UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION II
245 PEACHTREE CENTER AVENUE NE, SUITE 1200
ATLANTA, GEORGIA 30303-1257

May 13, 2013

Mr. Scott Batson
Site Vice President
Duke Energy Carolinas, LLC
Oconee Nuclear Station
7800 Rochester Highway
Seneca, SC 29672

SUBJECT: OCONEE NUCLEAR STATION – NRC PROBLEM IDENTIFICATION AND RESOLUTION INSPECTION REPORT 05000269/2013008, 05000270/2013008, 05000287/2013008

Dear Mr. Batson:

On April 18, 2013, the U. S. Nuclear Regulatory Commission (NRC) completed an inspection at your Oconee Nuclear Station Units 1, 2, and 3. The enclosed report documents the inspection findings, which were discussed on April 18, 2013, with you and other members of your staff.

The inspection was an examination of activities conducted under your license as they relate to the identification and resolution of problems, and compliance with the Commission's rules and regulations and with the conditions of your operating license. Within these areas, the inspection involved examination of selected procedures and representative records, observations of plant equipment and activities, and interviews with personnel.

Based on the inspection sample, the inspection team concluded that the implementation of the corrective action program and overall performance related to identifying, evaluating, and resolving problems at Oconee Nuclear Station Units 1, 2, and 3 was adequate. Licensee identified problems were entered into the corrective action program at a low threshold. Problems were generally prioritized and evaluated commensurate with the safety significance of the problems. Corrective actions were generally implemented in a timely manner commensurate with their importance to safety and addressed the identified causes of problems. Lessons learned from the industry operating experience were generally reviewed and applied when appropriate. Audits and self-assessments were effectively used to identify problems and appropriate actions.

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter and its enclosure will be available electronically for public inspection in the NRC Public Document Room or from the Publicly Available Records (PARS) component of the 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).

Sincerely,

/RA/

Curtis W. Rapp, Chief
Reactor Projects Branch 7
Division of Reactor Projects

Docket Nos.: 50-269, 50-270, 50-287
License Nos.: DPR-38, DPR-47, DPR-55

Enclosure: INSPECTION REPORT 05000269/2013008, 05000270/2013008, and 05000287/2013008 w/Attachment: Supplemental Information

cc w/encl. (see page 3)

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cc w/encl. (see page 3)

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Letter to Scott Batson from Curtis W. Rapp dated May 13, 2013.

SUBJECT: OCONEE NUCLEAR STATION – NRC PROBLEM IDENTIFICATION AND RESOLUTION INSPECTION REPORT 05000269/2013008, 05000270/2013008, 05000287/2013008

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U.S. NUCLEAR REGULATORY COMMISSION

REGION II

Docket Nos.:	50-269, 50-270, 50-287
License Nos.:	DPR-38, DPR-47, DPR-55
Report Nos.:	05000269/2013008, 05000270/2013008, 05000287/2013008
Licensee:	Duke Energy Carolinas, LLC
Facility:	Oconee Nuclear Station, Units 1, 2 and 3
Location:	Seneca, SC 29672
Dates:	April 1 – 5, 2013 April 15 – 18, 2013
Inspectors:	L. Suggs, Senior Construction Projects Inspector, Team Leader R. Patterson, Reactor Inspector N. Pitoniak, Fuel Facility Inspector N. Staples, Senior Project Inspector
Approved by:	C. Rapp, Chief Reactor Projects Branch 7 Division of Reactor Projects

Enclosure

SUMMARY OF FINDINGS

IR 05000269/2013-008, 05000270/2013-008, 05000287/2013-008; April 1, 2013 – April 18, 2013; Oconee Nuclear Station Units 1, 2 and 3; Biennial Inspection of the Problem Identification and Resolution Program.

The inspection was conducted by a senior construction project inspector, a senior project inspector, a reactor inspector, and a fuel facility inspector. No findings were identified. The NRC's program for overseeing the safe operation of commercial nuclear power reactors is described in NUREG-1649, "Reactor Oversight Process," Rev. 4.

Identification and Resolution of Problems

The inspectors concluded that, in general, problems were properly identified, evaluated, prioritized, and corrected. The licensee was effective at identifying problems and entering them into the corrective action program (CAP) for resolution, as evidenced by the relatively few number of deficiencies identified by external organizations (including the NRC) that had not been previously identified by the licensee, during the review period. Generally, prioritization and evaluation of issues were adequate, formal root cause evaluations for significant problems were adequate, and corrective actions specified for problems were acceptable. Overall, corrective actions developed and implemented for issues were generally effective and implemented in a timely manner. However, two minor examples associated with failure to take adequate corrective actions were identified.

The inspectors determined that overall, audits and self-assessments were adequate in identifying deficiencies and areas for improvement in the CAP, and appropriate corrective actions were developed to address the issues identified. Operating experience usage was found to be generally acceptable and integrated into the licensee's processes for performing and managing work, and plant operations.

Based on discussions and interviews conducted with plant employees from various departments, the inspectors determined that personnel at the site felt free to raise safety concerns to management and use the CAP to resolve those concerns.

REPORT DETAILS

4. OTHER ACTIVITIES

4OA2 Problem Identification and Resolution

.1 Assessment of the Corrective Action Program

a. Inspection Scope

The inspectors reviewed the licensee's CAP procedures which described the administrative process for initiating and resolving problems primarily through the use of the Problem Investigation Program (PIPs). To verify that problems were properly identified, appropriately characterized and entered into the CAP, the inspectors reviewed PIPs that were issued between December 2011 and February 2013, including a detailed review of selected PIPs associated with the following risk-significant systems: Reactor Coolant (NC), 4160VAC Auxiliary Power (AC) and High Pressure Service Water (HPSW). Where possible, the inspectors independently verified that the corrective actions were implemented. The inspectors also reviewed selected common causes and generic concerns associated with root cause evaluations to determine if they had been appropriately addressed. To help ensure that samples were reviewed across all cornerstones of safety identified in the NRC's Reactor Oversight Process (ROP), the inspectors selected a representative number of PIPs that were identified and assigned to the major plant departments, including operations, maintenance, engineering, health physics, chemistry, and security. The inspectors reviewed selected PIPs, verified corrective actions were implemented, and attended meetings where PIPs were screened for significance to determine whether the licensee was identifying, accurately characterizing, and entering problems into the CAP at an appropriate threshold.

The inspectors conducted plant walkdowns of equipment to assess the material condition and to identify any deficiencies that had not been previously entered into the CAP. The inspectors reviewed PIPs, maintenance history, completed work orders (WOs) for the systems, and reviewed associated system health reports. These reviews were performed to verify that problems were being properly identified, appropriately characterized, and entered into the CAP. Items reviewed generally covered a two-year period; however, in accordance with the inspection procedure, a five-year review was performed for selected systems for age-dependent issues.

Control room walkdowns were also performed to assess the Main Control Room (MCR) deficiency list and to ascertain if deficiencies were entered into the CAP. Operator Workarounds and Operator Burden screenings were reviewed and the inspectors verified compensatory measures for deficient equipment which were being implemented.

The inspectors conducted a detailed review of selected PIPs to assess the adequacy of the root-cause and apparent-cause evaluations of the problems identified. The inspectors reviewed these evaluations against the descriptions of the problem described in the PIPs and the guidance in licensee procedure NSD 212, "Cause Analysis," Rev. 27 and NSD 208 "Problem Investigation Program," Rev. 38. The inspectors assessed if the licensee had adequately determined the cause(s) of identified problems, and had

adequately addressed operability, reportability, common cause, generic concerns, extent-of-condition, and extent-of-cause. The review also assessed if the licensee had appropriately identified and prioritized corrective actions to prevent recurrence for significant conditions adverse to quality.

The inspectors attended various plant meetings to observe management oversight functions of the corrective action process. These included PIP screening meetings and Performance Improvement and Oversight Committee (PIOC) meetings.

Documents reviewed are listed in the Attachment.

b. Assessment

Identification of Issues

The inspectors determined that the licensee was generally effective in identifying problems and entering them into the CAP and there was a low threshold for entering issues into the CAP. Trending was generally effective in monitoring equipment performance. Site management was actively involved in the CAP and focused appropriate attention on significant plant issues.

Prioritization and Evaluation of Issues

Based on the review of PIPs sampled by the inspection team during the onsite period, the inspectors concluded that problems were generally prioritized and evaluated in accordance with the licensee's CAP procedures. Each PIP was assigned a significance level by certified members during the Central Screening Team (CST) meeting.

The inspectors determined that station personnel had conducted root cause and apparent cause analyses in compliance with the licensee's CAP procedures. The assigned cause determinations were appropriate and considered the significance of the issues being evaluated. A variety of formal causal-analysis techniques were used depending on the type and complexity of the issue consistent with NSD 212.

Effectiveness of Corrective Actions

The inspectors determined that, overall, corrective actions were timely, commensurate with the safety significance of the issues, and effective in that conditions adverse to quality were. For significant conditions adverse to quality, the corrective actions directly addressed the cause and effectively prevented recurrence. Effectiveness reviews for corrective actions to prevent recurrence (CAPRs) were sufficient to ensure corrective actions were properly implemented and were effective.

The inspectors identified the following two examples of a minor performance deficiency (PD) associated with the licensee's failure to take adequate corrective action. These two examples involved a violation of regulatory requirements, but are not subject to regulatory enforcement.

- PIP O-12-7940 – The intent of proposed corrective action was not accomplished by the actual corrective action, which was contrary to procedure NSD 208, rev. 38, section 208.9.3.2. The licensee initiated PIP O-13-3662 to address this issue.

- PIP O-12-1269 – The actual corrective action was closed, however the action to update the associated documentation had not been completed. Additionally, the corrective actions did not address the identified cause of the condition. The licensee initiated PIP O-13-04158 to address this issue.

c. Findings

No findings were identified.

.2 Assessment of the Use of Operating Experience (OE)

a. Inspection Scope

The inspectors examined licensee program for reviewing industry OE, reviewed licensee procedure NSD 204, “Operating Experience Program,” Rev. 15 and reviewed the licensee’s OE database to assess the effectiveness of how external and internal OE data was handled at the plant. In addition, the inspectors selected operating experience documents (e.g., NRC generic communications, 10 CFR Part 21 reports, licensee event reports, vendor notifications, and plant internal OE items, etc.) issued since December 2011, to verify if the licensee had appropriately evaluated each notification for applicability and if issues identified through these reviews were entered into the CAP. Documents reviewed are listed in the Attachment.

b. Assessment

The inspectors determined that the licensee was generally effective in screening operating experience for applicability to the plant. Industry OE was evaluated by plant OE Coordinators and relevant information was then forwarded to the applicable department for further action or informational purposes. OE issues requiring action were entered into the CAP for tracking and closure. In addition, OE was included in all root cause evaluations in accordance with licensee procedures.

c. Findings

No findings were identified.

.3 Assessment of Self-Assessments and Audits

a. Inspection Scope

The inspectors reviewed audit reports and self-assessment reports, including those which focused on problem identification and resolution, to assess the thoroughness and self-criticism of the licensee's audits and self assessments, and to verify that problems identified through those activities were appropriately prioritized and entered into the CAP

for resolution in accordance with licensee procedure NSD 607, “Self Assessments and Benchmarking.”

b. Assessment

The inspectors determined that the scopes of assessments and audits were adequate. Self-assessments were generally detailed and critical. The inspectors verified that PIPs were created to document all areas for improvement and findings resulting from the self-assessments, and verified that actions had been completed consistent with those recommendations. Generally, the licensee performed evaluations that were technically accurate. Site trend reports were thorough and a low threshold was established for evaluation of potential trends as evidenced by the PIPs reviewed that were initiated as a result of adverse trends.

c. Findings

No findings were identified.

.4 Assessment of Safety-Conscious Work Environment

a. Inspection Scope

The inspectors randomly interviewed several on-site workers regarding their knowledge of the CAP and their willingness to write PIPs or raise safety concerns. During technical discussions with members of the plant staff, the inspectors also conducted interviews to develop a general perspective of the safety-conscious work environment. The interviews were also conducted to determine if any conditions existed that would cause employees to be reluctant to raise safety concerns. The inspectors reviewed the licensee’s Employee Concerns Program (ECP) and interviewed the ECP manager. Additionally, the inspectors reviewed a sample of ECP issues to verify that concerns were being properly reviewed and identified deficiencies were resolved and entered into the CAP when appropriate.

b. Assessment

The inspectors determined that licensee management emphasized the need for all employees to identify and report problems using the appropriate methods established within the administrative programs, including the CAP and ECP. These methods were readily accessible to all employees. The inspectors determined that employees felt free to raise issues, and that management encouraged employees to place issues into the CAP for resolution.

The inspectors did not identify any reluctance on the part of the licensee staff to report safety concerns.

c. Findings

No findings were identified.

4OA6 Exit

Exit Meeting Summary

On April 18, 2013, the inspectors presented the inspection results to Mr. Batson and other members of the site staff. The inspectors confirmed that all proprietary information examined during the inspection had been returned to the licensee.

ATTACHMENT: SUPPLEMENTAL INFORMATION

SUPPLEMENTAL INFORMATION

KEY POINTS OF CONTACT

Licensee personnel:
Judy Smith – Regulatory Affairs
Susan Perry – Regulatory Affairs
Pam Metler – PI INPO Coordinator
Amanda Stevenson – RP Technical Support
Lesley Smith – Performance Improvement
Gail Joyner – Regulatory Affairs
Jimmy Looper – Operations Support
Tommy Young – Operations Support
Matt Ginn – Systems Engineer
Edgar Scott – Operations Support
Robert Meixell II – Licensing Specialist
Trevor Turner – System Engineer
Tracy Roland – Senior Operations Specialist
Jeff Hyrnda – Operations Shift Manager
Mark Carroll – Control Room Supervisor
Thomas Wehrman - Operations Support

NRC personnel:
G. Hopper, Chief, Branch 7, Division of Reactor Projects

LIST OF DOCUMENTS REVIEWED

Procedures
SOMP 02-01, Safety Tagging and Configuration Control, Rev. 16
IMP-ON-2012-00531, Mulsifyre's Isolated for HPSW Strainer PM
OP/0/A/1104/011, High Pressure Service Water, Rev. 90
OP/0/A/1104/048, TB Sump Operation
NSD 316, Fire Protection and Impairment and Surveillance, Rev. 10
NSD 316, Fire Protection and Impairment and Surveillance, Rev. 13
NSD 506 Appendix C Workaround Aggregate Assessment completed 2/4/13, Rev. 5
NSD 506, Operator Workarounds and Control Room Deficiencies, Rev. 5
NSD 208, Problem Investigation Program, Rev. 32
NSD-212, Cause Analysis, Rev. 27
NSD-602, Employee Concerns Program, Rev. 6
NSD-203, Operability/Functionality Determination, Rev. 26
NSD-204, Operating Experience Program, Rev. 15
NSD-208, Problem Investigation Program, Rev. 38
NSD-607, Self Assessments and Benchmarking, Rev. 17
NSD-125, Performance Improvement, Rev. 5
NSD-120, Equipment Reliability Process, Rev. 6
NSD-331, Insulated Cables Aging Management Program, Rev. 0
OMP 1-32, Configuration Control for Components Prone to Mispositioning, Re.v 3
OMP 2-16 Attachment C, Unit Shift Turnover Sheet from 4/4/2013

IP-0-A-2001-003A, Inspection and Maintenance of 4.16KV and 6.9KV ACB, Rev. 50
IP-0-A-2001-003-H, Refurbishing 5HK and 7.5HK Air Circuit Breakers, Rev. 43

Problem Investigation Program (PIPs)

O-12-07940	O-11-15285	O-12-10212
O-11-11449	O-11-15459	O-12-10268
O-12-04008	O-12-00120	O-12-10449
O-12-01269	O-12-00123	O-12-10969
O-08-06525	O-12-00175	O-12-11115
O-12-04368	O-12-00224	O-12-11313
O-12-08202	O-12-00252	O-12-11509
O-12-11235	O-12-00281	O-12-11556
O-10-01685	O-12-00370	O-12-11623
O-10-01674	O-12-00384	O-12-11964
O-12-06827	O-12-01412	O-12-12236
O-12-11522	O-12-01537	O-12-12281
O-12-10338	O-12-01546	O-12-12480
O-12-01876	O-12-01581	O-12-12499
O-11-00218	O-12-01590	O-12-12807
O-11-11449	O-12-02285	O-12-12979
O-12-01906	O-12-02685	O-12-13121
O-09-08779	O-12-02732	O-12-13133
M-10-00655	O-12-02754	O-12-13169
O-10-01565	O-12-03028	O-12-13589
O-10-09834	O-12-03237	O-12-13772
O-10-09847	O-12-03406	O-12-13822
O-11-00016	O-12-03409	O-12-13846
O-11-00387	O-12-03565	O-12-13923
O-11-00388	O-12-03614	O-12-14051
O-11-00660	O-12-03726	O-12-14345
O-11-00751	O-12-03856	O-12-14850
O-11-01215	O-12-04017	O-13-00175
O-11-01321	O-12-04036	O-13-00719
O-11-05143	O-12-04318	O-13-01935
O-11-06162	O-12-04580	O-13-02043
O-11-06292	O-12-04654	O-13-03267
O-11-06984	O-12-05151	G-12-01740
O-11-08215	O-12-05508	G-12-01754
O-11-08999	O-12-05541	G-12-00264
O-11-10036	O-12-05680	G-13-00507
O-11-10039	O-12-05988	O-10-01680
O-11-10040	O-12-07937	O-11-10962
O-11-10473	O-12-07994	O-11-11438
O-11-11635	O-12-08011	O-11-11015
O-11-13667	O-12-08295	O-11-11510
O-11-14680	O-12-08650	O-11-10907
O-11-14686	O-12-09197	O-11-15323
O-11-14975	O-12-09985	O-11-11800
O-11-15134	O-12-10000	O-12-13700

Attachment

O-12-00831	O-12-01340	O-10-08395
O-12-01156	O-12-03790	O-11-15172
O-12-10874	O-12-00577	G-12-01901
O-12-11938	O-12-03273	O-11-15055
O-12-01340	O-12-10817	G-12-00693
O-12-01551	O-13-03647	O-12-07940
O-12-01399	O-13-03462	O-12-03457
O-12-06062	O-12-02037	O-12-01998
O-12-01399	O-12-13014	O-12-03114
O-12-01346	O-12-13121	

Operating Experience Documents

O-11-59916	O-12-61027	O-12-60095
O-11-59955	O-12-61801	G-12-1416
O-11-59917	O-12-09000	G-12-60208
O-11-59919	O-12-62064	
G-12-60451	O-11-59977	
O-12-61612		

PIPs Generated as a Result of Inspection

O-13-03567	O-13-03727	O-13-04167
O-13-03616	O-13-03746	O-13-04213
O-13-03662	O-13-04158	O-13-04216
O-13-03679	O-13-04162	O-13-04262

Self-Assessments

Independent Nuclear Oversight-Audit Oconee Corrective Action Program Audit 12-6, 3/7/2012
Independent Nuclear Oversight-Audit Oconee Corrective Action Program Audit 10-3, 3/18/2010
Corrective Action Program Assessment, O-12-03114

Other Documents

LER 270/2008-02, Several MSSVs Slightly Out of Tolerance, Rev. 1
TS-OC-SSS-LPW/HPW, High Pressure Service Water System Description Summary, Rev. 7
Quick Cause Evaluation (QCE) User's Guide, Rev. 3
Apparent Cause (ACE) User's Guide, Rev. 6
Root Cause Analysis User's Guide, Rev. 15
Cause Analysis Certification List
Scaffold Inspection Correspondence (Email), 4/2/13
PT/1/A/0600/010, Reactor Coolant Leakage, Rev. 94,
PT/0/A/0230/001, Radiation Monitor Check, Rev. 165
HP/0/A/1008/005, RIA Setpoints, Rev. 9
PIP 12-3409 and PIP 3614 Root Cause Team Charter
Duke Energy Carolinas Topical Report Quality Assurance Program, Duke-1-A, Amendment 39
Duke Energy, LER 269/2011-04, Rev. 0, 6/1/2011
ETQS 2200.0, Employee Training and Qualification System Standard Training Committee Administration, Rev. 10, 2/27/13
ETQS 5300.0, Employee Training and Qualification System Standard On-the-Job Training and Task Performance Evaluation, Rev. 6, 12/17/12

OTP 5405.0, Development, Administration, and Security of Exams, Rev. 31, 2/8/13
OTP 5701.0, Simulator training and Evaluation, Rev. 30a, 2/25/13
Curriculum Review Committee Agenda, 2/7/12
Curriculum Review Committee draft minutes, 6/12/12
Curriculum Review Committee minutes, 8/7/12
Curriculum Review Committee minutes, 9/25/12
Reactor Coolant System health reports, for 2012
AD-EG-ALL-1202, Preventative Maintenance Administrative Guidance, Rev. 0
AM-0-A-1300-059, Pump-Submersible-Emergency SSF Water Supply-Installation and Removal, Rev. 11
OSC-2790, HVAC Calculations for Chillers A&B, Rev.2
OSC-5930, Unit 1 Motor Starter Circuit Voltage and Fuse Adequacy Calculation, Rev. 13
OSS-0254.00-00-2020, Standby Shutdown Facility 125VDC Essential Power System, Rev. 9
OFD-099A-1.1, Symbols for Flow Diagrams, Rev. 14
OCFD-OPS-HPSW-1, Composite Diagram HPSW System, Rev. 0
OSC-10791, Documentation of ONS Turbine Building Flood Assessment, Rev. 0
ECP Independent Survey
Letter to from T. Preston Gillespie, Vice President ONS to U.S. NRC Reply to Notice of Violation, 2/27/12
ONS PIOC Certification Completion Status
ONS Central Screening Team Certification Completion Status
ONS Root Cause Evaluation Core Team Certification Completion Status
ONS Apparent Cause Evaluation Core Team Certification Completion Status