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SUBJECT: Provides status of revised corrective action program
 implemented on 931004, per util 931029 & 0729 ltrs. Status of
 program based on input from completed & ongoing QA
 assessments & NRC insps, including 50-397/93-36.

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January 19, 1994
G02-94-016

Docket No. 50-397

U.S. Nuclear Regulatory Commission
Attn: Document Control Desk
Washington, D.C. 20555

Gentlemen:

Subject: **WNP-2, OPERATING LICENSE NPF-21
STATUS REPORT ON CORRECTIVE ACTION PROGRAM**

- References: 1) Letter, G02-93-262, dated October 29, 1993, JV Parrish (SS) to NRC,
 "Status Report on Corrective Action Program"
- 2) Letter, G02-93-196, dated July 29, 1993, JV Parrish (SS) to NRC,
 "Corrective Action Program Improvement Schedule"
- 3) Letter, G02-93-125, dated May 27, 1993, WG Council (SS) to BH
 Faulkenberry (NRC), "Response to the 1993 Systematic Assessment of
 Licensee Performance (SALP)"

Purpose and Background

This letter provides a status per References 1 and 2 of the revised Corrective Action Program implemented on October 4, 1993. The current status of the program is based on input from completed and ongoing Quality Assurance (QA) assessments, ongoing Problem Evaluation Request (PER) User's Group reviews, the review of PERs, NRC inspections (including 93-36), utility benchmarking, and individual and management feedback. Similar efforts by the Supply System will continue in order to monitor and improve the program.

Reference 3 identified four problem areas to address identified concerns with our corrective action program. These areas include problem identification, root cause identification, implementation of corrective actions, and management oversight. These areas are discussed below.

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STATUS REPORT ON CORRECTIVE ACTION PROGRAM

Problem Identification

The corrective action program lacked consistent identification of problems which resulted in unacceptable delay in implementation of corrective actions or compensatory measures. With implementation of the revised program on October 4, 1993, previous corrective action processes were either included in, or subordinated to, the PER process as indicated in Reference 3. This process provides clearer direction for identification, documentation and resolution of deficiencies having significance. Additional review is also being performed by the PER User's Group to identify methods to further clarify the criteria for initiating a PER. Based on our experience since implementation of the revised program, improvements have occurred in the areas of self-critical attitudes and problem identification. Additional work is required to reinforce and extend this improvement.

Root Cause Identification

The corrective action program lacked accurate problem cause identification. As indicated in Reference 3, this deficiency was the result of assessment of the problem with incomplete information which sometimes led to assignment of ineffective corrective actions. In January 1993, the PER process was changed to assign line organizations the responsibility for assessment of the probable cause and appropriate corrective actions. The corrective action program was further changed on August 4, 1993 to transfer the Root Cause Analysis (RCA) responsibility to line organizations. This was done to place the responsibility of RCA with the people who understand the processes that have failed and improve the ability of the line organizations to be self-critical. The goal is to identify effective corrective actions to prevent recurrence. The revised program has been in effect for approximately 3 months. Although the Supply System believes improvement has taken place, additional time is necessary to accurately measure the effectiveness of the program's ability to preclude recurrent conditions. Monitoring and improvement actions will continue in this area.

Implementation of Corrective Actions

The corrective action program lacked effective implementation of identified corrective actions. A line organization is assigned overall responsibility for a given PER. The expectation is that the actions will be closed promptly and correctly. Since June 1993, there has been a decrease in open plant actions of approximately 30% and a significant decrease in late actions. The backlog of open actions will continue to be monitored and improved.

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1. The first part of the report is a summary of the work done during the year.

2. The second part is a detailed account of the work done during the year.

3. The third part is a summary of the work done during the year.

4. The fourth part is a summary of the work done during the year.

STATUS REPORT ON CORRECTIVE ACTION PROGRAM

Management Oversight

The corrective action program lacked sufficiently strong oversight of the program by management. This was evidenced by overdue corrective actions and repeat plant problems. Performance plans for supervisory personnel in the Operations, QA, and Engineering directorates have been changed to contain expectations for quality and timeliness of work performed. Performance against these expectations are reviewed quarterly with personnel. Overdue corrective actions and repeat problems appear to have decreased significantly in the last two months. The Plant Operations Committee (POC) is reviewing selected root causes and corrective actions to assess their ability to preclude recurrence for significant conditions adverse to quality. Management is sponsoring a PER User's Group to recommend enhancements to the PER and RCA processes and will review the recommendations and implement those determined appropriate. Further efforts to improve management oversight will continue.

Conclusion

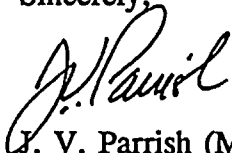
Overall, the Supply System believes that the revised program has been successful in responding to previously identified concerns. However, further monitoring and improvement are necessary, and will continue, so that the program will fully meet senior management expectations.

Specifically, we are pleased with the increased ability of the Supply System to be self-critical and to more promptly identify potential and actual deficiencies, although additional improvement is expected. In the area of determining corrective action, our improvement has not been as consistent as in the preceding areas. Senior plant management is personally communicating expectations for dispositioning corrective actions until satisfactory additional improvement has been achieved.

Planned Further Actions

Ongoing and future activities (such as a review by the PER User's Group and QA audit 294-002) will provide further evaluation of the Corrective Action Program, with appropriate refinements to continue. Another status report on the Corrective Action Program will be provided to you by July 30, 1994.

Sincerely,



J. V. Parrish (Mail Drop 1023)
Assistant Managing Director, Operations

cc: KE Perkins - NRC RV
NS Reynolds - Winston & Strawn
JW Clifford - NRC

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