



**UNITED STATES  
NUCLEAR REGULATORY COMMISSION**  
REGION I  
2100 RENAISSANCE BOULEVARD, SUITE 100  
KING OF PRUSSIA, PENNSYLVANIA 19406-2713

August 22, 2019

Mr. Eric Carr  
President and Chief Nuclear Officer  
PSEG Nuclear, LLC  
P.O. Box 236  
Hancocks Bridge, NJ 08038

SUBJECT: HOPE CREEK GENERATING STATION – BIENNIAL PROBLEM  
IDENTIFICATION AND RESOLUTION INSPECTION REPORT  
05000354/2019010

Dear Mr. Carr:

On August 2, 2019, the U.S. Nuclear Regulatory Commission (NRC) completed a problem identification and resolution inspection at your Hope Creek Unit 1 and discussed the results of this inspection with Mr. Jim Priest and other members of your staff. The results of this inspection are documented in the enclosed report.

The NRC inspection team reviewed the station's corrective action program and the station's implementation of the program to evaluate its effectiveness in identifying, prioritizing, evaluating, and correcting problems, and to confirm that the station was complying with NRC regulations and licensee standards for corrective action programs. Based on the samples reviewed, the team determined that your staff's performance in each of these areas adequately supported nuclear safety.

The team also evaluated the station's processes for use of industry and NRC operating experience information and the effectiveness of the station's audits and self-assessments. Based on the samples reviewed, the team determined that your staff's performance in each of these areas adequately supported nuclear safety.

Finally the team reviewed the station's programs to establish and maintain a safety-conscious work environment, and interviewed station personnel to evaluate the effectiveness of these programs. Based on the team's observations and the results of these interviews the team found no evidence of challenges to your organization's safety-conscious work environment. Your employees appeared willing to raise nuclear safety concerns through at least one of the several means available.

The NRC inspectors did not identify any finding or violation of more than minor significance.

This letter, its enclosure, and your response (if any) will be made available for public inspection and copying at <http://www.nrc.gov/reading-rm/adams.html> and at the NRC Public Document Room in accordance with 10 CFR 2.390, "Public Inspections, Exemptions, Requests for Withholding."

Sincerely,

**/RA/**

Brice A. Bickett, Chief  
Reactor Projects Branch 3  
Division of Reactor Projects

Docket No. 05000354  
License No. NPF-57

Enclosure:  
As stated

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SUBJECT: HOPE CREEK GENERATING STATION – BIENNIAL PROBLEM  
IDENTIFICATION AND RESOLUTION INSPECTION REPORT  
05000354/2019010 DATED AUGUST 22, 2019

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**U.S. NUCLEAR REGULATORY COMMISSION**  
**Inspection Report**

Docket Number: 05000354

License Number: NPF-57

Report Number: 05000354/2019010

Enterprise Identifier: I-2019-010-0005

Licensee: PSEG Nuclear, LLC

Facility: Hope Creek Generating Station

Location: Hancocks Bridge, NJ 08038

Inspection Dates: July 15, 2019 to August 02, 2019

Inspectors: M. Draxton, Senior Project Engineer  
S. Ghrayeb, Resident Inspector  
J. Patel, Resident Inspector  
B. Sienel, Resident Inspector

Approved By: Brice A. Bickett, Chief  
Reactor Projects Branch 3  
Division of Reactor Projects

Enclosure

## **SUMMARY**

The U.S. Nuclear Regulatory Commission (NRC) continued monitoring the licensee's performance by conducting a biennial problem identification and resolution inspection at Hope Creek Generating Station in accordance with the Reactor Oversight Process. The Reactor Oversight Process is the NRC's program for overseeing the safe operation of commercial nuclear power reactors. Refer to <https://www.nrc.gov/reactors/operating/oversight.html> for more information.

### **List of Findings and Violations**

No findings or violations of more than minor significance were identified.

### **Additional Tracking Items**

None.

## INSPECTION SCOPES

Inspections were conducted using the appropriate portions of the inspection procedures (IPs) in effect at the beginning of the inspection unless otherwise noted. Currently approved IPs with their attached revision histories are located on the public website at <http://www.nrc.gov/reading-rm/doc-collections/insp-manual/inspection-procedure/index.html>. Samples were declared complete when the IP requirements most appropriate to the inspection activity were met consistent with Inspection Manual Chapter (IMC) 2515, "Light-Water Reactor Inspection Program - Operations Phase." The inspectors reviewed selected procedures and records, observed activities, and interviewed personnel to assess licensee performance and compliance with Commission rules and regulations, license conditions, site procedures, and standards.

## OTHER ACTIVITIES – BASELINE

### 71152B - Problem Identification and Resolution

#### Biennial Team Inspection (IP Section 02.04) (1 Sample)

- (1) The inspectors performed a biennial assessment of the licensee's corrective action program, use of operating experience, self-assessments and audits, and safety conscious work environment.
  - **Corrective Action Program Effectiveness:** The inspectors assessed the corrective action program's effectiveness in identifying, prioritizing, evaluating, and correcting problems.
  - **Operating Experience, Self-Assessments and Audits:** The inspectors assessed the effectiveness of the station's processes for use of operating experience, audits and self-assessments.
  - **Safety Conscious Work Environment:** The inspectors assessed the effectiveness of the station's programs to establish and maintain a safety-conscious work environment.

## INSPECTION RESULTS

Assessment	71152B
<b>Corrective Action Program –</b>	
<u>Identification:</u> The inspectors determined that, in general, PSEG identified issues and entered them into the corrective action program at a low threshold. During plant walk downs, there is evidence of continued focus to improve the look and condition of the plant, although the inspectors identified a few deficiencies not previously identified and captured in PSEG's corrective action program. PSEG promptly entered each issue into their corrective action program and took actions to evaluate and address.	
The inspectors identified a potential weakness in the processing of anonymous condition reports. This is documented as an observation below.	

**Prioritization and Evaluation:** Based on the samples reviewed, the inspectors determined that, in general, PSEG appropriately prioritized and evaluated issues commensurate with the safety significance of the identified problem. PSEG appropriately screened notifications (NOTFs) for operability and reportability, categorized NOTFs by significance, and assigned actions to the appropriate department for evaluation and resolution.

**Correcting Problems:** The inspectors determined that the overall corrective action program performance related to resolving problems was effective. In most cases, PSEG implemented corrective actions to resolve problems in a timely manner.

However, the inspectors identified two minor performance deficiencies for corrective actions being closed to non-corrective actions that were subsequently closed with no action taken, and for failure to assign a corrective action program action item to a condition adverse to quality. Additionally, the inspectors identified an observation on untimely actions in addressing a long term asset management (LTAM) item. The two minor performance deficiencies and the observation are documented below.

Assessment	71152B
<b>Operating Experience, Self-Assessments and Audits –</b>  <p>The team determined that PSEG appropriately evaluated industry operating experience for its relevance to the facility. PSEG appropriately incorporated both internal and external operating into plant procedures and processes, as well as lessons learned for training and pre-job briefs.</p> <p>The team reviewed a sample of self-assessments and audits to assess whether the licensee was identifying and addressing performance trends. The team concluded that PSEG had an effective self-assessment and audit process.</p>	

Assessment	71152B
<b>Safety Conscious Work Environment –</b>  <p>The team interviewed a total of 41 individuals: 13 in focus groups and 28 in one-on-one interviews. The purpose of these interviews was (1) to evaluate the willingness of the licensee staff to raise nuclear safety issues, (2) to evaluate the perceived effectiveness of the corrective action program at resolving identified problems, and (3) to evaluate the licensee's safety-conscience work environment. The personnel interviewed were randomly selected by the inspectors from the Operations, Engineering, Maintenance, Security, and Radiation Protection work groups. To supplement these discussions, the team interviewed the Employee Concerns Program (ECP) Coordinator to assess her perception of the site employees' willingness to raise nuclear safety concerns. The team also reviewed the ECP case log and select case files.</p> <p>All individuals interviewed indicated that they would raise safety concerns. All individuals felt that their management was receptive to receiving safety concerns and generally addressed them promptly, commensurate with the significance of the concern. Most interviewees indicated they were adequately trained and proficient on initiating NOTFs. All interviewees were aware of the licensee's ECP, stated they would use the program if necessary, and expressed confidence that their confidentiality would be maintained if they brought issues to the ECP. When asked whether there have been any instances where individuals</p>	

experienced retaliation or other negative reaction for raising safety concerns, all individuals interviewed stated that they had neither experienced nor heard of an instance of retaliation at the site. The team determined that the processes in place to mitigate potential safety culture issues were adequately implemented.

Minor Performance Deficiency	71152B
<p>Minor Performance Deficiency: The Inspectors reviewed corrective actions related to the finding associated with the High Pressure Coolant Injection (HPCI) turbine lube oil water intrusion (ML16319A289). Specifically, the inspectors reviewed those corrective actions that were not completed by the end of the associated supplemental inspection (Inspection Report 05000354/2017011, ML17242A220). During the review, the inspectors identified two examples of corrective actions that were closed out to a non-corrective action program (NCAP) action tracking item (ACIT), contrary to PSEG procedure. Per LS-AA-125, Corrective Action Program, corrective actions (CAPR / CRCA / CRDA) cannot be closed to an ACIT. Root cause evaluation (RCE) order 70188669, Operations 1160 and 1170 for CRCA-3 and CRCA-4 respectively were to "Perform a gap analysis of the Electric Power Research Institute (EPRI) HPCI and Reactor Core Isolation Cooling (RCIC) maintenance manual guidance as compared to the PSEG HPCI and RCIC maintenance procedures, document the results, and initiate corrective actions to close any gaps identified. These condition report corrective actions (CRCAs) were subsequently closed to NOTF 20776157, which was categorized as significance level (SL) 5, an NCAP, which generated ACITs to track the actions. Review of NOTF 20776157 identified that the gap analyses were completed but that the ACIT tracking actions were subsequently closed without completing the corrective actions identified from the gap analyses.</p> <p>Screening: The inspectors determined the performance deficiency was minor because the gaps identified in the evaluation are not safety significant. The inspectors evaluated this issue using IMC 0612, Appendix B, "Issue Screening," and IMC 0612, Appendix E, "Examples of Minor Issues," and determined that this performance deficiency was minor because all screening questions were answered "No." PSEG initiated a NOTF to review their gap analyses and to re-evaluate for any proposed changes (NOTF 20830358).</p>	

Minor Performance Deficiency	71152B
<p>Minor Performance Deficiency: The inspectors identified a minor performance deficiency associated with PSEG procedure LS-AA-125, "Corrective Action Program," Revision 26 for the failure to assign an action item commensurate with the significance level of a NOTF that documented a condition adverse to quality (CAQ). Specifically, PSEG procedure requires the licensee to assign a CRCA action item for a CAQ that requires restoration. The inspectors found that PSEG assigned an ACIT action item, which is an NCAP action item, to a CAQ NOTF 20800224. As a result, no engineering analysis was documented to determine the acceptability of voltage readings outside of the acceptance criteria provided in the surveillance test procedure. Additionally, the inspectors identified that PSEG did not generate a new NOTF in accordance with LS-AA-125 to document a new occurrence of a condition adverse to quality.</p> <p>The inspectors reviewed several NOTFs related to the Hope Creek HPCI 250V direct current (DC) system. NOTF 20791133, dated April 1, 2018, documented that the HPCI battery is in "bad condition" due to corrosion and needs to be rebuilt. The inspectors noted that this NOTF was correctly classified as a CAQ, significance level 2, and was correctly assigned to</p>	



the next monthly surveillance work order to inspect, clean, and restore the 250V DC battery to its normal condition.

However, during the July 2018 quarterly surveillance test, performed under work order 50202962, PSEG found that battery voltages measured from positive phase to ground and negative phase to ground did not meet the acceptance criteria in procedure HC.MD-ST.PJ-0002, "250 Volt Quarterly Battery Surveillance." PSEG determined this was due to corrosion on battery terminals and it did not impact any technical specification acceptance criteria, such as electrolyte level, battery float voltage, individual cell voltage, and specific gravity. The inspectors reviewed NOTFs 20797958 and 20800224, dated July 1, 2018, that documented this issue, and found both NOTFs were correctly classified as conditions adverse to quality. Dispositioning these NOTFs, PSEG assigned NOTF 20797958 to work order 50205332 to perform a cleaning of battery terminals during the next monthly surveillance test, which is an acceptable assignment for a CAQ item per PSEG procedure. NOTF 20800224 was assigned to engineering as an ACIT 70201508-0010, an NCAP action item, to address this issue, which was not in accordance with the LS-AA-125 procedure.

Procedure LS-AA-125 requires the licensee to assign a CRCA action item for a CAQ that requires restoration. The inspectors determined that the engineering ACIT 70201508-0010 should have been assigned as a CRCA because previous action items assigned to work orders to clean and inspect battery for corrosion did not restore a CAQ. The inspectors reviewed ACIT 70201508-0010 and found that it was completed without review and approval, as it was an NCAP item, and documented that this condition existed because of corrosion on battery terminals. No engineering analysis was performed to determine what would be the acceptable voltage levels when measured to ground to ensure voltage leakage to ground does not challenge battery operation. The inspectors reviewed samples of monthly and quarterly surveillance test results and determined that HPCI 250V DC battery met all the acceptance criteria specified in Hope Creek technical specification, as such battery remained operable. The inspectors also performed walkdown of battery to assess the material conditions. The inspectors noted that corrosion amount found on battery terminals was not in high concentration.

Additionally, the inspectors found that no new NOTFs were written to document the battery's degraded conditions when quarterly surveillance tests performed in October 2018 (50205371) and April 2019 (50209680) found again battery voltages to ground outside of its acceptance criteria. The team determined that these were new occurrences of a CAQ as previous work orders should have cleaned and restored the battery to its normal condition. PSEG's action for not writing a new NOTF was contrary to their corrective action program procedure LS-AA-125, which states to promptly identify and correct items or occurrences that are conditions adverse to quality or might adversely affect the safe operation of nuclear plant.

PSEG promptly documented this issue in their corrective action program as NOTFs 20830113 and 20830418.

Screening: The inspectors determined the performance deficiency was minor. The inspectors evaluated this issue using IMC 0612, Appendix B, "Issue Screening," and IMC 0612, Appendix E, "Examples of Minor Issues," and determined that this performance deficiency was minor because all screening questions were answered "No." In addition, PSEG will be replacing the HPCI 250V DC battery during the refueling outage in October 2019 as part of their 15-year preventive maintenance replacement frequency. Additionally,

the inspectors determined that monthly and quarterly surveillance tests procedures require inspecting all battery cells and terminals are clean and free from corrosion, as any further degradation should reasonably be identified and corrected until the battery is replaced.

Observation: Untimely Action in Addressing Long Term Asset Management (LTAM) Item.	71152B
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The inspectors reviewed NOTF 20757935, dated March 1, 2017, that documented 17 safety-related molded case circuit breakers (MCCBs) in the RCIC 250V DC system that are installed in the plant beyond the vendor recommended service life of 24 years. This NOTF was written from the expert panel review of RCIC motor operated valve failure. The inspectors noted that the NOTF was assigned a significance level 4, which is a NCAP condition. As a result, an ACIT 70187722-0060 was assigned to address this NOTF. The inspectors noted that this ACIT was closed on July 17, 2017, stating that LTAM item H-17-0007 had been created and approved by the supervisor for presentation to the plant health committee (PHC) for the replacement of all 250V DC MCCBs. During the interview of system manager who is assigned to this LTAM item, the inspectors found that no progress has been made from the LTAM to address this condition. The LTAM item has been opened since March 2017 and has not been presented to PHC for resolution. Additionally, the inspectors reviewed the initial NOTF screening and action item assignments and determined that no action item was assigned to perform an evaluation of breakers currently installed in the plant for documenting an equipment reliability strategy until the LTAM item is fully implemented. Based on inspectors' questioning of the lack of evaluation, PSEG presented an environmental qualification report EQ-HC-070 to the inspectors that showed these breakers have a thermal life of 43 years. PSEG initiated NOTF 20830192 to present the LTAM item to PHC, determine if an equipment reliability strategy should be developed, and determine why the LTAM item was not presented to PHC in two years and communicate lessons learned.

Observation: Potential Weakness in Anonymous Condition Report Processing	71152B
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The inspectors identified a potential weakness in the processing of anonymous condition reports. At Hope Creek, all anonymous condition reports that are generated from the internal PSEG website, automatically initiate an email that is sent and reviewed by only one individual, the ECP Manager. The ECP Manager then determines whether to forward the emails on to other PSEG staff and then manually enters the information into an ECP database. The ECP Manager, who is not a current or previously licensed reactor operator, has the responsibility to complete all necessary screenings that a condition report would receive that is not generated anonymously. Examples of these screenings include: condition significance determination for conditions adverse to quality or regulatory compliance, determinations of whether any equipment operability concerns, any regulatory reporting requirements, or maintenance rule assessment. Additionally, the inspectors observed that during a period when the ECP Manager was scheduled to be out of the office, the individual acting in the ECP Manager's absence did not have access to the anonymous condition report emails, thereby introducing a potential delay in its review, in this case, approximately two weeks. PSEG had previously removed guidance from the corrective action program procedures and the ECP procedure (EI-AA-101-1001) only states to "ADDRESS anonymous concerns in the same manner as any other concern except that direct feedback to the CI cannot be performed." The inspectors completed a review of recent issues identified through the anonymous condition report process and did not identify any missed immediate safety or security concerns and therefore determined that there was no performance deficiency. PSEG initiated a NOTF to address the issue (NOTF 20830551).

## **EXIT MEETINGS AND DEBRIEFS**

The inspectors verified no proprietary information was retained or documented in this report.

- On August 2, 2019, the inspectors presented the biennial problem identification and resolution inspection results to Mr. Jim Priest and other members of the licensee staff.

## DOCUMENTS REVIEWED

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
71152B	Corrective Action Documents		70188669, 70188669, 70189117, 70195826, 70196335, 70199676, 70207066, 70207181, 70207183, 70207214, 70207681, 70207710	
			20646549, 20669265, 20673253, 20681229, 20681234, 20684861, 20686027, 20701152, 20706542, 20707933, 20711033, 20721083, 20721482, 20729267, 20733274, 20734665, 20752195, 20753185, 20753328, 20753501, 20756466, 20757935, 20760377, 20760534, 20761771, 20761853, 20763122, 20765269, 20769459, 20770143, 20770560, 20771144, 20771542, 20771751, 20772095, 20772331, 20772898, 20775158, 20776157, 20776332, 20779096, 20783856, 20784017, 20784207, 20786627, 20788159, 20788580, 20789672, 20791133, 20792102, 20792269, 20792450, 20792776, 20793027, 20793068, 20793638, 20794010, 20794358, 20795835, 20797958, 20798315, 20799124, 20799402, 20800224, 20802452, 20803120, 20803200, 20808531, 20812743, 20813032, 20813609, 20814275, 20814988, 20815405, 20817261, 20817433, 20819294, 20819607, 20820854, 20821328, 20821572, 20822687, 20824565, 20824948, 20824969, 20825101, 20825608, 20825609, 20825610, 20826010, 20826508, 20826941, 20827285, 20827321, 20827603, 20828359	
		70192117	WGE (Work Group Evaluation), Commercial Grade Dedication Plan	02/27/2017
		70192567	ACE (Apparent Cause Evaluation), Fuel Conditioning Exceeded NF-AB-440	04/19/2017
		70194313	ERE (Equipment Reliability Evaluation), H1-BC-HVF027B Tripped Breaker During Stroke	09/25/2017
		70194313	H1-BC-HVF027B Tripped Breaker During Stroke	Revision 0
		70195872	RCE (Root Cause Evaluation), Hope Creek 2017 Maintenance & Training TIF	10/25/2017

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
		70197980	WGE, Pitting Identified on Strainer Body	01/04/2018
		70198651	WGE for NCV 2018410-01 [Failure to establish and maintain compensatory measures]	
		70201011	CCE (Common Cause Evaluation), Evaluate H1R21 Rework for Common Causes	08/02/2018
		70201021	ACE, Trip of 'A' Feed Pump	07/02/2018
		70202192	Root Cause Evaluation – HC Cycle 22 Failed Fuel	Revision 0
		70203043	10C617 CAB Blown Fuse	Revision 0
		70207064	CCE, HCVS SAWA Fill and Vent Prior to use	05/22/2019
	Corrective Action Documents Resulting from Inspection		20829285, 20829387, 20829605, 20829675, 20829899, 20829921, 20830037, 20830113, 20830117, 20830182, 20830192, 20830358, 20830418, 20830550, 20830551, 20830862	
	Miscellaneous		Hope Creek Generating Station Plant Performance Report	April 2019
			Hope Creek Generating Station Plant Performance Report	May 2019
		EQ-HC-070	Environmental Qualification Binder for General Electric DC Breakers TEC/TED Series	Revision 1
		FIN 05000354/2018001-01	Implementing Procedures for Beyond Design Basis FLEX Mitigating Strategies Not Followed	
		FIN 05000354/2018003-02	Inadequate Procedures for Restoration of the 'A' Reactor Feed Pump Turbine (RFPT) Following Maintenance	
		HC-MSPI-001	Mitigating System Performance Index Basis Document	Revision 8
		NCV 05000354/2018410-01	Failure to establish and maintain compensatory measures	
		NCV 05000354/2019011-02	Inadequate Procedural Guidance to Perform Time Critical Actions	
		NCV 05000354/2017001-01	Inadequate Control of Defective Material Causes the 'A' EDG to Fail to Start	
		NCV	Inadequate Preventive Maintenance Replacement	

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
		05000354/2017001-02	Schedule for the HPCI Overspeed Trip Tappet Reset Spring	
		NCV 05000354/2017003-01	Inadequate Operability Determination of Ground Fault Alarm	
		NCV 05000354/2017003-02	Inadequate Establishment of Maintenance Rule Goals, Monitoring, and Corrective Actions for the Reactor Protection System	
		NCV 05000354/2017004-01	Scaffold Installed with Insufficient Separation from Safety-Related Equipment	
		NCV 05000354/2017004-02	Inadequate Design Control of Emergency Diesel Generator Speed Switch	
		NCV 05000354/2017008-01	Improper Preventive Maintenance Deletion Results in the Inoperability of the 'A' Control Room HVAC System	
		NCV 05000354/2018002-01	Inadequate Instructions for Station Service Water Pump Maintenance	
		NCV 05000354/2018004-01	Inadequate High Pressure Coolant Injection Trip Unit Preventive Maintenance	
	Operability Evaluations	19-004	70206392, H1PK -1B-D-417 and H1PK -72-42023	Revision 0
		70185270-0010	Op evaluation for NCV 2019011-02 [Inadequate Procedural Guidance to Perform Time Critical Actions]	
	Procedures	AD-AA-101-1006	Procedure Biennial Reviews	Revision 1
		CC-AA-11	Nonconforming Materials, Parts, or Components	Revision 5
		CC-AA-309-101	ENGINEERING TECHNICAL EVALUATIONS	Revision 12
		EI-AA-101	EMPLOYEE CONCERNS PROGRAM	Revision 10
		EI-AA-101-1001	Employee Concerns Program Process	Revision 12
		EP-AA-121-1006	PSEG ANS Siren Monitoring Troubleshooting, and Testing	Revision 2
		ER-AA-2002	System Health Indicator Program	Revision 17
		ER-AA-2003	System Performance Monitoring and Analysis	Revision 11

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
		ER-AA-2030	Conduct of Plant Engineering Manual	Revision 16
		LS-AA-115	OPERATING EXPERIENCE PROGRAM	Revision 18
		LS-AA-120	Issue Identification and Screening Process	Revision 19
		LS-AA-125	Corrective Action Program	Revision 26
		LS-AA-126	SELF-ASSESSMENT / BENCHMARKING	Revision 17
		NC.RS-TI.ZZ-0592	Radiation Protection Instrumentation (RPI) Laboratory Calibration and Quality Control	
		NC.RS-TI.ZZ-0592	Radiation Protection Instrumentation (RPI) laboratory calibration and quality	Revision 3
		OP-AA-108-115	Operability Determination and Functionality Assessment	Revision 4
		RP-AA-500	Radioactive Material (RAM) Control	Revision 13
		WC-AA-106	Work Screening and Processing	Revision 21
	Self-Assessments		Aggregate Performance Review - Nuclear Safety Culture Monitoring (18-03)	
			Aggregate Performance Review - Nuclear Safety Culture Monitoring (19-01)	
			Performance Improvement Functional Area Assessment	May 2019
			Employee Concerns Program Evaluation	12/20/2018
			Nuclear Safety Culture Survey Fleet Overview	December 2017
			Problem Identification and Resolution Focused Area Self-Assessment	04/26/2019
			Engineering – Current Performance Assessment	May 2019
		80119657	Corrective Action Program Audit Report, Audit NOSA-HPC-17-04, April 17, 2017 to April 28, 2017	05/03/2017
		80124590	Corrective Action Program Audit Report, Audit NOSA-HPC-19-04	05/02/2019
		CISA 70187691	Maintenance Execution of On-line LCO Windows	08/18/2017
		FASA 80119257	F-Ops Leadership in Mitigating Risk	06/13/2017
		NOSA-HPC-17-08	Radiation Protection Audit Report	October 9-20, 2017
		NOSA-HPC-17-09	Operations, Operations Training, and PORC	11/22/2017
		NOSA-HPC-18-01	Security Plan, FFD, AA, PADS, and Cyber Security	01/31/2018

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
		NOSA-HPC-18-03	Maintenance	02/28/2018
		NOSA-HPC-18-04	Chemistry, Radwaste, Effluent and Environmental Monitoring	05/24/2018
		NOSA-HPC-18-06	Engineering Programs and Station Blackout	08/16/2018
		NOSA-HPC-18-07	Fire Protection	10/09/2018
		NOSA-HPC-18-12	Document Control and Quality Assurance Records Audit Report	December 3-17, 2018
	Work Orders	50202962	250V DC Quarterly Surveillance	07/02/2018
		50205371	250V DC Quarterly Surveillance	10/01/2018
		50209680	250V DC Quarterly Surveillance	04/14/2019
		60136011	NUCM IFDHV-FOOI-DIAGNOSTIC TST W/HI TEMP GLUE	04/19/2018