review checkl
Owner1: WHEELER,DONALD J CRAI: 3047259 Desc: - Implement root and apparent cause review checklis compliance based, yet allow for identification of areas
Owner2: Ref:
Task: 3.2.5.d TaskOrder: 03.02.05.d Brief: NAD to implement use of the Significant CRDR Root
Owner1: DUTTON,EDWIN C CRAI: 3032400 Desc: - NAD to implement use of the Significant CRDR Root tracking and trending. Reference CRDR 3018463.
Owner2: Ref:
Task: 3.2.5.e TaskOrder: 03.02.05.e Brief: Develop and implement Root Cause review and qu
Owner1: HENRY,DOUGLAS C CRAI: 3032402 Desc: - Develop and implement Root Cause review and que 3018463.
Owner2: Ref:
Task: 3.2.5.f TaskOrder: 03.02.05.f Brief: Provide a briefing at the Leadership Alignment Meeting on quality che
Owner1: WHEELER,DONALD J CRAI: 3047260 Desc: - Provide a briefing at the Leadership Alignment Meeting on quality checklis provide oversight and resolve differences between them.
Owner2: Ref:
Task: 3.2.5.g TaskOrder: 03.02.05.g Brief: Implement a periodic review of CARB scorecard results to provide feedback Due: 3/28/2008 Start: Major Task ?
Owner1: WHEELER,DONALD J CRAI: 3047261 Desc: - Implement a process for periodic review of CARB scorecard results and provision of roll-up score card results to the management team, training department, PID, root and apparent cause investigators, oversight groups, and Advocates.
Owner2: Ref: Finish: Major Task # % Comp: Comp Date: Comp ? Sources Preds
Task: 3.2.6 TaskOrder: 03.02.06 Brief: Conduct senior management review "CAP Day" of oldest corrective action doc Due: Start: Major Task ?
Owner1: CRAI: Desc: Conduct senior management review "CAP Day" of oldest corrective action documents (CRDRs, DFWOs and CMWOs). Incorporate periodic reviews into 90DP-0IP10.
Owner2: Ref: Finish: Major Task # % Comp: Comp Date: Comp ? Sources Preds
Task Source(s)
Save Record
Delete Record
Close Form
Task Number: 3.2.5.c
Source: X-PI&R
95001 95001
95002 95002
95003 95003
CAL Confirmatory Action Letter
DES CTRL/C Design Control / Configuation Management
E PLAN Emergency Preparedness
ENG PROG Engineering Programs
ER Equipment Reliability
ETR Engineering Technical Rigor
HP/IS Human Performance-Industrial Safety
ImPACT ImPACT
INPO-ATV (Training Accreditaion)
INPO-PE (Plant Evaluation)
MG PLT WK Managing Plant Work Loads
NRC (Non-SIIP NRC Commitments / Actions
OF Operational Focus - CP1 / CE1
OR Ogranizational Effectiveness
PIR Performance Improvement/PI&R
PROC/WS Proceedures / Work Instructions Quality
Safety Cult Safety Culture
T&Q Training and Qualifications
X-HU X-HU
X-PI&R X-PI&R
Record: 244 of 1469
Form View
FLTR
NUM


Task Source(s)
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Delete Record
Close Form
Task Number:
3.2.5.c
Implement root and apparent cause review checklists to be used
Source:
X-PI&R
STIP
Task Number:
Source:
95001 95001
95002 95002
95003 95003
CAL Confirmatory Action Letter
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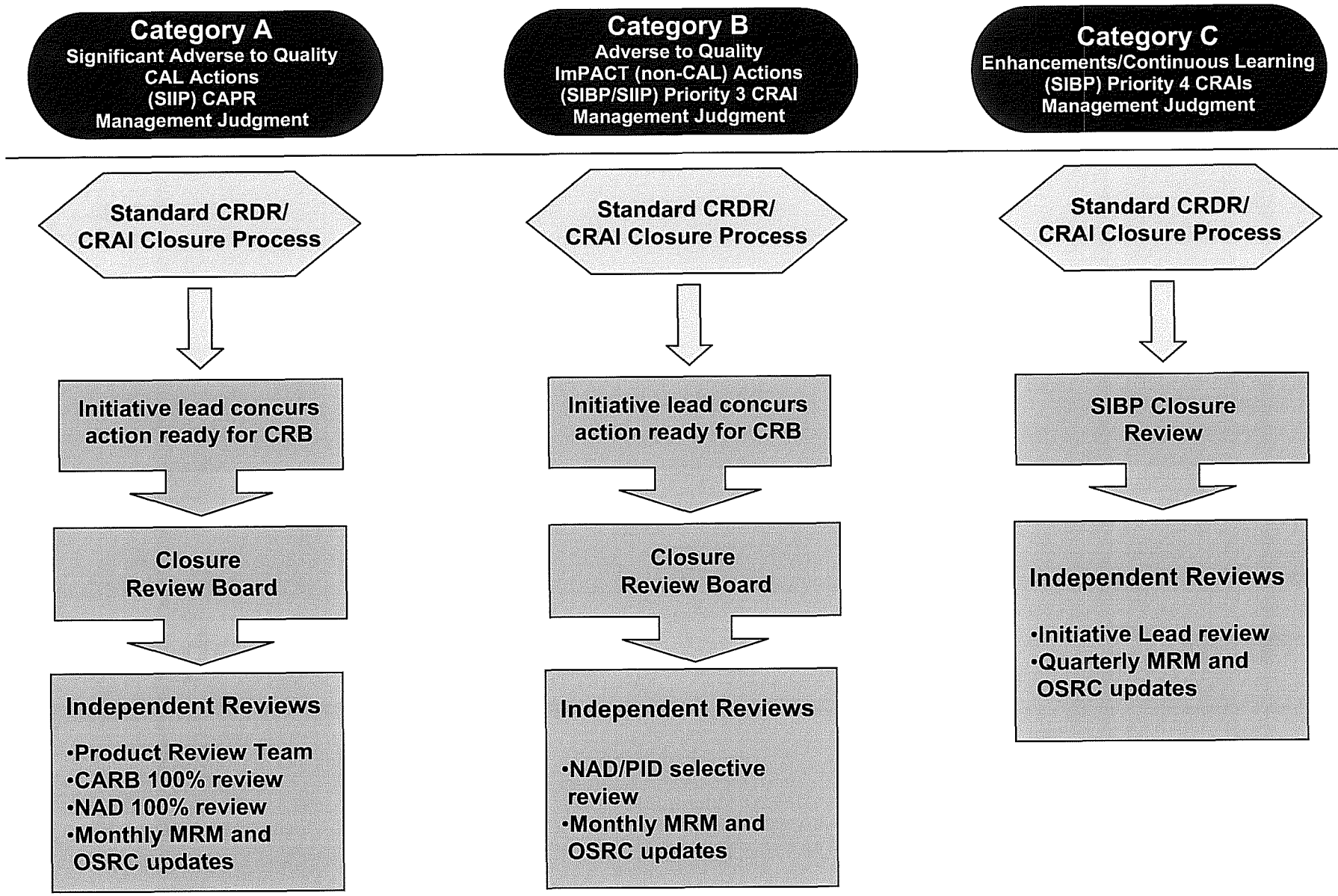
PROC/WS Proceedures / Work Instructions Quality
Safety Cult Safety Culture
T&Q Training and Qualifications
X-HU X-HU
X-PI&R X-PI&R

Graded Approach to SIBP/SIIP Action Closure



Integrated Plans For Continuous Improvement

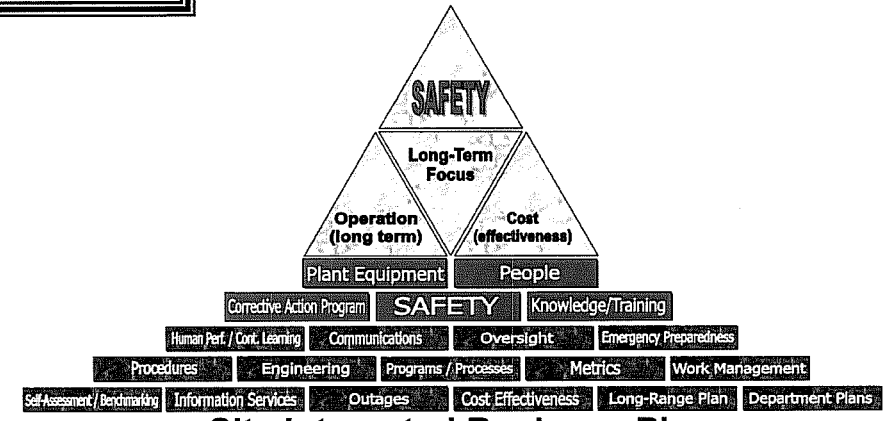
Effectiveness Reviews

Monitoring/Metrics

External/internal input, OE, benchmarking

Annual Adjustments

Integrated Action Plans



Site Integrated Business Plan

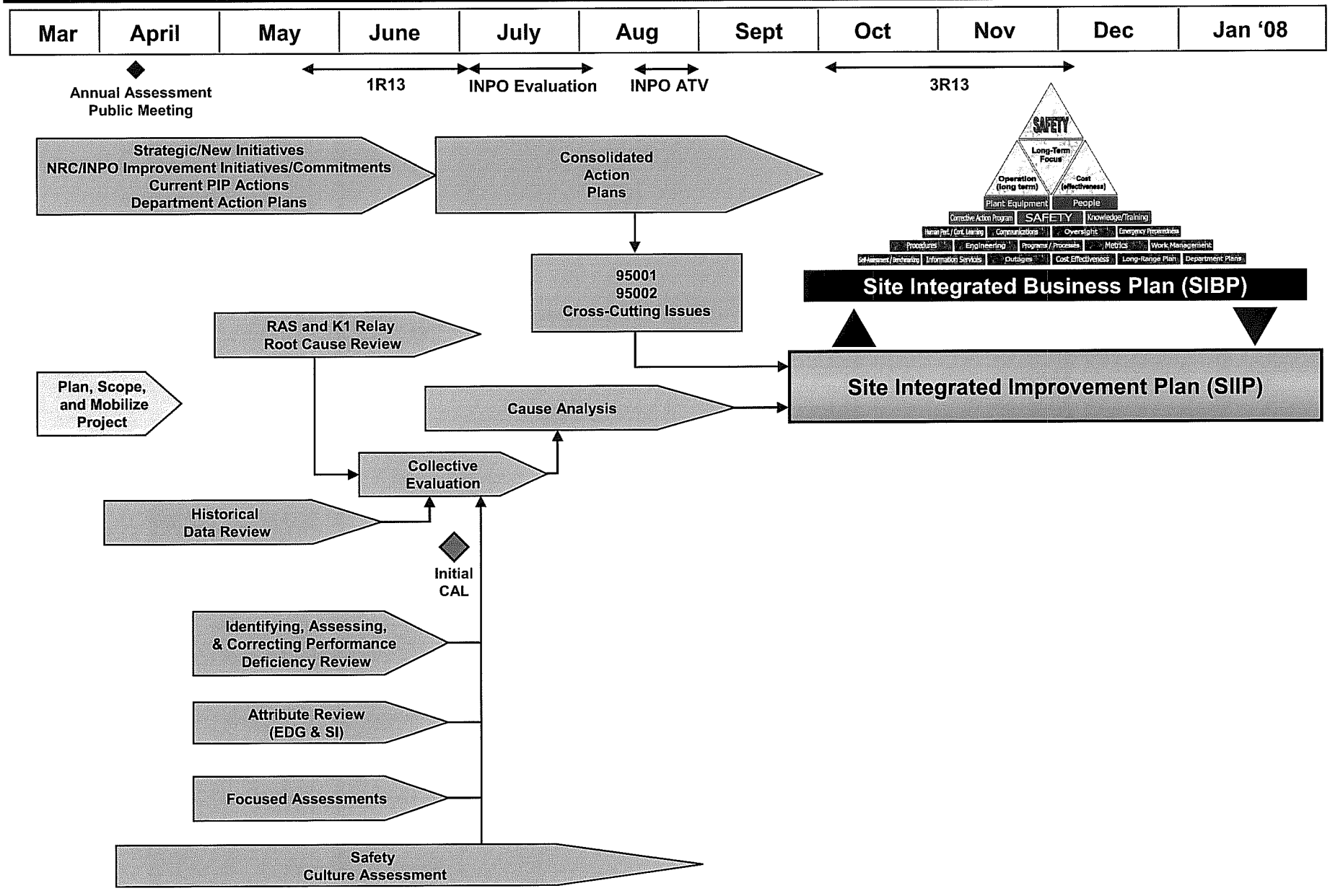
Senior Leader Review & Approval

ImPACT Project & Safety Culture

Dwight Mims

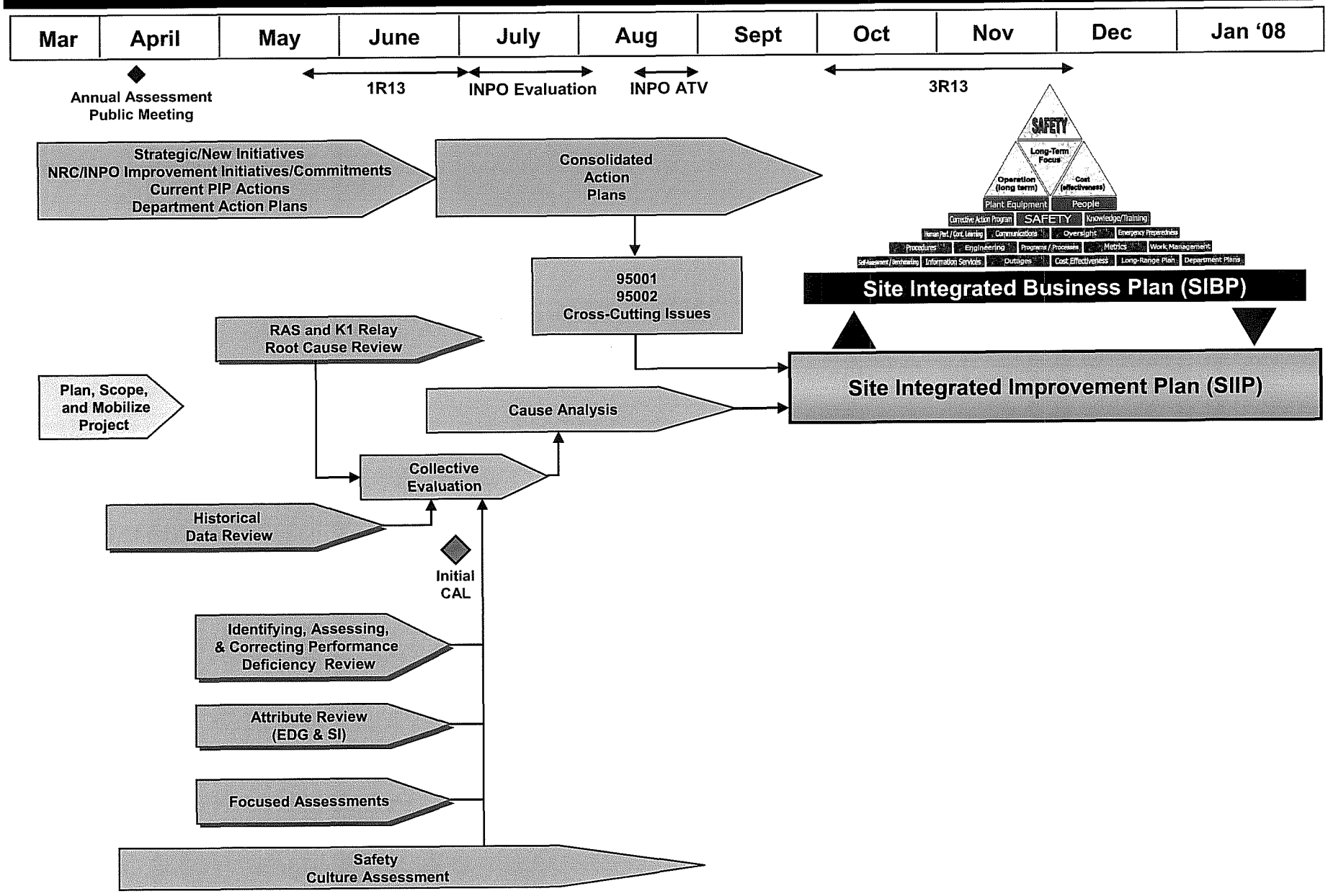
Vice President, Regulatory Affairs
& Plant Improvement

Improving Palo Verde for the Long Term



NOTE: This approximates the timetable for the ImPACT Project — see project schedule for detail.

Improving Palo Verde for the Long Term



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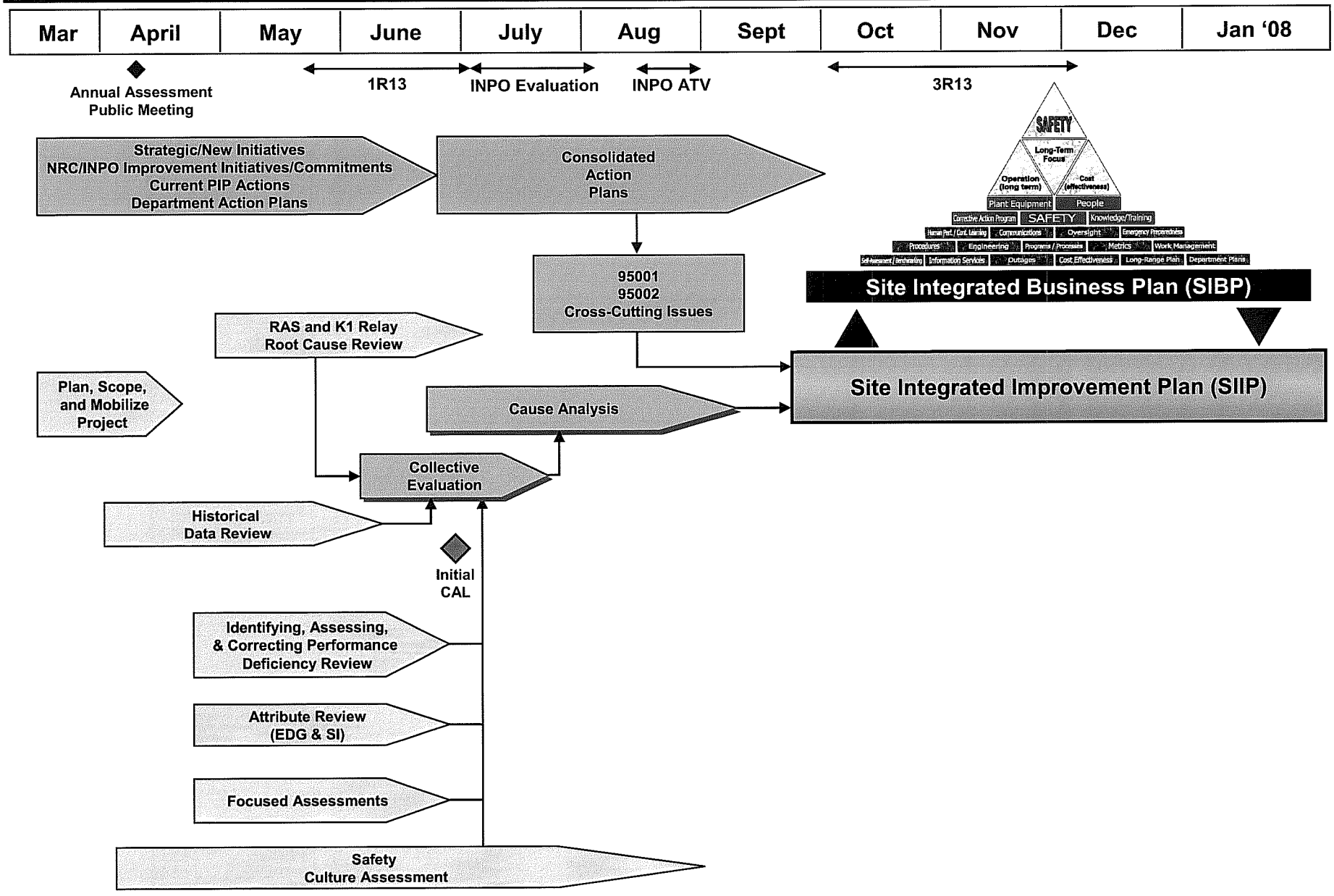
Improving Palo Verde for the Long Term



NOTE: This approximates the timetable for the ImPACT Project — see project schedule for detail.

Root Cause Teams

- **What's Different…**
  - Just-In-Time Training for leads
  - Approximately 40% external membership, 60% internal
  - Industry experts coach and mentor teams
  - Routine alignment & integration meetings
  - Investigation Directors & Root Cause Leads provide fresh perspective
  - Shift Manager input

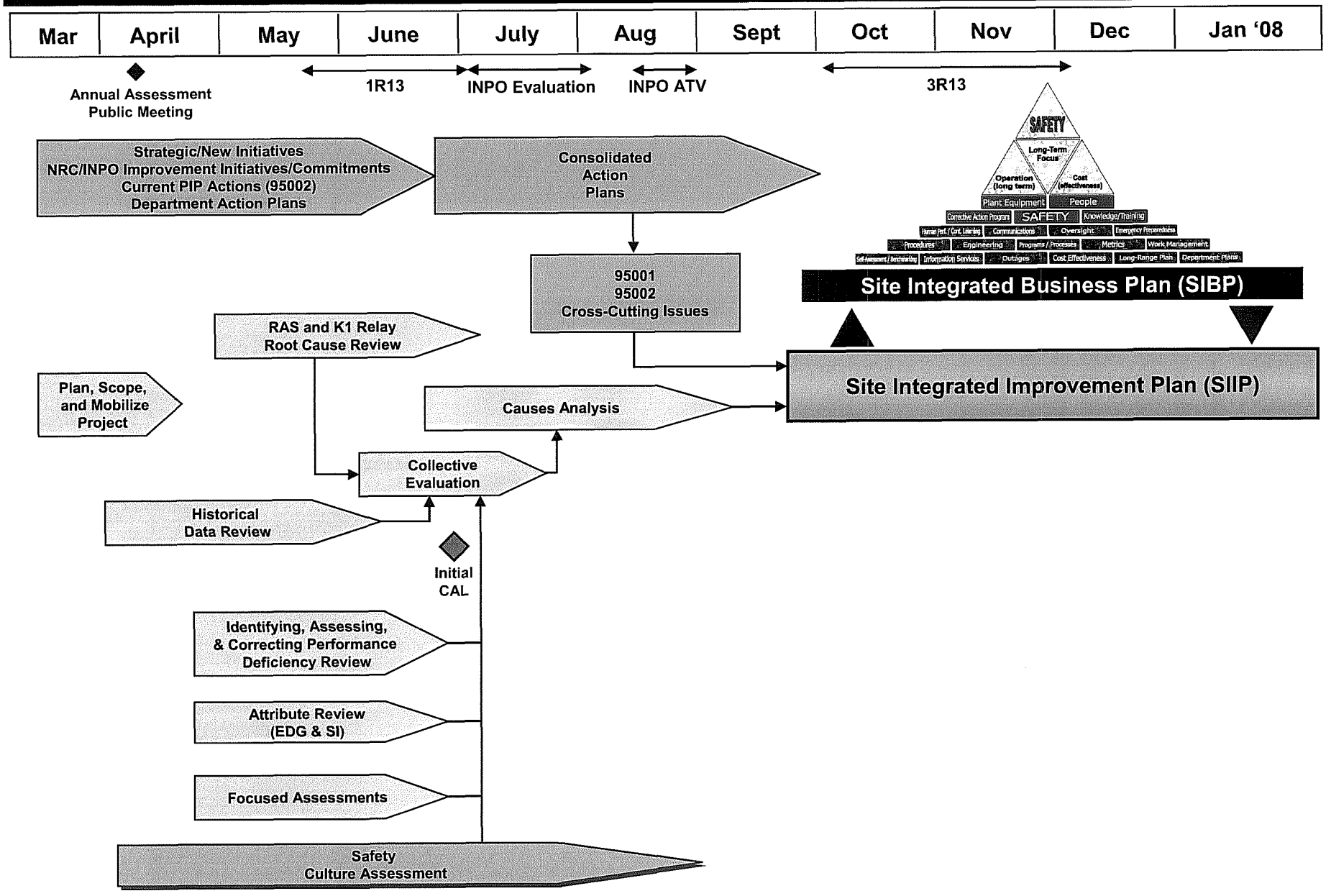
ImPACT Cause Analysis

	Topical Area	Sponsor
1	Organizational Effectiveness	Bob Bement
2	Operational Focus	Bob Bement
3	Emergency Preparedness	Dwight Mims
4	Engineering Programs	John Hesser
5	Design Control / Configuration Management	John Hesser
6	Engineering Technical Rigor	John Hesser
7	Equipment Reliability	Mike Perito
8	Procedures / Work Instructions	Terry Radtke
9	Human Performance – Industrial Safety	Bob Bement
10	Performance Improvement	Dwight Mims
11	Managing Plant Work Loads	Bob Bement
12	Training & Qualification	Bob Bement

Actions Initiated / In Progress

- Managed Inventory / Backlogs
- Emergency Preparedness
- Oversight Improvements
- Staffing Upgrades
- Operational Focus Emphasis
- Employee Engagement
- CDBR Adjustments
- Engineering Improvement Plan

Improving Palo Verde for the Long Term



NOTE: This approximates the timetable for the ImPACT Project — see project schedule for detail.

Assessment Elements

- **Two Complementary Safety Culture Assessments:**
  - SYNERGY survey
    - 80% participation
    - 54% provided write-in comments
  - Independent Safety Culture Performance Evaluation Team (ISCPET)
- **Organizational and Topical Interviews**
- **Behavior Observations**
- **Document Reviews**

Assessment Results

- **Eleven organizations identified as requiring further attention**
  - Interviews provided further insights with no evidence of unwillingness to raise safety concerns
  - Common themes – Training & Qualifications, Staffing Resources, Compensation
- **Trend questions to assess current momentum in overall Nuclear Safety Culture indicate recent improvement**
- **Valuable insights provided by write-in comments**

Findings & Conclusions

- **Nuclear Safety Culture**
  - Improve the corrective action process
  - Address staffing & funding resource issues
  - Emphasize Standards, Leadership Alignment & Performance Accountability
  - Focus on operational nuclear safety practices
  - Improve effectiveness of independent oversight, internal assessment & benchmarking
  - Reinforce safety-conscious work environment expectations

Findings & Conclusions

- **General Culture & Work Environment**
  - Improve effectiveness in planning & implementing change
  - Improve work management & other processes
  - Engage the workforce
- **Organizational Initiatives**
  - Address opportunities in the organizations identified

Findings & Conclusions

Positive Observations

- Environment exists that promotes the free flow of information
- Workforce understands their responsibility & will pursue potential nuclear safety issues
- Corporate and site senior leadership communicating right safety message
- Policies and programs place priority on nuclear safety
- Alternative means for raising concerns generally function well and are trusted
- Importance being placed on improving nuclear safety performance

Status / Update

- **Final reports issued by independent teams**
- **Areas for improvement mapped into cause analysis**
- **Delta & collective analysis of Nuclear Safety Culture Assessment results**
- **Communication of Assessment results**
- **Safety Culture Team**
- **Formal action plan development**
  - Tracking, monitoring & traceability
  - On-going assessment & effectiveness plan
- **Incorporation of actions into the SIIP or other area as appropriate**

Actions Initiated / In Progress

Nuclear Safety Culture

- Ongoing Leadership alignment meetings
- Anonymous Palo Verde Action Requests (PVAR)
- External & internal organizational Safety-Conscious Work Environment assessments
- Plant status, safety & safety culture discussion at start of all meetings
- Frontline employee safety culture behavior sessions
- Weekly Vice President streaming videos
- Spray Pond Case Study Training

Organizational Initiatives

- Leadership and organizational changes
- Leadership development initiatives

Cross-Cutting Issues

George Andrews

Director, Performance Improvement

Background

- **NRC Cross-cutting issues**
  - Problem Identification & Resolution (PI&R): March 2005
  - Human Performance: March 2005

Background

- **PI&R Issues**
  - Failure to identify degraded conditions
  - Inadequate operability determinations
  - Timeliness of corrective actions
  - Engineering quality
    - Operability determinations
    - Evaluation completeness
    - Extent of condition

Background

- **Human Performance Issues**
  - Ineffective decision-making
    - Assumptions
    - Communication of decisions
  - Inadequate resources
    - Procedure quality
  - Ineffective work practices
    - Failure to follow procedures
    - Human error prevention techniques

Background

- **Initial Causal Analysis**
  - PI&R Cause Analysis
    - Accountability
    - Standards
  - Human Performance Cause Analysis
    - Ownership
    - Leadership
    - Standards

Background

- **PI&R Re-Evaluation**
  - Effectiveness Review
  - Root Cause Evaluation
    - Behavior and Culture
    - Knowledge and Skills
    - Process
  - Benchmarking

Causes & Actions

- **PI&R Behavior and Culture**
  - Established dedicated Action Request Review Committee – "ARRC"
  - Refocus Performance Advocates
  - Corrective Action Review Board – "CARB"
  - Performance Improvement Closure Reviews
  - Offsite Safety Review Committee

Causes & Actions

- **PI&R Knowledge and Skills**
  - ☐ Root Cause Investigator Just-In-Time Training
  - ☐ Apparent Cause Training
  - ☐ CARB Training
  - ☐ Corrective Action "Fundamentals" Training
  - ☐ Root Cause Initial & Continuing Training

Causes & Actions

- **PI&R Process**
  - Palo Verde Action Request process – "PVAR"
  - Map & Understand
  - Trend Program

Measuring Results

- **PI&R Metrics**
  - Corrective Action quality & timeliness
  - Degraded/Non-conforming condition resolution
  - Operability Determination quality

PI&R Current Status

- Mapped previous actions
- Evaluated action effectiveness
- Completed root cause analysis
- Integrated action plan into the SIIP
- Performance is improving
- Focus areas for further improvement

Background

- **Human Performance Re-Evaluation**
  - Effectiveness Review
  - Cause validation
    - Behavior and Culture
    - Knowledge and Skills
    - Process
  - Benchmarking

Causes & Actions

- **Human Performance Behavior and Culture**
  - ☐ Manager of the Day Program
  - ☐ Outage "Focus" Team
  - ☐ Observation Program
  - ☐ Clock Reset Program
  - ☐ Coach-the-Coach Training
  - ☐ Train-the-Trainer

Causes & Actions

- **Human Performance Knowledge and Skills**
  - ☐ Issue Fundamentals booklet — clear standards and expectations
  - ☐ Human Performance training with mock-ups
  - ☐ Develop Department Performance Advocates
  - ☐ Issue Outage Operating Experience handbook

Causes & Actions

- **Human Performance Process**
  - Operational Decision-Making Issues (ODMIs)
    - Assess Safety, Risk, Safety Culture, Technical Competence, Skeptic Role
    - Responsible personnel identified
    - Trigger points for further action
    - Documentation/distribution of decision basis
  - Procedure Quality
    - Address inventory of procedure change requests
    - Establish integrated site process for procedures
    - Update administrative control program to optimize effectiveness
    - Develop work flow for procedure feedback and tracking

Measuring Results

- **Human Performance Metrics**
  - Observation Rate is increasing
  - Site-wide training is ongoing
  - Error Rate is decreasing

Human Performance Current Status

- Mapped previous actions
- Validated Root Cause Analysis
- Evaluated Action effectiveness
- Action Plan incorporated into SIIP
- Performance is improving
- Focus areas for further improvement

Conclusions

Randy Edington

Senior Vice President - Nuclear
& Chief Nuclear Officer

In Conclusion...

- What's Different?
- Sustainability
- Current State

Questions