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Attachment 1

Millstone Nuclear Power Station, Unit No. 2

Operational Readiness Plan, Revision 1

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# **MILLSTONE**

## **Unit 2**

### **OPERATIONAL READINESS PLAN**

**MILLSTONE NUCLEAR POWER STATION**

**Northeast Utilities**

# Table of Contents

<b>I. Purpose and Process</b>	<b>1</b>
A. Purpose	2
B. Background	2
C. How Did We Get to Where We Are?	3
D. How Do We Get to Where We Are Going?	3
E. NRC Restart Process	6
F. ORP Methodology	10
G. Recovery Organization	12
 <b>II. Management Standards</b>	 <b>14</b>
A. Nuclear Safety Culture	14
B. Employee Concerns	15
C. Commitments & Commitment Management	16
D. Department-Specific Excellence Plans	16
E. Management Development and Leadership	17
F. Employee Communications	18
G. Corrective Action Program	18
H. Procedure and Technical Specification Upgrades	21

# Table of Contents

<b>III. Self Assessment (Organizational Readiness)</b>	24
A. Discussion	24
B. Self-Assessment Program	24
C. Independent Oversight Program	26
<b>IV. Regulatory Readiness</b>	27
A. Regulatory Compliance	27
B. Regulatory Communications	28
<b>V. Configuration Management and Design Control (System Readiness)</b>	29
<b>VI. Physical Readiness of Plant (System Readiness)</b>	34
A. Methodology for Workscope Development	34
B. Work Process Improvements	35
C. Housekeeping	35
D. Materiel Condition and Operability	36
<b>VII. Operational Readiness</b>	37
<b>VIII. Assessment of Millstone Unit No. 2 Restart Readiness (Operational Readiness)</b>	38
A. Restart Assessment Process	38
B. Closeout of ORP Deliverables	40



# **Table of Contents**

<b>IX. Communications</b>	43
<b>X. Readiness For Restart Schedule &amp; Resources</b>	48
A. Development, Approval and Revision	48
B. Schedule Adherence and Review	49
C. Schedule Distribution, Records and Close-out	50
D. Operational Strategy	50
E. Special Testing and Inspection	51
F. Major Modifications	52
G. Projected Readiness for Restart Schedule Milestones	52
H. Resources	52
I. Contingencies	53
<b>XI. Startup and Power Ascension Plan</b>	54
<b>XII. Performance Improvement Plan</b>	55
A. Introduction	55
B. Performance Improvement Initiatives	55
C. Plant Improvement Projects	56
<b>Attachments</b>	57 - 64

# **I. Purpose and Process**

## A. Purpose

The purpose of this plan is to raise Millstone Unit No. 2's (Unit 2) operating standards. This will require a top to bottom organizational commitment to embrace conservative decision making, forthrightness and integrity, self assessment, and the highest standards for the conduct of operation. Unit 2 can not restart until sufficiently high standards are demonstrated in the following key areas:

- The relationship between employees and management
- Compliance with regulatory requirements
- Effective corrective action programs
- Unit configuration and operation consistent with the licensing bases
- Ability to maintain the design and licensing bases

The fundamental goal is to be recognized by our employees, the public and the regulator as a trusted, safe and efficient nuclear power plant operator. A significant milestone toward achieving this goal is the removal of Unit 2 from the NRC Watch List. To accomplish this, the intermediate goal of restarting the plant must be achieved. This will allow demonstration of the new standards, management effectiveness during power operations and the completion of activities that can only be accomplished during operations.

## B. Background

Unit 2 was placed on the NRC Watch List on January 31, 1996. The Unit entered a mid-cycle outage on February 20, 1996, to modify the Containment Sump Screen. In letters dated March 7, 1996, and May 21, 1996, the NRC requested that additional information be submitted, prior to restart, which describes actions taken to ensure future operation will be conducted in accordance with Unit 2's operating license and UFSAR and the Commission's regulations, and the disposition of deficiencies identified after the issuance of the ACR 7007 report, respectively. In letters dated August 14, 1996 and October 24, 1996, the NRC issued confirmatory orders directing the establishment of an Independent Corrective Action Verification Program (ICAVP) and the establishment of a comprehensive plan to address the handling of employee concerns with the retention of a third party to oversee NU efforts.

## C. How Did We Get to Where We Are?

The basic causes for our problems have been assessed and documented in ACR - 7007, the Nuclear Committee Advisory Team (NCAT) report, the Fundamental Cause Assessment Team (FCAT) report, the Joint Utility Management Association (JUMA) report and several NRC Inspection Reports. The findings and lessons learned from those reports can be summarized in one fundamental cause:

### **Management tolerating low operating standards, resulting in:**

- Non-conservative decision making
- Loss of trust and credibility
- Loss of configuration management
- Regulatory non-compliance
- Ineffective corrective actions
- Ineffective self assessment and oversight

## D. How Do We Get to Where We Are Going?

To restart Unit 2, we must raise operational standards significantly. This is necessary for Unit 2 management to regain trust and credibility with its employees and regulators. The raising of standards must first take place in management and supervision and then, by their leadership, be infused in all employees. The vision going forward is:

**To be recognized by employees, regulators, and the public as a trusted, safe and efficient nuclear operator.**

**To achieve this vision, the following key issues must be addressed by Unit 2 management:**

1. Regain the trust of employees
2. Regain the trust of the regulators

To regain the trust of employees, Unit 2 management must stop tolerating low operating standards and immediately begin to raise those standards. This will require enlightened leadership that results in proper resolution of employee

concerns and a non-punitive management style that rewards innovation and initiative while not tolerating low standards.

To regain the trust of the regulators, the Unit 2 organization must demonstrate its commitment to high operating standards. To raise operating standards, management must champion self-assessment and independent oversight, to ensure that issues are identified and resolved at the earliest opportunity and prior to becoming a more significant issue. The regulator must have total confidence and trust that Unit 2 will proactively identify and correct--in a timely manner--issues in the future. Without this confidence and trust, restart is not likely to occur even if the physical plant and programs are restored to compliance with the regulations and licensing basis.

Seven key success objectives have been identified, that when accomplished, will demonstrate the required high standards and reflect a fundamental change in how Unit 2 operates. These key success objectives are:

### **Millstone Station** **Success Objectives**

- High standards and clear accountabilities
  - Incorporated many best practices from other utilities
  - Regularly benchmark with other nuclear utilities
  - Indicators show strong improvement toward excellence
  - Commitments are met
- Strong nuclear safety policy
  - Careful adherence to high nuclear safety standards
  - Conservative decision making
- Effective self-assessment
  - Significant issues are identified by NU rather than the regulator
- Effective Corrective Action process
  - Corrective actions and commitments are prioritized and resolved in a timely manner, thereby maintaining a low backlog
  - Improved regulatory performance as demonstrated by decreases in NRC violations and LERs

- Restored licensing and design bases with process to ensure that they are properly maintained
  - ICAVP contractor confirms that the design and licensing bases have been restored
  - Implemented configuration control processes to ensure design and licensing bases are maintained
- An environment that supports the identification and effective resolution of employee concerns
  - An improved Employee Concerns Program actively supported by management and employees
  - Independent review of employee safety concerns confirms effectiveness
- Commitment to resolve long-standing issues and to maintain safe and reliable operations
  - Resource commitment meet or exceed those of similar well run units
  - Problems are prioritized and resolved in a timely manner
  - Commitment to resolve longer term issues is captured by continuous improvement



## **E. Nuclear Regulatory Commission (NRC) Restart Process**

The position of the Millstone site with respect to its nuclear regulator is unprecedented due to the nature and pervasiveness of long-standing performance issues. As a result, the actions which must be taken by Unit 2 to resolve these issues, regain the NRC's trust and confidence, and resume operations are complex and interrelated, and demand the absolute attention of all Unit 2 employees and support groups.

### **The Issues**

Millstone has accepted declining operating standards for a number of years and, as a result, long-standing performance issues have languished. The operating standards for Unit 2 must be raised in the following key areas:

- Leadership
- Communications (Employee Concerns)
- Corrective Actions
- Procedural Adherence and Upgrade
- Work Planning
- Configuration Management
- Proactive Management (Conservative Decision-making)

### **Process Overview**

Many comprehensive reviews will be required to demonstrate that Unit 2, as a team, has successfully addressed the above issues. The reviews include:

- NRC Inspection Manual Chapter 0350, "Staff Guidelines for Restart Approval,"
- 10CFR50.54(f) requests for information, an Independent Corrective Action Verification Program (ICAVP),
- an Employee Concerns Program upgrade with independent oversight verification,
- various NRC staff approvals, and
- a Commission Vote.

## **1. Manual Chapter 350 Process**

The first NRC prerequisite to restart Unit 2 will be NRC Staff approval. NRC Inspection Manual Chapter 0350, "Staff Guidelines for Restart Approval," is the NRC's road map for the restart of a nuclear power plant that was voluntarily or involuntarily shutdown. MC 350 requires that the NRC staff designate a Restart Panel to oversee the process.

By procedure, the panel must develop a Restart Action Plan which incorporates a plant-specific "restart checklist." From a process standpoint, the Restart Action Plan specifically acknowledges the 10CFR50.54(f) process initiated earlier this year on configuration management/licensing basis documentation issues. The Restart Action Plan also acknowledges the Confirmatory Order requiring the ICAVP. (Note: 10CFR50.54(f) and ICAVP are discussed below)

### **Restart Checklist**

The restart checklist explicitly addresses regulatory compliance and licensing matters. It establishes the following as steps needed to be completed prior to restart:

- Necessary license amendments are issued
- Necessary exemptions or relief requests are granted
- "Significant" enforcement issues have been resolved
- "Allegations have been appropriately addressed"
- Pending 10CFR 2.206 petitions "have been appropriately addressed"

### **Operational Safety Team Inspection**

A key component of the MC 350 process is an Operational Safety Team Inspection (OSTI). The framework for an OSTI is established in Manual Chapter 93802, "Operational Safety Team Inspection." For Millstone, the Restart Assessment Plan states that the "inspection will cover self-assessments by the licensee, the licensee's implementation of its startup plan, control room observation during the approach to criticality and power ascension, selected systems readiness inspections and observation of management oversight."

### **Recommendation Process**

Ultimately, when the NRC's restart review process "has reached the point that the issues have been identified, corrected and reviewed," a "restart authorization process" will be initiated. At the NRC Staff level, the process of preparing a recommendation includes the following steps (as stated in the restart checklist):

- A restart recommendation is made by the Restart Assessment Panel.
- The Regional Administrator concurs with the restart recommendation.
- The Office of Nuclear Reactor Regulation (NRR) Associate Director and/or NRR Director concur with the restart recommendation.
- There are no restart objections from other applicable [Headquarters] offices. The applicable offices are not identified in the checklist, but given the pending investigation and enforcement matters for Millstone, and the checklist line items related to enforcement, allegations, and Section 2.206 petitions, the Office of Investigations (OI) and Office of Enforcement (OE) will be on this list.
- There are no restart objections from applicable Federal agencies. This may include the Department of Justice.

After these steps are completed, and the Section 50.54(f) and ICAVP processes are complete, the NRC Staff will submit a restart recommendation for Commission vote. The vote process is addressed below.

## **2. Section 50.54(f) Activities**

Each of the Millstone units presently is subject to a series of requests for information pursuant to 10CFR50.54(f). The information, under the terms of the NRC requests, is due no later than seven (7) days prior to restart. The letters address the broad issue of discrepancies between the plant/procedures and the licensing/design basis documentation (the "CR 7007" or "configuration management" issue). In addition, the letters raise the issue of the effectiveness of the Millstone problem identification and corrective action programs, and the design control process. The company, in responding to these pending requests, will need to provide a basis upon which the NRC can conclude that the plant will be operated in the future in conformance with the license and the underlying regulatory documents. As was stated previously, Section 50.54(f) activities will be an input to the MC350 assessment.

### **3. Independent Corrective Action Verification Program**

The Independent Corrective Action Verification Program (ICAVP) will review the modification of selected systems since initial licensing including:

- (a) Review of engineering design and configuration control processes;
- (b) Verification of current, as-modified plant conditions against design basis and licensing basis documentation;
- (c) Verification that design and licensing basis requirements are translated into operating procedures, and maintenance and test procedures;
- (d) Verification of system performance through review of specific test records and observation of selected testing of particular systems;
- (e) Review of proposed and implemented corrective action of identified design deficiencies.

Completion of the ICAVP review is necessary prior to NRC restart approval. The staff will incorporate the ICAVP results into the MC350 assessment.

### **4. Employee Concerns**

Due to "past failures in management processes and procedures for handling safety issues raised by employees," and to ensure that employees who raise safety concerns are not discriminated against, on October 24, 1996 the NRC ordered NU, prior to restart, to: submit a comprehensive plan within 60 days of issuance of the order to address the root cause of past performance failures, and propose within 30 days for NRC approval an independent third-party organization to oversee implementation of the plan. Independent oversight will continue until NU demonstrates that the conditions which led to the order have been corrected to the satisfaction of the NRC.

### **5. Commission Vote**

The Millstone units have been designated a Category 3 on the NRC Watch List, which requires a formal Commission vote authorizing restart. prior to the vote, the Commission will be provided with a formal NRC staff restart recommendation in the form of a "SECY paper," giving assurances that the concerns have been addressed. The paper will also indicate that the NRC Executive Director of Operations concurs with the restart recommendation. The Commission approval process ordinarily will involve at least one public session (at NRC Headquarters), with presentations by the NRC Staff and NNECO.

## **F. ORP Methodology**

The Unit 2 Operational Readiness Plan (ORP) has been developed to describe a long-term program to raise operating standards. The process will be continuous, long-term, and rigorous. The ORP is divided into two distinct phases: The Readiness for Restart Phase, which includes all actions necessary before requesting authorization for restart, and the Long-Term Performance Improvement Phase, which includes long-term actions necessary to achieve excellence. The Long-Term Performance Improvement Phase will be a natural extension of the Readiness for Restart Phase and will be more fully developed as the Readiness for Restart Phase is completed. All assignments and deliverables contained in the text of this ORP have been tabulated in Attachment 1 and are delineated in the text by a number in brackets. The tracking number will designate the section and item number, e.g., I-3, IV-5 etc. Assignments and deliverables may be treated as stand alone tasks or incorporated into the Readiness for Restart Schedule. Assignments in Attachment 1 will be managed through the Level 1 System. The documentation and close-out of these documents are discussed in Section X of this plan.

Of course, any plan is only as good as its actual implementation, and will only be effective with commitment from management and the entire organization. The Unit 2 team is committed to this plan and the tenets on which it is based. Demonstration of that commitment will come through adherence to scheduler commitments with a quality product.

### **Readiness For Restart Phase**

Readiness for Restart is generally defined as completing those activities necessary to ensure safe operations. This includes the necessary actions needed to restore compliance with regulations, including the design and licensing bases, and raising the standards to support long-term safe, reliable operations.

The Readiness for Restart Phase is composed of several elements (see Table I-1) designed to ensure the plant is ready to restart--not only from a physical and technical standpoint, but from a cultural standpoint as well.

### **Schedule, Startup and Power Ascension, and Performance Improvement**

The Readiness for Restart Schedule is described in Section X.



The Startup and Power Ascension Plan discusses the transition from current state to full power operation. It is described in Section XI.

The Performance Improvement Plan describes longer-term actions designed to return Unit 2 to excellence and sustain that performance level. It is described in Section XII.

**TABLE I-1**

***Organizational Readiness***

*Management Standards* is designed to address the issues that got us where we are: management toleration of low standards, inadequate response to employee concerns, poor corrective action, inadequate communications, and other issues. These are discussed in Section II of this Plan.

*Self Assessment* is a mechanism by which the organization will achieve sustained improvement through its own identification and correction of issues. This important management tool is discussed in Section III.

***Regulatory Readiness*** is a compilation of compliance and communications issues that are necessary to demonstrate to the NRC the organization's commitment to operate in accordance with all regulatory requirements. These issues are discussed in Section IV.

***System Readiness***

*Configuration Management and Design Control* details activities necessary to verify plant configuration and compliance with licensing and design bases. These activities are discussed in Section V.

*Physical Readiness of the Plant* describes the method by which it is determined which work is necessary to complete prior to startup. It is described in Section VI.

***Operational Readiness***

*Operational Readiness* discusses elements of the Operations Department. It is discussed in Section VII.

*Assessment of Restart Readiness* describes the process for Unit 2's own assessment that it is ready to request restart from the NRC. It is described in Section VIII.

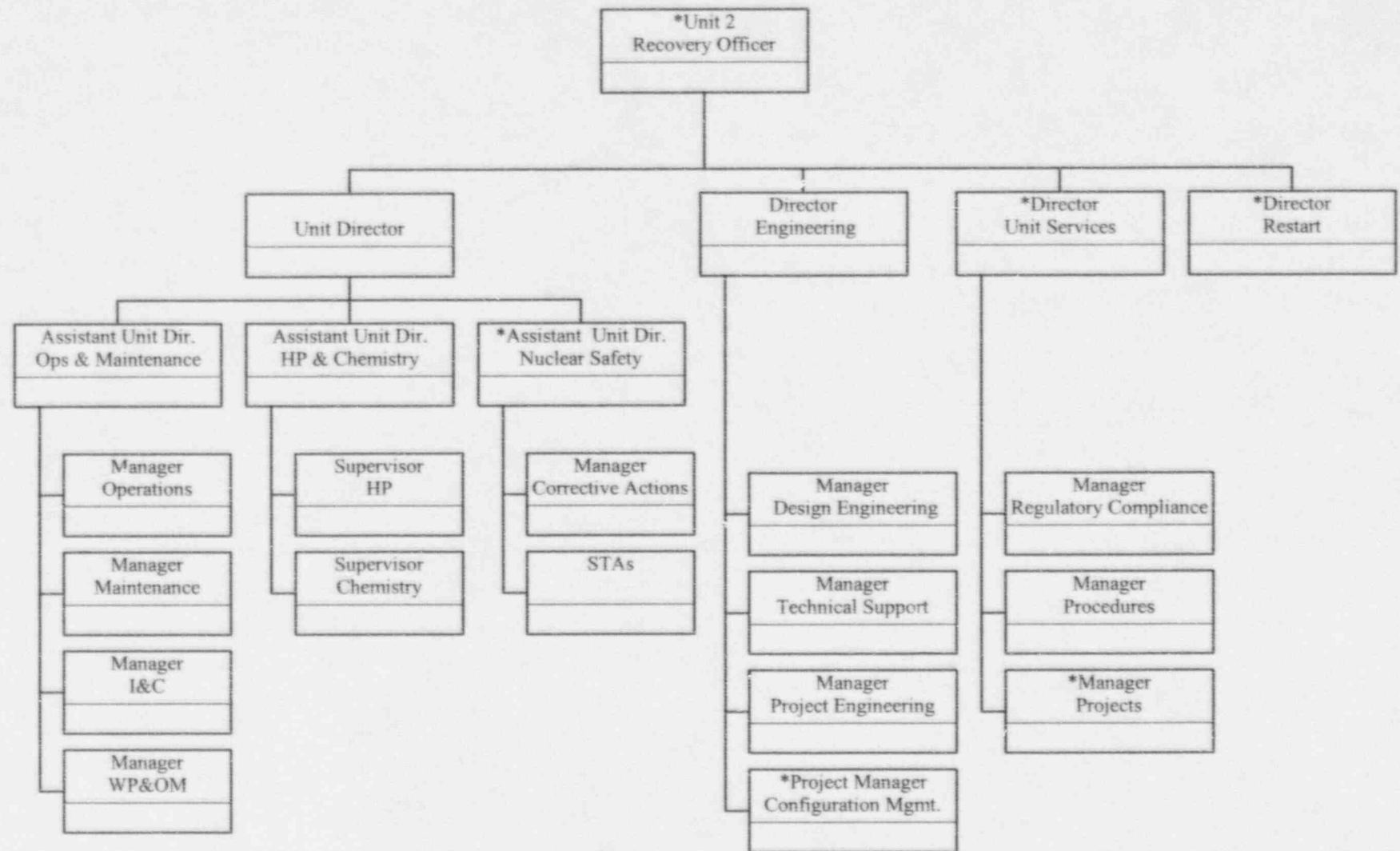
***Communication Readiness*** outlines the means by which communication between employees and management will improve and achieve excellence. A Unit 2-specific Communications Plan has been developed, and is summarized in Section IX.



## **G. Recovery Organization**

The purpose of the Unit 2 Recovery Organization is to establish a higher priority on safety and to focus the organization on raising standards and completing effective corrective actions. To accomplish this, the example Recovery Organization shown in Figure I-1 will be used as a model to facilitate the recovery of Unit 2. Key "coaching and integrating" positions will be established to evaluate and focus on nuclear safety, corrective actions and regulatory compliance, as well as work control. Adjustments to the model organization will be made as required to support recovery and longer-term normal power operations.

## Millstone Unit 2 Model Recovery Organization



**\*Recovery Positions**

**Figure I-1**

## **II. Management Standards (Organizational Readiness)**

High operating standards are absolutely essential to the success of Unit 2 because they are directly linked to the safety and reliability of our operations. The following section describes the process for establishing and raising Unit 2 standards. The key to success in each area discussed is clear communication of management expectations, followed by clear accountability for follow-through.

### **A. Nuclear Safety Culture**

Conservative decision-making is the standard which must be demonstrated on a continuous basis. Specific actions in this area include:

- An Unit 2 Nuclear Safety Policy will be developed, implemented, and embraced to enhance and guide conservative decision making. [II-1]
- Organizational changes will be made to emphasize and focus on Nuclear Safety. [II-2]
- An Operations Department standard for reactivity management will be developed. [II-3]
- SOER 96-01, "Control Room Supervision, Operational Decision-Making, and Teamwork," will be addressed. [II-4]
- SOER 96-02, "Design and Operating Considerations for Reactor Cores," will be addressed. [II-5]
- 10CFR50.59 training will be provided. [II-6]
- Periodic Human Performance Enhancement stand-downs will be conducted. [II-7]

The role of the Plant Operations Review Committee (PORC) is critical to providing line management independent review of actions taken and changes

made to unit operations. To increase the effectiveness of the PORC, the following activities will be taken:

- Perform a benchmarking assessment of PORC at good performing plants [II-8]
- Implement the Station Qualified Review (SQR) program to streamline PORC administrative (non-safety related) reviews [II-9]

The Safety Evaluation (10CFR 50.59) Program needs to be enhanced by:

- Establishing appropriate linkage between Operability Determinations and Bypass Jumpers with the 50.59 process [II-10]
- Ensuring that 50.59 reviewers and approvers have completed training, and establishing a peer review group to ensure consistent standards are met for 50.59 evaluations. [II-11]

## **B. Employee Concerns**

Effective resolution of Employee Concerns will be the highest priority of Unit 2 management. Employee concerns will be addressed in a prompt, efficient, and respectful manner. They will be addressed by supervision listening to employees, understanding their issues and resolving them. Specific expectations are as follows:

- The Unit 2 Recovery Officer will provide the expectations and standards for how management will resolve employee concerns. [II-12]
- Unit 2 management will fully support the NU Nuclear Employee Concerns Program.
- All employees will be familiarized with the Employee Concerns Program. [II-13]
- Unit 2 management will receive training and/or coaching on the expectations and standards for resolving employee concerns, as well as the Employee Concerns Program. [II-14]

## C. Commitments & Commitment Management

The standard for meeting and managing commitments must be raised. Our past resolve to meet our commitments and our ability to manage them has been poor at best. Simply put, we must do what we say we will do! Our standards in this area will be elevated as follows:

- The AITTs system will be adopted as the Unit 2 method of commitment tracking.
- An AITTs data management guideline will be established to manage data and commitments. [II-15]
- The AITTs backlog of "notify" items will be eliminated. [II-16]

## D. Department-Specific Excellence Plans

Each Unit 2 department will develop an Excellence Plan to raise standards and incorporate actions required by this Plan, including necessary personnel training and development. [II-17] Specific areas to be included in all Excellence Plans include:

--Self Assessment	--Self Assessment Training
--Department Performance Indicators	--Observation Training
--Root Cause Training	--First Line Supervisor Training
--Human Error Reduction Training	--50.59 Training
--Qualification Training	--Staffing and Resource Assessment
--Customer Feedback	--Clarification of Roles and Expectations
--Benchmarking	--Nuclear Safety Policy



## **E. Management Development and Leadership**

Management standards will be raised through the implementation of a program of management development and leadership. Key behavior characteristics for the Unit 2 leadership team to embrace and demonstrate include:

- Promote Teamwork
- Place "priority" on priority issues
- Follow through and meet commitments
- Coach and reinforce positive behavior and provide leadership
- Endorse continuous improvement and raising of standards
- Make conservative decisions

**Inputs for the development of this program are:**

- The Virginia Power Recovery Team will provide the leadership standard and coaching required to develop an effective long-term Unit 2 management team.
- Train and assign "coaches" to facilitate, as appropriate, the raising of standards. [II-18]
- Perform observation training. [II-19]
- A Level 1 management accountability system will be established. [II-20]
- Meaningful unit performance indicators and stretch goals will be established. [II-21]
- The expectation of "no missed commitments," including NRC and training commitments, will be established. [II-22]
- "Enlightened Leadership, Getting to the Heart of Change," by Oakley and Krug, will be utilized to make positive changes within the Unit 2 organization. Facilitated working session(s) with Unit 2 management personnel will be held to introduce and reinforce the key behavior characteristics discussed above. [II-23]
- A Best Practices Coordinator will be assigned to develop a benchmarking plan and schedule. Benchmarking trips will be made to INPO and to well-performing power stations to understand and raise standards. INPO assist visits will be used to facilitate and evaluate standards. [II-24]
- A special assessment of supervisors (and above) by their subordinates will be used to evaluate management leadership capability and to identify development needs. [II-25]



## **F. Employee Communications**

A Unit 2-specific Communications Plan has been developed. The overall objectives of this plan are to:

- Convey high standards and expectations.
- Build confidence of employees in themselves and their leadership.
- Reestablish employee belief in, and trust of management.
- Develop teamwork and organizational buy-in.
- Convey sense of progress.

Specific Actions:

- The Recovery Officer will provide key standards and expectations for communications.
- The Recovery Officer, Directors, and Managers will convey these standards and expectations in accordance with the Unit 2 Communication Plan provided in Attachment 4. [II-26]

## **G. Corrective Action Program**

An effective corrective action program is comprised of two principal phases -- identification and the implementation of identified action(s) to correct the deficiency.

In the identification phase a low threshold must be maintained to get all potential discrepancies into the corrective action program. Based on screening criteria for the items identified, proper immediate corrective actions must be implemented and reportability must be determined in a timely manner. Additional screening will determine the need for an immediate in-depth review (root cause) or self assessment. Further reviews will then be conducted to determine proper classification and categorization of the issues identified. Identified items will be placed in the data base for tracking and trending. Periodic management reports and trends generated from the data will determine the need for additional in-depth reviews. Action items that are generated from the various reviews will be

implemented to turn trends in the improving direction or to prevent the recurrence of events.

The implementation phase of the corrective actions program is equally important. This phase utilizes many in-place processes to make certain that the corrective actions identified get proper prioritization and tracking until the item is complete. Examples of these processes include but are not limited to the automated work orders (AWO), drawing updates (GRITS), and procedure revisions. In order to close an item after work is complete, evidence must be verified that the original concern has been addressed properly. For significant items such as commitments to the Nuclear Regulatory Commission, closure packages will be developed to provide an auditable product.

In order to maintain a strong corrective action process, a clear and concise program has been developed and documented with an approved procedure. Line management has taken ownership of the program by understanding the process and providing the resources and priorities necessary to respond to identified items in a timely manor. Self-assessments will be conducted to assure that no weaknesses are appearing in any area of the process. Oversight will also provide periodic assessments and audits of the program.

The following has been undertaken to ensure that the Corrective Action Program is effective:

### **1. Organization:**

A Corrective Actions Manager has been assigned with a staff dedicated to the program to provide the support required for program development and processing. The staff includes root cause specialists who have been trained on industry proven practices to determine the appropriate causes and corrective actions. The staff also includes trained personnel to properly classify events and to trend the data to identify areas where additional attention is needed. Reports and trends allow management to focus on specific weaknesses identified. Coordinators have been provided by the line organizations to make certain that day to day work is incorporating the actions in their department work plans that was identified through the corrective action process.

## **2. Process:**

A new corrective action procedure was approved which clearly delineates the responsibilities and processes required to conduct an effective corrective action process.

## **3. Prioritization:**

Efforts are underway to review the many actions that are outstanding to properly prioritize and group them. As the multiple phases of this plan are executed, the outstanding corrective actions associated with each system and program will be reviewed and closed as the corrective actions are completed. In some cases the actions may not be required prior to restarting the unit. For these activities, a management review will be conducted to assure that these items, either as stand alone items or in aggregate, will not affect safe operation of the unit.

## **4. Assessments:**

Self assessments and independent assessments of the corrective action program will be conducted periodically. An independent assessment will be used to determine the health of the program and to make adjustments as needed. Key Performance Indicators have been identified to provide the needed trends as the program matures. Benchmarking will continue with other utilities to provide the new ideas that are needed to keep the program at the highest standard.

## **H. Procedure and Technical Specifications Upgrades**

Standards must be raised in the area of procedure and technical specification quality. Specific actions are as follows:

**A single technical and administrative Unit 2 procedures group will be established. [II-34]**

**Technical Procedures revised (including EOPs and AOPs) required for restart readiness will be revised. [II-35]**

**The Emergency Operating Procedure (EOP) Upgrade Program will be completed following the return to power operations. [II-36] Specific activities are as follows:**

- Development of all EOP Upgrade Program administrative control procedures (Writer's Guide, User's Guide, EOP Administration and Maintenance Procedure, EOP Verification Procedure and EOP Validation Procedure)
- Mark-up, and Simulator Verification of CEN-152 on Unit 2 Simulator EOP re-write
- EOP Standard Appendix Development
- Basis Document Development
- Deviation Document Development
- Implementation Guidance Document Development
- Operators Classroom and Simulator Training
- EOP Upgrade Label Program Design and Implementation, SPDS upgrade
- SPDS Upgrade
- Upgraded EOP Setpoint Document Development and Implementation accounting for instrument uncertainties (based on CENPSD-1009)
- Pre-staging of all required tools and equipment

**The Abnormal Operating Procedure (AOP) Upgrade Program will be completed following the return to power operations. [II-37] Specific activities are as follows:**

- Upgrade existing AOPs
- Develop and Implement AOP Writer's Guide, User's Guide, Program Administration Procedure, Verification Procedure and Validation Procedure
- Develop Loss of DC Bus AOPs
- Develop new AOPs as identified
- Upgrade Appendix "R" AOPs including technical revision to meet Appendix "R" Compliance Report
- Unit 2 is nearing the end of the multi-year PUP, scheduled to be completed prior to unit startup
- Benchmarking has been completed for each department's procedures against the PUP Standardized Writer's Guide
- The remaining Unit 2 procedures are being upgraded to the PUP standards to ensure technical quality and usability (human factors)
- The PUP goal has been to assure that procedures are effective, efficient, and supports safe and reliable plant operation

**Unit 2 Operating procedures will be reviewed and revised as appropriate prior to Mode 4 operations, to ensure water-hammer events are precluded. [II-39]**



**Severe Accident Management Guidelines (SAMG) will be developed from the generic Combustion Engineering Owners Group (CEOG) SAMGs [II-40]. Program to be completed by December 1998. Specific activities are:**

- Develop and implement SAMG Writer's Guide
- Draft Phase I, II, III guidelines and Restorative AMGs
- Develop Calculation Aids
- Perform verification of SAMGs
- Perform validation of SAMGs
- Review IPEs for discrepancies
- Perform JTA for operators and STAs
- Develop training materials for operators and STAs
- Conduct SAMG operator and STA training
- Develop/revise SAMG support procedures
- Revise EPOPs and EPUGs
- Conduct EP organization training
- Revise station radiological emergency plan

**The Unit 2 Technical Specifications will be upgraded to the Improved Standard Technical Specifications after return to operations and completion of actions to restore Unit 2 to compliance with its Design and Licensing Basis. [II-41]**



# **III. Self Assessment**

## **(Organizational Readiness)**

### **A. Discussion**

To better understand the magnitude of problems that must be corrected, candid and objective assessments have been, and will continue to be conducted. Building from past evaluations and internal assessments, NU management has determined the key weaknesses and performance gaps. These assessments provided management the opportunity to review problems and commit the necessary resources to effect significant change. To ensure that problems of this severity do not occur in the future, an effective self-assessment program, and culture, are required.

### **B. Self Assessment Program**

Establishment and implementation of effective self-assessment are vital to the long-term success of Unit 2. Unit 2 must become a learning organization utilizing both internal and external assessment and the industry operating experience programs.

The key attribute to critical and effective self assessment is line management ownership and support. Extensive information already exists that, when evaluated appropriately, provides insight as to unit programs and operating performance. This information will be used by managers as the basis for self-assessment of unit performance. The self assessments will be performed by line managers and will include input from the line, internal oversight and external independent auditors and assessors. Self assessment is to be an integral part of each manager's Department Excellence Plan.

Unit Performance Indicators (UPI) will be selected and used to communicate goals and standards. Managers will review progress toward meeting the goals and will use this progress as an input to self-assessment. These indicators will be updated and reported on a monthly basis. Oversight and quality assurance personnel will report their findings and concerns to station managers. The results from these activities will also be used in the self-assessment process.

Inspection Findings--resulting from internal Nuclear Oversight audits, NRC inspections and external evaluation--will be reviewed by unit management to assess the effectiveness of the self-assessment program.

The ORP itself has been assessed by Nuclear Oversight to ensure it appropriately addresses Unit 2 standards and issues.

**The following specific activities will be undertaken to provide an effective self-assessment program:**

- The Unit 2 Recovery Officer will provide the standard and expectation for self-assessment. [III-1]
- An Unit 2 Unit Performance Annunciator Window Program will be developed to integrate relevant self assessment information. Performance criteria and goals for excellence will be developed so that progress can be measured and weaknesses identified. [III-2]
- A management backshift assessment program will be developed and implemented. [III-3]
- Key indicators for implementing this plan (Table III-1) and for ongoing operations after return to service will be developed and monitored. [III-4] (tied to commitment II-17)
- A Human Performance Enhancement Program will be developed and implemented. [III-5]
- Periodic Self Assessments will be conducted in the key areas of:
  - Corrective Actions [III-6]
  - Safety Evaluations (10CFR 50.59) [III-7]
  - PORC Effectiveness [III-8]
  - Technical Procedure Adequacy [III-9]
  - Configuration Management [III-10]
  - Surveillance Testing [III-11]
  - Conduct of Operations [III-12]
- Self Assessment Training will be provided to applicable personnel. [III-13]
- An Independent Readiness For Restart Assessment (consistent with INPO Evaluation Criteria and NRC 0350 guidance) will be conducted. [III-14]

## **C. Independent Oversight Program**

### **1. Nuclear Oversight**

The conduct of quality work and the responsibility for quality work resides with line management. The Nuclear Oversight organization's role is to provide independent and critical feedback to line management in the key areas of regulatory compliance, work and management performance and standards. Unit 2 will value and champion the oversight function. Specific standards for Unit 2 management and employees are as follows:

- The oversight function will be utilized to provide periodic, meaningful assessments of daily activities, processes and programs. [III-15]
- The Nuclear Oversight Department's need to staff with qualified and experienced personnel will be supported. [III-16]
- Issues and findings from the audit and surveillance programs will be resolved in a proactive and timely manner. [III-17]

### **2. INPO Assistance**

INPO will be utilized in an assistance role. Specific actions are as follows:

- Coordination with INPO to review action plans and areas of support will be conducted. [III-18]
- Use of INPO reverse loanees or direct utility loanees will be evaluated. [III-20]
- Use of INPO assist visits will be evaluated. (Assist visits in the areas of Operations, Work Planning, Management Development, Corrective Actions, System Engineering, and Procedure Upgrades will be requested as appropriate). [III-21]

### **3. External Assessment**

Independent external assessments (including utility peers) will be used as appropriate to verify program effectiveness and quality.

# IV. Regulatory Readiness

## A. Regulatory Compliance

Unit 2 will be in compliance with regulatory requirements prior to restart. Specific activities to be undertaken are as follows:

- Implement required actions to respond to violations identified in NRC Inspection Reports will be completed. [IV-1]
- Complete actions necessary to ensure compliance to 10CFR50 Appendix B as indicated by Nuclear Oversight audits and open/overdue audits. [IV-2]
- Open NRC Unresolved Items and LER commitments not scheduled to be resolved prior to restart will be assessed for impact on restart. [IV-3]
- Open Bypass Jumpers, Operability Determinations, and NCRs not addressed before restart will be screened and addressed under 10CFR50.59. [IV-4]
- Open safety related AWOs not addressed prior to restart will be assessed by an Operations SRO and PORC. [IV-5]
- Complete necessary reviews, repairs, and/or compensatory actions to ensure compliance with 10CFR50, Appendix R for use of Thermo-lag. [IV-6]
- Provide status of NRC commitment response due dates in the daily unit status report. [IV-7]

## B. Regulatory Communications

The following are examples of products and submittals that will be made available to the NRC: [IV-8]

- Unit 2 ORP, Readiness for Restart worklist, Performance Improvement Worklist
- Response to 10CFR50.54(f) letter
- ICAVP Plan and Request
- Violation responses as specified by NRC Inspection Reports
- Closure packages for LERs and Violations
- Closure packages for selected CRs



# **V. Configuration Management and Design Control (System Readiness)**

The Configuration Management Plan (CMP) has been developed to respond to the NRC's request pursuant to 10CFR50.54(f) and the associated Confirmatory Order. The CMP will identify and resolve significant discrepancies and also provide a basis for future operation in accordance with operating license, the Commission's regulations and the Final Safety Analysis Report (FSAR).

To accomplish these objectives many important tasks must be performed. The first step in the process is to define the CMP scope, process, controls, and deliverables. With this completed, the CMP team will proceed to assemble system Design Basis (DB) summaries and Licensing Basis (LB) commitments. The next step is to verify that Unit 2 design, operation, testing and maintenance are consistent with the DB and LB commitments and requirements. In addition, the CMP is responsible to ensure that station-wide programs and processes that implement and maintain DB and LB requirements are reviewed for compliance, revised as necessary, and are effectively implemented. Unit 2 technical programs and processes which impact system design, testing and maintenance will be reviewed by the CMP for compliance.

An important milestone is the Independent Corrective Action Verification Program (ICAVP), which is required by NRC Confirmatory Order. This special inspection will independently evaluate the effectiveness of the CMP efforts. The ICAVP will look at selected Maintenance Rule group 1 and 2 systems following the discovery phase of the CMP. Results of the inspection will be independently reported to both the NRC and Northeast Utilities (NU). To make sure we are prepared for this verification, a pre-ICAVP Readiness Assessment will be conducted to assure a successful inspection. The preparation and support for the ICAVP team inspection is an important element of the CMP. When we are confident that we are well prepared, the NRC will be notified of our readiness to proceed with ICAVP.

Periodic self-assessment will be performed to assure quality is achieved by verifying the effectiveness of project processes and products throughout the CMP effort. In addition, Nuclear Oversight will continue to closely monitor the CMP activities and to provide critical feedback.

Prior to Unit 2 restart, the response to the NRC 10CFR50.54(f) letter must be prepared and submitted to the NRC. This response must describe the actions taken to ensure that future operation of Unit 2 will be conducted in accordance with its license, the Commission's regulations and the Unit 2 FSAR. Also, the response must describe the actions taken to ensure that identified deficiencies have been appropriately evaluated and resolved. The CMP will provide a basis for developing this response by documenting the results of the DB and LB compliance verification and providing the rationale for concluding that the Unit 2 design basis requirements are translated into operating, maintenance and test procedures. The CMP effort will also result in the identification of significant problems, establishment of root causes and corrective actions necessary to ensure future safe operation.

The FSAR, selected Technical Specifications, and other documents will be revised prior to Unit 2 restart to ensure that the re-established configuration is accurately described. In addition, the CMP provides for a long-term configuration management phase which will control future changes to the LB, DB and physical plant, ensuring that all documents are updated and requirements are maintained.

### **10CFR50.54(f) Letter Summary**

The March 7, 1996, 10CFR50.54(f) letter from the NRC requires submission of additional written information, under oath and affirmation, to determine whether or not the license for Unit 2 should be suspended, modified or revoked. The information is to describe actions taken to ensure that the future operation of Unit 2 will be conducted in accordance with the terms and conditions of the operating license, the Commission's regulations, including 10CFR50.59, and the FSAR. The submittal should describe actions taken to assure that deficiencies identified, based on the ongoing review, have been evaluated for operability, the existence of unreviewed safety questions and reportability.

### **ICAVP Confirmatory Order Summary**

The NRC issued a Confirmatory Order to NNECO on August 14, 1996, requiring an Independent Corrective Action Verification Program (ICAVP) at each

Millstone unit. The ICAVP is to be conducted by a technically qualified company, independent of NU and its design contractor. The purpose of the ICAVP is to verify the adequacy of Unit 2's efforts to establish adequate design bases and design controls, including the translation of the design bases into operating procedures and maintenance and testing practices, verification of system performance, and implementation of modifications since issuance of the initial facility operating license.

### **Licensee Basis (LB) Definition**

The Licensing Basis (LB) is that set of requirements that includes the applicable NRC regulations and licensee commitments that ensure the unit's operation is in conformance with the operating license, the unit's design basis as specified in 10CFR50.2, NRC regulations, including 10CFR50.59 and the unit's FSAR.

### **Design Basis (DB) Definition**

Design Basis means that information which identifies the specific functions to be performed by a structure, system or component of a facility and the specific values or ranges of values chosen for controlling parameters as reference bounds for the design. These values may be (1) restraints derived from generally accepted state-of-the-art practices for achieving functional goals or (2) requirements derived from analysis (based on calculations and/or experiments) of the effects of a postulated accident for which a structure, system or component must meet functional goals.

### **Maintenance Rule System List**

#### **Group 1**

Auxiliary Feedwater	125v DC	Emer. Diesel Generator
Service Water	4160v Emer. Buses	ESF Room Cooling
RBCCW	120v Vital AC	Reactor Coolant
LPSI	Boric Acid	Shutdown Cooling
RWST	Control Element Drive	CVCS (Volume Portion)
CTMT Structure	EBFS & Fuel Hand. Vent	480v Load Centers
480v MCCs	Reactor Protection	Main Feedwater
Safety Injection Tanks	HPSI	Main Steam
Containment Spray	ESAS	CTMT Air Recir. & Cool.
NI Linear Range		CTMT Isolation

### Group 2

RSST	NSST	Switchyard
CTMT & Enc. Bldg. Purge	Diesel Room Ventilation	Diesel Generator Fuel Oil
Instrument Air	SFP Cooling & Purif.	Sampling
CTMT Post Inc. H2 Cont.	Main Exhaust	Radwaste Vent (Aux. bldg.)
Control Room A/C	Cond. Storage & Transfer	EHC Control
Chilled Water	Plant Heat & Cond. Rcvy.	Fire Protect. & Deluge
Auxiliary Bldg.	Intake Structure	Turbine Bldg.
NI Wide Rng. Log Channel	Incore Nuclear Monitor	Reactor Regulating
Control Bldg.	Process & Area Rad Monitors	
Enclosure Building	DC Vital Switchgear Ventilation	

### Configuration Management Program List

10 CFR 50.59 Program	Design Change Program	EQ Program
HELB Program	Setpoint Program	MEPL Program
Appx. "R" Program	MOV Program	SBO Program
IST Program	ERDS Program	Thermo-lag Program
Fuse Program	Fire Protection Program	Section XI Program
Check Valve Program	R.G. 197 Program	Seismic Program
M-Rule Program	Appx. "J" Program	Heavy Loads Program
E/C Program		PMMS Program

To maintain adequate and effective control of the Design Bases, the following activities will be conducted:

- Establish a CMP plan which meets the requirements of the March 7, 1996 NRC letter pursuant to 50.54(f). [V-I]

- Implement the CMP plan to validate and/or restore plant configuration with the Design Basis and Licensing Basis and successfully complete the Independent Corrective Action Verification required by the NRC Order dated August 14, 1996. [V-II]
- Establish ownership for system Design Basis and technical programs. [V-3]
- Establish an Engineering Assurance Program. [V-4]
- Reduce the Engineering Drawing Backlog. [V-5]
- Ensure the Design Control process adequately considers changes to required administrative and technical programs (e.g., Procedures, Vendor Manuals, App R, EQ, Simulator, Emergency Preparedness, etc.). [V-6]



Figure V-1

# Maintenance Rule Systems

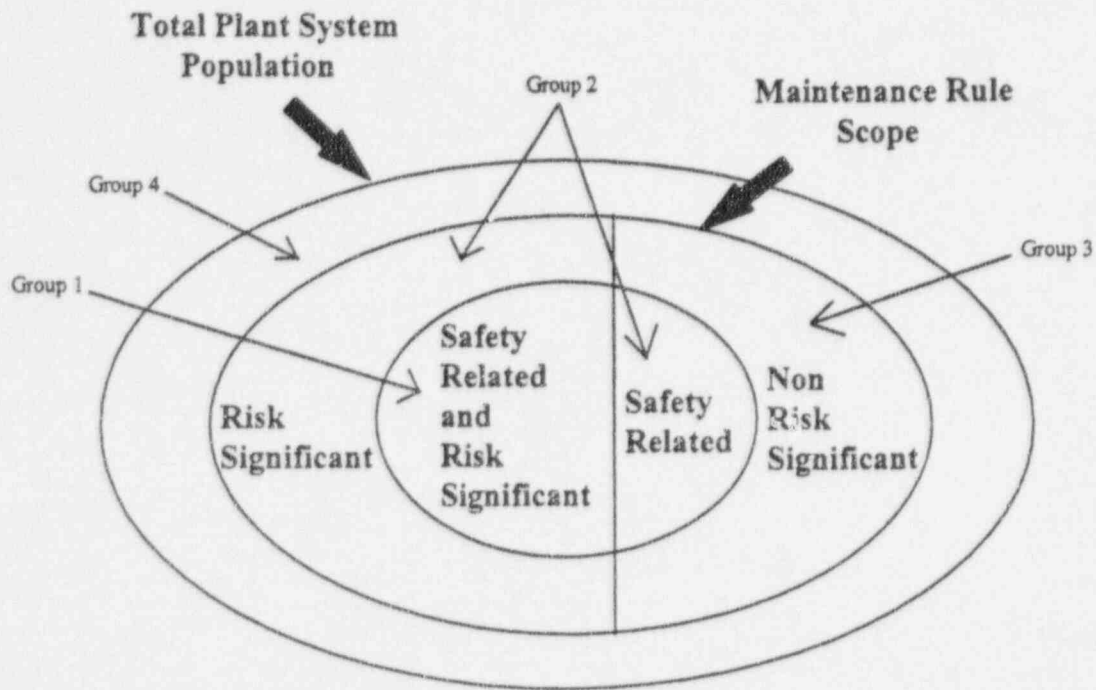


Figure V-2

# Engineering, Design, Licensing Basis Relational Diagram

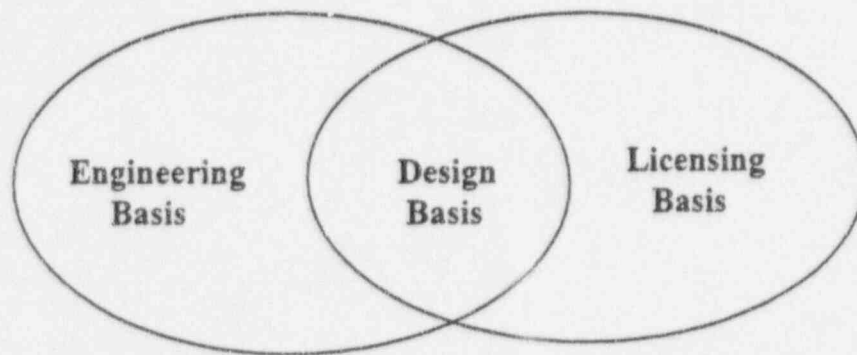
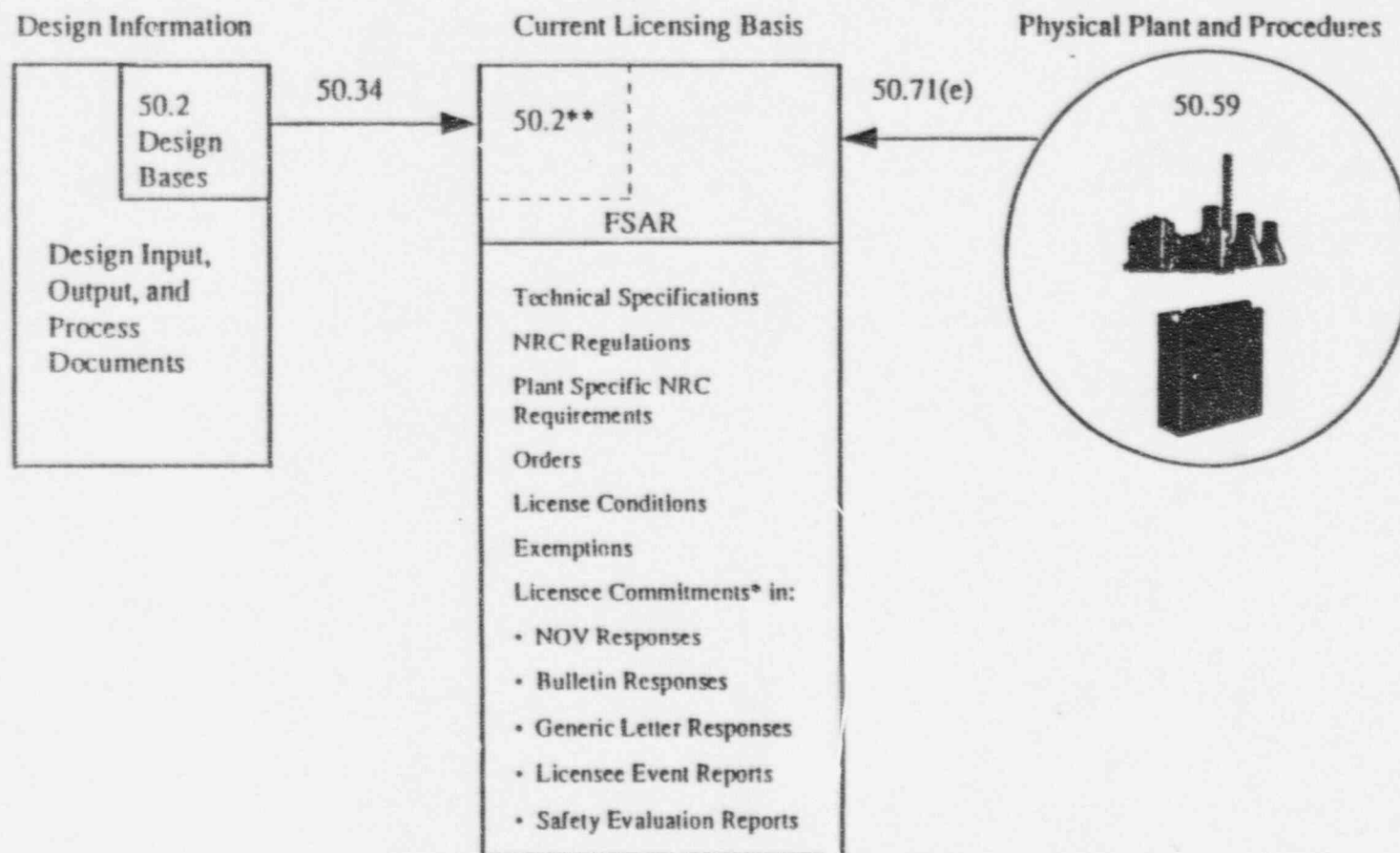


Figure V-3

## RELATIONSHIP OF CURRENT REGULATIONS



\* Those commitments that are necessary to comply with regulatory requirements

\*\* Some design bases information, developed in response to new regulations, may exist outside the FSAR, but is still considered part of the current licensing basis.

# **VI. Physical Readiness of the Plant (System Readiness)**

## **A. Methodology for Workscope Development**

The workscope considered by the Operational Readiness Plan will be continuously evolving. In order to identify and correctly address necessary work items, lists of deficiencies that will be screened include: AWO backlog, Condition Repts (CRs), Control Room Deficiencies, Operator burdens, Unresolved Item Reports (UIRs), Operability Determinations (ODs), Non-Conformance Reports (NCRs), Bypass Jumpers, and Engineering Modifications. All known deficiencies will be screened and logged into three (3) categories: [VI-1]

- (1) Work prior to restart
- (2) Scheduled work after restart
- (3) Future unscheduled level-of-effort work

The Unit 2 Readiness For Restart worklist will be contained in separate documents and is expected to be dynamic. The worklist for response to the 10CFR50.54(f) letter and the NRC Confirmatory Order may also be kept separate from the Unit 2 Ready For Restart work list. Controls for maintaining the 10CFR 50.54(f) worklist will be maintained by the Unit 2 Configuration Management Project (CMP). Controls for maintaining the Unit 2 Readiness For Restart worklist will be developed by the Unit 2 Restart Director and will be consistent with NUC-PI-20 which is currently specific to MP3.

## B. Work Process Improvements

Unit 2's ability to resolve work items in a timely manner will be improved. Specific improvements are as follows:

- An improved process for work flow will be established in the Work Planning & Outage Management (WP&OM) department to address the problem of rising backlogs and timely problem resolutions. [VI-2]
- A Work-It-Now (WIN) team will be established to more promptly address applicable plant equipment deficiencies. [VI-3]
- Engineering will be utilized to provide field engineering assistance for work in progress. Clear expectations regarding their roles, responsibilities, and performance will be communicated. [VI-4]
- Project Management and Project Engineering groups will be established to support physical plant modification work. [VI-5].
- The Unit 2 Surveillance Tracking Program will be self-assessed to preclude any missed surveillances.

## C. Housekeeping

Housekeeping standards will be raised on Unit 2 by:

- Standards and a program for the unit will be established. [VI-6]
- Periodic employee housekeeping standdowns will be conducted. [VI-7]
- Unauthorized and improperly stored equipment and materials will be removed from the unit. [VI-8]
- A Unit Painting Program will be initiated [VI-12]



## **D. Materiel Condition and Operability**

To restore plant systems to a high state of materiel readiness and/or to an operable condition:

- Complete required design change modifications. [VI-9]
- Complete required preventive maintenance. [VI-10]
- Complete required corrective maintenance. [VI-11]

# VII. Operational Readiness

Operations must be conducted at the highest standards to ensure safe and reliable plant operations. The Operations Department Excellence Plan will ensure that the following key elements are met:

- Operations personnel are cognizant of the status of plant systems and equipment under their control and ensure that systems and equipment are controlled in a manner that supports safe and reliable plant operation.
- Procedures are technically accurate, provide appropriate directions, and are effectively used to support safe and reliable operation of the plant.
- Operator knowledge and performance supports safe and reliable plant operations.
- Operator training activities, including Simulator Training, are conducted in a manner that supports safe and reliable plant operation.
- Operation of the plant is in compliance with Technical Specifications and Technical Requirements Manual.

The following specific actions will be completed:

- Operations Department Excellence Plan is to ensure that the above key elements are met. [VII-1]
- Develop a set of Operations Standards which will include Proactive Management, Shift Manager and SRO Roles and Responsibilities, and Communications Paths and Expectations. [VII-2]
- Train on Operations Standards. [VII-3]
- Review all Technical Specifications to ensure understanding, thereby enhancing ability for compliance. [VII-4]
- Conduct unit walkdowns to verify no uncontrolled temporary plant alterations or uncontrolled postings and Operator Aids exist. [VII-5]
- Conduct unit walkdowns to ensure in-plant storage meets administrative requirements. [VII-6]
- Complete Operations and System Engineering walkdowns for materiel condition issues. [VII-7]
- Complete an independent (external) assessment of the conduct of operations. [VII-8]
- Relevant industry operating experience will be reviewed. [VII-9]
- Unit 2 departments will conduct an operational readiness self-assessment prior to each mode change or key plant configuration change (e.g., fuel movement). [VII-10]

# **VIII. Assessment of Restart Readiness (Operational Readiness)**

## **A. Restart Assessment Process**

Restart Assessment ensures that the collective system operability and plant materiel condition supports safe and reliable plant operation. It also ensures that operating crews and other plant personnel are fully prepared to support safe and reliable startup and power operation.

The elements to be assessed will collectively encompass the following Key Success Objectives to confirm readiness of Unit 2 for restart:

### **Millstone Station Success Objectives**

- High standards and clear accountabilities
  - Incorporated many best practices from other utilities
  - Regularly benchmark with other nuclear utilities
  - Indicators show strong improvement toward excellence
  - Commitments are met
- Strong nuclear safety policy
  - Careful adherence to high nuclear safety standards
  - Conservative decision making
- Effective self-assessment
  - Significant issues are identified by NU rather than the regulator
- Effective Corrective Action process
  - Corrective actions and commitments are prioritized and resolved in a timely manner, thereby maintaining a low backlog
  - Improved regulatory performance as demonstrated by decreases in NRC violations and LERs

- Restored licensing and design bases with process to ensure that they are properly maintained
  - ICAVP contractor confirms that the design and licensing bases have been restored
  - Implemented configuration control processes to ensure design and licensing bases are maintained
- An environment that supports the identification and effective resolution of employee concerns
  - An improved Employee Concerns Program actively supported by management and employees
  - Independent review of employee safety concerns confirms effectiveness
- Commitment to resolve long-standing issues and to maintain safe and reliable operations
  - Resource commitment meet or exceed those of similar well run units
  - Problems are prioritized and resolved in a timely manner
  - Commitment to resolve longer term issues is captured by continuous improvement

Unit Performance Indicators (UPIs) for restart readiness (see Table VIII-1) will be identified. [VII-11]

**The following specific assessments to evaluate the above elements will be made prior to restart of Unit 2:**

- The approved Operational Readiness Plan will be independently reviewed by Nuclear Oversight for completeness. [VII-12]
- Specific departmental operational readiness assessments will be performed prior to mode changes. [VII-13]
- Nuclear Oversight will perform an independent assessment of restart readiness. [VII-14]

**Each system identified as either Maintenance Rule Group 1 or 2 will be affirmed ready for restart by the responsible System Engineer prior to request for authorization to restart. [VIII-6] Examples of activities that will be considered include:**

- Open items necessary for restart have been completed or satisfactorily dispositioned
- Materiel condition of the system and its ability to support safe and reliable operation has been affirmed
- Proper prioritization of all open items, including schedule for completion, has been completed

## **B. Closeout of Operational Readiness Plan Deliverables**

The following criteria will be used as a guideline in preparing, reviewing and approving the closure of Operational Readiness Plan deliverables. Preparation and review of these deliverable packages should verify that: the deliverable statement has been met, the deliverable completion quality supports safe restart and operation of Unit 2, and the documentation is sufficient to provide an auditable record of actions taken.

The following criteria are guidelines. Some of the criteria may not be applicable to all deliverable packages. Reviewers and management may also want to add additional criteria based on their judgment and expertise of the specific deliverable:

- The deliverable package is approved and signed by the responsible lead
- The package contains a cover memo outlining the description of the deliverable, the process used to satisfy it, and a summary of the results
- The package contains memos, forms, printouts and any other paperwork evidence necessary to judge that the deliverable statement has been met
- Corrective actions are implemented to prevent recurrence and address root cause findings (as applicable) of the problems that created the deliverable
- Any potential licensing basis or safety issues raised by the deliverable or its process have been resolved



- Any operability or restart issues raised by the deliverable or its process have been resolved
- Unit Performance Indicators are developed (or updated) to track deliverable items or processes
- If the deliverable is tied to a formal root cause analysis finding, include applicable sections of the root cause analysis
- If the deliverable statement cannot be met, discuss with the Director of Restart
- Self-Assessment plans include monitoring deliverable items or processes
- The deliverable package is a stand-alone document

### **Deliverable close-out process**

Attachments on pages 57-64 describe ORP deliverables. The following describes the general steps that should occur to close out a deliverable package:

- The responsible lead will schedule the package to be reviewed by the Unit 2 management team at the weekly Level 1 meeting, and distribute copies of the package to the management team members prior to the review meeting so they will have an opportunity to look at the information before the meeting
- The responsible lead will present the package for review/approval at the designated committee meeting
- The designated committee should formally review the package and, if satisfactory, indicate its approval. If the package is not satisfactory, the committee should indicate to the responsible lead what additional action is required
- After receipt of concurrence by the approval body the original, approved deliverable packages must be forwarded to the Director of Restart for inclusion in the Operational Readiness Library

**Table VIII-1**  
**UPIs for Readiness-for-Restart**

<p><b>Corrective Actions</b></p> <p>Restart List NCR Backlog AITTS Assignments Required for Startup NRC Open Items Licensee Event Report Commitments Notice of Violation Response Commitments License Amendments Required for Restart AITTS Assignments in NOTIFY Status Assignments Against CRs Open &gt;120 days Overdue Assignments CR Aging/Overdue Report Open/Overdue Assignments - Audits/Surveillances</p>	<p><b>Configuration Management</b></p> <p>Unresolved Items Report Drawing Update Backlog Restart Modification Implementation Status CMP - System Assessments CMP - Program Assessments</p>
<p><b>Physical Plant</b></p> <p>Maintenance Rule AWO Backlog Maintenance Rule (a)(1) Systems Status MEPL Systems Validated Open Operability Determinations Operator Burden Reduction Control Room Panel Deficiencies Temporary Modifications</p>	<p><b>Organizational Performance and Safety</b></p> <p>Restart Required Technical Procedure Revisions Condition Report Status Reportable Events Ratio of Cited/Non-Cited Notices of Violations Work Planning/Scheduling Effectiveness Industrial Safety Accident Rate Personnel Contamination Events Collective Radiation Exposure</p>

# IX. Communications

A comprehensive Communications Plan has been developed for Unit 2. The Plan places heavy emphasis on face-to-face communication as the most effective way to disseminate information and accomplish the following objectives:

1. Build confidence of employees in themselves and their leadership.
2. Re-establish employee credibility and trust of management.
3. Develop teamwork and organizational buy-in.
4. Convey progress.

Following are additional elements of the plan. A communications matrix, which describes communications, their audiences, and suggested frequency, are also part of the plan.

## What Should Be Communicated

The information communicated falls into many different categories:

- Management philosophies and messages
- Progress and Celebration of successes by individuals and/or groups
- Challenges that lie ahead
- Industry and Unit-specific experience that should be communicated to all unit personnel, such as lessons learned
- Management feedback on its plans and commitments
- Other information that is useful, of interest, or of value from the standpoint of employee morale
- Communication cross working groups should be stressed and the emphasis should be continuous. Also, employees need to know that their comments/suggestions/constructive criticism will be presented to higher management in the form it was intended when given to line management so they feel upper management is getting an accurate input

Three specific short-term communication strategies involve techniques used to boost employee morale and confidence, and provide progress:

- Celebration of successes at all levels. These can consist of letters of commendation, recognition in management meetings, celebration events, spot recognition awards, a written newsletter, and photo stories, described below
- Setting of several (3-5) short-term objectives that support longer-term goals
- Recovery Officer meeting with all supervisors, managers and directors together to review status, goals and future initiatives

## **Unit-Wide Communications Approach**

Consistent messages must be sent from top to bottom. It is important that communication with employees is consistent and well coordinated.

Communication with various levels of management is beneficial to employees. However, if meetings and messages are not carefully coordinated, employees can become frustrated by meetings that are either too frequent or not frequent enough, and can become confused if the messages are inconsistent or in conflict with one another.

Thus it is in the organization's interest to have a plan that is well thought out and executed. Toward that end, a communications matrix has been created, which lays out the plan for communications--both interpersonal and written. The plan has been developed to ensure enough contact between upper management and other management levels, to provide management's philosophies and expectations from top to bottom.

## **Communications Vehicles**

A number of communications vehicles are available. Some are system-wide and can be used to disseminate unit-specific information to the rest of the units, as appropriate. The unit communications liaison will be responsible for coordinating unit input into the system-wide communications vehicles. These are outlined in the Nuclear Communications plan.

Other vehicles are unit-specific. They are:

- **Face-to-Face Meetings:** Survey after survey demonstrates that employees generally want to receive most of their information about the organization from their supervisor. The importance of these communications must be reinforced by management, and individuals should be held accountable. It should be made clear that written communications do not replace face-to-face.

It should be emphasized here that face-to-face not only includes interaction between employees and immediate management, but also interactions between employees and unit senior management.

- **All-hands meetings:** In many cases, face-to-face communication is more appropriate in large groups. There have been, and will be, occasions when it is appropriate to hold a unit all-hands meeting. This could be run by the unit recovery officer, the unit director, the unit engineering director, as applicable.
- **Department meetings:** Whenever appropriate, information from the morning unit meeting should be discussed in department meetings. As discussed above, employees want to get most of their information from their immediate management, and brief meetings are an important element.
- **Unit management letters, memos and speeches:** In many cases, timely information is best communicated by management. These come out on a regular, as-needed basis. The objective is to project the fact that management is keeping the work force informed and recognizing individual achievement.
- **Unit/Department Celebration/Motivational Events:** There will be times when an event, such as a rally or picnic, will be appropriate. These can be used to celebrate success, rally support for upcoming challenges, and convey a sense of teamwork.
- **Unit-specific print communications:** Examples include unit dailies, weekly reports, issue-specific picture stories, officer letters/memos, etc. Two important messages that are crucial in our communications are individual and group recognition, and progress. These messages were better communicated with photo stories and weekly updates that existed last year.



## TEMPLATE FOR RECOVERY OFFICER/DIRECTORS FACE-TO-FACE COMMUNICATIONS PLAN

<u>ACTIVITY</u>	<u>EMPLOYEE AUDIENCE</u>	<u>RESPONSIBLE INDIVIDUAL</u>	<u>SUGGESTED FREQUENCY</u>
Management Staff Meeting	Directors/Managers	Unit Officer	Daily
Unit Walkdown with Department Managers	Managers Employees	Unit Officer Unit Director	Monthly Weekly
Department All-Hands Meetings (Note: May include the entire department or just a major group in the department)	1st Line Supervisors & Non-Supervisory Personnel	Unit Officer Unit Director Unit Engineering Director	Monthly Weekly Weekly
Unit 2 Strategy Meeting	Unit Director Engineering Director Employee Communications	Unit Officer	Weekly
Simulator Observations	Licensed Operators	Recovery Officer Unit Director	Monthly Monthly
System Engineer Plant Walkdowns	System Engineers	Unit Engineering Director	Periodically
Operating Shift Turnover	Operating Shift	Unit Officer Unit Director	Monthly Monthly
Meetings with First Line Supervisors and above (The Management Team)**	First Line Supervisors and above	Unit Officer	Quarterly Bi-weekly Bi-weekly
Meeting with Operations Shift Managers***	Shift Managers	Unit Director	Weekly

\*\* A quarterly meeting of the Unit Officer with 1<sup>st</sup> supervisors. With Unit progress, the frequency may be extended. Unit and Engineering Directors will meet with all of the first-line supervisors in one department (e.g., Maintenance) on a bi-weekly basis.

\*\*\* The Unit Director will meet with at least one Operations shift manager on a weekly basis, except when the unit conditions or being away from the unit preclude it.

## FACE-TO-FACE COMMUNICATIONS PLAN (Cont.)

<u>ACTIVITY</u>	<u>EMPLOYEE AUDIENCE</u>	<u>RESPONSIBLE INDIVIDUAL</u>	<u>SUGGESTED FREQUENCY</u>
NRC	NRC Resident Inspector	Unit Officer Engineering Director	Weekly
	NRC Region/HQ Management	Unit Officer	Monthly

## TEMPLATE FACE-TO-FACE COMMUNICATIONS PLAN For Department Managers

<u>ACTIVITY</u>	<u>EMPLOYEE AUDIENCE</u>	<u>SUGGESTED FREQUENCY</u>
Status Meetings	Management Team	Daily
Department All-Hands	All Department Employees	Bi-Weekly
Management Observation of Training	Employee Groups	Monthly/ Weekly for Licensed Ops Requal
Ops Manager Meeting	Ops Shift Managers	Weekly
Meetings with First Line Supervisors	First Line Supervisors	Bi-weekly
Customer/Corporate Support/ Vendor		Periodic
Invite NU Nuclear senior management (above Director level) to speak to department	All Department Members	Periodic

# **X. Readiness For Restart Schedule and Resources**

## **A. Development, Approval, and Revision**

The *Readiness-for-Restart Schedule* is developed, reviewed, approved, and revised by the individuals accountable for the completion of the contained activities and their line management. Ownership and buy-in to the schedule by those accountable for its completion is critical for success. Each department, group, or team responsible for contained activities prepares an action plan for achievement of the desired results. These actions are reviewed by the accountable department management, affected departments, and the Unit Director, or designee. Once reviewed and approved, the activities are included in the schedule.

As we progress through the schedule, emergent activities will be identified for inclusion within the schedule. These emergent activities will be reviewed by the accountable and impacted departments, and the Unit Director or designee prior to inclusion into the schedule.

### **Criteria for Restart Required Actions**

Activities meeting the criteria below are designated "required for restart" and are included within the *Readiness-for-Restart Schedule*. Activities identified as necessary for longer-term success but not specifically required prior to authorization for restart will be included within the Performance Improvement Plan - discussed in Section XI of this plan.

Activities meeting the following criteria are deemed required for restart and are included within the *Readiness-for-Restart Schedule and Readiness For Restart Worklist*:

- an event, component failure, deficiency, or condition that could result in operation in an LCO action statement
- failure to perform a required surveillance test or other license requirement or meet a commitment to an outside agency

- conditions that have resulted in repetitive safety system equipment failures
- potential licensing basis deficiencies requiring maintenance to restore the plant to conforming conditions (i.e. deficiencies in safety-related or other qualified equipment, e.g. EQ, Appendix R or seismic)
- items that impact plant operability, raise an unreviewed safety question, or indicate a discrepancy between the FSAR and as-built plant or an operating procedure
- deficiencies in configuration management programs processes, engineering analysis codes, or documentation that have or could have a reasonable likelihood of Equipment not meeting its license or design basis
- conditions that may create an unacceptable potential for an unplanned radioactive release to the environment or discharge effluent to the environment which is in excess of limits
- items with work priorities 1 & 2, and specifically identified priority 3 items, in accordance with the work priorities defined in plant procedures

## **B. Schedule Adherence and Review**

Once approved, the *Readiness-for-Restart Schedule* serves to communicate the plan of activities required for authorization to restart. Each accountable group, department, and individual is expected to ensure that the schedule accurately reflects the necessary actions to accomplish the desired result. Line management is expected to hold their personnel accountable for the accuracy and to the completion of activities within the schedule.

A regularly scheduled progress meeting will be held to monitor and progress the schedule. The attendees will include the accountable individuals, groups, or departments associated with the scheduled activities and line management. Each action due is expected to be completed and updated as such prior to or during this meeting. Upcoming actions in jeopardy are expected to also be updated during or prior to this meeting.

Remedial actions required to address jeopardized activities are expected to be submitted by the accountable department, group, or individual prior to failing to meet the schedule in accordance with the aforementioned revision process. Line management will hold accountable the schedule accuracy and as-scheduled completion of required activities.

## **C. Schedule Distribution, Records, and Close-out**

The *Readiness-for-Restart Schedule* will be periodically updated. Updated schedules will be distributed as needed to accountable departments, groups, line management, oversight, and the NRC. Distribution of the updated schedule will be completed by the ORP Manager in accordance with a distribution plan approved by the Unit Director or designee.

Archive files will be established each update such that progress is readily retrievable. Performance measures will be established by the Director of Restart to accurately reflect schedule accuracy and adherence. Specific quality records for activities requiring such will be maintained in accordance with the procedures governing the activity. The updates to the Readiness-for-Restart Schedule will be available for review but will not serve as a quality record for completion of contained activities.

Following authorization for restart, the Readiness-for-Restart Schedule will be completed, and the Startup and Power Ascension Plan will be used to direct unit activities. A transition plan will be developed and approved by the Unit Director or designee to facilitate this transition.

Specific administrative details for development, review, approval, revision, progress monitoring, and record keeping for the *Readiness-for-Restart Schedule* are contained within approved plant procedures.

## **D. Operational Strategy**

In the early stages of the current shutdown, a problem developed with 2-SI-645, a LPSI injection valve. The specific problem with this valve is that it cannot be shut completely due to apparent internal binding. In order to work on this valve and inspect other LPSI injection valves, the reactor core must be off loaded to the Spent Fuel Pool (SFP). As a result, Unit 2 went to Mode 6 and completed a full core off load. While the core is removed from the vessel, and the refueling pool is full, major maintenance (including safety-related Train A/Train B components), and major modifications will be performed (planned major modifications are discussed below).



Upon completion of the off-load workscope, a comprehensive testing program commenced. Virtually all 18 month, refuel frequency surveillances will be performed to verify the operability of systems and safety functions. Also, required post-modification and maintenance testing, as well as any required pre-operational system testing, will be performed to provide assurance of system functionality in compliance with licensing basis documentation.

Once all off-load system testing has been completed, the core will be reloaded, the reactor head will be reinstalled, and Mode 5 will be entered. Preparations will be made to fill and vent the RCS, draw a bubble and enter Mode 4 (commence a heat-up). Although a standard startup sequence will be followed, clearly the startup of Unit 2 will not be routine. As mentioned in Section III, Self Assessment, and Section VII, Assessment of Restart Readiness, many management, third-party, and oversight assessments will be made at each step in the start-up sequence. In addition, the return of equipment and systems to service will be systematic, deliberate and controlled.

## **E. Special Testing and Inspection**

During performance of the above operational plan, testing will be performed on a variety of components.

Examples of planned testing include:

- Steam Generator ECT
- CEDM housing nozzle crack inspections
- RBCCW system full flow testing
- RBCCW system flow balancing
- Radioactive waste ventilation flow balancing
- VOTES testing of 52 MOVs
- Spec 200 response time testing
- NI noise testing
- 'B' HPSI pump curve verification
- EDG ventilation receive flow testing
- Service water heat exchanger performance testing

## **F. Major Modifications**

**Examples of modifications that will be performed:**

- Replace 'C' RCP Seal
- Intersystem LOCA RBCCW System Modifications
- Control Room Air Conditioning (CRAC) Modifications
- Switchgear Cooling Modification
- Pressurizer Level Reg. Guide 1.97 Modifications for QA Power
- EDG 'A' & 'B' QA Ventilation System Damper Replacements
- Containment Radiation Monitor Isolation Modification
- Hydrogen Sampling/PASS Design Modifications
- S/G Blowdown Radiation Monitor Replacement
- Re-power H<sub>2</sub> Containment Isolation Valves

## **G. Projected Readiness For Restart Schedule Milestones**

Mode 6	December 96
Core Offload	January 97
CMP and System Outages Start	February 97
Performance Improvement Plan Prepared	May 97
Ready For ICAVP Start	June 97
Core Reload	July 97
Startup and Power Ascension Plan Prepared	July 97
System Readiness Assessment Start	August 97 - September 97
Readiness For Restart Assessment	August 97
Readiness For Restart	September 15, 1997

## **H. Resources**

The 1997 Unit 2 budget has been developed to support the ORP, Increased temporary staffing needs have been identified. This includes both on-site and off-site activities. Permanent resource requirements will be addressed as part of the

ORP requirement for Department Excellence Plans. The criteria for permanent staffing is to have sufficient and well qualified resources necessary to operate and maintain the unit safety and in complacence with regulatory requirements.

## **I. Contingencies**

Neither the 1997 budget, nor the Readiness For Restart Schedule will have contingencies included even though it is recognized that emergent work is likely, and that past work efficiency, quality and schedules adherence was low.

Schedules will be revised as necessary. However, it is not likely that additional resources over the 1997 approved budget can be made available. The Unit Officer will maintain the options to adjust priorities and reassign resources.

# **XI. Startup and Power Ascension Plan**

*Purpose: To ensure a safe and deliberate return to safe and reliable power operation following the extended shutdown period.*

The *Startup and Power Ascension Plan* will be a detailed schedule of actions taken following restart authorization to ensure careful and deliberate startup and power ascension. This Plan is in the form of a detailed schedule of activities that begin at restart authorization and conclude at stable full-power operations. This plan is necessary to ensure a careful and deliberate return to power operations following the extended shutdown period. Activities within this schedule include:

- General Operating Procedures
- Corrective and Preventive Maintenance
- Line Management Observation/Self-Assessment
- Assessment Hold-Points
- Surveillance Testing Procedures
- Post-Maintenance and Post-Modification Testing

The development, review, and approval of the Startup and Power Ascension Plan will be completed prior to the completion of the Readiness-for-Restart Schedule.  
[XI-1]

# **XII. Performance Improvement Plan**

**Purpose:** *To provide the long-term improvement plan and schedule to meet the highest standards for the conduct of safe and reliable operations.*

## **A. Introduction**

The *Performance Improvement Plan* will be developed, reviewed, and approved prior to restart..

The plan will contain the details and action steps to complete both programmatic improvements and plant projects to meet the longer term goals of safe, reliable, economic, and environmentally sound nuclear power operation. Progress on this plan will be closely monitored and reported frequently.

## **B. Performance Improvement Initiatives**

Performance Improvement Initiatives will include those programmatic improvements necessary to support the longer-term goals (beyond restart). Each Performance Improvement Initiative will have an associated schedule of action steps necessary for success. Examples of initiatives will cover programmatic areas of improvement including Nuclear Oversight effectiveness, improvements in Maintenance Programs, Backlog Reductions, and Staffing Development. Initiatives will be reviewed and approved by station management to ensure that appropriate resources and support are provided to effect completion. Progress on the schedule of these activities will be frequently communicated to the employees, senior management, the community, and the regulator.



## **C. Plant Improvement Projects**

Plant Improvement Projects will include those physical changes resulting in improvements to plant systems, equipment, and facilities necessary to support the longer-term goals (beyond restart). Projects will have an associated schedule of action steps necessary for success. Examples of Plant Improvement Projects include the continuation of plant coatings, upgrades of material conditions, plant efficiency modifications, and facility upgrades. Plant Improvement Projects will be reviewed and approved by station management to ensure that appropriate resources and support are provided to effect completion. Progress on the schedule of these activities will be similarly communicated to the employees, senior management, the community, and the regulator.

# Attachment

## ORP Assignments and Deliverables

Commit Number	Owner	Description
II-1a	Assistant Unit Director - Nuclear Safety	Develop and implement Unit 2 Nuclear Safety Policy (Work with Mario Bonaca)
II-1b	Corrective Actions Manager	Conduct self-assessment to ensure Unit 2 Nuclear Safety Policy expectations are embraced by Unit 2 organization
II-2	Unit Officer	Recovery Organizational changes
II-3	Operations Manager	Develop and rollout Operations Department standard for reactivity management
II-4	Manager of Operations/ Unit Dir. Staff Assistant	Complete response for SOER 96-01
II-5	Operations Manager/Tech Support Manager	Complete response and implement actions for SOER 96-02
II-6	Staff Assistant	Coordinate 10CFR50.59 training schedule for all applicable Unit 2 staff
II-7	Assistant Unit Dir. - Nuclear Safety	Develop schedule and agenda for Human Performance Stand-downs
II-8	I&C Manager	Perform benchmarking assessment at well-performing plants
II-9	Procedure Group Manager	Implement Station Qualified Review (SQR) Program
II-10	Engineering Director	Establish appropriate linkage between operability determinations and bypass jumpers with the 50.59 process
II-11	Engineering Director Unit Director	Designate peer review group for 50.59
II-12	Unit Officer	Set and communicate expectations and standards for resolution of employee concerns
II-13	Unit Director	Complete employee familiarization with

	Engineering Director	Employee Concerns Program
II-14	Unit Director Engineering Director	Complete management training on expectations and standards for resolving employee concerns, as well as, the Employee Concerns Program
II-15a	Restart Director	Establish an AITTS data management guideline. Hold Unit 2 AITTS workshop.
II-15b	Corrective Actions Manager	Perform self-assessment of AITTS effectiveness
II-16	Corrective Actions Manager Licensing Director	Eliminate AITTS backlog of "notify" items
II-17	Operations Manager Maintenance Manager WP&OM Manager I&C Manager HP Supervisor Engineering Director Corrective Actions Manager	Develop Level 1 for excellence plan implementation
II-18	Assistant Unit Director - Nuclear Safety	Train Department Coaches
II-19	Assistant Unit Director - Nuclear Safety	Implement Observation Training
II-20	Assistant Unit Director - Nuclear Safety	Establish a Level 1 Management Accountability System
II-21	Assistant Unit Director - Nuclear Safety	Establish stretch goals for UPI and "Workoff" curves (also see II-3)
II-22	Unit Director Engineering Director	Establish expectation of "no missed commitments."
II-23	Unit Director Engineering Director	Establish schedule for facilitated working sessions to introduce and reinforce behavioral characteristics for first line and above supervisors.
II-24	Assistant Unit Director - Nuclear Safety	Develop schedule and methodology for benchmarking trips
II-25	HRG Representative	Provide feedback to management team (group and individual) from supervisory assessments

II-26	Unit Officer Unit Director Engineering Director CMP Manager Tech Support Manager Maintenance Manager I&C Manager WP&OM Manager HP Supervisor Operations Manager Assistant Unit Director - Nuclear Safety 50.54(f) Acting Supervisor	Communicate standards and expectations to employees in accordance with the Unit 2 Communications Plan
II-27	Corrective Actions Manager	Establish ownership of corrective action program within line organization through revision of Corrective Action Program procedure
II-28a	Unit Director Engineering Director	Establish expectations for timely completion of investigations and corrective actions
II-28b	Corrective Actions Manager	Establish goals and trends for corrective actions
II-29	Corrective Actions Manager	Establish a core group of root cause evaluators
II-30	Assistant Unit Director - Nuclear Safety	Establish the organization, reporting structure, procedural requirements and facility support needed to implement the corrective action program
II-31	Corrective Actions Manager	Establish indicators and goals for determining effectiveness of the Corrective Action Program
II-32	Restart Director	Establish a backlog review team, perform backlog reviews
II-33	Corrective Actions Manager/ Perf. Evaluation Mgr.	Review a sample of previously closed CRs for adequacy
II-34	Assistant Unit Director - Nuclear Safety	Establish Single Technical Procedures Group
II-35	Procedure Group Manager	Identify and track Technical Procedure revisions required for restart readiness
II-36	Procedure Group Manager	Complete EOP upgrade

II-37	Procedure Group Manager	Complete AOP upgrade
II-38a	Procedure Group Manager	Establish plan to review technical procedures
II-38b	Procedure Group Manager	Implement plan for technical procedure review
II-39	Procedure Group Manager	Review and revise Operating procedures to ensure water hammer events are precluded
II-40	Procedure Group Manager	Complete Severe Accident Management Guideline development
II-41	Licensing Director	Develop schedule for Improved Standard Technical Specifications
III-1	Assistant Unit Director - Nuclear Safety	Provide/set standards and expectations for self-assessment
III-2	Assistant Unit Director - Nuclear Safety	Develop Unit Annunciator Window Program
III-3	Assistant Unit Director - Nuclear Safety	Develop and Implement a Management Backshift Assessment Program
III-4a	Assistant Unit Director - Nuclear Safety	Complete development of UPIs for ORP (see Also II-23)
III-4b	Assistant Unit Director - Nuclear Safety	Publish and review on a monthly frequency UPIs for ORP
III-5	Assistant Unit Director - Nuclear Safety	Development and Implement Human Performance Enhancement Program
III-6	Corrective Actions Manager	Conduct periodic self assessments for Corrective Actions
III-7	I&C Manager	Conduct periodic self assessments of Safety Evaluations (10CFR 50.59) Program and Process
III-8	I&C Manager	Conduct periodic self assessments for PORC effectiveness
III-9	Procedure Group Manager	Conduct periodic self assessments for technical procedure adequacy
III-10	CMP Manager	Conduct periodic self assessments for Configuration Management



III-11	Corrective Actions Manager	Conduct periodic self assessments for adherence to Surveillance Testing schedule and requirements
III-12	Operations Manager	Conduct periodic self assessments for conduct of operations
III-13	Assistant Unit Director - Nuclear Safety/ Nuclear Training Contact	Provide self assessment training to applicable personnel
III-14	Assistant Unit Director - Nuclear Safety	Conduct independent Organizational Readiness Assessment (Use INPO and NRC 0350 criteria)
III-15	Unit Director Perf. Evaluation Mgr. Eval. & Analysis. Group	Develop a plan for effective use of Nuclear Oversight for periodic assessment of daily activities, processes, and programs
III-16	Unit Director Engineering Director	Work with Nuclear Oversight to ensure proper staffing
III-17	Unit Director Engineering Director	Develop a plan to ensure proactive, timely resolution of issues and findings from audits and surveillances
III-18	Assistant Unit Director - Nuclear Safety	Review progress of actions to meet INPO 1996 findings. Prepare INPO six-month status report
III-19	Unit Officer	Request and set-up an INPO lead operational readiness assessment prior to restart
III-20	Unit Director Engineering Director	Compile evaluation for use of INPO reverse loanees or direct utility loanees.
III-21	Unit Director	Determine scope and schedule for INPO assistance visits.
IV-1	Licensing Director	Implement required actions to ensure timely response to NRC violations. Develop schedule to achieve timely compliance
IV-2	Unit Director Engineering Director	Identify actions necessary to ensure full compliance with 10CFR50 Appendix B for Oversight Audits

IV-3	Assistant Unit Director - Nuclear Safety	Open unresolved items (UIRs) and LER commitments have been addressed prior to restart
IV-4	Assistant Unit Director - Nuclear Safety	Open Bypass Jumpers, Operability Determinations, and NCRs not resolved prior to startup are screened against 10CFR50.59
IV-5	Operations Manager	Open safety related AWOs not addressed prior to restart have been assessed by an Operations SRO and PORC
IV-6	Engineering Director Licensing Director	Complete actions to ensure compliance with 10CFR50, Appendix R for Thermo-Lag
IV-7	Licensing Director	Provide status of commitment responses due dates in daily unit status report
IV-8	Licensing Director	Develop plan and internal structure to ensure submittals made on time
V-1	CMP Manager	Develop CMP Plan and Schedule
V-2	CMP Manager	Perform periodic independent technical review of CMP
V-3	Engineering Director	Establish ownership for system design and technical programs
V-4	Engineering Director	Establish Engineering Assurance Program
V-5	Engineering Director	Provide plans for Engineering Drawing Backlog
V-6	Engineering Director	Ensure design control process adequately considers changes to required administrative and tech programs
VI-1	Restart Director	Complete initial categorization process
VI-2a	WP&OM Manager	Complete work flow process changes
VI-2b	WP&OM Manager	Complete self-assessment of work flow process
VI-3	Maintenance Manager	Establish WIN Team
VI-4	Maintenance Manager	Staff Maintenance/Component Engineer positions and communicate roles, responsibilities, and expectations

VI-5	Project Engineering Manager/ Project Manager	Establish a Project Management/Engineering group to support modification work
VI-6	Work Planning & Maintenance Manager	Establish housekeeping standards and Program
VI-7	Work Planning & Maintenance Manager	Develop schedule for periodic housekeeping stand-down
VI-8	Lead - Work Planning & Maintenance Manager Operations Manager I&C Manager Maintenance Manager HP Supervisor	Remove all unauthorized/improperly stored equipment and materials from unit
VI-9	Unit Director Engineering Director	Complete required design change modifications
VI-10	WP&OM Manager	Complete required Preventive Maintenance
VI-11	WP&OM Manager	Complete required Corrective Maintenance
VI-12	Maintenance Manager	Develop Unit Painting Program
VII-1	Operations Manager	Ensure Operations Department Excellence Plan incorporates elements from ORP
VII-2	Operations Manager	Develop set of Operations Standards
VII-3	Operations Manager/ Nuclear Training Contact	Train on Operations Standards
VII-4	Operations Manager Tech Support Manager	Review Tech Spec Surveillance Procedures to ensure compliance with Tech Specs
VII-5	Operations Manager HP Supervisor Tech Support Manager	Conduct unit walkdowns to verify no uncontrolled temp alterations or postings and Operator Aids exist
VII-6	Operations Manager Maintenance Manager HP Supervisor I&C Manager	Conduct unit walkdowns to ensure in-plant storage meets requirements

VII-7	Operations Manager Tech Support Manager HP Supervisor	Conduct Ops and System Engineering walkdowns for materiel condition issues
VII-8	Operations Manager	Complete independent (external) assessment of conduct of Operations
VII-9	Corrective Actions Manager Nuclear Safety Engineering	Develop plan for effective self-assessment of relevant industry operating experience
VII-10a	Assistant Unit Director - Nuclear Safety	Develop and implement an operational readiness self-assessment process (pre-INPO/pre-IPAP methodology)
VII-10b	Unit Director Assistant Unit Director - Nuclear Safety (lead) Operations Manager Maintenance Manager I&C Manager WP&OM Manager HP Supervisor 50.54(f) Acting Supv. Tech Support Manager	Conduct operational readiness self-assessment prior to each mode change and significant plant configuration change
VIII-1	Assistant Unit Director - Nuclear Safety	Identify UPIs for restart readiness
VIII-2	Perf. Evaluation Mgr.	Complete independent review of ORP
VIII-3	Same as VII-10B	Specific departmental operational readiness assessments will be performed prior to mode changes
VIII-4	Perf. Evaluation Mgr.	Perform independent assessment of restart readiness
VIII-5	Same as III-19	Request independent (external) restart readiness assessment
VIII-6	Tech Support Manager CMP Manager	Affirm that Maintenance Rule Group 1 and 2 systems are ready for restart
XI-1	Restart Director	Prepare Startup and Power Ascension Plan