



Entergy Operations, Inc.
Entergy Nuclear Operations, Inc.
1340 Echelon Parkway
Jackson, MS 39213
Tel 601-368-5711

David Hahn
Vice President, Oversight

10 CFR 50.54(a)(3)
10 CFR 71.106
10 CFR 72.140(d)

CNRO2021-00011

April 01, 2021

ATTN: Document Control Desk
U. S. Nuclear Regulatory Commission
Washington, DC 20555-0001

Subject: Annual Report for Entergy Quality Assurance Program Manual and Indian Point Energy Center Quality Assurance Program changes under 10 CFR 50.54(a)(3), 10 CFR 71.106, and 10 CFR 72.140(d) Notification of Application of Approved Appendix B to 10 CFR 72 subpart G.

Arkansas Nuclear One (Units 1 & 2)
NRC Docket Nos. 50-313 & 50-368
Renewed License Nos. DPR-51 & NPF-6
NRC Docket No. 72-13
NRC Docket No.: 71-0341

Grand Gulf Nuclear Station
NRC Docket No. 50-416
Renewed License No. NPF-29
NRC Docket No. 72-50
NRC Docket No.: 71-0536

Indian Point Nuclear Power Plant Units 1,2 & 3
NRC Docket Nos. 50-003, 50-247, 50-286
License No. DPR-05
Renewed License Nos. DPR-26, DPR-64
NRC Docket No. 72-51
NRC Docket No.: 71-0240

Palisades Nuclear Power Plant
NRC Docket No. 50-255
Renewed License No. DPR- 20
NRC Docket No. 72-07
NRC Docket No.: 71-0937

Big Rock Point Nuclear Plant-ISFSI
NRC Docket No. 50-155
License No. DPR-6
NRC Docket No. 72-43
NRC Docket No.: 71-0937

River Bend Station
NRC Docket No. 50-458
Renewed License No. NPF-47
NRC Docket No. 72-49
NRC Docket No.: 71-0566

Waterford 3 Steam Electric Station
NRC Docket No. 50-382
Renewed License No. NPF-38
NRC Docket No. 72-75
NRC Docket No.: 71-0604

Entergy Operations, Inc. and Entergy Nuclear Operations, Inc. (collectively referred to as "Entergy") is submitting the attached Entergy Quality Assurance Program Manual (QAPM), Revision 40, effective February 07, 2021 in accordance with 10 CFR 50.54(a)(3) and 10 CFR 71.106 in Enclosure 1 of this letter.

Enclosure 1 to this letter describes the changes to the Entergy QAPM since the last annual submittal. The last annual submittal dated April 02, 2020, encompassed QAPM Revision 37. Since that date, there have been three updates incorporated to the QAPM. A synopsis of these revisions is provided in Enclosure 1. The 10 CFR 50.54(a)(3) and 10 CFR 71.106 evaluations are included under Attachment A. The Entergy QAPM Revision 40, which also reflects Revision 37, Revision 38, and Revision 39 is included under Attachment B.

In addition, Entergy is submitting the attached Indian Point Energy Center (IPEC) QAPM, Revision 3, effective February 07, 2021 in accordance with 10 CFR 50.54(a)(3) and 10 CFR 71.106 in Enclosure 2 of this letter.

Enclosure 2 to this letter contains the first annual update of the IPEC QAPM since the IPEC Quality Assurance program was separated from the consolidated Entergy QAPM for decommissioning. This enclosure describes the changes to the Entergy IPEC QAPM since the IPEC site specific QAPM, Revision 0 was issued on April 03, 2020. Three subsequent revisions were made to the IPEC QAPM in 2020. A synopsis of these revisions is provided in Enclosure 2.

The Entergy QAPM and Entergy IPEC QAPM continue to satisfy the requirements of 10 CFR 50 Appendix B and the Regulatory Guides and ANSI Standards referenced in the QAPM Table of Contents and QAPM Table 1. As such, it also meets the requirements of 10 CFR 72.140(d) for Independent Spent Fuel Storage Installations and 10 CFR 71.101(f) for Packaging and Transportation of Radioactive Material.

This letter contains no new regulatory commitments. Should you have any questions, please contact Mr. Joe P. Pennington, Manager – Corporate QA at (601) 368-5357.

Sincerely,



David Hahn 1 APR 21

DH/JPP/BH

- Enclosures 1. Changes to the Entergy Quality Assurance Program Manual since last annual update submitted April 02, 2020

Attachments to Enclosure 1:

A. QAPM Revisions 38, 39, and 40 10 CFR 50.54(a)(3) and 10 CFR 71.106 Evaluation Forms and Affected Pages

B. QAPM Revision 40 Complete Copy

2. Changes to the Entergy IPEC Quality Assurance Program Manual

Attachments to Enclosure 2:

A. IPEC QAPM Revisions 0, 01, 02, and 03 10 CFR 50.54(a)(3) and 10 CFR 71.106 Evaluation Forms and Affected Pages

B. IPEC QAPM Revision 03 Complete Copy

Reference: Entergy Operations, Inc. letter to U. S. Nuclear Regulatory Commission, "Annual Report for Quality Assurance Program Manual Changes Under 10 CFR 50.54(a)(3), 10 CFR 71.106, and 10 CFR 72.140(d) Notification of Application of Approved Appendix B to 10 CFR 72 subpart G," (ADAMS Accession No. ML20094J014), dated April 2, 2020

cc: NRC Region I Administrator
NRC Region III Administrator
NRC Region IV Administrator
NRC PM (ANO)
NRC PM (GGNS)
NRC PM (RBS)
NRC PM (WF3)
NRC PM (IPEC)
NRC PM (PAL)
NRC PM (BRP)
NRC Senior Resident Inspector (ANO)
NRC Senior Resident Inspector (GGNS)
NRC Senior Resident Inspector (RBS)
NRC Senior Resident Inspector (WF3)
NRC Senior Resident Inspector (IPEC)
NRC Senior Resident Inspector (PAL)

Enclosure 1

CNRO2021-00011

**Changes to the Entergy Quality Assurance Program Manual since last annual update
submitted April 02, 2020**

**Changes to the Entergy Quality Assurance Program Manual since last annual update
submitted April 02, 2020**

Synopsis of QAPM Revision Changes

QAPM Rev. 38

1. This change to the Entergy Quality Assurance Program Manual (QAPM) separated the Indian Point Energy Center (IPEC) QAPM from the Entergy Fleet QAPM. The separation of IPEC from the Entergy QAPM is in preparation for the decommissioning of the IPEC.

To support the implementation of ongoing quality assurance activities and the transition to a decommissioning facility, IPEC adopted the Entergy QAPM under the guidance provided in 10 CFR 50.54(a)(3) and established a site-specific IPEC QAPM using the Entergy QAPM as the basis. The IPEC QAPM contains the same requirements and commitments as the current Entergy QAPM. The changes made to support this transition and allow the adoption of the Entergy QAPM involved primarily administrative changes to reflect a site-specific QAPM. These changes were assessed using the guidance provided in 10 CFR 50.54(a)(3) and did not constitute a reduction in commitments to the previously approved quality assurance program. (Reference letter NL-20-024 (ML20113E817) to the NRC dated April 22, 2020).

2. The Entergy QAPM cover sheet was changed to reflect the removal of the IPEC Unit 1, Unit 2, and Unit 3 docket numbers from the cover page. The Energy QAPM revision number was updated on all pages to Revision 38.

QAPM Rev. 39

1. Entergy QAPM Revision 38, Change 1, allows a grace period not to exceed 25% for audit interval for supplier audits. This is a reduction in commitment from the previously approved QAPMs. The current requirement of a 90-day grace period was submitted and approved in the Entergy QAPM, Rev. 3, submitted via CNRO2000-00012 and accepted by the NRC, ADAMS Accession No.: ML003711648 and IPEC QAPM, Rev 0, submitted via NL-20-04 and accepted by the NRC. While the 25% grace period represents a reduction in commitment from the previously approved Entergy and IPEC QAPMs, the change has been previously evaluated and approved by the NRC, as documented in Southern Nuclear Company SER, approved June 17, 2005, ADAMS Accession No.: ML051570349.
2. Entergy QAPM Revision 38, Change 2, reduces the meeting frequency for the Safety Review Committee meeting from twice per year to once per year. This is a reduction in commitment from the previously approved QAPMs. Entergy is committed to ANSI N18.7-1976, section 4.3.2.2, defining the meeting frequency for the independent review body as no less than twice per year. Entergy never took exception to this requirement; thus, Entergy is committed to this requirement in Revision 0 of the Entergy QAPM, submitted via CNRO1998-00025 and accepted by the NRC, letter dated November 6, 1998; and IPEC QAPM, Rev 0, submitted via NL-20-04 and accepted by the NRC. While changing the SRC meeting frequency to once per year represents a reduction in commitment from the

previously approved Entergy and IPEC QAPMs, the change has been previously evaluated and approved by the NRC, as documented in Nuclear Management Company, LLC, (NMC) SER, dated January 13, 2005, ADAMS Accession No.: ML050210276. This SER removes the requirement for the SRC completely; however, Entergy will use this SER to reduce the frequency for the meeting of the Safety Review Committee (SRC) and the SRC will still meet once per year and perform reviews as specified by ANSI N18.7 -1976. The On-site Safety Review Committee and Nuclear Independent Oversight currently perform the reviews the Safety Review Committee performs, and these reviews will be used to supplement the reviews by the SRC when the meeting frequency is reduced.

These changes to the Entergy QAPM were issued in conjunction with the same changes to the IPEC QAPM. Entergy QAPM Revision 38, Change 1 and Change 2 were incorporated into Entergy QAPM Revision 39, effective July 16, 2020. IPEC QAPM Revision 1, Change 1 and Change 2 were incorporated into IPEC QAPM Revision 2, effective July 16, 2020.

QAPM Rev. 40

1. QAPM Rev. 39, Change 1, modifies the QAPM to exempt ASME Code Case N-752 LSS Class 2 and 3 structures, systems, and components (SSCs) from the requirements of the QAPM. This change has been submitted to the NRC for approval in letter OCAN112001 dated November 17, 2020. This change has not been implemented.
2. QAPM Rev. 39, Change 2, is an update to the Entergy nuclear corporate and site organizational structure which alters the site records management reporting relationship. The management position for site records management will no longer report off-site to the VP Regulatory Affairs, but instead will report to the site Vice President through the site Performance Improvement manager.
3. QAPM Rev. 39, Change 3, reflects organizational changes made within the Entergy Nuclear senior executive organization as allowed by 10 CFR 50.54(a)(3) (iii) and 10 CFR 50.54(a)(3) (vi). This organizational change eliminates the position Sr. Vice President (VP) Nuclear Operations, changes the reporting relationships for all three COO, Nuclear Operations positions from reporting to the Sr VP Nuclear Operations to reporting to the Executive VP, Nuclear Operations / CNO, creates a new position Senior Vice President, Corporate Services reporting to the CNO, and changes the reporting relationships for the following positions from reporting to the Sr. VP Nuclear Operations to reporting to the new position Sr. VP, Corporate Services: VP, Outage Services, VP, Operations Support, and VP, Regulatory Assurance.

These changes to the Entergy QAPM were issued in conjunction with the same changes to the IPEC QAPM. These changes were incorporated into Entergy QAPM revision 40, effective February 07, 2021 and the IPEC QAPM Revision 3, effective February 07, 2021.

Attachments:

- A. QAPM Revisions 38, 39, and 40 10 CFR 50.54(a)(3) and 10 CFR 71.106 Evaluation Forms and Affected Pages (67 pages)
- B. QAPM Revision 40 Complete Copy (55 pages)

Enclosure 1, Attachment A

CNRO2021-00011

**QAPM Revisions 38, 39, and 40 10 CFR 50.54(a)(3) and 10 CFR 71.106 Evaluation Forms
and Affected Pages**

(67 pages to follow)

QAPM Change Evaluation**NOTE**

The basis for the answers should be of sufficient depth and detail to support the conclusions reached and allow for independent review. Simply stating the change does not decrease the effectiveness without stating why is not acceptable.

Editorial corrections (i.e., spelling, punctuation, typographical or grammatical errors, and incorrect cross-references) are not considered changes and, therefore, a Quality Assurance Program Regulatory Review is not required. All boxes should be marked "N/A" and proceed to signature page of the evaluation form. If questions 4-8 do not apply to the change being reviewed, then the associated boxes should be marked "N/A". [10 CFR 50.54 (a)(3)]

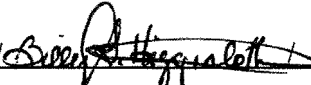
	YES, NO, or N/A
<p>1. Is this change an editorial change as defined in 10 CFR 50.54(a)(3) and 10 CFR 71.106? If yes, provide basis, mark remaining questions "N/A" and state "not a reduction in commitment." Proceed to approval page of attachment.</p> <p>Basis for Answer: These changes are not considered editorial as defined in 10 CFR 50.54(a)(3) and 10 CFR 71.106. This change separates the Indian Point Energy Center (IPEC) QAPM from the Entergy QAPM. It is an adoption of the current Entergy QAPM Revision 37 with necessary changes in nomenclature as needed to make it plant specific to IPEC. The IPEC QAPM will be issued as IPEC QAPM Revision 0.</p>	NO
<p>2. For any YES answer in the 10 CFR 50.54(a) QAPM Change Screening or for the QA-initiated change, does the proposed change represent a reduction in commitment or process(es) described or established in the approved QA Program?</p> <p>Basis for Answer: The change to the Entergy Quality Assurance Program Manual (QAPM) does not represent a reduction in commitment in that it separates the Indian Point Energy Center (IPEC) QAPM from the Entergy Fleet QAPM. The separation of IPEC from the Entergy QAPM is in preparation for the decommissioning of the IPEC. The IPEC QAPM Revision 0 is an adoption of the previously approved consolidated Entergy QAPM that was initially approved by the U.S. Nuclear Regulatory Commission (NRC) in the Safety Evaluation Report, dated November 6, 1998 and most recently as approved in the Safety Evaluation Report, dated December 28, 2012 and documented in Revision 24 of the Entergy QAPM. Since then, thirteen (13) revisions have been made to the Entergy QAPM primarily for organizational and responsibility changes. Those changes were validated not to be a reduction in commitment to the previously approved QAPM in accordance with 10 CFR 50.54(a)(3). One</p>	NO

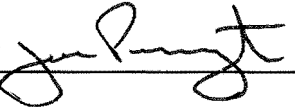
<p>(1) reduction in commitment to the previously approved QAPM was approved by the NRC, but it was limited to grout and was incorporated into Revision 31 of the QAPM. Therefore, these proposed changes are being submitted to the NRC for notification with the Fleet QAPM either during 2020 or 2021 based on the timing of the issuance of Revision 1 and the annual submittal to the NRC.</p>	
<p>3. If item 2 above is YES, is the proposed change limited to the use of a quality assurance alternative or exception approved by the NRC safety evaluation report (SER), for which the bases of the NRC approval are applicable to Entergy?</p> <p>If YES, explain how all of the NRC approval bases from the SER are incorporated or covered by the Entergy QA Program.</p> <p><u>This exemption is not allowed under 10 CFR 71.106 and cannot be used to reduce commitments under part 71.</u></p> <p>Basis for Answer: This change to the Entergy Quality Assurance Program Manual (QAPM) separates the Indian Point Energy Center (IPEC) QAPM from the Entergy QAPM. The separation of IPEC from the Entergy QAPM is in preparation for the decommissioning of the IPEC. The IPEC QAPM Revision 0 is an adoption of the approved Entergy QAPM to be plant specific for IPEC. This change does not include the use of a quality assurance alternative or exception previously approved by an NRC Safety Evaluation Report (SER).</p>	N/A
<p>4. Is the proposed change a change to a QA standard approved by the NRC which is more recent than the QA standard currently established in the QA Program?</p> <p>Basis for Answer: None of the proposed changes affect QA standards approved by the NRC other than name changes from Entergy to IPEC.</p>	N/A

	YES, NO, or N/A
<p>5. Is the proposed change a change involving the use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles?</p> <p>Basis for Answer: None of the proposed changes affect the use of generic organizational position titles.</p>	N/A
<p>6. Is the proposed change a change involving the use of generic organizational charts to indicate functional relationships, authorities, and responsibilities, or alternately, the use of descriptive text?</p> <p>Basis for Answer: None of the proposed changes include the use of generic organizational charts to indicate functional relationships, authorities, and responsibilities.</p>	N/A
<p>7. Is the proposed change an elimination of Quality Assurance Program information that duplicates language in quality assurance regulatory guides and quality assurance standards to which Entergy Nuclear (EN) is committed?</p> <p>Basis for Answer: None of the proposed changes include the elimination of Quality Assurance Program information that duplicates language in Quality Assurance Regulatory Guides and Quality Assurance Standards</p>	N/A
<p>8. Does the proposed change continue to ensure that persons and organizations performing Quality Assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations?</p> <p>Basis for Answer: There are no changes to the Quality Assurance functions.</p>	YES
<p>9. Is a change to the QAPM required? If YES, process change per EN-LI-113. If NO, distribute as indicated on the last page of this attachment.</p> <p>Basis for Answer: A revision to the Entergy QAPM is required to remove the IPEC Docket Numbers from the cover page and develop a Revision 0 of the IPEC QAPM and include IPEC's Docket Numbers on the IPEC QAPM.</p>	YES

QAPM CHANGE REVIEW RESULTS

- ☐ Change is editorial in accordance with 10 CFR 50.54(a)(3) and 10 CFR 71.106, thus, does not represent a reduction in commitment. The change can be implemented upon approval of parent change document. (Question 1 is YES)
- ☒ Does not represent a reduction of commitment, and can be implemented upon approval of parent change document. (Questions 4, 5, 6, 7, and 8 are YES or N/A)
- ☐ Represents a reduction of commitment with prior NRC approval. The safety evaluation issued by the NRC has been evaluated and it directly applies to the changes being proposed for EN. The change can be implemented upon approval of parent change document. (Question 3 is YES)
- ☐ Represents a reduction of commitment; however, the change has sufficient basis to demonstrate continued compliance with Appendix B and USAR commitments. Therefore, the proposed change should be submitted for NRC review/approval. (Questions 2 is YES and Question 3 is NO)
- ☐ Represents a reduction of commitment with insufficient basis to demonstrate continued compliance. Therefore, the activity should not be processed.

Billy L. Higginbotham /  02/24/2020
Preparer Date

Joe P. Pennington /  / 02/24/2020
Manager, QA Date

QA Site Supervisor Review:

 Applicable Site QA Supervisor Reviews Required
 (see attached sheets for documentation of reviews)
☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	IPEC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
RBS	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
WF3	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Site Review Due Date: 03/06/2020

Site Review Input:

Record references below. If there are none state **None**.

ANO: NONE	IPEC:
GGNS: NONE	PLP/BRP: NONE
RBS: NONE	
WF3: NONE	

Site QA Supervisor acknowledges completion of reviews below

 ANO ☐ GGNS ☐ RBS ☐ WF3 ☐
 IPEC ☒ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

Steven O'Brien

Site QA Supervisor



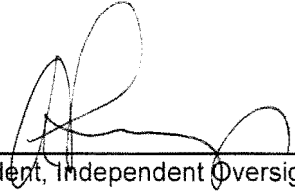
/ 3-5-2020

/ Date

CHANGE DISPOSITION

- ☒ Approved for implementation
☐ Disapproved
☐ Approved for submittal to the NRC

Approved by/Date: Oscar Limpias


Vice President, Independent Oversight

03/06/2020

Distribution: Original – Attach to Parent Document;
Copy – Quality Assurance



Entergy

Quality Assurance Program Manual

Arkansas Nuclear One (Units 1 & 2)
Docket Nos. 50-313 & 50-368
License Nos. DPR-51 & NPF-6
Docket No. 72-13
Docket No.: 71-0341

Grand Gulf Nuclear Station
Docket No. 50-416
License No. NPF-29
Docket No. 72-50
Docket No.: 71-0536

River Bend Station
Docket No. 50-458
License No. NPF-47
Docket No. 72-49
Docket No.: 71-0566

Waterford 3 Steam Electric Station
Docket No. 50-382
License No. NPF-38
Docket No. 72-75
Docket No.: 71-0604

Palisades Nuclear Power Plant
Docket No. 50-255
License No. DPR- 20
Docket No. 72-07
Docket No.: 71-0937

Big Rock Point Nuclear Plant-ISFSI
Docket No. 50-155
License No. DPR-6
Docket No. 72-43
Docket No.: 71-0937

~~Indian Point 1 Nuclear Power Plant~~
~~Docket No. 50-003~~
~~License No. DPR-05~~
~~Docket No. 72-51~~
~~Docket No.: 71-0240~~

~~Indian Point 2 Nuclear Power Plant~~
~~Docket No. 50-247~~
~~License No. DPR-26~~
~~Docket No. 72-51~~
~~Docket No.: 71-0240~~

~~Indian Point 3 Nuclear Power Plant~~
~~Docket No. 50-286~~
~~License No. DPR-64~~
~~Docket No. 72-51~~
~~Docket No.: 71-0240~~

QAPM Change Evaluation

NOTE

The basis for the answers should be of sufficient depth and detail to support the conclusions reached and allow for independent review. Simply stating the change does not decrease the effectiveness without stating why is not acceptable.

Editorial corrections (i.e., spelling, punctuation, typographical or grammatical errors, and incorrect cross-references) are not considered changes and, therefore, a Quality Assurance Program Regulatory Review is not required. All boxes should be marked "N/A" and proceed to signature page of the evaluation form. If questions 4-8 do not apply to the change being reviewed, then the associated boxes should be marked "N/A". [10 CFR 50.54 (a)(3)]

	YES, NO, or N/A
<p>1. Is this change an editorial change as defined in 10 CFR 50.54(a)(3) and 10 CFR 71.106? If yes, provide basis, mark remaining questions "N/A" and state "not a reduction in commitment." Proceed to approval page of attachment.</p> <p>Basis for Answer:</p>	No
<p>2. For any YES answer in the 10 CFR 50.54(a) QAPM Change Screening or for the QA-initiated change, does the proposed change represent a reduction in commitment or process(es) described or established in the approved QA Program?</p> <p>Basis for Answer: The change to the Entergy QAPM Revision 38 and IPEC QAPM Revision 1 to allow a grace period not to exceed 25% for audit interval for supplier audits is a reduction in commitment from the previously approved QAPMs. The current requirement of a 90-day grace period was submitted and approved in the Entergy QAPM, Rev. 3, submitted via CNRO2000-00012 and accepted by the NRC, ADAMS Accession No.: ML003711648 and IPEC QAPM, Rev 0, submitted via NL-20-04 and accepted by the NRC. While the 25% grace period represents a reduction in commitment from the previously approved Entergy and IPEC QAPMs, the change has been previously evaluated and approved by the NRC, as documented in Southern Nuclear Company SER, approved June 17, 2005, ADAMS Accession No.: ML051570349.</p>	Yes
<p>3. If item 2 above is YES, is the proposed change limited to the use of a quality assurance alternative or exception approved by the NRC safety evaluation report (SER), for which the bases of the NRC approval are applicable to Entergy?</p>	Yes

If YES, explain how all of the NRC approval bases from the SER are incorporated or covered by the Entergy QA Program.

This exemption is not allowed under 10 CFR 71.106 and cannot be used to reduce commitments under part 71.

Basis for Answer: As allowed by 10 CFR 50.54(a), the licensee may use a QA exception previously approved by the NRC in a safety evaluation, provided that the bases of the NRC approval are applicable to the licensee's facility. This change has been evaluated and approved in SER "SAFETY EVALUATION BY THE OFFICE OF NUCLEAR REACTOR REGULATION PROPOSED CHANGE TO THE QUALITY ASSURANCE PROGRAM COMMON SAFETY REVIEW BOARD CONDUCT OF OPERATIONS SOUTHERN NUCLEAR OPERATING COMPANY, INC. JOSEPH M. FARLEY NUCLEAR PLANT, UNITS 1 AND 2 EDWIN I. HATCH NUCLEAR PLANT, UNITS 1 AND 2 VOGTLE ELECTRIC GENERATING PLANT, UNITS 1 AND 2 DOCKET NOS. 50-348, 50-364, 50-321, 50-366, 50-424, AND 50-425," dated June 17, 2005, ADAMS Accession No.: ML051570349. Below is an evaluation of this SER as it relates to Entergy.

The SER approved the following reductions in commitments for Southern Nuclear Company (SNC):

- 1) Adoption of a standard conduct of operations for the Safety Review Board (SRB). The reduction in commitment was to have the SRB review the PRB performance instead of review reports and meeting minutes of the PRB. The evaluation stated that "Subjects requiring independent review by the independent review body are described in Section 4.3.4 of ANS N18.7-1976. Review of the reports and minutes of the onsite operating organization (Plant Review Board) is not an explicit requirement of Section 4.3.4. A performance-based review of the activities of the PRB is an acceptable alternative to review of documentation."

At Entergy, the Safety Review Committee (SRC) is the equivalent of the SNC SRB and the On-site Safety Review Committee (OSRC) is the equivalent of SNC PRB. The Entergy and IPEC QAPMs do not explicitly list review of reports and minutes of the OSRC by the SRC as a requirement. Per the evaluation, review of the OSRC reports is not an explicit requirement; therefore, Entergy will not make changes to its QAPMs to reflect this part of the SER.

- 2) Change 2 of the SER SNC proposes to adopt a standard list description of QA audit topics. SNC states that adoption of a standard description of audit topics would not reduce the scope or effectiveness of the audit program. SNC made this change to standardize audits topics between SNC's three nuclear plants. The evaluation states, in part, "Section 4.5 of ANSI N18.7-1976 specifies that a comprehensive system of planned

and documented audits shall be carried out to verify compliance with all aspects of the administrative controls and QA program...The list of audit topics contained in the Farley QA program description is consistent with the guidance of ANS N18.7-1976, Section 4.5, Audit Program.”

The Entergy and IPEC QAPMs and NMM procedure, EN-QV-109, Audit Process, complies with ANS N18.7 – 1976, Section 4.5 in that a list of required audit topics are identified. Therefore, no changes are required to the Entergy and IPEC QAPM to adopt this portion of the SER.

- 3) Change 3 of the SER proposes that SNC adopt a maximum 24-month audit interval, except where noted. The evaluation states, in part, “A similar change in maximum audit intervals, based on performance-based audit scheduling, has been previously approved by the NRC staff in U.S. NRC letter to Boston Edison Company, “Issuance of Amendment No. 168 to Facility Operating License No. DPR-35, Pilgrim Nuclear Power Station,” November 12, 1996.(Reference 6). The proposed implementation of a maximum 24-month interval for the specified audits is consistent with the guidance of AL 95-06 and is, therefore, acceptable.”

Entergy and IPEC QAPMs currently provides audit intervals of 24-month in accordance with Regulatory Guide 1.33 Revision 2, dated February 1978. Entergy was allowed to take exception to section C.4 of Reg Guide 1.33. Instead of meeting the requirements of this section, Entergy will perform audits at frequencies as discussed in QAPM Section C.2.a, which allows for performance-based auditing and performance of audits at indicated frequencies. Therefore, no changes are required to the Entergy and IPEC QA program to meet the intent of this SER.

- 4) Change 4 of the SER proposed standard criteria for extending audit intervals. Specifically,
- Audits shall be performed at the intervals designated herein for each audit area. Schedules shall be based on the month in which the audit starts.
 - Entergy and IPEC QAPM C.2.a currently states, “Audit frequencies will be implemented as required by the applicable Code of Federal Regulations, safety analysis report, and commitments by various correspondences to the NRC. Audits will be conducted at a frequency in accordance with either Section C.2.a.1 or Section C.2.a.2” of the QAPM. The QAPM does not explicitly discuss audit start date as it relates to scheduling. However, EN-QV-109, Audit Process, implements the QAPM requirements for scheduling and further defines

<p>how audit start dates are determined. Specifically, “Compliance to periodicity is achieved by employing the time between the previous first day of active auditing and the next first day of active auditing in the same calendar month for an audit. If any audit (Appendix B or non-Appendix B) is completed earlier than the scheduled 12 or 24-month period, then the date of early completion becomes the new start date for the next 12 or 24-month audit period. Thus, no changes are needed to the Entergy and IPEC QAPM to adopt this SER.</p> <ul style="list-style-type: none"> • A maximum extension not to exceed 25 percent of the audit interval shall be allowed. That is to say that, for audits on a 24-month frequency, the maximum time between specific audits shall not exceed 30 months. Likewise, audits on an annual (12 month) frequency shall not be extended beyond 15 months. <ul style="list-style-type: none"> ○ Entergy and IPEC QAPM currently employs a more conservative extension period of 90 days for internal audits. Since the approach is more conservative than what is in the SER, Entergy and IPEC will not implement this change in its QAPMs. • When an audit interval extension greater than one month is used, the next audit for that particular audit area will be scheduled from the original anniversary month rather than from the month of the extended audit. <ul style="list-style-type: none"> ○ Entergy and IPEC QAPM already implements this process for audits that are extended. The QAPMs currently state, “A grace period of 90 days may be applied to the 24-month frequency for internal audits. For activities deferred in accordance with the 90-day grace period, the next performance due date will be based on their originally scheduled date.” • Item B shall also apply to supplier audits and evaluations except that a total combined time interval for any three consecutive inspection or audit intervals should not exceed 3.25 times the specified inspection or audit interval. (Item B is the extension period for internal audits above) <ul style="list-style-type: none"> ○ Entergy and IPEC QAPM currently define the extension period for supplier audits as a 90-day grace period. For those audits that are deferred in accordance with the 90-day grace period, the next performance date will be based on their originally scheduled date. <p>Due to challenges imposed by the pandemic and being challenged to complete supplier audits due to travel restrictions, Entergy is adopting this less conservative approach for extending supplier audits to prevent the supplier from expiring prior to the audit being able to be</p>	
--	--

<p>performed. This will be a reduction in commitment from the currently approved QAPM but has been previously approved by the NRC in the referenced SER.</p> <p>The change to the Entergy and IPEC QAPMs in Table 1 N.2 is being changed to read, "This section requires that supplier audits be performed on a triennial basis. A grace period not to exceed 25% for audit interval may be applied to this activity. For activities deferred in accordance with the 25% grace period, the next performance date will be based on their originally scheduled date. A total combined time interval for any three consecutive inspection or audit intervals should not exceed 3.25 times the specified inspection or audit interval."</p> <p>This review ensures that once the changes are incorporated, the Entergy QAPM and the IPEC QAPM continue to comply with 10 CFR 50 App. B, ANSI N18.7 section 3.4, SRP section 17.3, NUREG-0800 and 10 CFR 50.54(a)(3)</p>	
<p>4. Is the proposed change a change to a QA standard approved by the NRC which is more recent than the QA standard currently established in the QA Program?</p> <p>Basis for Answer:</p>	N/A
<p>5. Is the proposed change a change involving the use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles?</p> <p>Basis for Answer:</p>	N/A
<p>6. Is the proposed change a change involving the use of generic organizational charts to indicate functional relationships, authorities, and responsibilities, or alternately, the use of descriptive text?</p> <p>Basis for Answer:</p>	N/A
<p>7. Is the proposed change an elimination of Quality Assurance Program information that duplicates language in quality assurance regulatory guides and quality assurance standards to which Entergy Nuclear (EN) is committed?</p> <p>Basis for Answer:</p>	N/A

<p>8. Does the proposed change continue to ensure that persons and organizations performing Quality Assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations?</p> <p>Basis for Answer: The change to QAPM Table 1 N.2 does not impact QA organizational functions and persons performing Quality Assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule.</p>	Yes
<p>9. Is a change to the QAPM required? If YES, process change per EN-LI-113. If NO, distribute as indicated on the last page of this attachment.</p> <p>Basis for Answer: The Entergy QAPM and IPEC QAPM need to be revised to allow a grace period not to exceed 25% for audit interval for the performance of supplier audits.</p>	Yes

QAPM CHANGE REVIEW RESULTS

- ☐ Change is editorial in accordance with 10 CFR 50.54(a)(3) and 10 CFR 71.106, thus, does not represent a reduction in commitment. The change can be implemented upon approval of parent change document. (Question 1 is YES)
- ☐ Does not represent a reduction of commitment, and can be implemented upon approval of parent change document. (Questions 4, 5, 6, 7, and 8 are YES or N/A)
- ☒ Represents a reduction of commitment with prior NRC approval. The safety evaluation issued by the NRC has been evaluated and it directly applies to the changes being proposed for EN. The change can be implemented upon approval of parent change document. (Question 3 is YES)
- ☐ Represents a reduction of commitment; however, the change has sufficient basis to demonstrate continued compliance with Appendix B and USAR commitments. Therefore, the proposed change should be submitted for NRC review/approval. (Questions 2 is YES and Question 3 is NO)
- ☐ Represents a reduction of commitment with insufficient basis to demonstrate continued compliance. Therefore, the activity should not be processed.

Alisha Johnson-Thomas
Preparer

Alisha Johnson-Thomas
Thomas

Digitally signed by Alisha
Johnson-Thomas
Date: 2020.07.13 12:58:07 -
05'00'

Joe Pennington
Manager, QA

Joe
Pennington

Digitally signed by Joe
Pennington
Date: 2020.07.13 13:33:25 -
05'00'

/ Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: _____

Site Review Input:

Record references below. If there are none state **None**.

ANO: None	IPEC:
GGNS:	PLP/BRP:
RBS:	
WF3:	

Site QA Supervisor acknowledges completion of reviews below

ANO ☒ GGNS ☐ RBS ☐ WF3 ☐
IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

John R.
Harrison

Digitally signed by John R. Harrison
DN: cn=John R. Harrison, c=US,
o=Nuclear Independent Oversight,
ou=NSO3,
email=jharr22@entergy.com
Reason: I am approving this document
Date: 2020.06.30 13:01:12 -0500

Site QA Supervisor

/

/

Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes <input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes <input type="checkbox"/> No
GGNS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes <input type="checkbox"/> No
RBS	<input type="checkbox"/> Yes <input type="checkbox"/> No		
WF3	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Site Review Due Date: _____

Site Review Input:

Record references below. If there are none state **None**.


ANO:	IPEC:
GGNS: None	PLP/BRP:
RBS:	
WF3:	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☒ RBS ☐ WF3 ☐
IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

Baogia Nguyen

 Digitally signed by Baogia Nguyen
Date: 2020.07.08 09:49:01 -05'00'

/

Site QA Supervisor

/

Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes <input type="checkbox"/> No	IPEC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes <input type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes <input type="checkbox"/> No
RBS	<input type="checkbox"/> Yes <input type="checkbox"/> No		
WF3	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Site Review Due Date: N/A

Site Review Input:

Record references below. If there are none state **None**.

ANO:	IPEC: None
GGNS:	PLP/BRP:
RBS:	
WF3:	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☐ WF3 ☐
 IPEC ☒ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

Steven A. O'Brien
 Digitally signed by Steven A. O'Brien
 Date: 2020.07.06 13:57:49 -04'00'

Site QA Supervisor

/ **7/6/2020**
 / Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: 7/13/2020

Site Review Input:


Record references below. If there are none state **None**.

ANO:	IPEC:
GGNS:	PLP/BRP: None
RBS:	
WF3:	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☐ WF3 ☐
IPEC ☐ PLP/BRP ☒

Site QA Supervisor acknowledgement (print & sign) /date

John R. Walker  / 7/13/2020
Site QA Supervisor / Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: 07/08/2020

Site Review Input:

Record references below. If there are none state **None**.

ANO:	IPEC:
GGNS:	PLP/BRP:
RBS: None	
WF3:	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☒ WF3 ☐
IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

John Jackson

Site QA Supervisor

/ 07/08/2020

/ Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: July 9, 2020

Site Review Input:

Record references below. If there are none state **None**.

ANO:	IPEC:
GGNS:	PLP/BRP:
RBS:	
WF3: None	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☐ WF3 ☒
 IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

John M. Solaski Digitally signed by John M. Solaski
 Date: 2020.07.08 08:44:36 -05'00'

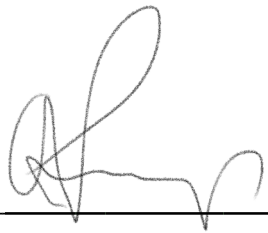
Site QA Supervisor

/
 Date

CHANGE DISPOSITION

- ☒ Approved for implementation
- ☐ Disapproved
- ☐ Approved for submittal to the NRC

Approved by/Date: Oscar Limpias
Vice President, Independent Oversight

 / 07/14/2020

Distribution: Original – Attach to Parent Document;
Copy – Quality Assurance

QAPM Change Evaluation**NOTE**

The basis for the answers should be of sufficient depth and detail to support the conclusions reached and allow for independent review. Simply stating the change does not decrease the effectiveness without stating why is not acceptable.

Editorial corrections (i.e., spelling, punctuation, typographical or grammatical errors, and incorrect cross-references) are not considered changes and, therefore, a Quality Assurance Program Regulatory Review is not required. All boxes should be marked "N/A" and proceed to signature page of the evaluation form. If questions 4-8 do not apply to the change being reviewed, then the associated boxes should be marked "N/A". [10 CFR 50.54 (a)(3)]

	YES, NO, or N/A
<p>1. Is this change an editorial change as defined in 10 CFR 50.54(a)(3) and 10 CFR 71.106? If yes, provide basis, mark remaining questions "N/A" and state "not a reduction in commitment." Proceed to approval page of attachment.</p> <p>Basis for Answer:</p>	No
<p>2. For any YES answer in the 10 CFR 50.54(a) QAPM Change Screening or for the QA-initiated change, does the proposed change represent a reduction in commitment or process(es) described or established in the approved QA Program?</p> <p>Basis for Answer: The change to the Entergy QAPM Revision 38 and IPEC QAPM Revision 1 to reduce the meeting frequency for the Safety Review Committee meeting from twice per year to once per year is a reduction in commitment from the previously approved QAPMs. Entergy is committed to ANSI N18.7-1976, section 4.3.2.2, defining the meeting frequency for the independent review body as no less than twice per year. Entergy never took exception to this requirement; thus, Entergy is committed to this requirement in Revision 0 of the Entergy QAPM, submitted via CNRO1998-00025 and accepted by the NRC, letter dated November 6, 1998; and IPEC QAPM, Rev 0, submitted via NL-20-04 and accepted by the NRC. While changing the SRC meeting frequency to once per year represents a reduction in commitment from the previously approved Entergy and IPEC QAPMs, the change has been previously evaluated and approved by the NRC, as documented in Nuclear Management Company, LLC, (NMC) SER, dated January 13, 2005, ADAMS Accession No.: ML050210276. This SER removes the requirement for the SRC completely; however, Entergy will use this SER to reduce the frequency for the meeting of the Safety Review Committee (SRC) and the SRC will still meet once per year and perform reviews as specified by ANSI N18.7 -1976. The On-site Safety</p>	Yes

<p>Review Committee and Nuclear Independent Oversight currently perform the reviews the Safety Review Committee performs, and these reviews will be used to supplement the reviews by the SRC when the meeting frequency is reduced.</p> <p>Detailed information for the adoption of this SER is described in Item 3 below.</p>	
<p>3. If item 2 above is YES, is the proposed change limited to the use of a quality assurance alternative or exception approved by the NRC safety evaluation report (SER), for which the bases of the NRC approval are applicable to Entergy?</p> <p>If YES, explain how all of the NRC approval bases from the SER are incorporated or covered by the Entergy QA Program.</p> <p><u>This exemption is not allowed under 10 CFR 71.106 and cannot be used to reduce commitments under part 71.</u></p> <p>Basis for Answer: As allowed by 10CFR 50.54(a), the licensee may use a QA exception previously approved by the NRC in a safety evaluation, provided that the bases of the NRC approval are applicable to the licensee's facility. This change has been evaluated and approved in SER "SAFETY EVALUATION BY THE OFFICE OF NUCLEAR REACTOR REGULATION QUALITY ASSURANCE INDEPENDENT REVIEW PROGRAM ALTERNATIVE DUANE ARNOLD ENERGY CENTER KEWAUNEE NUCLEAR POWER PLANT MONTICELLO NUCLEAR GENERATING PLANT PALISADES NUCLEAR PLANT POINT BEACH NUCLEAR PLANT, UNITS 1 AND 2 PRAIRIE ISLAND NUCLEAR GENERATING PLANT, UNITS 1 AND 2 DOCKET NOS. 50-331, 50-305, 50-263, 50-255, 50-266, 50-301, 50-282, and 50-306," dated January 13, 2005, ADAMS Accession No.: ML050210276.</p> <p>Below is an evaluation of this SER as it relates to Entergy and discussed in items 1-6.</p> <p>For purpose of this evaluation, the term OSRC (Off-site Safety Review Committee) in the SER is synonymous with SRC (Safety Review Committee) for Entergy. The term PORC (Plant On-Site Review Committee) in the SER is synonymous with the term OSRC (On-site Safety review Committee) for Entergy. The SER approved the following reduction in commitment for Nuclear Management Company, LLC.:</p> <p>1. PORC will perform the independent review of safety evaluations for changes in the facility as described in the final safety analysis report (FSAR) prior to implementation of the change. PORC will evaluate the effect on safety and if a technical specification (TS) change or NRC review is required. As applicable, the PORC review be will augmented</p>	<p>Yes</p>

by another review that is completed during the design process. The NMC QATR requires that design verification be performed by any competent individual(s) or group(s) other than those who performed the original design but who may be from the same organization. These reviews verify that changes in the facility do not result in a loss of adequate design or safety margins.

At Entergy, the On-site Safety Review Committee already reviews the 10 CFR 50.59 Safety Evaluations as outlined in EN-OM-119, On-site Safety Review Committee, section 5.0[6](b) (Reference ANSI N18.7 - 1976, 4.3.4(1)). Therefore, no additional changes are needed in the Entergy and IPEC QAPMs to implement this portion of the SER.

2. A qualified person, independent of the preparer, will review changes in the procedures as described in the FSAR prior to implementation of the change. The procedure review process includes an independent evaluation of changes to determine if a TS change or other NRC approval is required. The QATR will require that independent assessments of selected procedure changes be performed to verify that procedure reviews and revision controls are effectively implemented. Independent assessments are performed by the Nuclear Oversight Organization to verify effective implementation of procedures and processes.

Entergy has procedural requirements currently in place that require procedure reviews and revision controls to be effectively implemented (Ref. EN-AD-101, NMM Procedure Process and EN-AD-104, Site Procedure Control Process). Nuclear Independent Oversight (NIO) audits the procedure review and revision process during the Document Control Audit. NIO also audits procedures and their changes during the performance of functional area audits. Therefore, no additional changes are required for Entergy and IPEC QAPMs to implement this portion of the SER.

3. PORC will perform the independent review of TS changes and license amendments relating to nuclear safety prior to implementation, except in those cases where the change is identical to a previously reviewed proposed change.

The On-site Safety Review Committee currently performs reviews of TS changes and license amendments per EN-OM-119, section 5.0[6](3) (Ref QAPM Table 1, C.7 and C.8; ANSI N18.7-1976, 4.3.4(3)). Therefore, no additional changes to the Entergy and IPEC QAPMs are required to implement this portion of the SER.

4. PORC will perform the independent review of violations, deviations, and reportable events which require reporting to the NRC in writing within

24 hours. This review will include the results of investigations and recommendations resulting from such investigations to prevent or reduce the probability of recurrence of the event.

The Entergy On-site Safety Review Committee currently performs review of reports made in accordance with 10 CFR 50.73 per EN-OM-119, section 5.0[6](b)(6) (Ref QAPM Table 1, C.9 and C.23; ANSI N18.7-1976, 4.3.4(4)). Therefore, no additional changes to the Entergy and IPEC QAPMs are required to implement this portion of the SER.

5. PORC will perform an independent review of any matter related to nuclear safety that is requested by the Site Vice President, Site Director, Plant Manager, any PORC member, or by other NMC organizations.

Per EN-OM-119, section 5.0[6](b)(9), the Entergy On-site Safety Review committee currently performs review of, "Other items as identified by the GMPO, OSRC or the SRC and any other matter involving safe operations of the unit (which may include procedure related items) (Ref. QAPM Table 1, C.9; ANSI N18.7-1976, 4.3.4(5)). Therefore, no additional changes to the Entergy and IPEC QAPMs are required to implement this portion of the SER.

6. a. The licensee's review and assessment programs include review of significant proposed plant changes or tests, verification that reportable events are promptly investigated and corrected, and looking for trends which may not be apparent to the day-to-day observer. The Nuclear Oversight management and management responsible for the areas assessed, will review the results of all independent assessments.

Entergy currently has in place the Aggregate Performance Review Meeting (APRM) and the Department Performance Review Meeting (DPRM). The APRM is a meeting conducted by members of the site's leadership team to review performance monitoring inputs, assess performance, identify and monitor performance Aggregate Performance Issues (APIs), and conduct analysis and planning for actions to resolve performance APIs at the site level. The DPRM is a meeting conducted by members of a department to review performance monitoring inputs, assess performance, identify and monitor performance APIs, and conduct analysis and planning for actions to resolve performance APIs at the department level (Ref EN-LI-121, trending and Performance Review Process). Nuclear Independent Oversight also bins, aggregates, analyzes, and trends site and fleet functional area performance to identify and communicate actual or potential site or fleet issues (Ref EN-FAP-QV-204, Nuclear Independent Oversight Trending and Analysis).

The OSRC and SRC currently performs review of significant plant changes or tests and verification that reportable events are promptly investigated and corrected as outlined in EN-OM-119 and EN-QV-130, respectively.

Lastly, NIOS bins selected data streams in the functional area performance drivers to assist in identifying and analyzing emerging or adverse trends before performance declines or is self-revealed through a consequential result. Nuclear safety culture codes are also used to provide a picture of performance in the functional area. Therefore, no additional changes are required to the Entergy and IPEC QAPMs to implement this portion of the SER.

- b. PORC and the Nuclear Oversight Organization, collectively, will perform the independent review of the corrective actions for significant conditions adverse to quality. Provisions for independent assessments of the audit program are incorporated into the QATR to ensure the effectiveness of the oversight process.

The SRC performs and independent review of corrective actions for significant conditions adverse to quality per EN-QV-130, Att. 9.6. Additionally, Entergy NIOS performs the independent review of the corrective actions for significant conditions adverse to quality, as outlined in EN-QV-126, Oversight Follow-up Procedure. A review of significant conditions adverse to quality is also performed in each functional area audit. Independent assessments of the audit program are already incorporated into EN-QV-128, Assessments of Nuclear Independent Oversight. This function is performed by the Nuclear Industry Evaluation Program (NIEP) and provides a process for the performance of an independent audit of the adequacy/effectiveness of implementation of the QA Program. Therefore, no additional changes are required to the Entergy and IPEC QAPMs to implement this portion of the SER.

- c. NMC periodically performs independent reviews of matters involving the safe operation of its fleet of nuclear power plants, with a minimum of one such review being conducted for each generating site each year. The review addresses matters that plant and corporate management determine warrant special attention, such as plant programs, performance trends, employee concerns, or other matters related to safe plant operations. The review is performed by a team consisting of personnel with experience and competence in the activities being reviewed, but independent (from cost and schedule considerations) from the organizations responsible for those activities. The review is supplemented by outside consultants or organizations as necessary to ensure the team has the requisite expertise and competence. Results are documented and reported to

<p>responsible management.</p> <p>Since Entergy is not eliminating the SRC but reducing the meeting frequency from twice per year to once per year, Entergy will maintain an annual independent review per site. The review will continue to satisfy the requirements of an independent review. Therefore, Entergy will meet the intent of this portion of the SER. The only change to the Entergy and IPEC QAPMs is to change the meeting frequency from twice per year to once per year, which requires an exception to ANSI N18.7 -1976, section 4.3.2.2 (QAPM Table 1.C.5), to which Entergy is currently committed.</p> <p>Section 2.2 of the SER discusses organizational freedom as defined in ANSI N18.7-1976. Since the SRC will remain in place, the SRC will continue to maintain its independence when discharging its independent review responsibilities and continues to meet the intent of this portion of the SER.</p> <p>Conclusion: The practices described in the evaluation above have been found acceptable by the NRC in the referenced SER. The Entergy SRC, NIOS, and OSRC will continue to satisfy the requirements of independent review bodies as discussed above except the SRC will meet once per year per site instead of twice per year. The persons performing Quality Assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule. This review ensures that once the changes are incorporated, the Entergy QAPM and the IPEC QAPM continue to comply with 10 CFR 50 App. B, ANSI N18.7 section 3.4, SRP section 17.3, NUREG-0800 and 10 CFR 50.54(a)(3)</p>	
<p>4. Is the proposed change a change to a QA standard approved by the NRC which is more recent than the QA standard currently established in the QA Program?</p> <p>Basis for Answer:</p>	N/A
<p>5. Is the proposed change a change involving the use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles?</p> <p>Basis for Answer:</p>	N/A
<p>6. Is the proposed change a change involving the use of generic organizational charts to indicate functional relationships, authorities, and responsibilities, or alternately, the use of descriptive text?</p> <p>Basis for Answer:</p>	N/A

<p>7. Is the proposed change an elimination of Quality Assurance Program information that duplicates language in quality assurance regulatory guides and quality assurance standards to which Entergy Nuclear (EN) is committed?</p> <p>Basis for Answer:</p>	N/A
<p>8. Does the proposed change continue to ensure that persons and organizations performing Quality Assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations?</p> <p>Basis for Answer: The change to the Entergy and IPEC QAPMs Table 1 C.5 does not impact QA organizational functions and persons performing Quality Assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule.</p>	Yes
<p>9. Is a change to the QAPM required? If YES, process change per EN-LI-113. If NO, distribute as indicated on the last page of this attachment.</p> <p>Basis for Answer: The Entergy QAPM and IPEC QAPM need to be revised to reduce the required meeting frequency for the Safety Review Committee from twice per year to once per year.</p>	Yes

QAPM CHANGE REVIEW RESULTS

- ☐ Change is editorial in accordance with 10 CFR 50.54(a)(3) and 10 CFR 71.106, thus, does not represent a reduction in commitment. The change can be implemented upon approval of parent change document. (Question 1 is YES)
- ☐ Does not represent a reduction of commitment, and can be implemented upon approval of parent change document. (Questions 4, 5, 6, 7, and 8 are YES or N/A)
- ☒ Represents a reduction of commitment with prior NRC approval. The safety evaluation issued by the NRC has been evaluated and it directly applies to the changes being proposed for EN. The change can be implemented upon approval of parent change document. (Question 3 is YES)
- ☐ Represents a reduction of commitment; however, the change has sufficient basis to demonstrate continued compliance with Appendix B and USAR commitments. Therefore, the proposed change should be submitted for NRC review/approval. (Questions 2 is YES and Question 3 is NO)
- ☐ Represents a reduction of commitment with insufficient basis to demonstrate continued compliance. Therefore, the activity should not be processed.

Alisha Johnson-Thomas

Preparer

Alisha Johnson-Thomas

Digitally signed by Alisha Johnson-Thomas

Date: 2020.07.13 11:39:34 -05'00'

Joe Pennington

Manager, QA

Joe

Pennington

Digitally signed by Joe Pennington
Date: 2020.07.13 13:31:43 -05'00'

Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)☒ Yes ☐ No

ANO	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: 07/13/2020

Site Review Input:

Record references below. If there are none state **None**.

ANO: None	IPEC:
GGNS:	PLP/BRP:
RBS:	
WF3:	

Site QA Supervisor acknowledges completion of reviews below

ANO ☒ GGNS ☐ RBS ☐ WF3 ☐
 IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

John R.
Harrison

Digitally signed by John R. Harrison
 DN: cn=John R. Harrison, c=US,
 o=Nuclear Independent Oversight,
 ou=INSEO3,
 email=jharr22@entergy.com
 Reason: I am approving this document
 Date: 2020.07.10 10:00:35 -0500

Site QA Supervisor

/

/

Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes <input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes <input type="checkbox"/> No
GGNS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes <input type="checkbox"/> No
RBS	<input type="checkbox"/> Yes <input type="checkbox"/> No		
WF3	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Site Review Due Date: 07/13/2020

Site Review Input:

Record references below. If there are none state **None**.

ANO:	IPEC:
GGNS: None	PLP/BRP:
RBS:	
WF3:	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☒ RBS ☐ WF3 ☐
IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

Baogia Nguyen

 Digitally signed by Baogia Nguyen
Date: 2020.07.08 11:31:47 -05'00'

/

Site QA Supervisor

/

Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes <input type="checkbox"/> No	IPEC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes <input type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes <input type="checkbox"/> No
RBS	<input type="checkbox"/> Yes <input type="checkbox"/> No		
WF3	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Site Review Due Date: N/A

Site Review Input:

Record references below. If there are none state **None**.

ANO:	IPEC: None
GGNS:	PLP/BRP:
RBS:	
WF3:	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☐ WF3 ☐
IPEC ☒ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

Steven A. O'Brien

Digitally signed by Steven A. O'Brien
Date: 2020.07.14 02:17:46 -04'00'

/

7/14/2020

Site QA Supervisor

/

Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: 07/13/2020

Site Review Input:


Record references below. If there are none state **None**.

ANO:	IPEC:
GGNS:	PLP/BRP: None
RBS:	
WF3:	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☐ WF3 ☐
IPEC ☐ PLP/BRP ☒

Site QA Supervisor acknowledgement (print & sign) /date

John R. Walker  / 7/13/2020
Site QA Supervisor / Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: 07/13/2020

Site Review Input:

Record references below. If there are none state **None**.

ANO:	IPEC:
GGNS:	PLP/BRP:
RBS: None	
WF3:	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☒ WF3 ☐
IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

John Jackson

Site QA Supervisor



/

0708/2020

Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes <input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes <input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes <input type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes <input type="checkbox"/> No
RBS	<input type="checkbox"/> Yes <input type="checkbox"/> No		
WF3	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

Site Review Due Date: July 10, 2020

Site Review Input:

Record references below. If there are none state **None**.

ANO:	IPEC:
GGNS:	PLP/BRP:
RBS:	
WF3: None	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☐ WF3 ☒
IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

John M. Solaski Digitally signed by John M. Solaski
Date: 2020.07.08 18:57:04 -05'00'


Site QA Supervisor

/ Date

CHANGE DISPOSITION

- ☒ Approved for implementation
- ☐ Disapproved
- ☐ Approved for submittal to the NRC

Approved by/Date: Oscar Limpias
Vice President, Independent Oversight

 , 07/14/2020

Distribution: Original – Attach to Parent Document;
Copy – Quality Assurance



Entergy

Quality Assurance Program Manual

Arkansas Nuclear One (Units 1 & 2)
Docket Nos. 50-313 & 50-368
License Nos. DPR-51 & NPF-6
Docket No. 72-13
Docket No.: 71-0341

Big Rock Point Nuclear Plant-ISFSI
Docket No. 50-155
License No. DPR-6
Docket No. 72-43
Docket No.: 71-0937

Grand Gulf Nuclear Station
Docket No. 50-416
License No. NPF-29
Docket No. 72-50
Docket No.: 71-0536

River Bend Station
Docket No. 50-458
License No. NPF-47
Docket No. 72-49
Docket No.: 71-0566

Waterford 3 Steam Electric Station
Docket No. 50-382
License No. NPF-38
Docket No. 72-75
Docket No.: 71-0604

Palisades Nuclear Power Plant
Docket No. 50-255
License No. DPR- 20
Docket No. 72-07
Docket No.: 71-0937

Table 1
Regulatory Commitments

C. Regulatory Guide 1.33 Revision 2, dated February 1978

Clarification/Exception

- | | | |
|----|---|---|
| 1. | Section C.1 | Entergy will provide procedures for the guide's Appendix A activities as discussed. However, Entergy does not consider all activities listed to be "safety-related" (e.g., activities in 7.e). |
| 2. | Section C.4 | This section establishes minimum 2-year audit frequency for all safety related functions and recommends audit frequencies specific to Corrective Action, Facility Operation, and Staff Performance, Training, and Qualifications. Entergy will perform audits at frequencies as discussed in QAPM Section C.2.a instead of this section. |
| 3. | ANSI N18.7
Section 1 | Sentences 4 and 5 state, "However, applicable sections of this standard should be used as they apply to related activities. Activities included are: Design Changes, Purchasing, Fabricating..." With regard to radioactive material transportation activities, Entergy will only implement the requirements associated with those activities conducted in accordance with the applicable NRC Quality Assurance Program Approval for Radioactive Material Packages. |
| 4. | ANSI N18.7
Section 4.3.1 | The specific areas of experience described in this section are not applicable to the on-site safety review committee but the committee must be comprised of site operating or engineering supervisory personnel. Additionally, the off-site safety review committee need contain experience in only a majority of the areas. |
| 5. | ANSI N18.7
Sections 4.3.2.2
& 4.3.2.3 | Instead of the requirements of this section 4.3.2.2, the independent safety review committee will meet once per year. The statement that "no more than a minority of the quorum shall have line responsibility for the operation of the plant" in section 4.3.2.3 is not applicable to the on-site safety review committee. |

Table 1 Regulatory Commitments

N. Regulatory Guide 1.144 Revision 1, dated September 1980

Clarification/Exception

- | | |
|----------------------------------|--|
| 1. RG 1.144
Section C.3.a.(2) | This section is not applicable. |
| 2. RG 1.144
Section C.3.b.(2) | In addition to the requirements of this section, previously evaluated and approved active suppliers for which auditing is not the selected method of source verification should be evaluated concurrent with the award of a contract. Regardless of the evaluation results, active suppliers (except those excluded under C.3.b(1)) are source verified (audit, surveillance or inspection) within two years prior to award of a contract or have source verification performed. Inactive suppliers are evaluated prior to supplying items or services. An audit shall be conducted if required to determine the acceptability of procured items or services (i.e., acceptability cannot be determined by receipt inspection or another method allowable under 10 CFR 50 Appendix B, Criterion VII). |
| 3. RG 1.144
Section C.3.b.(2) | This section requires that supplier audits be performed on a triennial basis. A 90-day grace period not to exceed 25% for audit interval may be applied to this activity. For activities deferred in accordance with the 90-day 25% grace period, the next performance date will be based on their originally scheduled date. A total combined time interval for any three consecutive inspection or audit intervals should not exceed 3.25 times the specified inspection or audit interval. |
| 4. RG 1.144
Section C.3.b.(2) | Instead of the annual documented evaluation of suppliers discussed in this section, an ongoing evaluation of supplier performance is conducted which takes into account, where applicable, the other considerations of this section and paragraph of the Regulatory Guide. |

QAPM Change Evaluation

NOTE

The basis for the answers should be of sufficient depth and detail to support the conclusions reached and allow for independent review. Simply stating the change does not decrease the effectiveness without stating why is not acceptable.

Editorial corrections (i.e., spelling, punctuation, typographical or grammatical errors, and incorrect cross-references) are not considered changes and, therefore, a Quality Assurance Program Regulatory Review is not required. All boxes should be marked "N/A" and proceed to signature page of the evaluation form. If questions 4-8 do not apply to the change being reviewed, then the associated boxes should be marked "N/A". [10 CFR 50.54 (a)(3)]

	YES, NO, or N/A
<p>1. Is this change an editorial change as defined in 10 CFR 50.54(a)(3) and 10 CFR 71.106? If yes, provide basis, mark remaining questions "N/A" and state "not a reduction in commitment." Proceed to approval page of attachment.</p> <p>Basis for Answer:</p> <p>Organizational changes are being made within Entergy Nuclear and are not "Editorial" as defined 10 CFR 50.54(a)(3) and 10 CFR 71.106. No QAPM responsibilities were eliminated with this change.</p>	NO
<p>2. For any YES answer in the 10 CFR 50.54(a) QAPM Change Screening or for the QA-initiated change, does the proposed change represent a reduction in commitment or process(es) described or established in the approved QA Program?</p> <p>Basis for Answer:</p> <p>The consolidated Entergy QAPM was initially approved by the U.S. Nuclear Regulatory Commission (NRC) in the Safety Evaluation Report, dated November 6, 1998 and most recently as approved in the Safety Evaluation Report, dated December 28, 2012 (ML12347A140) and documented in Revision 24 of the Entergy QAPM. Since then, fifteen (15) revisions have been made to the Entergy QAPM primarily for organizational and responsibility changes. All but one of these changes were validated not to be reduction in commitments to the previously approved QAPM in accordance with 10 CFR 50.54(a)(3). The one (1) reduction in commitment to the previously approved QAPM was approved by the NRC in SER dated September 13, 2016 (ML16251A620), but it was limited to grout and was incorporated into Revision 31 of the QAPM.</p> <p>Prior to QAPM Revision 33 and 34, the site management position responsible for records management reported to onsite Regulatory Assurance/PI management positions. This change will return the site management position responsible for records management to reporting to the Site Vice President via the Site Performance Improvement (PI) Manager. The regulatory assurance manager</p>	NO

	YES, NO, or N/A
<p>reporting relationship is not changing, that position will continue to report to an offsite officer (Vice President of Regulatory Assurance).</p> <p>This revision does not alter any authority, independence, or organizational freedom previously established for organizations performing quality assurance functions as described in the QAPM.</p> <p>This change to the Entergy QAPM, Revision 39 is limited to organizational changes as allowed by 10 CFR 50.54(a)(3) (iii) which allows "The use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles" and 10 CFR 50.54(a)(3) (vi) which states "Organizational revisions that ensure that persons and organizations performing quality assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations" are not considered as reductions in commitment.</p>	
<p>3. If item 2 above is YES, is the proposed change limited to the use of a quality assurance alternative or exception approved by the NRC safety evaluation report (SER), for which the bases of the NRC approval are applicable to Entergy?</p> <p>If YES, explain how all of the NRC approval bases from the SER are incorporated or covered by the Entergy QA Program.</p> <p><u>This exemption is not allowed under 10 CFR 71.106 and cannot be used to reduce commitments under part 71.</u></p> <p>Basis for Answer:</p> <p>This change is limited to organizational changes as allowed by 10 CFR 50.54(a)(3) (iii) which allows "The use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles" and 10 CFR 50.54(a)(3) (vi) which states "Organizational revisions that ensure that persons and organizations performing quality assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations" are not considered as reductions in commitment.</p>	NO
<p>4. Is the proposed change a change to a QA standard approved by the NRC which is more recent than the QA standard currently established in the QA Program?</p> <p>Basis for Answer:</p> <p>This change is limited to organizational changes as allowed by 10 CFR 50.54(a)(3) (iii) and (vi). No changes are being made to existing Entergy QAPM QA standards.</p>	N/A

	YES, NO, or N/A
<p>5. Is the proposed change a change involving the use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles?</p> <p>Basis for Answer:</p> <p>This change is limited to organizational changes as allowed by 10 CFR 50.54(a)(3) (iii) which allows "The use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles" and (3) (vi) which states "Organizational revisions that ensure that persons and organizations performing quality assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations" are not considered as reductions in commitment.</p> <p>The generic position titles remain in lower case in keeping with the QAPM format and 10 CFR 50.54(a)(3) (iii).</p> <p>This change will alter the reporting relationship of the site management position responsible for records management as described in section A.2.b.4(d) of the Entergy Quality Assurance Program Manual. The site management position responsible for records management currently reports to an off-site executive position (Vice President of Regulatory Assurance). This change will have the site management position responsible for records management report to the Site Vice President via the Site Performance Improvement (PI) Manager.</p> <p>This revision does not alter any authority, independence, or organizational freedom previously established for organizations performing quality assurance functions as described in the QAPM.</p>	YES
<p>6. Is the proposed change a change involving the use of generic organizational charts to indicate functional relationships, authorities, and responsibilities, or alternately, the use of descriptive text?</p> <p>Basis for Answer:</p> <p>No, this change is limited to organizational changes as allowed by 10 CFR 50.54(a)(3) (iii) and (vi).</p>	N/A
<p>7. Is the proposed change an elimination of Quality Assurance Program information that duplicates language in quality assurance regulatory guides and quality assurance standards to which Entergy Nuclear (EN) is committed?</p> <p>Basis for Answer:</p> <p>No, this change is limited to organizational changes as allowed by 10 CFR 50.54(a)(3) (iii) and (vi).</p>	N/A

	YES, NO, or N/A
<p>8. Does the proposed change continue to ensure that persons and organizations performing Quality Assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations?</p> <p>Basis for Answer:</p> <p>These generic position titles remain in lower case in keeping with QAPM format and 10 CFR 50.54(a)(3) (iii) that allows "The use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles." Additionally, 10 CFR 50.54(a)(3) (vi) states "Organizational revisions that ensure that persons and organizations performing quality assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations" are not considered as reductions in commitment.</p> <p>This change has no impact on the authority, organizational freedom, or independence from cost or schedule of organizations performing quality assurance functions as they continue to have organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations as described in section A.2. a and A.2.b of the Entergy Quality Assurance Program Manual.</p>	YES
<p>9. Is a change to the QAPM required? If YES, process change per EN-LI-113. If NO, distribute as indicated on the last page of this attachment.</p> <p>Basis for Answer:</p> <p>Yes, this change will require revision of QAPM sections A.2.b.3 and A.2.b.4.(d) to reflect the change in reporting relationship of the site management position responsible for records management as described in section A.2.b.4(d) of the Entergy Quality Assurance Program Manual. The site management position responsible for records management currently reports to an off-site executive position (Vice President of Regulatory Assurance). This change will revise section A.2.b.3 to have the site management position responsible for records management report to the Site Vice President via the Site Performance Improvement (PI) Manager.</p> <p>This change will be incorporated in revision 40 of the Entergy QAPM.</p>	YES

Sheet Page 5 of 11

QAPM Rev 39 Change No. 2
LBDCR NO: 2020-09**QAPM CHANGE REVIEW RESULTS**

- ☐ Change is editorial in accordance with 10 CFR 50.54(a)(3) and 10 CFR 71.106, thus, does not represent a reduction in commitment. The change can be implemented upon approval of parent change document. (Question 1 is YES)
- ☒ Does not represent a reduction of commitment and can be implemented upon approval of parent change document. (Questions 4, 5, 6, 7, and 8 are YES or N/A)
- ☐ Represents a reduction of commitment with prior NRC approval. The safety evaluation issued by the NRC has been evaluated and it directly applies to the changes being proposed for EN. The change can be implemented upon approval of parent change document. (Question 3 is YES)
- ☐ Represents a reduction of commitment; however, the change has sufficient basis to demonstrate continued compliance with Appendix B and USAR commitments. Therefore, the proposed change should be submitted for NRC review/approval. (Questions 2 is YES and Question 3 is NO)
- ☐ Represents a reduction of commitment with insufficient basis to demonstrate continued compliance. Therefore, the activity should not be processed.

Billy L. Higginbotham Digitally signed by Billy L. Higginbotham
Date: 2021.01.11 12:51:23 -06'00' / January 11, 2021
Preparer Date

Joe P. Pennington Digitally signed by Joe Pennington
Date: 2021.01.11 16:27:36 -06'00' / January 11, 2021
Manager, QA Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
GGNS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: January 20, 2021

Site Review Input:


Record references below. If there are none state **None**.

ANO: NONE	IPEC: N/A
GGNS: N/A	PLP/BRP: N/A
RBS: N/A	
WF3: N/A	

Site QA Supervisor acknowledges completion of reviews below

ANO ☒ GGNS ☐ RBS ☐ WF3 ☐
IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date


Digitally signed by John R. Harrison
DN: cn=John R. Harrison, c=US,
o=Nuclear Independent Oversight,
ou=NSEQ3,
email=jharr22@entergy.com
Reason: I am approving this document
Date: 2021.01.19 08:52:47 -06'00'

John Harrison / January 19, 2021
 Site QA Supervisor / Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
GGNS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: January 20, 2021

Site Review Input:

Record references below. If there are none state **None**.

ANO: N/A	IPEC: N/A
GGNS: <i>NONE</i>	PLP/BRP: N/A
RBS: N/A	
WF3: N/A	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☒ RBS ☐ WF3 ☐
IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

Baogia Nguyen *Baogia Nguyen* / January 18 2021
Site QA Supervisor / Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
GGNS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: January 20, 2021

Site Review Input:

Record references below. If there are none state **None**.

ANO: N/A	IPEC: N/A
GGNS: N/A	PLP/BRP: None
RBS: N/A	
WF3: N/A	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☐ WF3 ☐
IPEC ☐ PLP/BRP ☒

Site QA Supervisor acknowledgement (print & sign) /date

John Walker

Site QA Supervisor

January 13, 2021

Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
GGNS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: January 20, 2021

Site Review Input:

Record references below. If there are none state **None**.

ANO: N/A	IPEC: N/A
GGNS: N/A	PLP/BRP: N/A
RBS: None	
WF3: N/A	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☒ WF3 ☐
 IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

John Jackson John Jackson Digitally signed by John Jackson
Date: 2021.01.12 14:02:33 -06'00' / January 12, 2021
 Site QA Supervisor / Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
GGNS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: January 20, 2021

Site Review Input:

Record references below. If there are none state **None**.

ANO: N/A	IPEC: N/A
GGNS: N/A	PLP/BRP: N/A
RBS: N/A	
WF3: None	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☐ WF3 ☒
IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

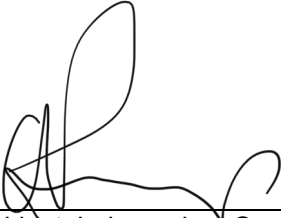
John Solaski John M. Solaski Digitally signed by John M. Solaski
Date: 2021.01.18 09:01:53 -06'00' / January 18, 2021
Site QA Supervisor / Date

Sheet Page 11 of 11

QAPM Rev 39 Change No. 2
LBDCR NO: 2020-09

CHANGE DISPOSITION

- ☒ Approved for implementation
- ☐ Disapproved
- ☐ Approved for submittal to the NRC

Approved by/Date: Oscar Limpias  / January 19, 2021
Vice President, Independent Oversight

Distribution: Original – Attach to Parent Document;
Copy – Quality Assurance



Entergy

Quality Assurance Program Manual

Arkansas Nuclear One (Units 1 & 2)
Docket Nos. 50-313 & 50-368
License Nos. DPR-51 & NPF-6
Docket No. 72-13
Docket No.: 71-0341

Big Rock Point Nuclear Plant-ISFSI
Docket No. 50-155
License No. DPR-6
Docket No. 72-43
Docket No.: 71-0937

Grand Gulf Nuclear Station
Docket No. 50-416
License No. NPF-29
Docket No. 72-50
Docket No.: 71-0536

River Bend Station
Docket No. 50-458
License No. NPF-47
Docket No. 72-49
Docket No.: 71-0566

Waterford 3 Steam Electric Station
Docket No. 50-382
License No. NPF-38
Docket No. 72-75
Docket No.: 71-0604

Palisades Nuclear Power Plant
Docket No. 50-255
License No. DPR- 20
Docket No. 72-07
Docket No.: 71-0937

A.2.b. (continued)

1. An executive management position for each nuclear site reports through the applicable executive position responsible for each designated operating group. This position is responsible for overall plant nuclear safety at each site, and is responsible for establishing the policies, goals, and objectives and the implementation of the QAPM at the respective site.
2. A management position responsible for overall plant operations assures the safe, reliable, and efficient operation of the plant within the constraints of applicable regulatory requirements and the operating license. Different aspects of these responsibilities may be fulfilled by separate managers. The onsite safety review committee reports to the management position responsible for plant operations.
3. A management position responsible for performance improvement, emergency planning, training, security, [corrective action program](#), and [records management](#)~~corrective action program~~. Different aspects of these responsibilities may be fulfilled by separate managers.
4. The following site positions report directly to an executive position offsite:
 - (a) A management position responsible for quality assurance who has overall authority and responsibility for establishing, controlling, and verifying the implementation and adequacy of the quality assurance program as described in this QAPM. This position has the authority and responsibility to escalate matters directly to the highest level nuclear executive officer when needed. This position reports to the executive responsible for nuclear oversight through the corporate management position responsible for nuclear oversight (offsite).
 - (b) A management position responsible for materials, purchasing, and contracts, procurement, services, receipt, storage, and issue of materials, parts, and components. Different aspects of these responsibilities may be fulfilled by separate managers. This site position reports to an executive (supply chain – offsite) who has a functional interface with the executive responsible for engineering and technical services.
 - (c) A management position responsible for engineering, the development and maintenance of engineering programs, plant design bases, policies, and procedures and for providing engineering services. This position reports to the executive responsible for engineering through the corporate management (offsite). Different aspects of these responsibilities (e.g., fuel design) may be fulfilled by separate managers.

A.2.b.4.(continued)

- (d) A management position responsible for regulatory assurance ~~and records management~~. This position is responsible for maintaining the licensing basis and oversight of licensing and regulatory programs and reports to the executive responsible for regulatory assurance through the corporate management (offsite).
- c. The on-site and off-site safety review committees independently review activities to provide additional assurance that the units are operated and maintained in accordance with the Operating License and applicable regulations that address nuclear safety.

3. Responsibility

- a. Entergy has the responsibility for the scope and implementation of an effective quality assurance program.
- b. Entergy may delegate all or part of the activities of planning, establishing, and implementing the quality assurance program to others, but retains the responsibility for the program's effectiveness.
- c. Entergy is responsible for ensuring that the applicable portion(s) of the quality assurance program is properly documented, approved, and implemented (people are trained and resources are available) before an activity within the scope of the QAPM is undertaken by Entergy or by others.
- d. Individual managers are to ensure that personnel working under their management cognizance are provided the necessary training and resources to accomplish their assigned tasks within the scope of the QAPM.
- e. Procedures that implement the QAPM are approved by the management responsible for the applicable quality function. These procedures are to reflect the QAPM and work is to be accomplished in accordance with them.

4. Authority

- a. When Entergy delegates responsibility for planning, establishing, or implementing any part of the overall QA program, sufficient authority to accomplish the assigned responsibilities is delegated.
- b. The management position responsible for quality assurance has the responsibility and the authority to stop unsatisfactory work and control further processing, delivery, installation, or use of non-conforming items or services. Cost and schedule considerations will not override safety considerations.

QAPM Change Evaluation**NOTE**

The basis for the answers should be of sufficient depth and detail to support the conclusions reached and allow for independent review. Simply stating the change does not decrease the effectiveness without stating why is not acceptable.

Editorial corrections (i.e., spelling, punctuation, typographical or grammatical errors, and incorrect cross-references) are not considered changes and, therefore, a Quality Assurance Program Regulatory Review is not required. All boxes should be marked "N/A" and proceed to signature page of the evaluation form. If questions 4-8 do not apply to the change being reviewed, then the associated boxes should be marked "N/A". [10 CFR 50.54 (a)(3)]

	YES, NO, or N/A
<p>1. Is this change an editorial change as defined in 10 CFR 50.54(a)(3) and 10 CFR 71.106? If yes, provide basis, mark remaining questions "N/A" and state "not a reduction in commitment." Proceed to approval page of attachment.</p> <p>Basis for Answer:</p> <p>Organizational changes are being made within the Entergy Nuclear senior executive organization which are not "Editorial" as defined 10 CFR 50.54(a)(3) and 10 CFR 71.106. No QAPM responsibilities were eliminated with this change.</p>	NO
<p>2. For any YES answer in the 10 CFR 50.54(a) QAPM Change Screening or for the QA-initiated change, does the proposed change represent a reduction in commitment or process(es) described or established in the approved QA Program?</p> <p>Basis for Answer:</p> <p>The consolidated Entergy QAPM was initially approved by the U.S. Nuclear Regulatory Commission (NRC) in the Safety Evaluation Report, dated November 6, 1998 and most recently as approved in the Safety Evaluation Report, dated December 28, 2012 (ML12347A140) and documented in Revision 24 of the Entergy QAPM. Since then, fifteen (15) revisions have been made to the Entergy QAPM primarily for organizational and responsibility changes. All but one of these changes were validated not to be reduction in commitments to the previously approved QAPM in accordance with 10 CFR 50.54(a)(3). The one (1) reduction in commitment to the previously approved QAPM was approved by the NRC in SER dated September 13, 2016 (ML16251A620), but it was limited to grout and was incorporated into Revision 31 of the QAPM.</p> <p>This change to the Entergy QAPM, Revision 39 is limited to organizational changes</p>	NO

	YES, NO, or N/A
<p>as allowed by 10 CFR 50.54(a)(3) (iii) which allows "The use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles" and 10 CFR 50.54(a)(3) (vi) which states "Organizational revisions that ensure that persons and organizations performing quality assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations" are not considered as reductions in commitment.</p> <p>This organizational change will eliminate the position Sr. Vice President (VP) Nuclear Operations, change the reporting relationships for all three COO, Nuclear Operations positions from reporting to the Sr VP Nuclear Operations to reporting to the Executive VP, Nuclear Operations / CNO, create a new position Senior Vice President, Nuclear Corporate Services reporting to the CNO, and change the reporting relationships for the following positions from reporting to the Sr. VP Nuclear Operations to reporting to the new position Sr. VP, Nuclear Corporate Services: VP, Outage Services, VP, Operations Support, and VP, Regulatory Assurance.</p> <p>This revision does not alter any authority, independence, or organizational freedom previously established for organizations performing quality assurance functions as described in the QAPM.</p>	
<p>3. If item 2 above is YES, is the proposed change limited to the use of a quality assurance alternative or exception approved by the NRC safety evaluation report (SER), for which the bases of the NRC approval are applicable to Entergy?</p> <p>If YES, explain how all of the NRC approval bases from the SER are incorporated or covered by the Entergy QA Program.</p> <p><u>This exemption is not allowed under 10 CFR 71.106 and cannot be used to reduce commitments under part 71.</u></p> <p>Basis for Answer:</p> <p>This change is limited to the Entergy Nuclear senior executive organizational changes as allowed by 10 CFR 50.54(a)(3) (iii) and 10 CFR 50.54(a)(3) (vi).</p>	NO
<p>4. Is the proposed change a change to a QA standard approved by the NRC which is more recent than the QA standard currently established in the QA Program?</p> <p>Basis for Answer:</p> <p>This change is limited to organizational changes as allowed by 10 CFR 50.54(a)(3) (iii) and (vi). No changes are being made to existing Entergy QAPM QA standards.</p>	N/A

	YES, NO, or N/A
<p>5. Is the proposed change a change involving the use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles?</p> <p>Basis for Answer:</p> <p>This change is limited to organizational changes as allowed by 10 CFR 50.54(a)(3) (iii) which allows "The use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles" and 10 CFR 50.54 (a)(3) (vi) which states "Organizational revisions that ensure that persons and organizations performing quality assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations" are not considered as reductions in commitment.</p> <p>The generic position titles remain in lower case in keeping with the QAPM format and 10 CFR 50.54(a)(3) (iii).</p> <p>This change will eliminate the position Sr. Vice President (VP) Nuclear Operations, change the reporting relationships for all three COO, Nuclear Operations positions from reporting to the Sr VP Nuclear Operations to reporting to the Executive VP, Nuclear Operations / CNO, create a new position Sr VP, Nuclear Corporate Services reporting to the CNO, and change the reporting relationships for the following positions from reporting to the Sr VP Nuclear Operations to reporting to the new position Sr VP, Nuclear Corporate Services: VP, Outage Services, VP, Operations Support, and VP, Regulatory Assurance.</p> <p>This revision does not alter any authority, independence, or organizational freedom previously established for organizations performing quality assurance functions as described in the QAPM.</p>	YES
<p>6. Is the proposed change a change involving the use of generic organizational charts to indicate functional relationships, authorities, and responsibilities, or alternately, the use of descriptive text?</p> <p>Basis for Answer:</p> <p>This change is limited to organizational changes as allowed by 10 CFR 50.54(a) (3) (iii) and (vi).</p>	N/A
<p>7. Is the proposed change an elimination of Quality Assurance Program information that duplicates language in quality assurance regulatory guides and quality assurance standards to which Entergy Nuclear (EN) is committed?</p> <p>Basis for Answer:</p>	N/A

	YES, NO, or N/A
This change is limited to organizational changes as allowed by 10 CFR 50.54(a)(3) (iii) and (vi).	
<p>8. Does the proposed change continue to ensure that persons and organizations performing Quality Assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations?</p> <p>Basis for Answer:</p> <p>These generic position titles remain in lower case in keeping with QAPM format and 10 CFR 50.54(a)(3) (iii) that allows "The use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles." Additionally, 10 CFR 50.54(a)(3) (vi) states "Organizational revisions that ensure that persons and organizations performing quality assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations" are not considered as reductions in commitment.</p> <p>This change has no impact on the authority, organizational freedom, or independence from cost or schedule of organizations performing quality assurance functions as they continue to have organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations as described in section A.2. a and A.2.b of the Entergy Quality Assurance Program Manual.</p>	YES
<p>9. Is a change to the QAPM required? If YES, process change per EN-LI-113. If NO, distribute as indicated on the last page of this attachment.</p> <p>Basis for Answer:</p> <p>Yes, this change will require revision of QAPM sections A.2.a.3 and A.2.a.4. to reflect the elimination of the position Sr. Vice President (VP) Nuclear Operations, change the reporting relationships for all three COO, Nuclear Operations positions from reporting to the Sr VP Nuclear Operations to reporting to the Executive VP, Nuclear Operations / CNO, create a new position Sr VP, Nuclear Corporate Services reporting to the CNO. This will also change the reporting relationships for the following positions from reporting to the Sr VP Nuclear Operations to reporting to the new position Sr VP, Nuclear Corporate Services: VP, Outage Services, VP, Operations Support, and VP, Regulatory Assurance.</p> <p>This change will be incorporated in revision 40 of the Entergy QAPM.</p>	YES

QAPM CHANGE REVIEW RESULTS

- [] Change is editorial in accordance with 10 CFR 50.54(a)(3) and 10 CFR 71.106, thus, does not represent a reduction in commitment. The change can be implemented upon approval of parent change document. (Question 1 is YES)
- [X] Does not represent a reduction of commitment and can be implemented upon approval of parent change document. (Questions 4, 5, 6, 7, and 8 are YES or N/A)
- [] Represents a reduction of commitment with prior NRC approval. The safety evaluation issued by the NRC has been evaluated and it directly applies to the changes being proposed for EN. The change can be implemented upon approval of parent change document. (Question 3 is YES)
- [] Represents a reduction of commitment; however, the change has sufficient basis to demonstrate continued compliance with Appendix B and USAR commitments. Therefore, the proposed change should be submitted for NRC review/approval. (Questions 2 is YES and Question 3 is NO)
- [] Represents a reduction of commitment with insufficient basis to demonstrate continued compliance. Therefore, the activity should not be processed.

Billy L. Higginbotham Billy L. Higginbotham Digitally signed by Billy L. Higginbotham
Preparer Date: 2021.01.11 14:41:11 -06'00' / January 11, 2021 Date

Joe P. Pennington Joe Pennington Digitally signed by Joe Pennington
Manager, QA Date: 2021.01.11 16:30:17 -06'00' / January 11, 2021 Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
GGNS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: January 20, 2021

Site Review Input:


Record references below. If there are none state **None**.

ANO: NONE	IPEC: N/A
GGNS: N/A	PLP/BRP: N/A
RBS: N/A	
WF3: N/A	

Site QA Supervisor acknowledges completion of reviews below

ANO ☒ GGNS ☐ RBS ☐ WF3 ☐
IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date


Digitally signed by John R. Harrison
DN: cn=John R. Harrison, c=US,
o=Nuclear Independent Oversight,
ou=NSEQ3,
email=jharr22@entergy.com
Reason: I am approving this document
Date: 2021.01.19 08:54:26 -0600

John Harrison / January 19, 2021
 Site QA Supervisor / Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
GGNS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: January 20, 2021

Site Review Input:

Record references below. If there are none state **None**.

ANO: N/A	IPEC: N/A
GGNS: <i>NONE</i>	PLP/BRP: N/A
RBS: N/A	
WF3: N/A	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☒ RBS ☐ WF3 ☐
IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

Baogia Nguyen

Site QA Supervisor

Baogia Nguyen

January 18, 2021

Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
GGNS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: January 20, 2021

Site Review Input:

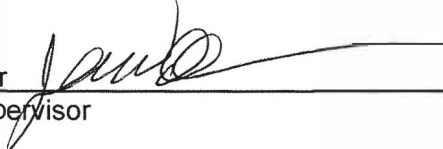
Record references below. If there are none state **None**.

ANO: N/A	IPEC: N/A
GGNS: N/A	PLP/BRP: <i>None</i>
RBS: N/A	
WF3: N/A	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☐ WF3 ☐
IPEC ☐ PLP/BRP ☒

Site QA Supervisor acknowledgement (print & sign) /date

John Walker  / January 13 2021
Site QA Supervisor / Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
GGNS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: January 20, 2021

Site Review Input:

Record references below. If there are none state **None**.

ANO: N/A	IPEC: N/A
GGNS: N/A	PLP/BRP: N/A
RBS: None	
WF3: N/A	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☒ WF3 ☐
 IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

John Jackson John Jackson Digitally signed by John Jackson
Date: 2021.01.12 14:04:26 -06'00' / January 12, 2021
 Site QA Supervisor / Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
GGNS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: January 20, 2021

Site Review Input:

Record references below. If there are none state **None**.

ANO: N/A	IPEC: N/A
GGNS: N/A	PLP/BRP: N/A
RBS: N/A	
WF3: None	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☐ WF3 ☒
IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

John Solaski John M. Solaski Digitally signed by John M. Solaski
Date: 2021.01.18 09:04:48 -06'00' / January 18, 2021
Site QA Supervisor / Date

CHANGE DISPOSITION

- ☒ Approved for implementation
- ☐ Disapproved
- ☐ Approved for submittal to the NRC

Approved by/Date: Oscar Limpias / January 19, 2021
Vice President, Independent Oversight

Distribution: Original – Attach to Parent Document;
Copy – Quality Assurance

A.2. (continued)**a. Corporate Organization**

1. The Entergy Corporation chief executive officer (CEO) is responsible for overall corporate policy and provides executive direction and guidance for the corporation as well as promulgates corporate policy through the Company's senior management staff. Responsibility for developing, implementing, and verifying execution of the Quality Assurance Program is delegated to the chief nuclear officer, the highest level nuclear executive, and authority for developing and verifying execution of the program to the executive responsible for nuclear oversight.
2. The chief nuclear officer, the highest level nuclear executive officer, is responsible for providing top-level direction for the safe and reliable operation of Entergy's nuclear sites. The highest level nuclear executive officer provides guidance with regards to company quality assurance policy. This position is responsible for providing engineering services, nuclear safety, and operations support. Supply chain and information technology are no longer a functional area exclusively within the nuclear organizational structure. However, the oversight and governance of these functional areas remain within the nuclear organization through this executive position that is responsible for nuclear operations. The off-site safety review committee reports to this executive.
3. The following executives report to the highest level nuclear executive officer and provide governance and oversight in regards to implementing company quality assurance policy:
 - (a) The chief operating officers, the executives responsible for nuclear operations, are responsible for implementing quality assurance policies, goals, and objectives and the implementation of all activities associated with the safe and reliable operation of Entergy's nuclear sites.
 - (a)(b) The senior vice president responsible for ~~nuclear operations~~nuclear corporate services is responsible for ~~the implementation of all activities associated with the safe and reliable operation of Entergy's nuclear sites. This position is also responsible for~~ providing nuclear safety, operations support, outage services, regulatory assurance and implementing quality assurance policies, goals, and objectives of Entergy's corporate support activities.
 - (b)(c) The executive responsible for engineering and technical services is responsible for providing engineering services, project management services and implementing major projects and modifications including implementing quality assurance policies, goals, and objectives.



QUALITY ASSURANCE PROGRAM MANUAL

(e)(d) The executive responsible for oversight establishes the policies, goals, and objectives of the quality assurance policy and provides guidance and interpretation for implementing the company quality assurance policy and is responsible for governance and

A.2.a.3.(d) (continued)

implementation of the quality assurance program in accordance with regulatory requirements. Independent oversight groups report to this executive.

~~**A.2.a.3.(c)**~~ (continued)

(1) The following management positions report to this executive:

- A management position that is responsible for nuclear oversight activities and is independent of production. This position provides overall direction for the implementation of the quality assurance program.
- A management position that is responsible for oversight and governance of the QAPM. This position has authority and responsibility for establishing, controlling, and verifying the implementation and adequacy of the quality assurance program as described in this QAPM including activities related to vendor quality. This position has the authority for Stop Work and responsibility to escalate matters directly to the highest level nuclear executive officer when needed.

4. The following executives report to the senior vice president responsible for ~~nuclear operations~~nuclear corporate services and provide governance and oversight in regards to implementing company quality assurance policy:

~~(a) The chief operating officers, the executives responsible for nuclear operations, are responsible for implementing quality assurance policies, goals, and objectives and the implementation of all activities associated with the safe and reliable operation of Entergy's nuclear sites.~~

~~(b)~~(a) The executive responsible for operations support is responsible for implementing quality assurance policies, goals, and objectives of Entergy's corporate support activities.

~~(c)~~(b) The executive responsible for production and outage services is responsible for providing outage services and implementing quality assurance policies, goals, and objectives of Entergy's corporate support activities.

~~(d)~~(c) The executive responsible for regulatory assurance is responsible for regulatory interfaces, licensing activities, corporate nuclear security, corporate emergency planning and implementing quality assurance policies, goals, and objectives.

b. Site Organization

Enclosure 1, Attachment B

CNRO2021-00011

QAPM Revision 40 Complete Copy

(55 pages to follow)



Entergy

Quality Assurance Program Manual

Arkansas Nuclear One (Units 1 & 2)
Docket Nos. 50-313 & 50-368
License Nos. DPR-51 & NPF-6
Docket No. 72-13
Docket No.: 71-0341

Big Rock Point Nuclear Plant-ISFSI
Docket No. 50-155
License No. DPR-6
Docket No. 72-43
Docket No.: 71-0937

Grand Gulf Nuclear Station
Docket No. 50-416
License No. NPF-29
Docket No. 72-50
Docket No.: 71-0536

River Bend Station
Docket No. 50-458
License No. NPF-47
Docket No. 72-49
Docket No.: 71-0566

Waterford 3 Steam Electric Station
Docket No. 50-382
License No. NPF-38
Docket No. 72-75
Docket No.: 71-0604

Palisades Nuclear Power Plant
Docket No. 50-255
License No. DPR- 20
Docket No. 72-07
Docket No.: 71-0937



POLICY STATEMENT

Entergy Operations, Inc. (EOI) and Entergy Nuclear Operations, Inc. (ENOI) (hereafter referred to collectively as Entergy) shall maintain and operate nuclear plants in a manner that will ensure the health and safety of the public and workers. Facilities shall be operated in compliance with the requirements of the Code of Federal Regulations, the applicable Nuclear Regulatory Commission (NRC) Facility Operating Licenses, and applicable laws and regulations of the state and local governments.

The Quality Assurance Program (QAP) described herein and associated implementing documents provide for control of activities that affect the quality of safety-related nuclear plant structures, systems, and components. The QAP is also applied to certain quality-related equipment and activities that are not safety-related, but support safe plant operations, or where other regulatory or industry guidance establishes program requirements.

The Quality Assurance Program Manual (QAPM) is the top-level policy document that establishes the manner in which quality is to be achieved and presents our overall philosophy regarding achievement and assurance of quality. Implementing documents assign more detailed responsibilities and requirements and define the organizational interfaces involved in conducting activities within the scope of the QAPM. Compliance with the QAPM and implementing documents is mandatory for personnel directly or indirectly associated with implementation of the QAP.

Responsibility for developing, implementing, and verifying execution of the Quality Assurance Program is delegated to the chief nuclear officer (highest level nuclear executive) and authority for developing and verifying execution of the program to the executive responsible for oversight.

TABLE OF CONTENTS

<u>SECTION</u>	<u>PAGE</u>
A. MANAGEMENT	
1. Methodology	1
2. Organization	1
3. Responsibility	5
4. Authority	5
5. Personnel Training and Qualification	6
6. Corrective Action	6
7. Regulatory Commitments	7
B. PERFORMANCE/VERIFICATION	
1. Methodology	7
2. Design Control	8
3. Design Verification	9
4. Procurement Control	10
5. Procurement Verification	11
6. Identification and Control of Items	11
7. Handling, Storage, and Shipping	11
8. Test Control	12
9. Measuring and Test Equipment Control	13
10. Inspection, Test, and Operating Status	14
11. Special Process Control	14
12. Inspection	15

TABLE OF CONTENTS

<u>SECTION</u>	<u>PAGE</u>
B. PERFORMANCE/VERIFICATION (continued)	
13. Corrective Action	15
14. Document Control	16
15. Records	16
C. AUDIT	
1. Methodology	17
2. Performance	17
D. INDEPENDENT SAFETY REVIEW	
1. Description	20
Table 1- Regulatory Commitments	
A. Regulatory Guide 1.8 Revision 1, dated September 1975 “Personnel Qualification and Training”	21
B. Regulatory Guide 1.30 , dated August 1972 “Quality Assurance Requirements for the Installation, Inspection, and Testing of Instrumentation and Electric Equipment”	23
C. Regulatory Guide 1.33 Revision 2, dated February 1978 “Quality Assurance Program Requirements”	24
D. Regulatory Guide 1.37 , dated March 1973 “Quality Assurance Requirements for Cleaning of Fluid Systems and Associated Components of Water-Cooled Nuclear Power Plants”	28
E. Regulatory Guide 1.38 Revision 2, dated May 1977 “Quality Assurance Requirements for Packaging, Shipping, Receiving, Storage and Handling of Items for Water-Cooled Nuclear Power Plants”	29
F. Regulatory Guide 1.39 Revision 2, dated September 1977 “Housekeeping Requirements for Water-Cooled Nuclear Power Plants”	34

TABLE OF CONTENTS

<u>SECTION</u>	<u>PAGE</u>
Table 1- Regulatory Commitments (continued)	
G. Regulatory Guide 1.58 Revision 1, dated September 1980 “Qualifications of Nuclear Power Plant Inspection, Examination, and Testing Personnel”	35
H. Regulatory Guide 1.64 Revision 2, dated June 1976 “Quality Assurance Requirements for the Design of Nuclear Power Plants”	36
I. Regulatory Guide 1.74 dated February 1974 “Quality Assurance Terms and Definitions”	37
J. Regulatory Guide 1.88 Revision 2, dated October 1976 “Collection, Storage and Maintenance of Nuclear Power Plant Quality Assurance Records”	38
K. Regulatory Guide 1.94 Revision 1, dated April 1976 “Quality Assurance Requirements for Installation, Inspection and Testing of Structural Steel during the Construction Phase of Nuclear Power Plants”	40
L. Regulatory Guide 1.116 Revision 0-R, dated June 1976 “Quality Assurance Requirements for Installation, Inspection and Testing of Mechanical Equipment and Systems”	43
M. Regulatory Guide 1.123 Revision 1, dated July 1977 “Quality Assurance Requirements for control of Procurement of Items and Services for Nuclear Power Plants”	44
N. Regulatory Guide 1.144 Revision 1, dated September 1980 “Auditing of Quality Assurance Programs for Nuclear Power Plants”	47
O. Regulatory Guide 1.146 Revision 0, dated August 1980 “Qualification of Quality Assurance Program Audit Personnel for Nuclear Power Plants”	50

A. MANAGEMENT**1. Methodology**

- a. The Quality Assurance Program Manual (QAPM) provides a consolidated overview of the quality program controls which govern the operation and maintenance of Entergy's (Entergy Operations, Inc.'s (EOI) and Entergy Nuclear Operations, Inc. (ENOI) quality related items and activities. The QAPM describes the quality assurance organizational structure, functional responsibilities, levels of authority, and interfaces.
- b. The requirements and commitments contained in the QAPM are mandatory and must be implemented, enforced, and adhered to by all individuals and organizations. Employees are encouraged to actively participate in the continued development of the QAPM as well as its implementation. Changes should be promptly communicated when identified.
- c. The QAPM applies to all activities associated with structures, systems, and components that are safety related or controlled by 10 CFR 72. The QAPM also applies to transportation packages controlled by 10 CFR 71. The methods of implementation of the requirements of the QAPM are commensurate with the item's or activity's importance to safety. The applicability of the requirements of the QAPM to other items and activities is determined on a case-by-case basis. The QAPM implements 10 CFR 50 Appendix B, 10 CFR 71 Subpart H, and 10 CFR 72 Subpart G.
- d. The QAPM is implemented through the use of approved procedures (e.g., policies, directives, procedures, instructions, or other documents) which provide written guidance for the control of quality related activities and provide for the development of documentation to provide objective evidence of compliance.

2. Organization

The organizational structure responsible for implementation of the QAPM is described below. The organizational structure consists of corporate functions and the nuclear facilities. The specific organization titles for the quality assurance functions described are identified in procedures. The authority to accomplish the quality assurance functions described is delegated to the incumbent's staff as necessary to fulfill the identified responsibility.

A.2. (continued)**a. Corporate Organization**

1. The Entergy Corporation chief executive officer (CEO) is responsible for overall corporate policy and provides executive direction and guidance for the corporation as well as promulgates corporate policy through the Company's senior management staff. Responsibility for developing, implementing, and verifying execution of the Quality Assurance Program is delegated to the chief nuclear officer, the highest level nuclear executive, and authority for developing and verifying execution of the program to the executive responsible for nuclear oversight.
2. The chief nuclear officer, the highest level nuclear executive officer, is responsible for providing top-level direction for the safe and reliable operation of Entergy's nuclear sites. The highest level nuclear executive officer provides guidance with regards to company quality assurance policy. This position is responsible for providing engineering services, nuclear safety, and operations support. Supply chain and information technology are no longer a functional area exclusively within the nuclear organizational structure. However, the oversight and governance of these functional areas remain within the nuclear organization through this executive position that is responsible for nuclear operations. The off-site safety review committee reports to this executive.
3. The following executives report to the highest level nuclear executive officer and provide governance and oversight in regards to implementing company quality assurance policy:
 - (a) The chief operating officers, the executives responsible for nuclear operations, are responsible for implementing quality assurance policies, goals, and objectives and the implementation of all activities associated with the safe and reliable operation of Entergy's nuclear sites.
 - (b) The senior vice president responsible for nuclear corporate services is responsible for providing nuclear safety, operations support, outage services, regulatory assurance and implementing quality assurance policies, goals, and objectives of Entergy's corporate support activities.
 - (c) The executive responsible for engineering and technical services is responsible for providing engineering services, project management services and implementing major projects and modifications including implementing quality assurance policies, goals, and objectives.
 - (d) The executive responsible for oversight establishes the policies, goals, and objectives of the quality assurance policy and provides guidance and interpretation for implementing the company quality assurance policy and is responsible for governance and

A.2.a.3.(d) (continued)

implementation of the quality assurance program in accordance with regulatory requirements. Independent oversight groups report to this executive.

(1) The following management positions report to this executive:

- A management position that is responsible for nuclear oversight activities and is independent of production. This position provides overall direction for the implementation of the quality assurance program.
- A management position that is responsible for oversight and governance of the QAPM. This position has authority and responsibility for establishing, controlling, and verifying the implementation and adequacy of the quality assurance program as described in this QAPM including activities related to vendor quality. This position has the authority for Stop Work and responsibility to escalate matters directly to the highest level nuclear executive officer when needed.

4. The following executives report to the senior vice president responsible for nuclear corporate services and provide governance and oversight in regards to implementing company quality assurance policy:

- (a) The executive responsible for operations support is responsible for implementing quality assurance policies, goals, and objectives of Entergy's corporate support activities.
- (b) The executive responsible for production and outage services is responsible for providing outage services and implementing quality assurance policies, goals, and objectives of Entergy's corporate support activities.
- (c) The executive responsible for regulatory assurance is responsible for regulatory interfaces, licensing activities, corporate nuclear security, corporate emergency planning and implementing quality assurance policies, goals, and objectives.

b. Site Organization

The following site management positions describe the typical site QAPM functional responsibilities, which may be delegated to others as established in this document. These individuals may report through an additional layer of management but shall maintain sufficient authority and organizational freedom to implement the assigned responsibilities.

1. An executive management position for each nuclear site reports through the applicable executive position responsible for each

A.2.b.1. (continued)

designated operating group. This position is responsible for overall plant nuclear safety at each site, and is responsible for establishing the policies, goals, and objectives and the implementation of the QAPM at the respective site.

2. A management position responsible for overall plant operations assures the safe, reliable, and efficient operation of the plant within the constraints of applicable regulatory requirements and the operating license. Different aspects of these responsibilities may be fulfilled by separate managers. The onsite safety review committee reports to the management position responsible for plant operations.
3. A management position responsible for performance improvement, emergency planning, training, security, corrective action program, and records management. Different aspects of these responsibilities may be fulfilled by separate managers.
4. The following site positions report directly to an executive position offsite:
 - (a) A management position responsible for quality assurance who has overall authority and responsibility for establishing, controlling, and verifying the implementation and adequacy of the quality assurance program as described in this QAPM. This position has the authority and responsibility to escalate matters directly to the highest level nuclear executive officer when needed. This position reports to the executive responsible for nuclear oversight through the corporate management position responsible for nuclear oversight (offsite).
 - (b) A management position responsible for materials, purchasing, and contracts, procurement, services, receipt, storage, and issue of materials, parts, and components. Different aspects of these responsibilities may be fulfilled by separate managers. This site position reports to an executive (supply chain – offsite) who has a functional interface with the executive responsible for engineering and technical services.
 - (c) A management position responsible for engineering, the development and maintenance of engineering programs, plant design bases, policies, and procedures and for providing engineering services. This position reports to the executive responsible for engineering through the corporate management (offsite). Different aspects of these responsibilities (e.g., fuel design) may be fulfilled by separate managers.

A.2.b.4. (continued)

- (d) A management position responsible for regulatory assurance. This position is responsible for maintaining the licensing basis and oversight of licensing and regulatory programs and reports to the executive responsible for regulatory assurance through the corporate management (offsite).
- c. The on-site and off-site safety review committees independently review activities to provide additional assurance that the units are operated and maintained in accordance with the Operating License and applicable regulations that address nuclear safety.

3. Responsibility

- a. Entergy has the responsibility for the scope and implementation of an effective quality assurance program.
- b. Entergy may delegate all or part of the activities of planning, establishing, and implementing the quality assurance program to others, but retains the responsibility for the program's effectiveness.
- c. Entergy is responsible for ensuring that the applicable portion(s) of the quality assurance program is properly documented, approved, and implemented (people are trained and resources are available) before an activity within the scope of the QAPM is undertaken by Entergy or by others.
- d. Individual managers are to ensure that personnel working under their management cognizance are provided the necessary training and resources to accomplish their assigned tasks within the scope of the QAPM.
- e. Procedures that implement the QAPM are approved by the management responsible for the applicable quality function. These procedures are to reflect the QAPM and work is to be accomplished in accordance with them.

4. Authority

- a. When Entergy delegates responsibility for planning, establishing, or implementing any part of the overall QA program, sufficient authority to accomplish the assigned responsibilities is delegated.
- b. The management position responsible for quality assurance has the responsibility and the authority to stop unsatisfactory work and control further processing, delivery, installation, or use of non-conforming items or services. Cost and schedule considerations will not override safety considerations.

A. (continued)**5. Personnel Training and Qualification**

- a. Personnel assigned to implement elements of the quality assurance program are capable of performing their assigned tasks.
- b. Training programs are established and implemented to ensure that personnel achieve and maintain suitable proficiency.
- c. Personnel training and qualification records are maintained in accordance with procedures.
- d. Additional details concerning Personnel Training and Qualification may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guides 1.8, 1.58, and 1.146).

6. Corrective Action

- a. It is the responsibility of each individual to promptly identify and report conditions adverse to quality. Management at all levels encourages the identification of conditions that are adverse to quality.
- b. A corrective action program is established and implemented that includes prompt identification, documentation, and correction of conditions adverse to quality. The corrective action program for significant conditions adverse to quality shall require cause determination and a corrective action plan that precludes repetition.
- c. Specific responsibilities within the corrective action program may be delegated, but Entergy maintains responsibility for the program's effectiveness.
- d. Non-conforming items are properly controlled to prevent their inadvertent test, installation, or use. They are reviewed and either accepted, rejected, repaired, or reworked.
- e. Reports of conditions that are adverse to quality are analyzed to identify trends in quality performance. Significant conditions adverse to quality and significant trends are reported to the appropriate level of management.
- f. Additional details concerning corrective action activities may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.33).

A. (continued)**7. Regulatory Commitments**

- a. Except where alternatives are identified, Entergy complies with the QA guidance documents listed on Table 1. If the guidance in one of these documents is in conflict with the QAPM, the guidance provided in the QAPM is the controlling guidance. Additionally, the following clarifications apply to all guidance documents listed in Table 1:
 - 1. For modifications and nonroutine maintenance, guidance applicable to construction-like activities is applicable to comparable plant activities. Except that the inspection of modifications, repairs, rework, and replacements shall be in accordance with the original design and inspection requirements or a documented approved alternative.
 - 2. The definitions provided by Regulatory Guide 1.74 and associated clarifications as described in Table 1 apply wherever the defined term is used in the QAPM and associated guidance documents.
 - 3. Clarification to a guidance document applies wherever the guidance document is invoked.
 - 4. In each of the ANSI standards, other documents (e.g., other standards, codes, regulations, tables, or appendices) are referenced or described. These other documents are only quality assurance program requirements if explicitly committed to in the QAPM. If not explicitly committed to, these documents are not considered as quality assurance program requirements, although they may be used as guidance.
 - 5. Guidance applicable to safety related items and activities is applicable to comparable items and activities controlled by 10 CFR 72 and transportation packages controlled by 10 CFR 71.
- b. The NRC is to be notified of QAPM changes in accordance with 10 CFR 50.54(a)(3) or 10 CFR 50.54(a)(4).

B. PERFORMANCE/VERIFICATION**1. Methodology**

- a. Personnel performing work activities such as design, engineering, procurement, manufacturing, construction, installation, startup, maintenance, modification, operation, and decommissioning are responsible for achieving acceptable quality.

B.1 (continued)

- b. Personnel performing verification activities are responsible for verifying the achievement of acceptable quality and are different personnel than those who performed the work.
- c. Work is accomplished and verified using instructions, procedures, or other appropriate means that are of a detail commensurate with the activity's complexity and importance to safety.
- d. Criteria that define acceptable quality are specified, and quality is verified against these criteria.

2. Design Control

- a. The design control program is established and implemented to assure that the activities associated with the design of systems, components, structures, and equipment and modifications thereto, are executed in a planned, controlled, and orderly manner.
- b. The program includes provisions to control design inputs, processes, outputs, changes, interfaces, records, and organizational interfaces.
- c. Design inputs (e.g., performance, regulatory, quality, and quality verification requirements) are to be correctly translated into design outputs (e.g., specifications, drawings, procedures, and instructions).
- d. The final design output is to relate to the design input in sufficient detail to permit verification.
- e. The design process is to ensure that items and activities are selected and independently verified consistent with their importance to safety to ensure they are suitable for their intended application.
- f. Changes to final designs (including field changes and modifications) and dispositions of non-conforming items to either use-as-is or repair are to be subjected to design control measures commensurate with those applied to the original design and approved by the organization that performed the original design or a qualified designee.
- g. Interface controls (internal and external between participating design organizations and across technical disciplines) for the purpose of developing, reviewing, approving, releasing, distributing, and revising design inputs and outputs are defined in procedures.
- h. Design documentation and records, which provide evidence that the design and design verification process was performed in accordance with this program, shall be collected, stored, and maintained in accordance with documented procedures. This documentation includes final design documents, such as drawings and specifications, and revisions thereto and documentation which identifies the important steps, including sources of design inputs that support the final design.

B. (continued)

- i. Additional details concerning design control activities may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.64).

3. Design Verification

- a. A program is established and implemented to verify the acceptability of design activities and documents for the design of items. The selection and incorporation of design inputs and design processes, outputs, and changes are verified.
- b. Verification methods include, but are not limited to, design reviews, alternative calculations, and qualification testing. The extent of this verification will be a function of the importance to safety of the item, the complexity of the design, the degree of standardization, the state of the art, and the similarity with previously proven designs. Standardized or previously proven designs will be reviewed for applicability prior to use.
- c. When a test program is used to verify the acceptability of a specific design feature, the test program is to demonstrate acceptable performance under conditions that simulate the most adverse design conditions that are expected to be encountered.
- d. Independent design verification is to be completed before design outputs are used by other organizations for design work and before they are used to support other activities such as procurement, manufacture, or construction. When this timing cannot be achieved, the unverified portion of the design is to be identified and controlled. In all cases, the design verification is to be completed before relying on the item to perform its function.
- e. Individuals or groups responsible for design reviews or other verification activities shall be identified in procedures and their authority and responsibility shall be defined and controlled. Design verification shall be performed by any competent individuals or groups other than those who performed the original design but who may be from the same organization. The designer's immediate supervisor may perform the design verification provided:
 - 1. the supervisor is the only technically qualified individual capable of performing the verification,
 - 2. the need is individually documented and approved in advance by the supervisor's management, and
 - 3. the frequency and effectiveness of the supervisor's use as a design verifier are independently verified to guard against abuse.

B.3 (continued)

- f. Design verification procedures are to be established and implemented to ensure that an appropriate verification method is used, the appropriate design parameters to be verified are chosen, the acceptance criteria are identified, the verification is satisfactorily accomplished, and the results are properly recorded.
- g. Additional details concerning design verification activities may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.64).

4. Procurement Control

- a. A program is established and implemented to ensure that purchased items and services are of acceptable quality.
- b. The program includes provisions for evaluating prospective suppliers and selecting only qualified suppliers.
- c. The program includes provisions for ensuring that qualified suppliers continue to provide acceptable products and services.
- d. The program includes provisions (e.g., source verification, receipt inspection, pre-installation and post-installation tests, and certificates of conformance) for accepting purchased items and services.
- e. Applicable technical, regulatory, administrative, and reporting requirements (e.g., specifications, codes, standards, tests, inspections, special processes, and 10 CFR Part 21) are invoked for procurement of items and services.
- f. The program includes provisions for ensuring that documented evidence of an item's conformance to procurement requirements is available at the site before the item is placed in service or used unless otherwise specified in procedures.
- g. The program includes provisions for ensuring that procurement, inspection, and test requirements have been satisfied before an item is placed in service or used unless otherwise specified in procedures.
- h. The procurement of components, including spare and replacement parts, is subject to quality and technical requirements suitable for their intended service.
- i. Appropriate controls for the selection, determination of suitability for intended use (critical characteristics), evaluation, receipt, and quality evaluation of commercial grade items are to be imposed to ensure that the items will perform satisfactorily in service.

B.4 (continued)

- j. Additional details concerning procurement control may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guides 1.33 and 1.123).

5. Procurement Verification

- a. A program is established and implemented to verify the quality of purchased items and services at intervals and to a depth consistent with the item's or service's importance to safety, complexity, and quantity and the frequency of procurement.
- b. The program is executed in all phases of procurement. As necessary, this may require verification of activities of suppliers below the first tier.
- c. Additional details concerning procurement verification may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guides 1.123 and 1.144).

6. Identification and Control of Items

- a. A program is established and implemented to identify and control items to prevent the use of incorrect or defective items.
- b. Identification of each item is maintained throughout fabrication, erection, installation, and use so that the item can be traced to its documentation. Traceability is maintained to an extent consistent with the item's importance to safety.
- c. Additional details concerning identification and control of items may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.33).

7. Handling, Storage, and Shipping

- a. A program is established and implemented to control the handling, storage, shipping, cleaning, and preserving of items to ensure the items maintain acceptable quality.
- b. Special protective measures (e.g., containers, shock absorbers, accelerometers, inert gas atmospheres, specific moisture content levels, and temperature levels) are specified and provided when required to maintain acceptable quality.
- c. Specific procedures are developed and used for cleaning, handling, storage, packaging, shipping, and preserving items when required to maintain acceptable quality.

B.7 (continued)

- d. Items are marked and labeled during packaging, shipping, handling, and storage to identify, maintain, and preserve the items' integrity and indicate the need for special controls.
- e. Additional details concerning handling, storage, and shipping activities may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.38).

8. Test Control

- a. A test control program is established and implemented to demonstrate that items will perform satisfactorily in service.
- b. Criteria are defined that specify when testing is required.
- c. The test control program includes, as appropriate, proof tests before installation, pre-operational tests, post-maintenance tests, post-modification tests, and operational tests.
- d. Test procedures are developed that include:
 - 1. instructions and prerequisites to perform the test,
 - 2. use of proper test equipment,
 - 3. acceptance criteria, and
 - 4. mandatory inspections as required.
- e. Test results are evaluated to assure that test objectives and inspection requirements have been satisfied.
- f. Unacceptable test results shall be evaluated.
- g. Additional details concerning test control may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.33).

B. (continued)**9. Measuring and Test Equipment Control**

- a. A program is established and implemented to control the calibration, maintenance, and use of measuring and test equipment. Measuring and test equipment does not include permanently installed operating equipment or test equipment used for preliminary checks where data obtained will not be used to determine acceptability or be the basis for design or engineering evaluation. Additionally, calibration and control measures are not required for rulers, tape measures, levels and other such devices if normal commercial manufacturing practices provide adequate accuracy.
- b. The types of equipment covered by the program (e.g., instruments, tools, gauges, and reference and transfer standards) are defined in procedures.
- c. Measuring and test equipment is calibrated at specified intervals or immediately before use on the basis of the item's required accuracy, intended use, frequency of use, and stability characteristics and other conditions affecting its performance.
- d. Measuring and test equipment is labeled, tagged, or otherwise controlled to indicate its calibration status and to ensure its traceability to calibration test data.
- e. Measuring and test equipment is calibrated against standards that have an accuracy of at least four times the required accuracy of the equipment being calibrated or, when this is not possible, have an accuracy that ensures the equipment being calibrated will be within the required tolerance.
- f. If nationally recognized standards exist, calibration standards are to be traceable to them. Except where calibration standards with the same accuracy as the instruments being calibrated are shown to be adequate for the requirements, calibration standards are to have a greater accuracy than the standards being calibrated.
- g. Measuring and test equipment found out of calibration is tagged or segregated. The acceptability shall be determined of items measured, inspected, or tested with an out-of-calibration device.
- h. Additional details concerning measuring and test equipment control may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guides 1.30, 1.33, 1.94, 1.116, and 1.123).

B. (continued)**10. Inspection, Test, and Operating Status**

- a. The status of required inspections and tests and the operating status of items is verified before release, fabrication, receipt, installation, test, and use, as applicable. This verification is to preclude inadvertent bypassing of inspections and tests and to prevent inadvertent operation of controlled equipment.
- b. The application and removal of inspection, test, and operating status indicators are controlled in accordance with procedures.
- c. Additional details concerning inspection, test, and operating status control may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.33).

11. Special Process Control

- a. A program is established and implemented to ensure that special processes are properly controlled.
- b. The criteria that establish which processes are special are described in procedures. The following are special processes:
 - 1. welding,
 - 2. heat-treating,
 - 3. NDE (Non-Destructive Examination),
 - 4. chemical cleaning, and
 - 5. unique fabricating or testing processes that require in-process controls.
- c. Special processes are accomplished by qualified personnel, using appropriate equipment, and procedures in accordance with applicable codes, standards, specifications, criteria, and other special requirements.
- d. Additional details concerning special process control may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.33).

B. (continued)**12. Inspection**

- a. A program is established and implemented for inspections of activities in order to verify conformance to the documented instructions, procedures and drawings for accomplishing the activity. The inspection program may be implemented by or for the organization performing the activity to be inspected.
- b. Provisions to ensure inspection planning is properly accomplished are to be established. Planning activities are to identify the characteristics and activities to be inspected, the inspection techniques, the acceptance criteria, and the organization responsible for performing the inspection.
- c. Provisions to identify inspection hold points, beyond which work is not to proceed without the consent of the inspection organization, are to be defined.
- d. Inspection results are to be documented by the inspector and reviewed by qualified personnel.
- e. Unacceptable inspection results shall be evaluated and resolved in accordance with procedures.
- f. Inspections are performed by qualified personnel other than those who performed or directly supervised the work being inspected. While performing the inspection activity the inspectors functionally report to the associated management position responsible for quality assurance.
- g. Additional details concerning inspections may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guides 1.33 and 1.58).

13. Corrective Action

- a. Procedures shall provide for identification, evaluation, and resolution of conditions adverse to quality.
- b. Reworked, repaired, and replacement items are to be inspected and tested in accordance with the original inspection and test requirements or specified alternatives.
- c. Additional details concerning corrective action activities may be found in Section A.6 and the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.33).

B. (continued)**14. Document Control**

- a. A program is established and implemented to control the development, review, approval, issue, use, and revision of documents.
- b. The scope of the document control program includes:
 - 1. safety analysis report,
 - 2. design documents,
 - 3. procurement documents,
 - 4. Technical Specifications,
 - 5. procedures, manuals, and plans,
 - 6. corrective action documents, and
 - 7. other documents as defined in procedures.
- c. Revisions of controlled documents are reviewed for adequacy and approved for release by the same organization that originally reviewed and approved the documents or by a designated organization that is qualified and knowledgeable.
- d. Copies of controlled documents are distributed to and used by the person performing the activity.
- e. The distribution of new and revised controlled documents is in accordance with procedures. Superseded documents are controlled.
- f. Additional details concerning document control may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.33).

15. Records

- a. A program is established and implemented to ensure that sufficient records of items and activities (e.g., design, engineering, procurement, manufacturing, construction, inspection and test, installation, pre-operation, startup, operations, maintenance, modification, decommissioning, and audits) are generated and maintained to reflect completed work.
- b. The program provides provisions for the administration, receipt, storage, preservation, safekeeping, retrieval, and disposition of records.

B.15 (continued)

- c. The program includes provisions for the use of various record storage media to maintain QA records. Procedures are developed to implement the regulatory guidance associated with the media used. The NRC Generic Letter 88-18 "Plant Record Storage on Optical Disk" is implemented for optical disk media. The Regulatory Issue Summary 2000-18 "Guidance on Managing QA Records in Electronic Media" is implemented for electronic media.
- d. Additional details concerning record requirements may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.88).

C. AUDIT**1. Methodology**

- a. Personnel responsible for carrying out audits are maintained cognizant of day-to-day activities by the ongoing involvement in the quality assurance program requirements so that they can act in a management advisory function.
- b. Organizations performing audits are to be technically and performance oriented commensurate with the activity being reviewed.
- c. Personnel performing audits have no direct responsibilities in the area they are assessing.
- d. Audits are accomplished using instructions, procedures, or other appropriate means that are of a detail commensurate with the activity's complexity and importance to safety.

2. Performance

- a. A program of planned and periodic audits is established and implemented to confirm that activities affecting quality comply with the QAPM and that the QAPM has been implemented effectively. Audit frequencies will be implemented as required by the applicable Code of Federal Regulations, safety analysis report, and commitments by various correspondences to the NRC. Audits will be conducted at a frequency in accordance with either Section C.2.a.1 or Section C.2.a.2 below. Audits of stand alone Independent Spent Fuel Storage Installations (ISFSIs) (e.g. those not sited with an operating nuclear power plant) may be conducted in accordance with Section C.2.a.4.

C.2.a (continued)

1. Audit frequencies will be determined in accordance with a performance based audit-scheduling program. The scheduling program, through an expert panel, uses assessment indicators to identify and schedule audits based on performance results and importance of the activity relative to safety. Potential audit subject areas are periodically assessed against appropriate performance criteria. From these reviews a determination is made in regard to the depth, scope, and scheduling of specific audits. Functional areas important to safety are assessed annually ($\pm 25\%$) to identify strengths and weaknesses (if applicable) to determine the level and focus of independent oversight activities for the upcoming year. The basis for the assessment shall include the results of audits and surveillance, NRC inspections, LERs, self-assessments, and applicable conditions reports (e.g., non-conformance and corrective action reports). Personnel changes, change/increase in functional area responsibilities, industry operating experience, and INPO evaluations will also be considered. Each area will be assigned a rating with a comparison to previous years. This assessment will be documented, reviewed, and approved by quality assurance management.

This document is considered a quality assurance record and will be available for NRC review. Audit subject areas of Section C.2.a.2 shall continue to be audited on the frequencies designated unless expert panel judgment, based on performance results, determines such an audit to be unnecessary. In such cases the expert panel basis shall be documented.

2. Audit schedules assure that the following areas are audited at the indicated frequencies, or more frequently as performance dictates.
 - a. The conformance of each unit's operation to provisions contained within the Technical Specifications and applicable license conditions is audited at least once every 24 months.
 - b. The performance, training, and qualifications of the entire staff are audited at least once every 24 months.

C.2.a.2. (continued)

- c. The results of actions taken to correct deficiencies occurring in unit equipment, structure, systems, or method of operation that affect nuclear safety is audited at least once every 24 months.
 - d. The performance of activities required by the QAPM to meet the criteria of 10 CFR 50, Appendix B is audited at least once every 24 months.
 - e. The Offsite Dose Calculations Manual and Process Control Program and implementing procedures are audited at least once every 24 months.
 - f. The radiological environmental monitoring program and the results thereof is audited at least once every 24 months.
 - g. A fire protection and loss prevention program inspection and audit shall be performed using either off-site licensee personnel or an outside fire protection firm at least once every 24 months.
 - h. The fire protection program and implementing procedures audit shall be performed at least once every 24 months.
 - i. A fire protection and loss prevention program inspection and audit shall be performed using an outside fire consultant at least once every 36 months.
- 3. A grace period of 90 days may be applied to the 24-month frequency for internal audits. For activities deferred in accordance with the 90-day grace period, the next performance due date will be based on their originally scheduled date.
 - 4. The audit schedule for stand alone ISFSIs may combine audits to cover the areas defined in section C.2.a.2 that are invoked by the ISFSI technical specifications.
- b. Audits shall provide an objective evaluation of quality related practices, procedures, instructions, activities, and items and a review of documents and records, as applicable.
 - c. Audits shall be performed in accordance with approved written procedures or checklists. Items from previous audits shall be reviewed and reaudited, as appropriate. The checklists are used as guides to the auditor.

C.2 (continued)

- d. Scheduling and resource allocation are based on the status and safety importance of the activity or process being assessed.
- e. Scheduling is dynamic, and resources are supplemented when the effectiveness of the quality assurance program is in doubt.
- f. Audit reports are written and distributed to the appropriate levels of management for review. Follow-up action, including re-look at deficient areas, is initiated as deemed appropriate.
- g. Implementation of delegated portions of the quality assurance program is assessed.
- h. Audits are conducted using predetermined acceptance criteria.
- i. Additional details concerning audits may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guides 1.33 and 1.144).

D. INDEPENDENT SAFETY REVIEW**1. Description**

- a. Independent safety review is performed to meet the individual unit's commitment to NUREG-0737, Section I.B.1.2, "Independent Safety Engineering Group," as described in the unit's safety analysis report.

Table 1

Regulatory Commitments

A. Regulatory Guide 1.8 Revision 1, dated September 1975

Clarification/Exception

1. General

Entergy is committed to Sections 1 – 4 of ANSI/ANS 3.1-1978 with following clarifications and exceptions.

Qualification requirements for personnel shall meet ANSI/ANS 3.1-1978 except the following:

- a. The radiation protection manager shall meet or exceed the qualifications of Regulatory Guide 1.8, Revision 2, 1987.
- b. Managers required to hold an SRO license are specified in the applicable unit's Technical Specifications.
- c. Licensed Operators shall be qualified in accordance with the requirements of 10 CFR 55.

Individuals filling positions who met the previous commitment at the time of implementation of this commitment can be considered to meet any more restrictive aspects of the requirements of this commitment for that position without further review and documentation.

2. General

The following qualifications may be considered equivalent to a bachelor's degree:

- a. 4 years of post-secondary schooling in science or engineering,
- b. 4 years of applied experience at a nuclear facility in the area for which qualification is sought,
- c. 4 years of operational or technical experience/training in nuclear power, or
- d. any combination of the above totaling 4 years.

Years of experience used to meet the education requirements as allowed by this exception shall not be used to also meet the experience requirements.

Table 1
Regulatory Commitments

A. Regulatory Guide 1.8 (continued)

- | | |
|---|---|
| 3. ANSI/ANS 3.1
Section 4 | Individuals assigned to professional-technical comparable positions shall have the authority and specified qualifications to accomplish the functional responsibilities of the position. |
| 4. ANSI/ANS 3.1
Section 4.4.5 | Individuals who do not possess the formal education and minimum experience requirements for the manager responsible for quality assurance should not be eliminated automatically when other factors provide sufficient demonstration of their abilities. These other factors are evaluated on a case-by-case basis and approved and documented by senior management. As a minimum, the Special Requirements of ANSI/ANS 3.1-1993 Section 4.3.7 must be met if the manager responsible for Quality Assurance does not meet the requirements of section 4.4.5 of ANSI/ANS 3.1-1978. |
| 5. ANSI/ANS 3.1
Section 5 | Entergy will maintain a training program for the unit staff that meets the applicable regulations and either a) is accredited by the National Nuclear Accrediting Board (NNAB) or b) meets the standards of section 5 of ANSI/ANS 3.1-1978. |

Table 1
Regulatory Commitments

B. Regulatory Guide 1.30, dated August 1972

Clarification/Exception

- | | |
|----------------------------------|--|
| 1. ANSI N45.2.4
General | ANSI N45.2.4 identifies various tests to be performed. The applicability of these tests will be determined as discussed in QAPM Section B.8 and based upon the significance of change or modification. |
| 2. ANSI N45.2.4
Section 3 | Documented routine inspections and audits of the storage area may be performed instead of the requirements of this Section. |
| 3. ANSI N45.2.4
Section 5.2 | In some cases, testing requirements may be met by post-installation surveillance testing in lieu of a special post-installation test. |
| 4. ANSI N45.2.4
Section 6.2.1 | The last sentence of this section states: "Items requiring calibration shall be tagged or labeled on completion indicating date of calibration and identity of the person that performed the calibration." Instead of requiring the tagging or labeling of all equipment this statement is changed to require the equipment to be suitably marked to indicate the date of the next required calibration and the identity of the person that performed the calibration. |

Table 1
Regulatory Commitments

C. Regulatory Guide 1.33 Revision 2, dated February 1978

Clarification/Exception

- | | |
|--|---|
| 1. Section C.1 | Entergy will provide procedures for the guide's Appendix A activities as discussed. However, Entergy does not consider all activities listed to be "safety-related" (e.g., activities in 7.e). |
| 2. Section C.4 | This section establishes minimum 2-year audit frequency for all safety related functions and recommends audit frequencies specific to Corrective Action, Facility Operation, and Staff Performance, Training, and Qualifications. Entergy will perform audits at frequencies as discussed in QAPM Section C.2.a instead of this section. |
| 3. ANSI N18.7
Section 1 | Sentences 4 and 5 state, "However, applicable sections of this standard should be used as they apply to related activities. Activities included are: Design Changes, Purchasing, Fabricating..." With regard to radioactive material transportation activities, Entergy will only implement the requirements associated with those activities conducted in accordance with the applicable NRC Quality Assurance Program Approval for Radioactive Material Packages. |
| 4. ANSI N18.7
Section 4.3.1 | The specific areas of experience described in this section are not applicable to the on-site safety review committee but the committee must be comprised of site operating or engineering supervisory personnel. Additionally, the off-site safety review committee need contain experience in only a majority of the areas. |
| 5. ANSI N18.7
Sections 4.3.2.2
& 4.3.2.3 | Instead of the requirements of this section 4.3.2.2, the independent safety review committee will meet once per year. The statement that "no more than a minority of the quorum shall have line responsibility for the operation of the plant" in section 4.3.2.3 is not applicable to the on-site safety review committee. |

Table 1
Regulatory Commitments

C. Regulatory Guide 1.33 (continued)

Clarification/Exception

- | | |
|---|---|
| 6. ANSI N18.7
Section
4.3.4.(1) & (2) | 10 CFR 50.59 was revised through Federal Register Notice 19991001 R1N3150-AF94 eliminating the terms "safety evaluation" and "unreviewed safety question." The term "safety evaluation" has been replaced with 10 CFR 50.59 "evaluation." The term "unreviewed safety question," as defined in the previous version of 10 CFR 50.59 (a)(2), was replaced by criteria provided in 50.59(c)(2) to determine if a license amendment pursuant to 50.90 is required prior to implementing the change, test, or experiment. |
| 7. ANSI N18.7
Section 4.3.4(2) | Reviews associated with changes to the technical specifications will be performed in accordance with Section 4.3.4(3) instead of this section. |
| 8. ANSI N18.7
Section 4.3.4(3) | Revision to proposed Technical Specification changes only requires review in accordance with this section when the revision involves a significant change to the technical basis for the proposed change. The independent review body discussed in this section is the on-site safety review committee. Voting members having a potential conflict of interest refrain from voting on documents under review. |
| 9. ANSI N18.7
Section 4.3.4(4) | In place of the requirements of this section, the on-site and off-site safety review committees shall review facility operations to detect potential nuclear safety hazards and all reports made in accordance with 10 CFR 50.73. |
| 10. ANSI N18.7
Section 4.3.4(5) | An example of the matters reviewed by the on-site safety review committee in accordance with this section is a change to the Emergency Plan (except editorial changes). |
| 11. ANSI N18.7
Section 4.5 | This section establishes minimum 2-year audit frequency for all safety related functions. Entergy will perform audits at frequencies as discussed in QAPM Section C.2.a instead of this section. |
| 12. ANSI N18.7
Section 4.5 | The independent review body discussed in this section is the off-site safety review committee. |

Table 1
Regulatory Commitments

C. Regulatory Guide 1.33 (continued)

Clarification/Exception

- | | |
|--|--|
| 13. ANSI N18.7
Section 5.1 | Instead of the requirements of this section to have a summary document, a method of cross-referencing these requirements to the implementing procedures will be maintained. |
| 14. ANSI N18.7
Section 5.2.2 | The person who holds a senior reactor operators license for the affected unit and approves a temporary change to a procedure is not required to be in charge of the shift. |
| 15. ANSI N18.7
Section 5.2.2 | In addition to the temporary procedure change process described for changes which clearly do not change the intent of a procedure, temporary procedure changes which may change the intent of a procedure may be made following the process described in this section. Except that the person normally responsible for approving revisions to the procedure is the approval authority for the change. |
| 16. ANSI N18.7
Section 5.2.6 | Instead of the requirements of this section concerning non-conforming conditions, non-conforming conditions will be evaluated and controlled in accordance with the corrective action program. |
| 17. ANSI N18.7
Section 5.2.6 | The requirement of the fifth paragraph of this section to have a log of the status of temporary modifications is not applicable to temporary modifications for routine tasks installed in accordance with procedures. These procedures shall provide assurance that approvals are obtained, temporary modification activities are independently verified by an individual cognizant of the purpose and the effect of the temporary modification, and that activities are adequately documented to indicate the status of the temporary modification. |
| 18. ANSI N18.7
Section 5.2.7.1 | This section will be implemented by adding the words "Where practical" in front of the first and fourth sentences of the fifth paragraph. For modifications where the requirements of the fourth sentence are not considered practical, a review in accordance with the provisions of 10 CFR 50.59 will be conducted. |

Table 1
Regulatory Commitments

C. Regulatory Guide 1.33 (continued)

Clarification/Exception

- | | |
|--|---|
| 19. ANSI N18.7
Section 5.2.8 | In lieu of a “master surveillance schedule,” the following requirement shall be complied with: “A surveillance testing schedule(s) shall be established reflecting the status of all in-plant surveillance tests and inspections.” |
| 20. ANSI N18.7
Section 5.2.9 | The requirements of the Physical Security Plan shall be implemented in place of these general requirements. |
| 21. ANSI N18.7
Section
5.2.13.1 | Consistent with ANSI N45.2.11 Section 7.2, minor changes to documents, such as inconsequential editorial corrections, or changes to commercial terms and conditions may not require that the revised document receive the same review and approval as the original documents. |
| 22. ANSI N18.7
Section 5.2.14 | Where marking, tagging, or physical separation of the non-conforming item is not feasible, the non-conforming item may be controlled by the use of appropriate documentation. |
| 23. ANSI N18.7
Section 5.2.15 | Required procedure reviews following the occurrences discussed in Section 5.2.15, paragraph 3, sentence 3, are determined and controlled in accordance with the QAPM Section A.6 instead of this section. |
| 24. ANSI N18.7
Section 5.2.15 | This section requires plant procedure review by an individual knowledgeable in the area affected by the procedure no less frequently than every two years to determine if changes are necessary or desirable. Instead of this review, controls are in effect to ensure that procedures are reviewed for possible revision upon identification of new or revised source material potentially affecting the intent of procedures. |
| 25. ANSI N18.7
Section 5.3.9 | Instead of the requirements of this section, the format and content of the emergency operating procedures follow the applicable NRC approved format for the specific unit. |
| 26. ANSI N18.7
Section 5.3.9.3 | Entergy's NRC accepted Emergency Plan will be implemented in lieu of the requirements in this section. |

Table 1
Regulatory Commitments

D. Regulatory Guide 1.37, dated March 1973

Clarification/Exception

- | | |
|--------------------------------------|--|
| 1. General | Instead of using the cleanliness level classification system of ANSI N45.2.1, the required cleanliness for specific items and activities is addressed on a case-by-case basis. Cleanliness is maintained, consistent with the work being performed to prevent introduction of foreign material. As a minimum, cleanliness inspections are performed prior to system closure and such inspections are documented. |
| 2. Section C.3 | The water quality for final flushes of fluid systems and associated components is at least equivalent to the quality of the operating system water, except for the oxygen and nitrogen content. |
| 3. Section C.4 | As an alternate to the requirements of this section, contamination levels in expendable products may be based upon safe practices and industrial availability with documented engineering evaluations. Contaminant levels are controlled such that subsequent removal by standard cleaning methods results in the achievement of final acceptable levels that are not detrimental to the materials. |
| 4. ANSI N45.2.1
Section 5 | Any nonhalogenated material may be used which is compatible with the parent material not just plastic film. |

Table 1
Regulatory Commitments

E. Regulatory Guide 1.38 Revision 2, dated May 1977

Clarification/Exception

- | | |
|----------------------------------|---|
| 1. ANSI N45.2.2
Section 3.2 | Storage of an item in a higher-level storage area meets the lower level storage requirements. |
| 2. ANSI N45.2.2
Section 3.2 | As an alternate to the requirements in Section 3.2.1 items (4), (5), and 7, Section 3.2.2, Section 3.2.3 item (1), and Section 3.2.4 item (2), the storage atmosphere may be controlled such that it is free of harmful contaminants in concentration that could produce damage to the stored item and protecting weld end preparations and threads by controlling the manner in which the item is stored. |
| 3. ANSI N45.2.2
Section 3.7.1 | Cleated, sheathed boxes may be used up to 1000 lb. rather than 500 lb. as specified in 3.7.1(1). Special qualification testing may be required for loads over 1000 lb. |
| 4. ANSI N45.2.2
Section 3.7.2 | Skids and runners will normally be fabricated from a minimum 2 X 4 inch nominal lumber size and laid flat except where this is impractical because of the small dimensions of the container. If forklift handling is required, minimum floor clearance for forklift tines will be provided. |
| 5. ANSI N45.2.2
Section 4.3.4 | Inspections of packages and/or preservative coatings are made immediately prior to loading rather than after loading. |
| 6. ANSI N45.2.2
Section 5.2.1 | Warehouse personnel will normally visually scrutinize incoming shipments for damage of the types listed in this section, this activity is not necessarily performed prior to unloading. Separate documentation of the shipping damage inspection is not necessary. Release of the transport agent after unloading and the signing for receipt of the shipment provides adequate documentation of completion of the shipping damage inspection. Any non-conformances noted will be documented and dispositioned. Persons performing the visual scrutiny during unloading are not considered to be performing an inspection function as defined under Reg. Guide 1.74; therefore, while they will be trained to perform this function, they may not be certified (N45.2.6) as an inspector. |

Table 1
Regulatory Commitments

E. Regulatory Guide 1.38 (continued)

Clarification/Exception

- | | |
|--|--|
| 7. ANSI N45.2.2
Section 5.2.2 | <p>The second division of this subsection requires six additional inspection activities if an item was not inspected or examined at the source. Entergy will consider that a source inspection has been conducted if the supplier of the item is required to comply with ANSI N45.2.2 for the purchased item and if the supplier's program has been audited and found acceptable in the area (i.e., the supplier performs a source inspection of his supplier or conducts a receipt inspection that includes, as applicable, the six additional items listed).</p> <p>Instead of the requirement that receiving inspections be performed in an area equivalent to the level of storage required for the item, receiving inspections will be performed in a manner and in an environment which does not endanger the requisite quality of an item. The receiving inspection's location environmental controls may be less stringent than storage environmental requirements for that item; however, the short time spent in the less stringent receiving inspection area shall be of such duration that it will not adversely affect the item being received.</p> |
| 8. ANSI N45.2.2
Section 5.2.3 | <p>The "Special Inspection" procedure is not required to be attached to the item or container but shall be readily available to inspection personnel.</p> |
| 9. ANSI N45.2.2
Section 6.2.1 | <p>Items which fall within the Level D classification of the standard will be stored in an area which may be posted to limit access, but other positive controls such as fencing or guards may not be provided.</p> |
| 10. ANSI N45.2.2
Section 6.2.4 | <p>The sentence is replaced with the following: "The use or storage of food, drinks, and salt tablet dispensers in any storage area shall be controlled and shall be limited to designated areas where such use or storage is not deleterious to stored items."</p> |

Table 1
Regulatory Commitments

E. Regulatory Guide 1.38 (continued)

Clarification/Exception

- | | |
|--|--|
| 11. ANSI N45.2.2
Section 6.2.5 | The sentence is replaced with the following: "Exterminators or other appropriate measures shall be used to control animals to minimize possible contamination and mechanical damage to stored material. If evidence of animal activity is detected, a survey or inspection will be utilized to determine the extent of the damage." |
| 12. ANSI N45.2.2
Section 6.3.3 | An alternate to the stated requirement is the following: "Hazardous chemicals, paints, solvents, and other materials of a like nature shall be stored in approved cabinets or containers which are not in close proximity to installed systems required for safe shutdown." |
| 13. ANSI N45.2.2
Section 6.4.2 | Care of items in storage shall be exercised in accordance with the following: "Types of components that could require maintenance while in storage shall be identified and evaluated for specific maintenance requirements. Maintenance activities 6.4.2 (6) through 6.4.2 (8) listed in this requirement shall be considered during this evaluation and any deviations shall be justified and documented." |
| 14. ANSI N45.2.2
Section 6.5 | The last sentence of this section is not applicable to the operations phase. |
| 15. ANSI N45.2.2
Section 6.6 | Entergy will comply with this section's requirements with the clarification that, for record purposes, only the access of personnel without key cards into indoor storage areas shall be recorded. Unloading or pickup of material shall not be considered "access," nor shall inspection by NRC or other regulatory agents, nor shall tours by nonlicensee employees who are accompanied by licensee employees. |

Table 1
Regulatory Commitments

E. Regulatory Guide 1.38 (continued)

Clarification/Exception

- | | |
|--|--|
| 16. ANSI N45.2.2
Section 7.3 | Re-rating hoisting equipment will be considered only when necessary. Prior to performing any lift above the load rating, the equipment manufacturer must be contacted for his approval and direction. The manufacturer must be requested to supply a document granting approval for a limited number of lifts at the new rating and any restrictions involved, such as modifications to be made to the equipment and the test lift load. At all times, the codes governing re-rating of hoisting equipment must be observed. |
| 17. ANSI N45.2.2
Appendix (A-3)
Section A.3.4.1 | During printing of the standard, a transposition occurred between the last sentence of A3.4.1(4) and A3.4.1(5). The correct requirements are: (4) "However, preservatives for inaccessible inside surfaces of pumps, valves and pipe systems containing reactor coolant water shall be the water flushable type." (5) "The name of the preservative used shall be indicated to facilitate touch up." |
| 18. ANSI N45.2.2
Appendix (A-3)
Section A.3.4.2 | There may be cases involving large or complex shaped items for which an inert or dry air purge is provided, rather than a static gas blanket, in order to provide adequate protection due to difficulty of providing a leak proof barrier. In these cases, a positive pressure purge flow may be utilized as an alternate to a leakproof barrier. |
| 19. ANSI N45.2.2
Appendix (A-3)
Section A.3.5.1 | Instead of the requirement for non-metallic plugs and caps to be brightly colored, non-metallic plugs and caps shall be an appropriately visible color. |
| 20. ANSI N45.2.2
Appendix (A-3)
Section A.3.5.2 | This paragraph limits halogen and sulfur content of tape. The use of tapes containing greater amounts of halogens than those identified will be allowed after appropriate evaluation; however, the quantities shall not be such that harmful concentrations could be leached or released by breakdown of the compounds under expected environmental conditions. |

Table 1
Regulatory Commitments

E. Regulatory Guide 1.38 (continued)

Clarification/Exception

- | | |
|--|--|
| 21. ANSI N45.2.2
Appendix (A-3)
Section A.3.7.1 | In lieu of A.3.7.1(3) and (4), Entergy will comply with the following: Fiberboard boxes shall be securely closed either with a water resistant adhesive applied to the entire area of contact between the flaps, or all seams and joints shall be sealed with not less than 2-inch wide, water resistant tape. |
| 22. ANSI N45.2.2
Appendix (A-3)
Section A.3.9 | Instead of the requirement that container markings appear on a minimum of two sides of the container, preferably on one side and one end, Entergy will comply with the following: Containers are adequately marked for storage, identification, and retrieval. Multiple marking requirements are imposed, where necessary. |
| 23. ANSI N45.2.2,
Appendix (A-3)
Section A.3.9 | Instead of the requirement that container markings be no less than 3/4" high, Entergy will comply with the following: Container markings are of a size which permits easy recognition. |
| 24. ANSI N45.2.2,
Appendix (A-3)
Section A.3.9 | Instead of the specific container marking requirements, Entergy will comply with the following: The information required in container marking is evaluated on a case-by-case basis. |
| 25. ANSI N45.2.2
Appendix (A-3)
Section A.3.9 | The last paragraph of A.3.9 could be interpreted as prohibiting any direct marking on bare austenitic stainless steel and nickel alloy metal surfaces. As a alternate, paragraphs A.3.9.(1) and (2) may be used to control marking on the surface of austenitic stainless steels and nickel base alloys based on documented engineering evaluations. Contamination levels are controlled such that the material used for marking is not detrimental to the materials marked. |

Table 1
Regulatory Commitments

F. Regulatory Guide 1.39 Revision 2, dated September 1977

Clarification/Exception

- | | |
|----------------------------------|---|
| 1. ANSI N45.2.3
General | The ANSI five level zone designation system may not be utilized, but the intent of the standard will be met for the areas of housekeeping, plant and personnel safety, and fire protection. |
| 2. ANSI N45.2.3
Section 3.1 | This section is not applicable. |
| 3. ANSI N45.2.3
Section 3.2.3 | The Fire Protection Program shall be used in lieu of the general requirements in this section. |
| 4. ANSI N45.2.3
Section 3.3 | The first paragraph is not applicable to the operations phase. |
| 5. ANSI N45.2.3
Section 3.4 | This section is not applicable. |
| 6. ANSI N45.2.3
Section 3.5 | Subparagraph (1) is not applicable to the operations phase; (2), (3), and (4) will be implemented. |

Table 1
Regulatory Commitments

G. Regulatory Guide 1.58 Revision 1, dated September 1980

Clarification/Exception

- | | |
|--------------------------------|---|
| 1. General | Entergy may choose not to apply the requirements of this guide to those personnel who are involved in day-to-day operations, surveillance, maintenance, and certain technical and support services whose qualifications are controlled by the Technical Specifications or other QAPM commitment requirements. |
| 2. General | General certification of inspectors in accordance with this guide is approved by a manager responsible for quality. |
| 3. ANSI N45.2.6
Section 1.2 | Paragraph 4 requires that the standard be imposed on personnel other than licensee employees; the applicability of this standard to suppliers will be documented and applied, as appropriate, in procurement documents for such suppliers. |
| 4. ANSI N45.2.6
Section 1.2 | The requirements of this standard do not apply to personnel using later editions of ASNT contained within 10 CFR 50.55a approved ASME editions or addenda. |
| 5. ANSI N45.2.6
Section 2.3 | This section requires, in part, that any person who has not performed inspection, examination, or testing activities in his qualified area for a period of one year shall be re-evaluated. A 90-day grace period may be applied to this activity. For activities deferred in accordance with the 90-day grace period, the next performance due date will be based on their originally scheduled date. |
| 6. ANSI N45.2.6
Section 2.5 | This section's requirements are clarified with the stipulation that, where no special physical characteristics are required, none will be specified. The converse is also true: if no special physical requirements are stipulated, none are considered necessary. |
| 7. ANSI N45.2.6
Section 3.5 | Entergy reserves the right to use personnel who do not meet these experience requirements but have shown capability through training and testing or capability demonstration. |

Table 1 Regulatory Commitments

H. Regulatory Guide 1.64 Revision 2, dated June 1976

Clarification/Exception

1. ANSI N45.2.11
Section 5.2.4 For the documentation of inter-disciplinary design reviews, there must be documented evidence of the acceptability of design documents, or portions thereof, prior to release (material, stress, physics, mechanical, electrical, concrete, etc.). Indication of the positive concurrence of those who determine the design acceptability relative to their respective disciplinary area of concern should be on the document or on a separate form traceable to the document. A document that indicates the reviewer's comments need not be retained.

Table 1
Regulatory Commitments

I. Regulatory Guide 1.74, dated February 1974

Clarification/Exception

- | | |
|--------------------------------|---|
| 1. ANSI N45.2.10,
Section 2 | Definitions for “Certificate of Conformance” and “Certificate of Compliance” will be exchanged based upon the guidance in ANSI N45.2.13 Section 10.2. |
|--------------------------------|---|

Table 1
Regulatory Commitments

J. Regulatory Guide 1.88 Revision 2, dated October 1976

Clarification/Exception

- | | |
|--|--|
| 1. RG 1.88
Section C | <p>Entergy will meet the requirements of NFPA No. 232-1975, "Standards for the Protection of Records", as allowed by the Regulatory Guide 1.88 – 1976 or ANSI/ ASME NQA-1-1983, Supplement 17S-1 Section 4.4 in lieu of N45.2.9 Section 5.6 or the discussions in this section for Records Storage Facilities with the clarification that penetrations providing fire protection, lighting, temperature/humidity control, or communications are acceptable as long as the penetration maintains the required fire resistance.</p> <p>Except that as an alternate to these requirements non-permanent records (e.g., 3 years retention records) may be stored and maintained by the originating organization in one-hour minimum fire rated file cabinets located in environmentally controlled facilities that have suitable fire protection. Suitable fire protection is provided by either an automatic sprinkler system or a combination of two or more of the following: 1) automatic fire alarms, 2) hose stations, or 3) portable extinguishers.</p> |
| 2. ANSI N45.2.9
Section 1.4 | <p>Documents are considered completed when they are "completely filled out" (i.e., when sufficient information is recorded to fulfill the record's intended purpose) and the adequacy of the document (e.g., legibility) has been accepted by the document control or records management organizations or designees.</p> |
| 3. ANSI N45.2.9
Section 3.2.2 | <p>The requirements for an index discussed in this section are considered to only require that a method of retrieving the record and controlling the identified information be established.</p> |
| 4. ANSI N45.2.9
Section 5.4.2 | <p>Instead of the requirements of this section, Entergy will comply with the following: Records shall not be stored loosely. They shall be secured for storage in file cabinets or on shelving in containers. Methods other than binders, folders, or envelopes (e.g., dividers or boxes) may be used to organize records for storage. This section is not applicable to special processed records controlled in accordance with Section 5.4.3 when the requirements of this section are not appropriate for the record type.</p> |

Table 1
Regulatory Commitments

J. Regulatory Guide 1.88 (continued)

Clarification/Exception

- | | |
|---|--|
| 5. ANSI N45.2.9
Section 5.4.3 | Instead of the requirements of this section, Entergy will comply with the following: Provisions shall be made for special processed records such as radiographs, photographs, negatives, microfilm, and magnetic media to prevent damage from excessive light, stacking, electromagnetic fields, temperature, and humidity as appropriate to the record type with appropriate consideration of packaging and storing recommendations as provided by the manufacturer of these materials. |
| 6. ANSI N45.2.9
Section 5.5 | Routine general office and nuclear site security systems and access controls are provided; no special security systems are required to be established for record storage areas. |
| 7. ANSI N45.2.9
Section 5.6 | Entergy will meet the requirements of NFPA No. 232 – 1975, “Standards for the Protection of Records”, as allowed by the Regulatory Guide 1.88 – 1976 or ANSI/ASME NQA-1-1983, Supplement 17S-1 Section 4.4 in lieu of this section for Records Storage Facilities with the clarification that penetrations providing fire protection, lighting, temperature/humidity control, or communications are acceptable as long as the penetration maintains the required fire resistance. |

Except that as an alternate to these requirements non-permanent records (e.g., 3 years retention records) may be stored and maintained by the originating organization in one-hour minimum fire rated file cabinets located in environmentally controlled facilities that have suitable fire protection. Suitable fire protection is provided by either an automatic sprinkler system or a combination of two or more of the following: 1) automatic fire alarms, 2) hose stations, or 3) portable extinguishers.

Table 1
Regulatory Commitments

K. Regulatory Guide 1.94 Revision 1, dated April 1976

Clarification/Exception

- | | |
|----------------------------------|--|
| 1. ANSI N45.2.5
Section 2.5.2 | The last sentence requires that all items inspected with maintenance and test equipment, which is found to be out of calibration, shall be considered unacceptable. Entergy will comply with QAPM Section B.9.g as an alternate. QAPM Section B.9.g requires an evaluation to determine the validity of previous measurements. |
| 2. ANSI N45.2.5
Section 4.5 | When using ACI-305-72 and ACI-306-66, Entergy may apply the following requirements: |

PLACING TEMPERATURES OF CONCRETE

A. During hot weather concreting, placing temperatures of concrete will be limited to the following: 1) Concrete members less than 3 feet in least dimension will not exceed 90°F; 2) Concrete members from 3 feet to 6 feet in least dimension will not exceed 70°F; and 3) Concrete members more than 6 feet in least dimension will have placing temperature as near 50°F as can be obtained by use of ice as necessary up to 100 percent of adding mixing water; and by shading aggregate and sprinkling the coarse aggregate the day it is to be used. Care will be taken so that no unmelted ice remains in the concrete at the end of the mixing period.

B. During cold weather concreting: In heating the water and aggregate, live steam to heat the fine and coarse aggregate shall not be used. The permissible range for concrete temperature shall be as follows: 1) Sections less than 3 feet in least dimensions 55°F to 75°F; and 2) Mass concrete 3 feet or more in least dimension 45°F to 65°F. The mixing water and aggregate will be purchased as required. The materials will be free of ice, snow and frozen lumps before they enter the mixer.

- | | |
|----------------------------|---|
| 3. ANSI N45.2.5
Table B | In accordance with ASME QA92-003 (ASME NQA-1 Interpretations), testing of non-shrink grout does not fall under the jurisdiction of N45.2.5 Table B; but the designer is responsible for identifying necessary testing and frequency requirements. |
|----------------------------|---|

Table 1
Regulatory Commitments

K. Regulatory Guide 1.94 (continued)

Clarification/Exception

**4. ANSI N45.2.5
Section 4.8**

For the performance of correlation tests, the requirements of this standard may be modified as discussed below:

Table B, REINFORCING STEEL: In-process testing of reinforcing steel will include the mechanical properties of yield strength, tensile strength and percent elongation on full size specimens for each bar size for each 50 tons or fraction thereof from each mill heat. Bend tests are performed during material qualification testing only, except as noted below for bar sizes #14 through #18.

Table A, "Required Qualification Tests" as applied to reinforcing steel will include bend tests as required by ASTM A615 and summarized in the following: a) For bar sizes #3 through #11, one full size specimen from largest bar size rolled from each mill heat, unless material from one heat differs by three or more designation numbers. When this occurs, one bend test shall be made from both the highest and lowest designation number of the deformed bars rolled; b) For bar sizes #14 through #18, Supplementary Requirements S1 of ASTM A615 will be applied, i.e., one fullsize specimen for each bar size for each mill heat. If supplementary requirements are not followed for mill tests, they will be applied as in-process tests.

In-process test specimens may be selected at the rebar fabrication shop, prior to start of fabrication of the rebar from the heat or fraction thereof represented by the test specimen.

Acceptance criteria for any failed test (qualifications as well as in-process) may be the same as that for tensile tests specified in Subarticle CC-2331.2 of ASME Section III, Div. 2 Code (1975). This states that if a test specimen fails to meet the specified strength requirements, two (2) additional specimens from the same heat and of the same bar size would be tested, and if either of the two additional specimens fails to meet the specified strength requirements, the material represented by the tests would be rejected for the specified use. Alternative use of rejected material under strict control may be subject to evaluation by engineering.

Table 1
Regulatory Commitments

K. Regulatory Guide 1.94 (continued)

Clarification/Exception

- | | |
|---------------------------------------|--|
| 5. ANSI N45.2.5
Section 4.9 | Entergy may interpret the terms "horizontal, vertical and diagonal bars" to apply respectively to the following types of splice positions: a. Horizontal, including 10° to horizontal; b. Vertical, including 10° to vertical; and c. 45° angle, including 10° to 80° angle. The words "splicing crew" are interpreted to refer to all project members that are actively engaged in preparing and assembling cadweld mechanical splices at the final splice location. Separate test cycles will be established for each bar size and each splice position. |
| 6. ANSI N45.2.5
Section 5.5 | Entergy will comply with inspection requirements of the applicable welding codes and any exceptions instead of this section. |

Table 1
Regulatory Commitments

L. Regulatory Guide 1.116 Revision 0-R, dated June 1976

Clarification/Exception

- | | |
|------------------------------|---|
| 1. ANSI N45.2.8
Section 3 | Documented routine inspections and audits of the storage area may be performed instead of the requirements of this section. |
|------------------------------|---|

Table 1
Regulatory Commitments

M. Regulatory Guide 1.123 Revision 1, dated July 1977

Clarification/Exception

- | | |
|--|---|
| 1. RG 1.123
Paragraph C.6.e | This paragraph shall be implemented as originally written in N45.2.13 (i.e., with the verb "should" instead of the verb "shall"). Entergy retains the ultimate responsibility for performance of purchased equipment. The appropriate engineering discipline will exercise this management/engineering prerogative with respect to the final decision on post installation test requirements. |
| 2. ANSI N45.2.13
Section 1.2.2 | Item c is an option which may be used to assure quality; however, any option given in 10 CFR 50 Appendix B, Criterion VII as implemented by the QAPM may also be used. |
| 3. ANSI N45.2.13
Section 1.3 | Instead of the definition provided for QA Program Requirements, Entergy will comply with the following: "Those individual requirements of the QAPM which, when invoked in total or in part, establish quality assurance program requirements for the activity being controlled. Although not specifically used in the QAPM, ANSI N45.2 may be imposed upon suppliers." |
| 4. ANSI N45.2.13
Section 3.1 | The "same degree of control" is stipulated to mean "equivalent level of review and approval." The changed document may not always be reviewed by the originator; however, at least an equivalent level of management/supervision shall review and approve any changes. |
| 5. ANSI N45.2.13
Section 3.1 | Changes to procurement documents which are changes in quantity, estimated price, cost codes, taxes, format or editorial changes that do not affect the quality of the item or service do not require an equivalent level of review and approval as the original document. |

Table 1
Regulatory Commitments

M. Regulatory Guide 1.123 (continued)

Clarification/Exception

- | | |
|---|--|
| <p>5a. ANSI N45.2.13
Section 3.2</p> | <p>When purchasing commercial-grade (as defined in 10 CFR 21) calibration services from NVLAP or A2LA accredited calibration laboratories, procurement documents are not required to impose a quality assurance program consistent with ANSI N45.2-1971. In such cases, accreditation may be accepted in lieu of the Purchaser imposing a QA Program consistent with ANSI N45.2-1971, provided all the following are met:</p> <ul style="list-style-type: none">• The accreditation is to ANSI/ISO/IEC 17025.• The accrediting body is either NVLAP A2LA.• The published scope of accreditation for the calibration laboratory covers the needed measurement parameters, ranges, and uncertainties.• The purchase documents require calibration/report to include identification of the laboratory equipment/standards used.• The purchase documents require reporting as-found calibration data when calibrated items are found to be out-of-tolerance. |
| <p>6. ANSI N45.2.13
Section 3.4</p> | <p>The requirements of the QAPM will be implemented instead of this section.</p> |
| <p>7.
ANSI N45.2.13
Section 4.2</p> | <p>Supplier evaluations may be performed any time prior to placing the purchased item in service.</p> |
| <p>8. ANSI N45.2.13
Section 8.2
Item b</p> | <p>Non-conformance notices for conditions described in this section are only required to be submitted to Entergy when the non-conformance could adversely affect the end use of an item relative to safety, interchangeability, operability, reliability, integrity or maintainability.</p> |

Table 1
Regulatory Commitments

M. Regulatory Guide 1.123 (continued)

Clarification/Exception

- | | |
|--|---|
| <p>9. ANSI N45.2.13
Section 10.2
Item d</p> | <p>The section states that the certificate should be attested to by a person who is responsible for this QA function whose function and position are described in the Purchaser's/Supplier's QA program. As an alternate to this requirement, Entergy will use the following: "The person attesting to a certificate shall be an authorized and responsible employee of the supplier, and shall be identified by the supplier."</p> |
|--|---|

Table 1
Regulatory Commitments

N. Regulatory Guide 1.144 Revision 1, dated September 1980

Clarification/Exception

- | | |
|----------------------------------|--|
| 1. RG 1.144
Section C.3.a.(2) | This section is not applicable. |
| 2. RG 1.144
Section C.3.b.(2) | In addition to the requirements of this section, previously evaluated and approved active suppliers for which auditing is not the selected method of source verification should be evaluated concurrent with the award of a contract. Regardless of the evaluation results, active suppliers (except those excluded under C.3.b(1)) are source verified (audit, surveillance or inspection) within two years prior to award of a contract or have source verification performed. Inactive suppliers are evaluated prior to supplying items or services. An audit shall be conducted if required to determine the acceptability of procured items or services (i.e., acceptability cannot be determined by receipt inspection or another method allowable under 10 CFR 50 Appendix B, Criterion VII). |
| 3. RG 1.144
Section C.3.b.(2) | This section requires that supplier audits be performed on a triennial basis. A grace period not to exceed 25% for audit interval may be applied to this activity. For activities deferred in accordance with the 25% grace period, the next performance date will be based on their originally scheduled date. A total combined time interval for any three consecutive inspection or audit intervals should not exceed 3.25 times the specified inspection or audit interval. |
| 4. RG 1.144
Section C.3.b.(2) | Instead of the annual documented evaluation of suppliers discussed in this section, an ongoing evaluation of supplier performance is conducted which takes into account, where applicable, the other considerations of this section and paragraph of the Regulatory Guide. |

Table 1
Regulatory Commitments

N. Regulatory Guide 1.144 (continued)

Clarification/Exception

- | | |
|--|--|
| 4a. RG 1.144
Section C.3.b.(2) | For suppliers of commercial-grade (as defined in 10 CFR 21) calibration services with accreditation by NVLAP or A2LA, a documented review of the supplier's accreditation by the purchaser may be used in lieu of performing an audit, accepting an audit by another licensee, performing a commercial-grade survey, inspecting or testing following delivery, or performing in-process surveillances during performance of the service. This review shall include, at a minimum, verification of all the following: <ul style="list-style-type: none">• The accreditation is to ANSI/ISO/IEC 17025.• The accrediting body is either NVLAP A2LA.• The published scope of accreditation for the calibration laboratory covers the needed measurement parameters, ranges, and uncertainties. |
| 5. ANSI N45.2.12
Section 4.3.1 | Pre-audit and post-audit conferences may be fulfilled by a variety of communications, such as telephone conversation. |
| 6. ANSI N45.2.12
Section 4.3.1 | Pre-audit and post-audit conferences are only held when deemed necessary by quality assurance or when requested by the audited organization. |
| 7. ANSI N45.2.12
Section 4.3.2.2 | This subsection could be interpreted to limit auditors to the review of only objective evidence; sometimes and for some program elements, no objective evidence may be available. Entergy will comply with an alternate sentence which reads: "When available, objective evidence shall be examined for compliance with QAPM requirements. If subjective evidence is used (e.g., personnel interviews) then the audit report must indicate how the evidence was obtained." |

Table 1
Regulatory Commitments

N. Regulatory Guide 1.144 (continued)

Clarification/Exception

- | | |
|---|---|
| 8. ANSI N45.2.12
Section 4.3.3 | Pre-audit and post-audit conferences are only held when deemed necessary by quality assurance or when requested by the audited organization. |
| 9. ANSI N45.2.12
Section 4.3.3 | Pre-audit and post-audit conferences may be fulfilled by a variety of communications, such as telephone conversation. |
| 10. ANSI N45.2.12
Section 4.4 | Instead of the last sentence of the last paragraph of the section, Entergy will comply with the following: The audit report shall be issued within thirty working days after the last day of the audit. The last day of an audit shall be considered to be the day of the post-audit conference. If a post-audit conference is not held because it was deemed unnecessary, the last day of the audit shall be considered to be the date the post-audit conference was deemed unnecessary as documented in the audit report. |
| 11. ANSI N45.2.12
Section 4.5.1 | The QAPM Section A.6 corrective action program may be used instead of these requirements as long as the appropriate time limits are applied to significant conditions adverse to quality. Also, no additional documentation is necessary if needed corrective actions are taken and verified prior to audit report issuance. |

Table 1
Regulatory Commitments

O. Regulatory Guide 1.146 Revision 0, dated August 1980

Clarification/Exception

- | | |
|--|--|
| 1. ANSI N45.2.23
Section 2.3.1.3 | Holdings of NRC-issued Reactor Operator/Senior Reactor Operator Licenses comply with the requirements of this section and may be awarded two credits. |
| 2. ANSI N45.2.23
Section 2.3.4 | Prospective lead auditors shall demonstrate their ability to effectively implement the audit process and lead an audit team. They shall have participated in at least one audit within the year preceding the individual's effective date of qualification. Upon successful demonstration of the ability to effectively lead audits, licensee management may designate a prospective lead auditor as a "lead auditor". |
| 3. ANSI N45.2.23
Sections 3.2 and
5.3 | These sections require that an annual assessment be performed of each lead auditor's qualification and that each lead auditor's records be updated annually. A 90-day grace period may be applied to these activities. For activities deferred in accordance with the 90-day grace period, the next performance due date will be based on their originally scheduled date. |

Enclosure 2

CNRO2021-00011

Changes to the Entergy IPEC Quality Assurance Program Manual

Changes to the Entergy IPEC Quality Assurance Program Manual

Changes to the Entergy Indian Point Energy Center (IPEC) Quality Assurance Program Manual (QAPM) since separation from Entergy QAPM, initial effective date April 03, 2020

Synopsis of QAPM Revision Changes

IPEC QAPM Rev. 0

1. The site specific Indian Point Energy Center (IPEC) QAPM Revision 0 was issued on April 03, 2020 in preparation for the decommissioning of the IPEC. The IPEC QAPM is an adoption of the Entergy Fleet Quality Assurance Program Manual as described below:

To support the implementation of ongoing quality assurance activities and the transition to a decommissioning facility, IPEC adopted the Entergy QAPM under the guidance provided in 10 CFR 50.54(a)(3) and established a site-specific IPEC QAPM using the Entergy QAPM as the basis. The IPEC QAPM contains the same requirements and commitments as the current Entergy QAPM. The changes made to support this transition and allow the adoption of the Entergy QAPM involved primarily administrative changes to reflect a site-specific QAPM. These changes were assessed using the guidance provided in 10 CFR 50.54(a)(3) and did not constitute a reduction in commitments to the previously approved quality assurance program (Reference letter NL-20-024 (ML20113E817) to the NRC dated April 22, 2020).

No other changes were made under this IPEC QAPM revision.

IPEC QAPM Rev. 01

This change to the IPEC QAPM Revision 0 was made upon the shutdown of IPEC Unit 2 and certification of permanent cessation of operations and permanent defueling of IPEC Unit 2 under 10 CFR 50.82(a)(1). This change provided conditional based exceptions that may be implemented for a unit that has permanently ceased power operations and has docketed a certification of permanent cessation of operations and permanent defueling under 10 CFR 50.82(a)(1) and entered decommissioning. The conditional based exceptions included within this revision to the IPEC QAPM are considered reductions in commitments to the previously approved QAPM, but can be implemented without prior NRC approval for the following reasons:

- The first conditional based exception that is considered a reduction in commitments to the previously approved QAPM is with Table 1 Sections A.1 and C.14 which adds a discussion regarding the position of Certified Fuel Handler (CFH) which become equivalent to the position of Senior Reactor Operator once a unit has a certification of permanent cessation of operations under 10 CFR 50.82(a)(1). This exception can only be implemented if a unit has permanently ceased power operations and has Certified under 10 CFR 50.82(a)(1). This conditional based exception relies on an NRC issued License Amendment (LA) to the Administrative Technical Specifications and the associated SER for the specific unit and the submittal of the CFH Training Program to the NRC for review and approval. This would be considered a corresponding change to

implement the specific unit's LA with the associated SER for a unit that has permanently ceased power operations and has docketed a certification of permanent cessation of operations and permanent defueling under 10 CFR 50.82(a)(1) and entered decommissioning. This License Amendment Request (LAR) was submitted to the NRC by Entergy IPEC via outgoing letter NL-19-013 (ML 19105B236) and provided requested changes to the Unit 2 and Unit 3 Administrative Technical Specifications.

- The second conditional based exception included in this change and is considered a reduction in commitments to the previously approved QAPM provides an allowance to credit alternative experience to determine the qualifications for the position of CFH and operators for a unit that has permanently ceased power operations and has Certified under 10 CFR 50.82(a)(1). This change was previously approved by the NRC for Vermont Yankee [Reference Letter to Vermont Yankee from the NRC, dated June 16, 2016 (ADAMS Accession Nos. ML16165A466 and ML16165A467), which included an associated SER] based on their docketing of the certification of permanent cessation of operations and permanent defueling under 10 CFR 50.82(a)(1). This is a consistent approval basis to the condition that IPEC Units 2 and 3 will achieve when the same milestone is met. This allows the conditional based exception to be included in the QAPM and implemented based on the associated Vermont Yankee SER without requiring prior NRC approval.

No other changes were made under this revision. IPEC QAPM, Revision 01 continues to comply with 10 CFR Part 50 Appendix B, Standard Review Plan 17.3, NUREG-0800 and 10 CFR 50.54(a)(3). It will also continue to satisfy the requirements of 10 CFR 71 Subpart H and 10 CFR 72 Subpart G.

IPEC QAPM Rev. 02

1. IPEC QAPM Revision 1, Change 1, allows a grace period not to exceed 25% for audit interval for supplier audits. This is a reduction in commitment from the previously approved QAPMs. The current requirement of a 90-day grace period was submitted and approved in the Entergy QAPM, Rev. 3, submitted via CNRO2000-00012 and accepted by the NRC, ADAMS Accession No.: ML003711648 and IPEC QAPM, Rev 0, submitted via NL-20-024 and accepted by the NRC. While the 25% grace period represents a reduction in commitment from the previously approved Entergy and IPEC QAPMs, the change has been previously evaluated and approved by the NRC, as documented in Southern Nuclear Company SER, approved June 17, 2005, ADAMS Accession No.: ML051570349.
2. IPEC QAPM Revision 1, Change 2, reduces the meeting frequency for the Safety Review Committee (SRC) meeting from twice per year to once per year. This is a reduction in commitment from the previously approved QAPMs. Entergy is committed to ANSI N18.7- 1976, section 4.3.2.2, defining the meeting frequency for the independent review body as no less than twice per year. Entergy never took exception to this requirement; thus, Entergy is committed to this requirement in Revision 0 of the Entergy QAPM, submitted via CNRO1998-00025 and accepted by the NRC, letter dated November 6, 1998; and IPEC QAPM, Rev 0, submitted via NL-20-024 and accepted by the NRC. While changing the SRC meeting frequency to once per year represents a reduction in commitment from the previously approved Entergy and IPEC QAPMs, the change has been previously evaluated and approved by the NRC, as documented in Nuclear

Management Company, LLC, (NMC) SER, dated January 13, 2005, ADAMS Accession No.: ML050210276. This SER removes the requirement for the SRC completely; however, Entergy will use this SER to reduce the frequency for the meeting of the SRC and the SRC will still meet once per year and perform reviews as specified by ANSI N18.7 -1976. The On-site Safety Review Committee and Nuclear Independent Oversight currently perform the reviews the Safety Review Committee performs, and these reviews will be used to supplement the reviews by the SRC when the meeting frequency is reduced.

These changes to the IPEC QAPM were issued in conjunction with the same changes to the Entergy QAPM. IPEC QAPM Revision 1, Change 1 and Change 2 were incorporated into IPEC QAPM Revision 2, effective July 16, 2020. Entergy QAPM Revision 38, Change 1 and Change 2 were incorporated into Entergy QAPM Revision 39, effective July 16, 2020.

IPEC QAPM Rev. 03

1. IPEC QAPM Rev. 2, Change 1, is an update to the Entergy nuclear corporate and site organizational structure which alters the site records management reporting relationship. The management position for site records management will no longer report off-site to the VP Regulatory Affairs, but instead will report to the site Vice President through the site Performance Improvement manager.
2. IPEC QAPM Revision 2, Change 2, is an update to the Entergy nuclear corporate organizational structure which eliminates the position Sr. Vice President (VP) Nuclear Operations, changes the reporting relationships for all three COO, Nuclear Operations positions from reporting to the Sr VP Nuclear Operations to reporting to the Executive VP, Nuclear Operations / CNO, creates a new position Senior Vice President, Nuclear Corporate Services reporting to the CNO, and changes the reporting relationships for the following positions from reporting to the Sr. VP Nuclear Operations to reporting to the new position Sr. VP, Nuclear Corporate Services: VP, Outage Services, VP, Operations Support, and VP, Regulatory Assurance.

These changes were incorporated into IPEC QAPM Revision 03 and Entergy QAPM Revision 40, effective February 7, 2021.

Attachments:

- A. IPEC QAPM Revisions 0, 01, 02, and 03 10 CFR 50.54(a)(3) and 10 CFR 71.106 Evaluation Forms and Affected Pages(126 pages)
- B. IPEC QAPM Revision 03 Complete Copy (56 pages)

Enclosure 2, Attachment A

CNRO2021-00011

**IPEC QAPM Revisions 0, 01, 02, and 03 10 CFR 50.54(a)(3) and 10 CFR 71.106 Evaluation
Forms and Affected Pages**

(126 pages to follow)

QAPM Change Evaluation**NOTE**

The basis for the answers should be of sufficient depth and detail to support the conclusions reached and allow for independent review. Simply stating the change does not decrease the effectiveness without stating why is not acceptable.

Editorial corrections (i.e., spelling, punctuation, typographical or grammatical errors, and incorrect cross-references) are not considered changes and, therefore, a Quality Assurance Program Regulatory Review is not required. All boxes should be marked "N/A" and proceed to signature page of the evaluation form. If questions 4-8 do not apply to the change being reviewed, then the associated boxes should be marked "N/A". [10 CFR 50.54 (a)(3)]

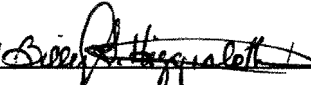
	YES, NO, or N/A
<p>1. Is this change an editorial change as defined in 10 CFR 50.54(a)(3) and 10 CFR 71.106? If yes, provide basis, mark remaining questions "N/A" and state "not a reduction in commitment." Proceed to approval page of attachment.</p> <p>Basis for Answer: These changes are not considered editorial as defined in 10 CFR 50.54(a)(3) and 10 CFR 71.106. This change separates the Indian Point Energy Center (IPEC) QAPM from the Entergy QAPM. It is an adoption of the current Entergy QAPM Revision 37 with necessary changes in nomenclature as needed to make it plant specific to IPEC. The IPEC QAPM will be issued as IPEC QAPM Revision 0.</p>	NO
<p>2. For any YES answer in the 10 CFR 50.54(a) QAPM Change Screening or for the QA-initiated change, does the proposed change represent a reduction in commitment or process(es) described or established in the approved QA Program?</p> <p>Basis for Answer: The change to the Entergy Quality Assurance Program Manual (QAPM) does not represent a reduction in commitment in that it separates the Indian Point Energy Center (IPEC) QAPM from the Entergy Fleet QAPM. The separation of IPEC from the Entergy QAPM is in preparation for the decommissioning of the IPEC. The IPEC QAPM Revision 0 is an adoption of the previously approved consolidated Entergy QAPM that was initially approved by the U.S. Nuclear Regulatory Commission (NRC) in the Safety Evaluation Report, dated November 6, 1998 and most recently as approved in the Safety Evaluation Report, dated December 28, 2012 and documented in Revision 24 of the Entergy QAPM. Since then, thirteen (13) revisions have been made to the Entergy QAPM primarily for organizational and responsibility changes. Those changes were validated not to be a reduction in commitment to the previously approved QAPM in accordance with 10 CFR 50.54(a)(3). One (1) reduction</p>	NO

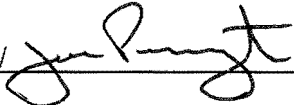
<p>in commitment to the previously approved QAPM was approved by the NRC, but it was limited to grout and was incorporated into Revision 31 of the QAPM. Therefore, these proposed changes are being submitted to the NRC for notification with the Fleet QAPM either during 2020 or 2021 based on the timing of the issuance of Revision 1 and the annual submittal to the NRC.</p>	
<p>3. If item 2 above is YES, is the proposed change limited to the use of a quality assurance alternative or exception approved by the NRC safety evaluation report (SER), for which the bases of the NRC approval are applicable to Entergy?</p> <p>If YES, explain how all of the NRC approval bases from the SER are incorporated or covered by the Entergy QA Program.</p> <p><u>This exemption is not allowed under 10 CFR 71.106 and cannot be used to reduce commitments under part 71.</u></p> <p>Basis for Answer: This change to the Entergy Quality Assurance Program Manual (QAPM) separates the Indian Point Energy Center (IPEC) QAPM from the Entergy QAPM. The separation of IPEC from the Entergy QAPM is in preparation for the decommissioning of the IPEC. The IPEC QAPM Revision 0 is an adoption of the approved Entergy QAPM to be plant specific for IPEC. This change does not include the use of a quality assurance alternative or exception previously approved by an NRC Safety Evaluation Report (SER).</p>	<p>N/A</p>
<p>4. Is the proposed change a change to a QA standard approved by the NRC which is more recent than the QA standard currently established in the QA Program?</p> <p>Basis for Answer: None of the proposed changes affect QA standards approved by the NRC other than name changes from Entergy to IPEC.</p>	<p>N/A</p>

	YES, NO, or N/A
<p>5. Is the proposed change a change involving the use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles?</p> <p>Basis for Answer: None of the proposed changes affect the use of generic organizational position titles.</p>	N/A
<p>6. Is the proposed change a change involving the use of generic organizational charts to indicate functional relationships, authorities, and responsibilities, or alternately, the use of descriptive text?</p> <p>Basis for Answer: None of the proposed changes include the use of generic organizational charts to indicate functional relationships, authorities, and responsibilities.</p>	N/A
<p>7. Is the proposed change an elimination of Quality Assurance Program information that duplicates language in quality assurance regulatory guides and quality assurance standards to which Entergy Nuclear (EN) is committed?</p> <p>Basis for Answer: None of the proposed changes include the elimination of Quality Assurance Program information that duplicates language in Quality Assurance Regulatory Guides and Quality Assurance Standards</p>	N/A
<p>8. Does the proposed change continue to ensure that persons and organizations performing Quality Assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations?</p> <p>Basis for Answer: There are no changes to the Quality Assurance functions.</p>	YES
<p>9. Is a change to the QAPM required? If YES, process change per EN-LI-113. If NO, distribute as indicated on the last page of this attachment.</p> <p>Basis for Answer: A revision to the Entergy QAPM is required to remove the IPEC Docket Numbers from the cover page and develop a Revision 0 of the IPEC QAPM and include IPEC's Docket Numbers on the IPEC QAPM.</p>	YES

QAPM CHANGE REVIEW RESULTS

- ☐ Change is editorial in accordance with 10 CFR 50.54(a)(3) and 10 CFR 71.106, thus, does not represent a reduction in commitment. The change can be implemented upon approval of parent change document. (Question 1 is YES)
- ☒ Does not represent a reduction of commitment, and can be implemented upon approval of parent change document. (Questions 4, 5, 6, 7, and 8 are YES or N/A)
- ☐ Represents a reduction of commitment with prior NRC approval. The safety evaluation issued by the NRC has been evaluated and it directly applies to the changes being proposed for EN. The change can be implemented upon approval of parent change document. (Question 3 is YES)
- ☐ Represents a reduction of commitment; however, the change has sufficient basis to demonstrate continued compliance with Appendix B and USAR commitments. Therefore, the proposed change should be submitted for NRC review/approval. (Questions 2 is YES and Question 3 is NO)
- ☐ Represents a reduction of commitment with insufficient basis to demonstrate continued compliance. Therefore, the activity should not be processed.

Billy L. Higginbotham /  02/24/2020
Preparer Date

Joe P. Pennington /  / 02/24/2020
Manager, QA Date

QA Site Supervisor Review:

 Applicable Site QA Supervisor Reviews Required
 (see attached sheets for documentation of reviews)
☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	IPEC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
RBS	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
WF3	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Site Review Due Date: 03/06/2020

Site Review Input:

Record references below. If there are none state **None**.

ANO: NONE	IPEC:
GGNS: NONE	PLP/BRP: NONE
RBS: NONE	
WF3: NONE	

Site QA Supervisor acknowledges completion of reviews below

 ANO ☐ GGNS ☐ RBS ☐ WF3 ☐
 IPEC ☒ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

Steven O'Brien

Site QA Supervisor



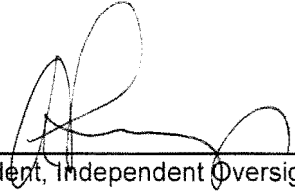
/ 3-5-2020

/ Date

CHANGE DISPOSITION

- ☒ Approved for implementation
☐ Disapproved
☐ Approved for submittal to the NRC

Approved by/Date: Oscar Limpias


Vice President, Independent Oversight

03/06/2020

Distribution: Original – Attach to Parent Document;
Copy – Quality Assurance



Entergy

Quality Assurance Program Manual **Indian Point Energy Center (IPEC)**

Indian Point 1 Nuclear Power Plant
Docket No. 50-003
License No. DPR-05
Docket No. 72-51
Docket No.: 71-0240

Indian Point 2 Nuclear Power Plant
Docket No. 50-247
License No. DPR-26
Docket No. 72-51
Docket No.: 71-0240

Indian Point 3 Nuclear Power Plant
Docket No. 50-286
License No. DPR-64
Docket No. 72-51
Docket No.: 71-0240



POLICY STATEMENT

Entergy ~~Operations, Inc. (EOI)~~ Indian Point Energy Center (IPEC) and Entergy Nuclear Operations, Inc. (ENOI) ~~(hereafter referred to collectively as Entergy)~~ shall maintain and operate ~~nuclear plants~~ the IPEC facility in a manner that will ensure the health and safety of the public and workers. ~~The f~~Facilities shall be operated in compliance with the requirements of the Code of Federal Regulations, the applicable Nuclear Regulatory Commission (NRC) Facility Operating Licenses, and applicable laws and regulations of the state and local governments.

The Quality Assurance Program (QAP) described herein and associated implementing documents provide for control of activities that affect the quality of safety-related nuclear plant structures, systems, and components. The QAP is also applied to certain quality-related equipment and activities that are not safety-related, but support safe plant operations, or where other regulatory or industry guidance establishes program requirements.

The Quality Assurance Program Manual (QAPM) is the top-level policy document that establishes the manner in which quality is to be achieved and presents our overall philosophy regarding achievement and assurance of quality. Implementing documents assign more detailed responsibilities and requirements and define the organizational interfaces involved in conducting activities within the scope of the QAPM. Compliance with the QAPM and implementing documents is mandatory for personnel directly or indirectly associated with implementation of the QAP.

Responsibility for developing, implementing, and verifying execution of the Quality Assurance Program is delegated to the chief nuclear officer (highest level nuclear executive) and authority for developing and verifying execution of the program to the executive responsible for oversight.

TABLE OF CONTENTS

<u>SECTION</u>	<u>PAGE</u>
A. MANAGEMENT	
1. Methodology	1
2. Organization	1
3. Responsibility	5
4. Authority	5
5. Personnel Training and Qualification	6
6. Corrective Action	6
7. Regulatory Commitments	7
B. PERFORMANCE/VERIFICATION	
1. Methodology	7
2. Design Control	8
3. Design Verification	9
4. Procurement Control	10
5. Procurement Verification	11
6. Identification and Control of Items	11
7. Handling, Storage, and Shipping	11
8. Test Control	12
9. Measuring and Test Equipment Control	13
10. Inspection, Test, and Operating Status	14
11. Special Process Control	14
12. Inspection	15

TABLE OF CONTENTS

<u>SECTION</u>	<u>PAGE</u>
B. PERFORMANCE/VERIFICATION (continued)	
13. Corrective Action	15
14. Document Control	16
15. Records	16
C. AUDIT	
1. Methodology	17
2. Performance	17
D. INDEPENDENT SAFETY REVIEW	
1. Description	20
 Table 1- Regulatory Commitments	
A. Regulatory Guide 1.8 Revision 1, dated September 1975 “Personnel Qualification and Training”	21
B. Regulatory Guide 1.30 , dated August 1972 “Quality Assurance Requirements for the Installation, Inspection, and Testing of Instrumentation and Electric Equipment”	23
C. Regulatory Guide 1.33 Revision 2, dated February 1978 “Quality Assurance Program Requirements”	24
D. Regulatory Guide 1.37 , dated March 1973 “Quality Assurance Requirements for Cleaning of Fluid Systems and Associated Components of Water-Cooled Nuclear Power Plants”	28
E. Regulatory Guide 1.38 Revision 2, dated May 1977 “Quality Assurance Requirements for Packaging, Shipping, Receiving, Storage and Handling of Items for Water-Cooled Nuclear Power Plants”	29
F. Regulatory Guide 1.39 Revision 2, dated September 1977 “Housekeeping Requirements for Water-Cooled Nuclear Power Plants”	34

TABLE OF CONTENTS

<u>SECTION</u>	<u>PAGE</u>
Table 1- Regulatory Commitments (continued)	
G. Regulatory Guide 1.58 Revision 1, dated September 1980 “Qualifications of Nuclear Power Plant Inspection, Examination, and Testing Personnel”	35
H. Regulatory Guide 1.64 Revision 2, dated June 1976 “Quality Assurance Requirements for the Design of Nuclear Power Plants”	36
I. Regulatory Guide 1.74 dated February 1974 “Quality Assurance Terms and Definitions”	37
J. Regulatory Guide 1.88 Revision 2, dated October 1976 “Collection, Storage and Maintenance of Nuclear Power Plant Quality Assurance Records”	38
K. Regulatory Guide 1.94 Revision 1, dated April 1976 “Quality Assurance Requirements for Installation, Inspection and Testing of Structural Steel during the Construction Phase of Nuclear Power Plants”	40
L. Regulatory Guide 1.116 Revision 0-R, dated June 1976 “Quality Assurance Requirements for Installation, Inspection and Testing of Mechanical Equipment and Systems”	43
M. Regulatory Guide 1.123 Revision 1, dated July 1977 “Quality Assurance Requirements for control of Procurement of Items and Services for Nuclear Power Plants”	44
N. Regulatory Guide 1.144 Revision 1, dated September 1980 “Auditing of Quality Assurance Programs for Nuclear Power Plants”	47
O. Regulatory Guide 1.146 Revision 0, dated August 1980 “Qualification of Quality Assurance Program Audit Personnel for Nuclear Power Plants”	50

A. MANAGEMENT**1. Methodology**

- a. The Quality Assurance Program Manual (QAPM) provides a consolidated overview of the quality program controls ~~associated with IPEC which govern the operation and maintenance of Entergy's (Entergy Operations, Inc.'s (EOI) and Entergy Nuclear Operations, Inc. (ENOI)~~ quality related items and activities. ~~The interface and coordination with the Entergy Fleet QAPM ensure the requirements of the IPEC QAPM are satisfied.~~ The QAPM describes the quality assurance organizational structure, functional responsibilities, levels of authority, and interfaces.
- b. The requirements and commitments contained in the QAPM are mandatory and must be implemented, enforced, and adhered to by all individuals and organizations. Employees are encouraged to actively participate in the continued development of the QAPM as well as its implementation. Changes should be promptly communicated when identified.
- c. The QAPM applies to all activities associated with structures, systems, and components that are safety related or controlled by 10 CFR 72. The QAPM also applies to transportation packages controlled by 10 CFR 71. The methods of implementation of the requirements of the QAPM are commensurate with the item's or activity's importance to safety. The applicability of the requirements of the QAPM to other items and activities is determined on a case-by-case basis. The QAPM implements 10 CFR 50 Appendix B, 10 CFR 71 Subpart H, and 10 CFR 72 Subpart G.
- d. The QAPM is implemented through the use of approved procedures (e.g., policies, directives, procedures, instructions, or other documents) which provide written guidance for the control of quality related activities and provide for the development of documentation to provide objective evidence of compliance.

2. Organization

The organizational structure responsible for implementation of the QAPM is described below. The organizational structure consists of corporate ~~and IPEC functions and the nuclear facilities~~. The specific organization titles for the quality assurance functions described are identified in procedures. The authority to accomplish the quality assurance functions described is delegated to the incumbent's staff as necessary to fulfill the identified responsibility.

A.2. (continued)**a. Corporate Organization**

1. The ~~Entergy Corporation~~ chief executive officer (CEO) is responsible for overall corporate policy and provides executive direction and guidance for the corporation as well as promulgates corporate policy through the Company's senior management staff. Responsibility for developing, implementing, and verifying execution of the Quality Assurance Program is delegated to the chief nuclear officer, the highest level nuclear executive, and authority for developing and verifying execution of the program to the executive responsible for nuclear oversight.
2. The chief nuclear officer, the highest level nuclear executive officer, is responsible for providing top-level direction for the safe and reliable operation of ~~Entergy's nuclear sites~~ the IPEC facility. The highest level nuclear executive officer provides guidance with regards to company quality assurance policy. This position is responsible for providing engineering services, nuclear safety, and operations support. Supply chain and information technology are no longer a functional area exclusively within the nuclear organizational structure. However, the oversight and governance of these functional areas remain within the nuclear organization through this executive position that is responsible for nuclear operations. The off-site safety review committee reports to this executive.
3. The following executives report to the highest level nuclear executive officer and provide governance and oversight in regards to implementing company quality assurance policy:
 - (a) The senior vice president responsible for nuclear operations is responsible for the implementation of all activities associated with the safe and reliable operation of ~~Entergy's nuclear sites~~ the IPEC facility. This position is also responsible for providing nuclear safety, operations support, outage services, regulatory assurance and implementing quality assurance policies, goals, and objectives of ~~Entergy's~~ corporate support activities.
 - (b) The executive responsible for engineering and technical services is responsible for providing engineering services, project management services and implementing major projects and modifications including implementing quality assurance policies, goals, and objectives.
 - (c) The executive responsible for oversight establishes the policies, goals, and objectives of the quality assurance policy and provides guidance and interpretation for implementing the company quality assurance policy and is responsible for governance and implementation of the quality assurance program in accordance with regulatory requirements. Independent oversight groups report to this executive.

A.2.a.3.(c) (continued)

(1) The following management positions report to this executive:

- A management position that is responsible for nuclear oversight activities and is independent of production. This position provides overall direction for the implementation of the quality assurance program.
- A management position that is responsible for oversight and governance of the QAPM. This position has authority and responsibility for establishing, controlling, and verifying the implementation and adequacy of the quality assurance program as described in this QAPM including activities related to vendor quality. This position has the authority for Stop Work and responsibility to escalate matters directly to the highest level nuclear executive officer when needed.

4. The following executives report to the senior vice president responsible for nuclear operations and provide governance and oversight in regards to implementing company quality assurance policy:

- (a) The chief operating officers, the executives responsible for nuclear operations, ~~are~~ is responsible for implementing quality assurance policies, goals, and objectives and the implementation of all activities associated with the safe and reliable operation of ~~Entergy's nuclear sites~~ the IPEC facility.
- (b) The executive responsible for operations support is responsible for implementing quality assurance policies, goals, and objectives of ~~Entergy's~~ corporate support activities.
- (c) The executive responsible for production and outage services is responsible for providing outage services and implementing quality assurance policies, goals, and objectives of ~~Entergy's~~ corporate support activities.
- (d) The executive responsible for regulatory assurance is responsible for regulatory interfaces, licensing activities, corporate nuclear security, corporate emergency planning and implementing quality assurance policies, goals, and objectives.

b. IPEC Site Organization

The following IPEC site management positions describe the ~~typical~~ site QAPM functional responsibilities, which may be delegated to others as established in this document. These individuals may report through an additional layer of management but shall maintain sufficient authority and organizational freedom to implement the assigned responsibilities.

A.2.b. (continued)

1. ~~The IPEC~~ An executive management position ~~for each nuclear site~~ reports through the applicable executive position responsible for each designated operating group. This position is responsible for overall plant nuclear safety at ~~each~~ the site, and is responsible for establishing the policies, goals, and objectives and the implementation of the QAPM at the ~~respective~~ IPEC site.
2. A management position responsible for overall plant operations assures the safe, reliable, and efficient operation of the plant within the constraints of applicable regulatory requirements and the operating license. Different aspects of these responsibilities may be fulfilled by separate managers. The onsite safety review committee reports to the management position responsible for plant operations.
3. A management position responsible for performance improvement, emergency planning, training, security, and corrective action program. Different aspects of these responsibilities may be fulfilled by separate managers.
4. The following site positions report directly to an executive position offsite:
 - (a) A management position responsible for quality assurance who has overall authority and responsibility for establishing, controlling, and verifying the implementation and adequacy of the quality assurance program as described in this QAPM. This position has the authority and responsibility to escalate matters directly to the highest level nuclear executive officer when needed. This position reports to the executive responsible for nuclear oversight through the corporate management position responsible for nuclear oversight (offsite).
 - (b) A management position responsible for materials, purchasing, and contracts, procurement, services, receipt, storage, and issue of materials, parts, and components. Different aspects of these responsibilities may be fulfilled by separate managers. This site position reports to an executive (supply chain – offsite) who has a functional interface with the executive responsible for engineering and technical services.
 - (c) A management position responsible for engineering, the development and maintenance of engineering programs, plant design bases, policies, and procedures and for providing engineering services. This position reports to the executive responsible for engineering through the corporate management (offsite). Different aspects of these responsibilities (e.g., fuel design) may be fulfilled by separate managers.

A.2.b.4. (continued)

- (d) A management position responsible for regulatory assurance and records management. This position is responsible for maintaining the licensing basis and oversight of licensing and regulatory programs and reports to the executive responsible for regulatory assurance through the corporate management (offsite).
- c. The on-site and off-site safety review committees independently review activities to provide additional assurance that ~~the units are~~ the IPEC facility is operated and maintained in accordance with the Operating Licenses and applicable regulations that address nuclear safety.

3. Responsibility

- a. ~~Entergy~~ IPEC has the responsibility for the scope and implementation of an effective quality assurance program.
- b. IPEC ~~Entergy~~ may delegate all or part of the activities of planning, establishing, and implementing the quality assurance program to others, but retains the responsibility for the program's effectiveness.
- c. IPEC ~~Entergy~~ is responsible for ensuring that the applicable portion(s) of the quality assurance program is properly documented, approved, and implemented (people are trained and resources are available) before an activity within the scope of the QAPM is undertaken by ~~Entergy~~ IPEC or by others.
- d. Individual managers are to ensure that personnel working under their management cognizance are provided the necessary training and resources to accomplish their assigned tasks within the scope of the QAPM.
- e. Procedures that implement the QAPM are approved by the management responsible for the applicable quality function. These procedures are to reflect the QAPM and work is to be accomplished in accordance with them.

4. Authority

- a. When IPEC ~~Entergy~~ delegates responsibility for planning, establishing, or implementing any part of the overall QA program, sufficient authority to accomplish the assigned responsibilities is delegated.
- b. The management position responsible for quality assurance has the responsibility and the authority to stop unsatisfactory work and control further processing, delivery, installation, or use of non-conforming items or services. Cost and schedule considerations will not override safety considerations.

A. (continued)**5. Personnel Training and Qualification**

- a. Personnel assigned to implement elements of the quality assurance program are capable of performing their assigned tasks.
- b. Training programs are established and implemented to ensure that personnel achieve and maintain suitable proficiency.
- c. Personnel training and qualification records are maintained in accordance with procedures.
- d. Additional details concerning Personnel Training and Qualification may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guides 1.8, 1.58, and 1.146).

6. Corrective Action

- a. It is the responsibility of each individual to promptly identify and report conditions adverse to quality. Management at all levels encourages the identification of conditions that are adverse to quality.
- b. A corrective action program is established and implemented that includes prompt identification, documentation, and correction of conditions adverse to quality. The corrective action program for significant conditions adverse to quality shall require cause determination and a corrective action plan that precludes repetition.
- c. Specific responsibilities within the corrective action program may be delegated, but IPEC ~~Entergy~~ maintains responsibility for the program's effectiveness.
- d. Non-conforming items are properly controlled to prevent their inadvertent test, installation, or use. They are reviewed and either accepted, rejected, repaired, or reworked.
- e. Reports of conditions that are adverse to quality are analyzed to identify trends in quality performance. Significant conditions adverse to quality and significant trends are reported to the appropriate level of management.
- f. Additional details concerning corrective action activities may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.33).

A. (continued)**7. Regulatory Commitments**

- a. Except where alternatives are identified, **EntergyIPEC** complies with the QA guidance documents listed on Table 1. If the guidance in one of these documents is in conflict with the QAPM, the guidance provided in the QAPM is the controlling guidance. Additionally, the following clarifications apply to all guidance documents listed in Table 1:
 1. For modifications and nonroutine maintenance, guidance applicable to construction-like activities is applicable to comparable plant activities. Except that the inspection of modifications, repairs, rework, and replacements shall be in accordance with the original design and inspection requirements or a documented approved alternative.
 2. The definitions provided by Regulatory Guide 1.74 and associated clarifications as described in Table 1 apply wherever the defined term is used in the QAPM and associated guidance documents.
 3. Clarification to a guidance document applies wherever the guidance document is invoked.
 4. In each of the ANSI standards, other documents (e.g., other standards, codes, regulations, tables, or appendices) are referenced or described. These other documents are only quality assurance program requirements if explicitly committed to in the QAPM. If not explicitly committed to, these documents are not considered as quality assurance program requirements, although they may be used as guidance.
 5. Guidance applicable to safety related items and activities is applicable to comparable items and activities controlled by 10 CFR 72 and transportation packages controlled by 10 CFR 71.
- b. The NRC is to be notified of QAPM changes in accordance with 10 CFR 50.54(a)(3) or 10 CFR 50.54(a)(4).

B. PERFORMANCE/VERIFICATION**1. Methodology**

- a. Personnel performing work activities such as design, engineering, procurement, manufacturing, construction, installation, startup, maintenance, modification, operation, and decommissioning are responsible for achieving acceptable quality.
- b. Personnel performing verification activities are responsible for verifying the achievement of acceptable quality and are different personnel than those who performed the work.

B.1 (continued)

- c. Work is accomplished and verified using instructions, procedures, or other appropriate means that are of a detail commensurate with the activity's complexity and importance to safety.
- d. Criteria that define acceptable quality are specified, and quality is verified against these criteria.

2. Design Control

- a. The design control program is established and implemented to assure that the activities associated with the design of systems, components, structures, and equipment and modifications thereto, are executed in a planned, controlled, and orderly manner.
- b. The program includes provisions to control design inputs, processes, outputs, changes, interfaces, records, and organizational interfaces.
- c. Design inputs (e.g., performance, regulatory, quality, and quality verification requirements) are to be correctly translated into design outputs (e.g., specifications, drawings, procedures, and instructions).
- d. The final design output is to relate to the design input in sufficient detail to permit verification.
- e. The design process is to ensure that items and activities are selected and independently verified consistent with their importance to safety to ensure they are suitable for their intended application.
- f. Changes to final designs (including field changes and modifications) and dispositions of non-conforming items to either use-as-is or repair are to be subjected to design control measures commensurate with those applied to the original design and approved by the organization that performed the original design or a qualified designee.
- g. Interface controls (internal and external between participating design organizations and across technical disciplines) for the purpose of developing, reviewing, approving, releasing, distributing, and revising design inputs and outputs are defined in procedures.
- h. Design documentation and records, which provide evidence that the design and design verification process was performed in accordance with this program, shall be collected, stored, and maintained in accordance with documented procedures. This documentation includes final design documents, such as drawings and specifications, and revisions thereto and documentation which identifies the important steps, including sources of design inputs that support the final design.
- i. Additional details concerning design control activities may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.64).

B. (continued)**3. Design Verification**

- a. A program is established and implemented to verify the acceptability of design activities and documents for the design of items. The selection and incorporation of design inputs and design processes, outputs, and changes are verified.
- b. Verification methods include, but are not limited to, design reviews, alternative calculations, and qualification testing. The extent of this verification will be a function of the importance to safety of the item, the complexity of the design, the degree of standardization, the state of the art, and the similarity with previously proven designs. Standardized or previously proven designs will be reviewed for applicability prior to use.
- c. When a test program is used to verify the acceptability of a specific design feature, the test program is to demonstrate acceptable performance under conditions that simulate the most adverse design conditions that are expected to be encountered.
- d. Independent design verification is to be completed before design outputs are used by other organizations for design work and before they are used to support other activities such as procurement, manufacture, or construction. When this timing cannot be achieved, the unverified portion of the design is to be identified and controlled. In all cases, the design verification is to be completed before relying on the item to perform its function.
- e. Individuals or groups responsible for design reviews or other verification activities shall be identified in procedures and their authority and responsibility shall be defined and controlled. Design verification shall be performed by any competent individuals or groups other than those who performed the original design but who may be from the same organization. The designer's immediate supervisor may perform the design verification provided:
 - 1. the supervisor is the only technically qualified individual capable of performing the verification,
 - 2. the need is individually documented and approved in advance by the supervisor's management, and
 - 3. the frequency and effectiveness of the supervisor's use as a design verifier are independently verified to guard against abuse.

B.3 (continued)

- f. Design verification procedures are to be established and implemented to ensure that an appropriate verification method is used, the appropriate design parameters to be verified are chosen, the acceptance criteria are identified, the verification is satisfactorily accomplished, and the results are properly recorded.
- g. Additional details concerning design verification activities may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.64).

4. Procurement Control

- a. A program is established and implemented to ensure that purchased items and services are of acceptable quality.
- b. The program includes provisions for evaluating prospective suppliers and selecting only qualified suppliers.
- c. The program includes provisions for ensuring that qualified suppliers continue to provide acceptable products and services.
- d. The program includes provisions (e.g., source verification, receipt inspection, pre-installation and post-installation tests, and certificates of conformance) for accepting purchased items and services.
- e. Applicable technical, regulatory, administrative, and reporting requirements (e.g., specifications, codes, standards, tests, inspections, special processes, and 10 CFR Part 21) are invoked for procurement of items and services.
- f. The program includes provisions for ensuring that documented evidence of an item's conformance to procurement requirements is available at the site before the item is placed in service or used unless otherwise specified in procedures.
- g. The program includes provisions for ensuring that procurement, inspection, and test requirements have been satisfied before an item is placed in service or used unless otherwise specified in procedures.
- h. The procurement of components, including spare and replacement parts, is subject to quality and technical requirements suitable for their intended service.
- i. Appropriate controls for the selection, determination of suitability for intended use (critical characteristics), evaluation, receipt, and quality evaluation of commercial grade items are to be imposed to ensure that the items will perform satisfactorily in service.

B.4 (continued)

- j. Additional details concerning procurement control may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guides 1.33 and 1.123).

5. Procurement Verification

- a. A program is established and implemented to verify the quality of purchased items and services at intervals and to a depth consistent with the item's or service's importance to safety, complexity, and quantity and the frequency of procurement.
- b. The program is executed in all phases of procurement. As necessary, this may require verification of activities of suppliers below the first tier.
- c. Additional details concerning procurement verification may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guides 1.123 and 1.144).

6. Identification and Control of Items

- a. A program is established and implemented to identify and control items to prevent the use of incorrect or defective items.
- b. Identification of each item is maintained throughout fabrication, erection, installation, and use so that the item can be traced to its documentation. Traceability is maintained to an extent consistent with the item's importance to safety.
- c. Additional details concerning identification and control of items may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.33).

7. Handling, Storage, and Shipping

- a. A program is established and implemented to control the handling, storage, shipping, cleaning, and preserving of items to ensure the items maintain acceptable quality.
- b. Special protective measures (e.g., containers, shock absorbers, accelerometers, inert gas atmospheres, specific moisture content levels, and temperature levels) are specified and provided when required to maintain acceptable quality.
- c. Specific procedures are developed and used for cleaning, handling, storage, packaging, shipping, and preserving items when required to maintain acceptable quality.

B.7 (continued)

- d. Items are marked and labeled during packaging, shipping, handling, and storage to identify, maintain, and preserve the items' integrity and indicate the need for special controls.
- e. Additional details concerning handling, storage, and shipping activities may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.38).

8. Test Control

- a. A test control program is established and implemented to demonstrate that items will perform satisfactorily in service.
- b. Criteria are defined that specify when testing is required.
- c. The test control program includes, as appropriate, proof tests before installation, pre-operational tests, post-maintenance tests, post-modification tests, and operational tests.
- d. Test procedures are developed that include:
 - 1. instructions and prerequisites to perform the test,
 - 2. use of proper test equipment,
 - 3. acceptance criteria, and
 - 4. mandatory inspections as required.
- e. Test results are evaluated to assure that test objectives and inspection requirements have been satisfied.
- f. Unacceptable test results shall be evaluated.
- g. Additional details concerning test control may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.33).

B. (continued)**9. Measuring and Test Equipment Control**

- a. A program is established and implemented to control the calibration, maintenance, and use of measuring and test equipment. Measuring and test equipment does not include permanently installed operating equipment or test equipment used for preliminary checks where data obtained will not be used to determine acceptability or be the basis for design or engineering evaluation. Additionally, calibration and control measures are not required for rulers, tape measures, levels and other such devices if normal commercial manufacturing practices provide adequate accuracy.
- b. The types of equipment covered by the program (e.g., instruments, tools, gauges, and reference and transfer standards) are defined in procedures.
- c. Measuring and test equipment is calibrated at specified intervals or immediately before use on the basis of the item's required accuracy, intended use, frequency of use, and stability characteristics and other conditions affecting its performance.
- d. Measuring and test equipment is labeled, tagged, or otherwise controlled to indicate its calibration status and to ensure its traceability to calibration test data.
- e. Measuring and test equipment is calibrated against standards that have an accuracy of at least four times the required accuracy of the equipment being calibrated or, when this is not possible, have an accuracy that ensures the equipment being calibrated will be within the required tolerance.
- f. If nationally recognized standards exist, calibration standards are to be traceable to them. Except where calibration standards with the same accuracy as the instruments being calibrated are shown to be adequate for the requirements, calibration standards are to have a greater accuracy than the standards being calibrated.
- g. Measuring and test equipment found out of calibration is tagged or segregated. The acceptability shall be determined of items measured, inspected, or tested with an out-of-calibration device.
- h. Additional details concerning measuring and test equipment control may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guides 1.30, 1.33, 1.94, 1.116, and 1.123).

B. (continued)**10. Inspection, Test, and Operating Status**

- a. The status of required inspections and tests and the operating status of items is verified before release, fabrication, receipt, installation, test, and use, as applicable. This verification is to preclude inadvertent bypassing of inspections and tests and to prevent inadvertent operation of controlled equipment.
- b. The application and removal of inspection, test, and operating status indicators are controlled in accordance with procedures.
- c. Additional details concerning inspection, test, and operating status control may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.33).

11. Special Process Control

- a. A program is established and implemented to ensure that special processes are properly controlled.
- b. The criteria that establish which processes are special are described in procedures. The following are special processes:
 - 1. welding,
 - 2. heat-treating,
 - 3. NDE (Non-Destructive Examination),
 - 4. chemical cleaning, and
 - 5. unique fabricating or testing processes that require in-process controls.
- c. Special processes are accomplished by qualified personnel, using appropriate equipment, and procedures in accordance with applicable codes, standards, specifications, criteria, and other special requirements.
- d. Additional details concerning special process control may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.33).

B. (continued)**12. Inspection**

- a. A program is established and implemented for inspections of activities in order to verify conformance to the documented instructions, procedures and drawings for accomplishing the activity. The inspection program may be implemented by or for the organization performing the activity to be inspected.
- b. Provisions to ensure inspection planning is properly accomplished are to be established. Planning activities are to identify the characteristics and activities to be inspected, the inspection techniques, the acceptance criteria, and the organization responsible for performing the inspection.
- c. Provisions to identify inspection hold points, beyond which work is not to proceed without the consent of the inspection organization, are to be defined.
- d. Inspection results are to be documented by the inspector and reviewed by qualified personnel.
- e. Unacceptable inspection results shall be evaluated and resolved in accordance with procedures.
- f. Inspections are performed by qualified personnel other than those who performed or directly supervised the work being inspected. While performing the inspection activity the inspectors functionally report to the associated management position responsible for quality assurance.
- g. Additional details concerning inspections may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guides 1.33 and 1.58).

13. Corrective Action

- a. Procedures shall provide for identification, evaluation, and resolution of conditions adverse to quality.
- b. Reworked, repaired, and replacement items are to be inspected and tested in accordance with the original inspection and test requirements or specified alternatives.
- c. Additional details concerning corrective action activities may be found in Section A.6 and the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.33).

B. (continued)**14. Document Control**

- a. A program is established and implemented to control the development, review, approval, issue, use, and revision of documents.
- b. The scope of the document control program includes:
 - 1. safety analysis report,
 - 2. design documents,
 - 3. procurement documents,
 - 4. Technical Specifications,
 - 5. procedures, manuals, and plans,
 - 6. corrective action documents, and
 - 7. other documents as defined in procedures.
- c. Revisions of controlled documents are reviewed for adequacy and approved for release by the same organization that originally reviewed and approved the documents or by a designated organization that is qualified and knowledgeable.
- d. Copies of controlled documents are distributed to and used by the person performing the activity.
- e. The distribution of new and revised controlled documents is in accordance with procedures. Superseded documents are controlled.
- f. Additional details concerning document control may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.33).

15. Records

- a. A program is established and implemented to ensure that sufficient records of items and activities (e.g., design, engineering, procurement, manufacturing, construction, inspection and test, installation, pre-operation, startup, operations, maintenance, modification, decommissioning, and audits) are generated and maintained to reflect completed work.
- b. The program provides provisions for the administration, receipt, storage, preservation, safekeeping, retrieval, and disposition of records.

B.15 (continued)

- c. The program includes provisions for the use of various record storage media to maintain QA records. Procedures are developed to implement the regulatory guidance associated with the media used. The NRC Generic Letter 88-18 "Plant Record Storage on Optical Disk" is implemented for optical disk media. The Regulatory Issue Summary 2000-18 "Guidance on Managing QA Records in Electronic Media" is implemented for electronic media.
- d. Additional details concerning record requirements may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.88).

C. AUDIT**1. Methodology**

- a. Personnel responsible for carrying out audits are maintained cognizant of day-to-day activities by the ongoing involvement in the quality assurance program requirements so that they can act in a management advisory function.
- b. Organizations performing audits are to be technically and performance oriented commensurate with the activity being reviewed.
- c. Personnel performing audits have no direct responsibilities in the area they are assessing.
- d. Audits are accomplished using instructions, procedures, or other appropriate means that are of a detail commensurate with the activity's complexity and importance to safety.

2. Performance

- a. A program of planned and periodic audits is established and implemented to confirm that activities affecting quality comply with the QAPM and that the QAPM has been implemented effectively. Audit frequencies will be implemented as required by the applicable Code of Federal Regulations, safety analysis report, and commitments by various correspondences to the NRC. Audits will be conducted at a frequency in accordance with either Section C.2.a.1 or Section C.2.a.2 below. Audits of stand alone Independent Spent Fuel Storage Installations (ISFSIs) (e.g. those not sited with an operating nuclear power plant) may be conducted in accordance with Section C.2.a.4.

C.2.a (continued)

1. Audit frequencies will be determined in accordance with a performance based audit-scheduling program. The scheduling program, through an expert panel, uses assessment indicators to identify and schedule audits based on performance results and importance of the activity relative to safety. Potential audit subject areas are periodically assessed against appropriate performance criteria. From these reviews a determination is made in regard to the depth, scope, and scheduling of specific audits. Functional areas important to safety are assessed annually ($\pm 25\%$) to identify strengths and weaknesses (if applicable) to determine the level and focus of independent oversight activities for the upcoming year. The basis for the assessment shall include the results of audits and surveillance, NRC inspections, LERs, self-assessments, and applicable conditions reports (e.g., non-conformance and corrective action reports). Personnel changes, change/increase in functional area responsibilities, industry operating experience, and INPO evaluations (if performed) will also be considered. Each area will be assigned a rating with a comparison to previous years. This assessment will be documented, reviewed, and approved by quality assurance management.

This document is considered a quality assurance record and will be available for NRC review. Audit subject areas of Section C.2.a.2 shall continue to be audited on the frequencies designated unless expert panel judgment, based on performance results, determines such an audit to be unnecessary. In such cases the expert panel basis shall be documented.

2. Audit schedules assure that the following areas are audited at the indicated frequencies, or more frequently as performance dictates.
 - a. The conformance of each unit's operation to provisions contained within the Technical Specifications and applicable license conditions is audited at least once every 24 months.
 - b. The performance, training, and qualifications of the entire staff are audited at least once every 24 months.

C.2.a.2. (continued)

- c. The results of actions taken to correct deficiencies occurring in unit equipment, structure, systems, or method of operation that affect nuclear safety is audited at least once every 24 months.
 - d. The performance of activities required by the QAPM to meet the criteria of 10 CFR 50, Appendix B is audited at least once every 24 months.
 - e. The Offsite Dose Calculations Manual and Process Control Program and implementing procedures are audited at least once every 24 months.
 - f. The radiological environmental monitoring program and the results thereof is audited at least once every 24 months.
 - g. A fire protection and loss prevention program inspection and audit shall be performed using either off-site licensee personnel or an outside fire protection firm at least once every 24 months.
 - h. The fire protection program and implementing procedures audit shall be performed at least once every 24 months.
 - i. A fire protection and loss prevention program inspection and audit shall be performed using an outside fire consultant at least once every 36 months.
- 3. A grace period of 90 days may be applied to the 24-month frequency for internal audits. For activities deferred in accordance with the 90-day grace period, the next performance due date will be based on their originally scheduled date.
 - 4. The audit schedule for stand alone ISFSIs may combine audits to cover the areas defined in section C.2.a.2 that are invoked by the ISFSI technical specifications.
- b. Audits shall provide an objective evaluation of quality related practices, procedures, instructions, activities, and items and a review of documents and records, as applicable.
 - c. Audits shall be performed in accordance with approved written procedures or checklists. Items from previous audits shall be reviewed and reaudited, as appropriate. The checklists are used as guides to the auditor.



C.2 (continued)

- d. Scheduling and resource allocation are based on the status and safety importance of the activity or process being assessed.
- e. Scheduling is dynamic and resources are supplemented when the effectiveness of the quality assurance program is in doubt.
- f. Audit reports are written and distributed to the appropriate levels of management for review. Follow-up action, including re-look at deficient areas, is initiated as deemed appropriate.
- g. Implementation of delegated portions of the quality assurance program is assessed.
- h. Audits are conducted using predetermined acceptance criteria.
- i. Additional details concerning audits may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guides 1.33 and 1.144).

D. INDEPENDENT SAFETY REVIEW

1. Description

- a. Independent safety review is performed to meet ~~the individual unit~~IPEC's commitment to NUREG-0737, Section I.B.1.2, "Independent Safety Engineering Group," as described in ~~the each~~ IPEC unit's safety analysis report.

Table 1

Regulatory Commitments

A. Regulatory Guide 1.8 Revision 1, dated September 1975

Clarification/Exception

1. General

~~Entergy~~IPEC is committed to Sections 1 – 4 of ANSI/ANS 3.1-1978 with following clarifications and exceptions.

Qualification requirements for personnel shall meet ANSI/ANS 3.1-1978 except the following:

- a. The radiation protection manager shall meet or exceed the qualifications of Regulatory Guide 1.8, Revision 2, 1987.
- b. Managers required to hold an SRO license are specified in the applicable unit's Technical Specifications.
- c. Licensed Operators shall be qualified in accordance with the requirements of 10 CFR 55.

Individuals filling positions who met the previous commitment at the time of implementation of this commitment can be considered to meet any more restrictive aspects of the requirements of this commitment for that position without further review and documentation.

2. General

The following qualifications may be considered equivalent to a bachelor's degree:

- a. 4 years of post secondary schooling in science or engineering,
- b. 4 years of applied experience at a nuclear facility in the area for which qualification is sought,
- c. 4 years of operational or technical experience/training in nuclear power, or
- d. any combination of the above totaling 4 years.

Years of experience used to meet the education requirements as allowed by this exception shall not be used to also meet the experience requirements.

Table 1
Regulatory Commitments

A. Regulatory Guide 1.8 (continued)

- | | |
|---|--|
| <p>3. ANSI/ANS 3.1
Section 4</p> | <p>Individuals assigned to professional-technical comparable positions shall have the authority and specified qualifications to accomplish the functional responsibilities of the position.</p> |
| <p>4. ANSI/ANS 3.1
Section 4.4.5</p> | <p>Individuals who do not possess the formal education and minimum experience requirements for the manager responsible for quality assurance should not be eliminated automatically when other factors provide sufficient demonstration of their abilities. These other factors are evaluated on a case-by-case basis and approved and documented by senior management. As a minimum, the Special Requirements of ANSI/ANS 3.1-1993 Section 4.3.7 must be met if the manager responsible for Quality Assurance does not meet the requirements of section 4.4.5 of ANSI/ANS 3.1-1978.</p> |
| <p>5. ANSI/ANS 3.1
Section 5</p> | <p>EntergyIPEC will maintain a training program for the unit staff that meets the applicable regulations and either a) is accredited by the National Nuclear Accrediting Board (NNAB) or b) meets the standards of section 5 of ANSI/ANS 3.1-1978.</p> |

Table 1
Regulatory Commitments

B. Regulatory Guide 1.30, dated August 1972

Clarification/Exception

- | | |
|----------------------------------|--|
| 1. ANSI N45.2.4
General | ANSI N45.2.4 identifies various tests to be performed. The applicability of these tests will be determined as discussed in QAPM Section B.8 and based upon the significance of change or modification. |
| 2. ANSI N45.2.4
Section 3 | Documented routine inspections and audits of the storage area may be performed instead of the requirements of this Section. |
| 3. ANSI N45.2.4
Section 5.2 | In some cases, testing requirements may be met by post-installation surveillance testing in lieu of a special post-installation test. |
| 4. ANSI N45.2.4
Section 6.2.1 | The last sentence of this section states: "Items requiring calibration shall be tagged or labeled on completion indicating date of calibration and identity of the person that performed the calibration." Instead of requiring the tagging or labeling of all equipment this statement is changed to require the equipment to be suitably marked to indicate the date of the next required calibration and the identity of the person that performed the calibration. |

Table 1
Regulatory Commitments

C. Regulatory Guide 1.33 Revision 2, dated February 1978

Clarification/Exception

1. Section C.1 **EntergyIPEC** will provide procedures for the guide's Appendix A activities as discussed. However, **EntergyIPEC** does not consider all activities listed to be "safety-related" (e.g., activities in 7.e).
2. Section C.4 This section establishes minimum 2-year audit frequency for all safety related functions and recommends audit frequencies specific to Corrective Action, Facility Operation, and Staff Performance, Training, and Qualifications. **EntergyIPEC** will perform audits at frequencies as discussed in QAPM Section C.2.a instead of this section.
3. ANSI N18.7 Section 1 Sentences 4 and 5 state, "However, applicable sections of this standard should be used as they apply to related activities. Activities included are: Design Changes, Purchasing, Fabricating..." With regard to radioactive material transportation activities, **EntergyIPEC** will only implement the requirements associated with those activities conducted in accordance with the applicable NRC Quality Assurance Program Approval for Radioactive Material Packages.
4. ANSI N18.7 Section 4.3.1 The specific areas of experience described in this section are not applicable to the on-site safety review committee but the committee must be comprised of site operating or engineering supervisory personnel. Additionally, the off-site safety review committee need contain experience in only a majority of the areas.
5. ANSI N18.7 Section 4.3.2.3 The statement that "no more than a minority of the quorum shall have line responsibility for the operation of the plant" is not applicable to the on-site safety review committee.

Table 1
Regulatory Commitments

C. Regulatory Guide 1.33 (continued)

Clarification/Exception

6. ANSI N18.7
Section 4.3.4.(1) & (2) 10 CFR 50.59 was revised through Federal Register Notice 19991001 R1N3150-AF94 eliminating the terms "safety evaluation" and "unreviewed safety question." The term "safety evaluation" has been replaced with 10 CFR 50.59 "evaluation." The term "unreviewed safety question," as defined in the previous version of 10 CFR 50.59 (a)(2), was replaced by criteria provided in 50.59(c)(2) to determine if a license amendment pursuant to 50.90 is required prior to implementing the change, test, or experiment.
7. ANSI N18.7
Section 4.3.4(2) Reviews associated with changes to the technical specifications will be performed in accordance with Section 4.3.4(3) instead of this section.
8. ANSI N18.7
Section 4.3.4(3) Revision to proposed Technical Specification changes only requires review in accordance with this section when the revision involves a significant change to the technical basis for the proposed change. The independent review body discussed in this section is the on-site safety review committee. Voting members having a potential conflict of interest refrain from voting on documents under review.
9. ANSI N18.7
Section 4.3.4(4) In place of the requirements of this section, the on-site and off-site safety review committees shall review facility operations to detect potential nuclear safety hazards and all reports made in accordance with 10 CFR 50.73.
10. ANSI N18.7
Section 4.3.4(5) An example of the matters reviewed by the on-site safety review committee in accordance with this section is a change to the Emergency Plan (except editorial changes).
11. ANSI N18.7
Section 4.5 This section establishes minimum 2-year audit frequency for all safety related functions. EntergyIPEC will perform audits at frequencies as discussed in QAPM Section C.2.a instead of this section.
12. ANSI N18.7
Section 4.5 The independent review body discussed in this section is the off-site safety review committee.

Table 1
Regulatory Commitments

C. Regulatory Guide 1.33 (continued)

Clarification/Exception

- | | | |
|-----|-------------------------------|--|
| 13. | ANSI N18.7
Section 5.1 | Instead of the requirements of this section to have a summary document, a method of cross-referencing these requirements to the implementing procedures will be maintained. |
| 14. | ANSI N18.7
Section 5.2.2 | The person who holds a senior reactor operators license for the affected unit and approves a temporary change to a procedure is not required to be in charge of the shift. |
| 15. | ANSI N18.7
Section 5.2.2 | In addition to the temporary procedure change process described for changes which clearly do not change the intent of a procedure, temporary procedure changes which may change the intent of a procedure may be made following the process described in this section. Except that the person normally responsible for approving revisions to the procedure is the approval authority for the change. |
| 16. | ANSI N18.7
Section 5.2.6 | Instead of the requirements of this section concerning non-conforming conditions, non-conforming conditions will be evaluated and controlled in accordance with the corrective action program. |
| 17. | ANSI N18.7
Section 5.2.6 | The requirement of the fifth paragraph of this section to have a log of the status of temporary modifications is not applicable to temporary modifications for routine tasks installed in accordance with procedures. These procedures shall provide assurance that approvals are obtained, temporary modification activities are independently verified by an individual cognizant of the purpose and the effect of the temporary modification, and that activities are adequately documented to indicate the status of the temporary modification. |
| 18. | ANSI N18.7
Section 5.2.7.1 | This section will be implemented by adding the words "Where practical" in front of the first and fourth sentences of the fifth paragraph. For modifications where the requirements of the fourth sentence are not considered practical, a review in accordance with the provisions of 10 CFR 50.59 will be conducted. |

Table 1
Regulatory Commitments

C. Regulatory Guide 1.33 (continued)

Clarification/Exception

- | | | |
|-----|-----------------------------------|---|
| 19. | ANSI N18.7
Section 5.2.8 | In lieu of a “master surveillance schedule,” the following requirement shall be complied with: “A surveillance testing schedule(s) shall be established reflecting the status of all in-plant surveillance tests and inspections.” |
| 20. | ANSI N18.7
Section 5.2.9 | The requirements of the Physical Security Plan shall be implemented in place of these general requirements. |
| 21. | ANSI N18.7
Section
5.2.13.1 | Consistent with ANSI N45.2.11 Section 7.2, minor changes to documents, such as inconsequential editorial corrections, or changes to commercial terms and conditions may not require that the revised document receive the same review and approval as the original documents. |
| 22. | ANSI N18.7
Section 5.2.14 | Where marking, tagging, or physical separation of the non-conforming item is not feasible, the non-conforming item may be controlled by the use of appropriate documentation. |
| 23. | ANSI N18.7
Section 5.2.15 | Required procedure reviews following the occurrences discussed in Section 5.2.15, paragraph 3, sentence 3, are determined and controlled in accordance with the QAPM Section A.6 instead of this section. |
| 24. | ANSI N18.7
Section 5.2.15 | This section requires plant procedure review by an individual knowledgeable in the area affected by the procedure no less frequently than every two years to determine if changes are necessary or desirable. Instead of this review, controls are in effect to ensure that procedures are reviewed for possible revision upon identification of new or revised source material potentially affecting the intent of procedures. |
| 25. | ANSI N18.7
Section 5.3.9 | Instead of the requirements of this section, the format and content of the emergency operating procedures follow the applicable NRC approved format for the specific unit. |
| 26. | ANSI N18.7
Section 5.3.9.3 | Entergy IPEC's NRC accepted Emergency Plan will be implemented in lieu of the requirements in this section. |

Table 1
Regulatory Commitments

D. Regulatory Guide 1.37, dated March 1973

Clarification/Exception

- | | |
|------------------------------|--|
| 1. General | Instead of using the cleanliness level classification system of ANSI N45.2.1, the required cleanliness for specific items and activities is addressed on a case-by-case basis. Cleanliness is maintained, consistent with the work being performed to prevent introduction of foreign material. As a minimum, cleanliness inspections are performed prior to system closure and such inspections are documented. |
| 2. Section C.3 | The water quality for final flushes of fluid systems and associated components is at least equivalent to the quality of the operating system water, except for the oxygen and nitrogen content. |
| 3. Section C.4 | As an alternate to the requirements of this section, contamination levels in expendable products may be based upon safe practices and industrial availability with documented engineering evaluations. Contaminant levels are controlled such that subsequent removal by standard cleaning methods results in the achievement of final acceptable levels that are not detrimental to the materials. |
| 4. ANSI N45.2.1
Section 5 | Any nonhalogenated material may be used which is compatible with the parent material not just plastic film. |

Table 1
Regulatory Commitments

E. Regulatory Guide 1.38 Revision 2, dated May 1977

Clarification/Exception

- | | |
|----------------------------------|---|
| 1. ANSI N45.2.2
Section 3.2 | Storage of an item in a higher-level storage area meets the lower level storage requirements. |
| 2. ANSI N45.2.2
Section 3.2 | As an alternate to the requirements in Section 3.2.1 items (4), (5), and 7, Section 3.2.2, Section 3.2.3 item (1), and Section 3.2.4 item (2), the storage atmosphere may be controlled such that it is free of harmful contaminants in concentration that could produce damage to the stored item and protecting weld end preparations and threads by controlling the manner in which the item is stored. |
| 3. ANSI N45.2.2
Section 3.7.1 | Cleated, sheathed boxes may be used up to 1000 lb. rather than 500 lb. as specified in 3.7.1(1). Special qualification testing may be required for loads over 1000 lb. |
| 4. ANSI N45.2.2
Section 3.7.2 | Skids and runners will normally be fabricated from a minimum 2 X 4 inch nominal lumber size and laid flat except where this is impractical because of the small dimensions of the container. If forklift handling is required, minimum floor clearance for forklift tines will be provided. |
| 5. ANSI N45.2.2
Section 4.3.4 | Inspections of packages and/or preservative coatings are made immediately prior to loading rather than after loading. |
| 6. ANSI N45.2.2
Section 5.2.1 | Warehouse personnel will normally visually scrutinize incoming shipments for damage of the types listed in this section, this activity is not necessarily performed prior to unloading. Separate documentation of the shipping damage inspection is not necessary. Release of the transport agent after unloading and the signing for receipt of the shipment provides adequate documentation of completion of the shipping damage inspection. Any non-conformances noted will be documented and dispositioned. Persons performing the visual scrutiny during unloading are not considered to be performing an inspection function as defined under Reg. Guide 1.74; therefore, while they will be trained to perform this function, they may not be certified (N45.2.6) as an inspector. |

Table 1
Regulatory Commitments

E. Regulatory Guide 1.38 (continued)

Clarification/Exception

- | | |
|---|---|
| <p>7. ANSI N45.2.2
Section 5.2.2</p> | <p>The second division of this subsection requires six additional inspection activities if an item was not inspected or examined at the source. EntergyIPEC will consider that a source inspection has been conducted if the supplier of the item is required to comply with ANSI N45.2.2 for the purchased item and if the supplier's program has been audited and found acceptable in the area (i.e., the supplier performs a source inspection of his supplier or conducts a receipt inspection that includes, as applicable, the six additional items listed).</p> <p>Instead of the requirement that receiving inspections be performed in an area equivalent to the level of storage required for the item, receiving inspections will be performed in a manner and in an environment which does not endanger the requisite quality of an item. The receiving inspection's location environmental controls may be less stringent than storage environmental requirements for that item; however, the short time spent in the less stringent receiving inspection area shall be of such duration that it will not adversely affect the item being received.</p> |
| <p>8. ANSI N45.2.2
Section 5.2.3</p> | <p>The "Special Inspection" procedure is not required to be attached to the item or container but shall be readily available to inspection personnel.</p> |
| <p>9. ANSI N45.2.2
Section 6.2.1</p> | <p>Items which fall within the Level D classification of the standard will be stored in an area which may be posted to limit access, but other positive controls such as fencing or guards may not be provided.</p> |
| <p>10. ANSI N45.2.2
Section 6.2.4</p> | <p>The sentence is replaced with the following: "The use or storage of food, drinks, and salt tablet dispensers in any storage area shall be controlled and shall be limited to designated areas where such use or storage is not deleterious to stored items."</p> |

Table 1
Regulatory Commitments

E. Regulatory Guide 1.38 (continued)

Clarification/Exception

- | | |
|-----------------------------------|--|
| 11. ANSI N45.2.2
Section 6.2.5 | The sentence is replaced with the following: "Exterminators or other appropriate measures shall be used to control animals to minimize possible contamination and mechanical damage to stored material. If evidence of animal activity is detected, a survey or inspection will be utilized to determine the extent of the damage." |
| 12. ANSI N45.2.2
Section 6.3.3 | An alternate to the stated requirement is the following: "Hazardous chemicals, paints, solvents, and other materials of a like nature shall be stored in approved cabinets or containers which are not in close proximity to installed systems required for safe shutdown." |
| 13. ANSI N45.2.2
Section 6.4.2 | Care of items in storage shall be exercised in accordance with the following: "Types of components that could require maintenance while in storage shall be identified and evaluated for specific maintenance requirements. Maintenance activities 6.4.2 (6) through 6.4.2 (8) listed in this requirement shall be considered during this evaluation and any deviations shall be justified and documented." |
| 14. ANSI N45.2.2
Section 6.5 | The last sentence of this section is not applicable to the operations phase. |
| 15. ANSI N45.2.2
Section 6.6 | Entergy IPEC will comply with this section's requirements with the clarification that, for record purposes, only the access of personnel without key cards into indoor storage areas shall be recorded. Unloading or pickup of material shall not be considered "access," nor shall inspection by NRC or other regulatory agents, nor shall tours by nonlicensee employees who are accompanied by licensee employees. |

Table 1
Regulatory Commitments

E. Regulatory Guide 1.38 (continued)

Clarification/Exception

- | | |
|--|--|
| 16. ANSI N45.2.2
Section 7.3 | Re-rating hoisting equipment will be considered only when necessary. Prior to performing any lift above the load rating, the equipment manufacturer must be contacted for his approval and direction. The manufacturer must be requested to supply a document granting approval for a limited number of lifts at the new rating and any restrictions involved, such as modifications to be made to the equipment and the test lift load. At all times, the codes governing re-rating of hoisting equipment must be observed. |
| 17. ANSI N45.2.2
Appendix (A-3)
Section A.3.4.1 | During printing of the standard, a transposition occurred between the last sentence of A3.4.1(4) and A3.4.1(5). The correct requirements are: (4) "However, preservatives for inaccessible inside surfaces of pumps, valves and pipe systems containing reactor coolant water shall be the water flushable type." (5) "The name of the preservative used shall be indicated to facilitate touch up." |
| 18. ANSI N45.2.2
Appendix (A-3)
Section A.3.4.2 | There may be cases involving large or complex shaped items for which an inert or dry air purge is provided, rather than a static gas blanket, in order to provide adequate protection due to difficulty of providing a leak proof barrier. In these cases, a positive pressure purge flow may be utilized as an alternate to a leakproof barrier. |
| 19. ANSI N45.2.2
Appendix (A-3)
Section A.3.5.1 | Instead of the requirement for non-metallic plugs and caps to be brightly colored, non-metallic plugs and caps shall be an appropriately visible color. |
| 20. ANSI N45.2.2
Appendix (A-3)
Section A.3.5.2 | This paragraph limits halogen and sulfur content of tape. The use of tapes containing greater amounts of halogens than those identified will be allowed after appropriate evaluation; however, the quantities shall not be such that harmful concentrations could be leached or released by breakdown of the compounds under expected environmental conditions. |

Table 1
Regulatory Commitments

E. Regulatory Guide 1.38 (continued)

Clarification/Exception

- | | |
|--|--|
| 21. ANSI N45.2.2
Appendix (A-3)
Section A.3.7.1 | In lieu of A.3.7.1(3) and (4), EntergyIPEC will comply with the following: Fiberboard boxes shall be securely closed either with a water resistant adhesive applied to the entire area of contact between the flaps, or all seams and joints shall be sealed with not less than 2-inch wide, water resistant tape. |
| 22. ANSI N45.2.2
Appendix (A-3)
Section A.3.9 | Instead of the requirement that container markings appear on a minimum of two sides of the container, preferably on one side and one end, EntergyIPEC will comply with the following: Containers are adequately marked for storage, identification, and retrieval. Multiple marking requirements are imposed, where necessary. |
| 23. ANSI N45.2.2,
Appendix (A-3)
Section A.3.9 | Instead of the requirement that container markings be no less than 3/4" high, EntergyIPEC will comply with the following: Container markings are of a size which permits easy recognition. |
| 24. ANSI N45.2.2,
Appendix (A-3)
Section A.3.9 | Instead of the specific container marking requirements, EntergyIPEC will comply with the following: The information required in container marking is evaluated on a case-by-case basis. |
| 25. ANSI N45.2.2
Appendix (A-3)
Section A.3.9 | The last paragraph of A.3.9 could be interpreted as prohibiting any direct marking on bare austenitic stainless steel and nickel alloy metal surfaces. As a alternate, paragraphs A.3.9.(1) and (2) may be used to control marking on the surface of austenitic stainless steels and nickel base alloys based on documented engineering evaluations. Contamination levels are controlled such that the material used for marking is not detrimental to the materials marked. |

Table 1
Regulatory Commitments

F. Regulatory Guide 1.39 Revision 2, dated September 1977

Clarification/Exception

- | | |
|----------------------------------|---|
| 1. ANSI N45.2.3
General | The ANSI five level zone designation system may not be utilized, but the intent of the standard will be met for the areas of housekeeping, plant and personnel safety, and fire protection. |
| 2. ANSI N45.2.3
Section 3.1 | This section is not applicable. |
| 3. ANSI N45.2.3
Section 3.2.3 | The Fire Protection Program shall be used in lieu of the general requirements in this section. |
| 4. ANSI N45.2.3
Section 3.3 | The first paragraph is not applicable to the operations phase. |
| 5. ANSI N45.2.3
Section 3.4 | This section is not applicable. |
| 6. ANSI N45.2.3
Section 3.5 | Subparagraph (1) is not applicable to the operations phase; (2), (3), and (4) will be implemented. |

Table 1
Regulatory Commitments

G. Regulatory Guide 1.58 Revision 1, dated September 1980

Clarification/Exception

- | | |
|--------------------------------|---|
| 1. General | Entergy IPEC may choose not to apply the requirements of this guide to those personnel who are involved in day-to-day operations, surveillance, maintenance, and certain technical and support services whose qualifications are controlled by the Technical Specifications or other QAPM commitment requirements. |
| 2. General | General certification of inspectors in accordance with this guide is approved by a manager responsible for quality. |
| 3. ANSI N45.2.6
Section 1.2 | Paragraph 4 requires that the standard be imposed on personnel other than licensee employees; the applicability of this standard to suppliers will be documented and applied, as appropriate, in procurement documents for such suppliers. |
| 4. ANSI N45.2.6
Section 1.2 | The requirements of this standard do not apply to personnel using later editions of ASNT contained within 10 CFR 50.55a approved ASME editions or addenda. |
| 5. ANSI N45.2.6
Section 2.3 | This section requires, in part, that any person who has not performed inspection, examination, or testing activities in his qualified area for a period of one year shall be re-evaluated. A 90-day grace period may be applied to this activity. For activities deferred in accordance with the 90-day grace period, the next performance due date will be based on their originally scheduled date. |
| 6. ANSI N45.2.6
Section 2.5 | This section's requirements are clarified with the stipulation that, where no special physical characteristics are required, none will be specified. The converse is also true: if no special physical requirements are stipulated, none are considered necessary. |
| 7. ANSI N45.2.6
Section 3.5 | Entergy IPEC reserves the right to use personnel who do not meet these experience requirements but have shown capability through training and testing or capability demonstration. |

Table 1

Regulatory Commitments

H. Regulatory Guide 1.64 Revision 2, dated June 1976

Clarification/Exception

1. ANSI N45.2.11
Section 5.2.4 For the documentation of inter-disciplinary design reviews, there must be documented evidence of the acceptability of design documents, or portions thereof, prior to release (material, stress, physics, mechanical, electrical, concrete, etc.). Indication of the positive concurrence of those who determine the design acceptability relative to their respective disciplinary area of concern should be on the document or on a separate form traceable to the document. A document that indicates the reviewer's comments need not be retained.

Table 1
Regulatory Commitments

I. Regulatory Guide 1.74, dated February 1974

Clarification/Exception

- | | |
|-----------------------------|---|
| 1. ANSI N45.2.10, Section 2 | Definitions for “Certificate of Conformance” and “Certificate of Compliance” will be exchanged based upon the guidance in ANSI N45.2.13 Section 10.2. |
|-----------------------------|---|

Table 1
Regulatory Commitments

J. Regulatory Guide 1.88 Revision 2, dated October 1976

Clarification/Exception

1. RG 1.88
Section C

~~Entergy~~IPEC will meet the requirements of NFPA No. 232-1975, "Standards for the Protection of Records", as allowed by the Regulatory Guide 1.88 – 1976 or ANSI/ ASME NQA-1-1983, Supplement 17S-1 Section 4.4 in lieu of N45.2.9 Section 5.6 or the discussions in this section for Records Storage Facilities with the clarification that penetrations providing fire protection, lighting, temperature/humidity control, or communications are acceptable as long as the penetration maintains the required fire resistance.

Except that as an alternate to these requirements non-permanent records (e.g., 3 years retention records) may be stored and maintained by the originating organization in one-hour minimum fire rated file cabinets located in environmentally controlled facilities that have suitable fire protection. Suitable fire protection is provided by either an automatic sprinkler system or a combination of two or more of the following: 1) automatic fire alarms, 2) hose stations, or 3) portable extinguishers.
2. ANSI N45.2.9
Section 1.4

Documents are considered completed when they are "completely filled out" (i.e., when sufficient information is recorded to fulfill the record's intended purpose) and the adequacy of the document (e.g., legibility) has been accepted by the document control or records management organizations or designees.
3. ANSI N45.2.9
Section 3.2.2

The requirements for an index discussed in this section are considered to only require that a method of retrieving the record and controlling the identified information be established.
4. ANSI N45.2.9
Section 5.4.2

Instead of the requirements of this section, ~~Entergy~~IPEC will comply with the following: Records shall not be stored loosely. They shall be secured for storage in file cabinets or on shelving in containers. Methods other than binders, folders, or envelopes (e.g., dividers or boxes) may be used to organize records for storage. This section is not applicable to special processed records controlled in accordance with Section 5.4.3 when the requirements of this section are not appropriate for the record type.

Table 1
Regulatory Commitments

J. Regulatory Guide 1.88 (continued)

Clarification/Exception

- | | |
|----------------------------------|---|
| 5. ANSI N45.2.9
Section 5.4.3 | Instead of the requirements of this section, EntergyIPEC will comply with the following: Provisions shall be made for special processed records such as radiographs, photographs, negatives, microfilm, and magnetic media to prevent damage from excessive light, stacking, electromagnetic fields, temperature, and humidity as appropriate to the record type with appropriate consideration of packaging and storing recommendations as provided by the manufacturer of these materials. |
| 6. ANSI N45.2.9
Section 5.5 | Routine general office and nuclear site security systems and access controls are provided; no special security systems are required to be established for record storage areas. |
| 7. ANSI N45.2.9
Section 5.6 | EntergyIPEC will meet the requirements of NFPA No. 232 – 1975, “Standards for the Protection of Records”, as allowed by the Regulatory Guide 1.88 – 1976 or ANSI/ASME NQA-1-1983, Supplement 17S-1 Section 4.4 in lieu of this section for Records Storage Facilities with the clarification that penetrations providing fire protection, lighting, temperature/humidity control, or communications are acceptable as long as the penetration maintains the required fire resistance. |

Except that as an alternate to these requirements non-permanent records (e.g., 3 years retention records) may be stored and maintained by the originating organization in one-hour minimum fire rated file cabinets located in environmentally controlled facilities that have suitable fire protection. Suitable fire protection is provided by either an automatic sprinkler system or a combination of two or more of the following: 1) automatic fire alarms, 2) hose stations, or 3) portable extinguishers.

Table 1
Regulatory Commitments

K. Regulatory Guide 1.94 Revision 1, dated April 1976

Clarification/Exception

- | | |
|----------------------------------|--|
| 1. ANSI N45.2.5
Section 2.5.2 | The last sentence requires that all items inspected with maintenance and test equipment, which is found to be out of calibration, shall be considered unacceptable. EntergyIPEC will comply with QAPM Section B.9.g as an alternate. QAPM Section B.9.g requires an evaluation to determine the validity of previous measurements. |
| 2. ANSI N45.2.5
Section 4.5 | When using ACI-305-72 and ACI-306-66, EntergyIPEC may apply the following requirements: |

PLACING TEMPERATURES OF CONCRETE

A. During hot weather concreting, placing temperatures of concrete will be limited to the following: 1) Concrete members less than 3 feet in least dimension will not exceed 90°F; 2) Concrete members from 3 feet to 6 feet in least dimension will not exceed 70°F; and 3) Concrete members more than 6 feet in least dimension will have placing temperature as near 50°F as can be obtained by use of ice as necessary up to 100 percent of adding mixing water; and by shading aggregate and sprinkling the coarse aggregate the day it is to be used. Care will be taken so that no unmelted ice remains in the concrete at the end of the mixing period.

B. During cold weather concreting: In heating the water and aggregate, live steam to heat the fine and coarse aggregate shall not be used. The permissible range for concrete temperature shall be as follows: 1) Sections less than 3 feet in least dimensions 55°F to 75°F; and 2) Mass concrete 3 feet or more in least dimension 45°F to 65°F. The mixing water and aggregate will be purchased as required. The materials will be free of ice, snow and frozen lumps before they enter the mixer.

- | | |
|----------------------------|---|
| 3. ANSI N45.2.5
Table B | In accordance with ASME QA92-003 (ASME NQA-1 Interpretations), testing of non-shrink grout does not fall under the jurisdiction of N45.2.5 Table B; but the designer is responsible for identifying necessary testing and frequency requirements. |
|----------------------------|---|

Table 1
Regulatory Commitments

K. Regulatory Guide 1.94 (continued)

Clarification/Exception

**4. ANSI N45.2.5
Section 4.8**

For the performance of correlation tests, the requirements of this standard may be modified as discussed below:

Table B, REINFORCING STEEL: In-process testing of reinforcing steel will include the mechanical properties of yield strength, tensile strength and percent elongation on full size specimens for each bar size for each 50 tons or fraction thereof from each mill heat. Bend tests are performed during material qualification testing only, except as noted below for bar sizes #14 through #18.

Table A, "Required Qualification Tests" as applied to reinforcing steel will include bend tests as required by ASTM A615 and summarized in the following: a) For bar sizes #3 through #11, one full size specimen from largest bar size rolled from each mill heat, unless material from one heat differs by three or more designation numbers. When this occurs, one bend test shall be made from both the highest and lowest designation number of the deformed bars rolled; b) For bar sizes #14 through #18, Supplementary Requirements S1 of ASTM A615 will be applied, i.e., one fullsize specimen for each bar size for each mill heat. If supplementary requirements are not followed for mill tests, they will be applied as in-process tests.

In-process test specimens may be selected at the rebar fabrication shop, prior to start of fabrication of the rebar from the heat or fraction thereof represented by the test specimen.

Acceptance criteria for any failed test (qualifications as well as in-process) may be the same as that for tensile tests specified in Subarticle CC-2331.2 of ASME Section III, Div. 2 Code (1975). This states that if a test specimen fails to meet the specified strength requirements, two (2) additional specimens from the same heat and of the same bar size would be tested, and if either of the two additional specimens fails to meet the specified strength requirements, the material represented by the tests would be rejected for the specified use. Alternative use of rejected material under strict control may be subject to evaluation by engineering.

Table 1
Regulatory Commitments

K. Regulatory Guide 1.94 (continued)

Clarification/Exception

- | | |
|---------------------------------------|---|
| 5. ANSI N45.2.5
Section 4.9 | EntergyIPEC may interpret the terms "horizontal, vertical and diagonal bars" to apply respectively to the following types of splice positions: a. Horizontal, including 10° to horizontal; b. Vertical, including 10° to vertical; and c. 45° angle, including 10° to 80° angle. The words "splicing crew" are interpreted to refer to all project members that are actively engaged in preparing and assembling cadweld mechanical splices at the final splice location. Separate test cycles will be established for each bar size and each splice position. |
| 6. ANSI N45.2.5
Section 5.5 | EntergyIPEC will comply with inspection requirements of the applicable welding codes and any exceptions instead of this section. |

Table 1
Regulatory Commitments

L. Regulatory Guide 1.116 Revision 0-R, dated June 1976

Clarification/Exception

- | | |
|------------------------------|---|
| 1. ANSI N45.2.8
Section 3 | Documented routine inspections and audits of the storage area may be performed instead of the requirements of this section. |
|------------------------------|---|

Table 1
Regulatory Commitments

M. Regulatory Guide 1.123 Revision 1, dated July 1977

Clarification/Exception

- | | |
|-----------------------------------|---|
| 1. RG 1.123
Paragraph C.6.e | This paragraph shall be implemented as originally written in N45.2.13 (i.e., with the verb "should" instead of the verb "shall"). Entergy IPEC retains the ultimate responsibility for performance of purchased equipment. The appropriate engineering discipline will exercise this management/engineering prerogative with respect to the final decision on post installation test requirements. |
| 2. ANSI N45.2.13
Section 1.2.2 | Item c is an option which may be used to assure quality; however, any option given in 10 CFR 50 Appendix B, Criterion VII as implemented by the QAPM may also be used. |
| 3. ANSI N45.2.13
Section 1.3 | Instead of the definition provided for QA Program Requirements, Entergy IPEC will comply with the following: "Those individual requirements of the QAPM which, when invoked in total or in part, establish quality assurance program requirements for the activity being controlled. Although not specifically used in the QAPM, ANSI N45.2 may be imposed upon suppliers." |
| 4. ANSI N45.2.13
Section 3.1 | The "same degree of control" is stipulated to mean "equivalent level of review and approval." The changed document may not always be reviewed by the originator; however, at least an equivalent level of management/supervision shall review and approve any changes. |
| 5. ANSI N45.2.13
Section 3.1 | Changes to procurement documents which are changes in quantity, estimated price, cost codes, taxes, format or editorial changes that do not affect the quality of the item or service do not require an equivalent level of review and approval as the original document. |

Table 1
Regulatory Commitments

M. Regulatory Guide 1.123 (continued)

Clarification/Exception

- | | |
|--|---|
| 5a. ANSI N45.2.13
Section 3.2 | When purchasing commercial-grade (as defined in 10 CFR 21) calibration services from NVLAP or A2LA accredited calibration laboratories, procurement documents are not required to impose a quality assurance program consistent with ANSI N45.2-1971. In such cases, accreditation may be accepted in lieu of the Purchaser imposing a QA Program consistent with ANSI N45.2-1971, provided all the following are met: <ul style="list-style-type: none">• The accreditation is to ANSI/ISO/IEC 17025.• The accrediting body is either NVLAP A2LA.• The published scope of accreditation for the calibration laboratory covers the needed measurement parameters, ranges, and uncertainties.• The purchase documents require calibration/report to include identification of the laboratory equipment/standards used.• The purchase documents require reporting as-found calibration data when calibrated items are found to be out-of-tolerance. |
| 6. ANSI N45.2.13
Section 3.4 | The requirements of the QAPM will be implemented instead of this section. |
| 7. ANSI N45.2.13
Section 4.2 | Supplier evaluations may be performed any time prior to placing the purchased item in service. |
| 8. ANSI N45.2.13
Section 8.2
Item b | Non-conformance notices for conditions described in this section are only required to be submitted to Entergy IPEC when the non-conformance could adversely affect the end use of an item relative to safety, interchangeability, operability, reliability, integrity or maintainability. |

Table 1
Regulatory Commitments

M. Regulatory Guide 1.123 (continued)

Clarification/Exception

9. ANSI N45.2.13
Section 10.2
Item d

The section states that the certificate should be attested to by a person who is responsible for this QA function whose function and position are described in the Purchaser's/Supplier's QA program. As an alternate to this requirement, EntergyIPEC will use the following: "The person attesting to a certificate shall be an authorized and responsible employee of the supplier, and shall be identified by the supplier."

Table 1
Regulatory Commitments

N. Regulatory Guide 1.144 Revision 1, dated September 1980

Clarification/Exception

- | | |
|----------------------------------|--|
| 1. RG 1.144
Section C.3.a.(2) | This section is not applicable. |
| 2. RG 1.144
Section C.3.b.(2) | In addition to the requirements of this section, previously evaluated and approved active suppliers for which auditing is not the selected method of source verification should be evaluated concurrent with the award of a contract. Regardless of the evaluation results, active suppliers (except those excluded under C.3.b(1)) are source verified (audit, surveillance or inspection) within two years prior to award of a contract or have source verification performed. Inactive suppliers are evaluated prior to supplying items or services. An audit shall be conducted if required to determine the acceptability of procured items or services (i.e., acceptability cannot be determined by receipt inspection or another method allowable under 10 CFR 50 Appendix B, Criterion VII). |
| 3. RG 1.144
Section C.3.b.(2) | This section requires that supplier audits be performed on a triennial basis. A 90-day grace period may be applied to this activity. For activities deferred in accordance with the 90-day grace period, the next performance date will be based on their originally scheduled date. |
| 4. RG 1.144
Section C.3.b.(2) | Instead of the annual documented evaluation of suppliers discussed in this section, an ongoing evaluation of supplier performance is conducted which takes into account, where applicable, the other considerations of this section and paragraph of the Regulatory Guide. |

Table 1
Regulatory Commitments

N. Regulatory Guide 1.144 (continued)

Clarification/Exception

- | | |
|--|--|
| 4a. RG 1.144
Section C.3.b.(2) | For suppliers of commercial-grade (as defined in 10 CFR 21) calibration services with accreditation by NVLAP or A2LA, a documented review of the supplier's accreditation by the purchaser may be used in lieu of performing an audit, accepting an audit by another licensee, performing a commercial-grade survey, inspecting or testing following delivery, or performing in-process surveillances during performance of the service. This review shall include, at a minimum, verification of all the following: <ul style="list-style-type: none">• The accreditation is to ANSI/ISO/IEC 17025.• The accrediting body is either NVLAP A2LA.• The published scope of accreditation for the calibration laboratory covers the needed measurement parameters, ranges, and uncertainties. |
| 5. ANSI N45.2.12
Section 4.3.1 | Pre-audit and post-audit conferences may be fulfilled by a variety of communications, such as telephone conversation. |
| 6. ANSI N45.2.12
Section 4.3.1 | Pre-audit and post-audit conferences are only held when deemed necessary by quality assurance or when requested by the audited organization. |
| 7. ANSI N45.2.12
Section 4.3.2.2 | This subsection could be interpreted to limit auditors to the review of only objective evidence; sometimes and for some program elements, no objective evidence may be available. Entergy IPEC will comply with an alternate sentence which reads: "When available, objective evidence shall be examined for compliance with QAPM requirements. If subjective evidence is used (e.g., personnel interviews) then the audit report must indicate how the evidence was obtained." |

Table 1
Regulatory Commitments

N. Regulatory Guide 1.144 (continued)

Clarification/Exception

- | | |
|------------------------------------|---|
| 8. ANSI N45.2.12
Section 4.3.3 | Pre-audit and post-audit conferences are only held when deemed necessary by quality assurance or when requested by the audited organization. |
| 9. ANSI N45.2.12
Section 4.3.3 | Pre-audit and post-audit conferences may be fulfilled by a variety of communications, such as telephone conversation. |
| 10. ANSI N45.2.12
Section 4.4 | Instead of the last sentence of the last paragraph of the section, Entergy IPEC will comply with the following: The audit report shall be issued within thirty working days after the last day of the audit. The last day of an audit shall be considered to be the day of the post-audit conference. If a post-audit conference is not held because it was deemed unnecessary, the last day of the audit shall be considered to be the date the post-audit conference was deemed unnecessary as documented in the audit report. |
| 11. ANSI N45.2.12
Section 4.5.1 | The QAPM Section A.6 corrective action program may be used instead of these requirements as long as the appropriate time limits are applied to significant conditions adverse to quality. Also, no additional documentation is necessary if needed corrective actions are taken and verified prior to audit report issuance. |

Table 1
Regulatory Commitments

O. Regulatory Guide 1.146 Revision 0, dated August 1980

Clarification/Exception

- | | |
|--|--|
| 1. ANSI N45.2.23
Section 2.3.1.3 | Holders of NRC-issued Reactor Operator/Senior Reactor Operator Licenses comply with the requirements of this section and may be awarded two credits. |
| 2. ANSI N45.2.23
Section 2.3.4 | Prospective lead auditors shall demonstrate their ability to effectively implement the audit process and lead an audit team. They shall have participated in at least one audit within the year preceding the individual's effective date of qualification. Upon successful demonstration of the ability to effectively lead audits, licensee management may designate a prospective lead auditor as a “lead auditor”. |
| 3. ANSI N45.2.23
Sections 3.2 and 5.3 | These sections require that an annual assessment be performed of each lead auditor’s qualification and that each lead auditor’s records be updated annually. A 90-day grace period may be applied to these activities. For activities deferred in accordance with the 90-day grace period, the next performance due date will be based on their originally scheduled date. |

QAPM Change Evaluation

NOTE

The basis for the answers should be of sufficient depth and detail to support the conclusions reached and allow for independent review. Simply stating the change does not decrease the effectiveness without stating why is not acceptable.

Editorial corrections (i.e., spelling, punctuation, typographical or grammatical errors, and incorrect cross-references) are not considered changes and, therefore, a Quality Assurance Program Regulatory Review is not required. All boxes should be marked "N/A" and proceed to signature page of the evaluation form. If questions 4-8 do not apply to the change being reviewed, then the associated boxes should be marked "N/A". [10 CFR 50.54 (a)(3)]

	YES, NO, or N/A
<p>1. Is this change an editorial change as defined in 10 CFR 50.54(a)(3) and 10 CFR 71.106? If yes, provide basis, mark remaining questions "N/A" and state "not a reduction in commitment." Proceed to approval page of attachment.</p> <p>Basis for Answer: The proposed changes to the IPEC QAPM are not considered editorial as defined in 10 CFR 50.54(a)(3) and 10 CFR 71.106. This change provides several conditional based exceptions that may be implemented for a unit that has docketed a certification of permanent cessation of operations and permanent defueling under 10 CFR 50.82(a)(1) and entered decommissioning. The first conditional based exception is made to Table 1, Regulatory Commitments Sections A.1 and C.14 which adds a discussion regarding the position of Certified Fuel Handler (CFH) which become equivalent to the position of Senior Reactor Operator once a unit has a certification of permanent cessation of operations under 10 CFR 50.82(a)(1). The second change is made to Table 1, Regulatory Commitments Section A.6. to provide an allowance to credit alternative experience to determine the qualifications for the position of CFH and operators which also can only be implemented for a unit that has docketed a certification of permanent cessation of operations under 10 CFR 50.82(a)(1).</p>	NO
<p>2. For any YES answer in the 10 CFR 50.54(a) QAPM Change Screening or for the QA-initiated change, does the proposed change represent a reduction in commitment or process(es) described or established in the approved QA Program?</p> <p>Basis for Answer: The proposed change to the IPEC QAPM provides conditional based exceptions that may be implemented for a unit that has permanently ceased power operations and has docketed a certification of permanent cessation of operations and permanent defueling under 10 CFR 50.82(a)(1) and entered decommissioning. The specific changes are made to Table 1, Regulatory Commitments Sections A.1, A.6 and C.14.</p> <ul style="list-style-type: none"> The first conditional based exception is the addition of a discussion of the 	YES

	YES, NO, or N/A
<p>position of Certified Fuel Handler (CFH) which become equivalent to the position of Senior Reactor Operator once a unit has docketed the certification under 10 CFR 50.82(a)(1) and obtained approval of corresponding changes to the Administrative Technical Specifications.</p> <ul style="list-style-type: none"> The second conditional based exception is to provide an allowance to credit alternative experience to determine the qualifications for the position of CFH and operators along with utilizing a training program that was submitted to and approved by the NRC. These changes are considered reductions in commitments to the previously approved QAPM. <p>This review verified that the IPEC QAPM continues to comply with 10 CFR Part 50 Appendix B, Standard Review Plan 17.3, NUREG-0800 and 10 CFR 50.54(a)(3). It will also continue to satisfy the requirements of 10 CFR 71 Subpart H and 10 CFR 72 Subpart G.</p>	
<p>3. If item 2 above is YES, is the proposed change limited to the use of a quality assurance alternative or exception approved by the NRC safety evaluation report (SER), for which the bases of the NRC approval are applicable to Entergy?</p> <p>If YES, explain how all of the NRC approval bases from the SER are incorporated or covered by the Entergy QA Program.</p> <p><u>This exemption is not allowed under 10 CFR 71.106 and cannot be used to reduce commitments under part 71.</u></p> <p>Basis for Answer: The 10 CFR 50.54(a) evaluation concluded that proposed changes (addition of conditional based exceptions) can be made without requiring prior NRC approval, based on the guidance provided within 10 CFR 50.54(a)3. The conditional based exceptions that are being included within this revision to the QAPM are considered reductions in commitments to the previously approved QAPM, but can be implemented without prior NRC approval for the following reasons:</p> <ul style="list-style-type: none"> The first conditional based exception that is considered a reduction in commitments to the previously approved QAPM is with Table 1 Sections A.1 and C.14 which adds a discussion regarding the position of CFH which become equivalent to the position of Senior Reactor Operator once a unit has a certification of permanent cessation of operations under 10 CFR 50.82(a)(1). This exception can only be implemented if a unit has permanently ceased power operations and has Certified under 10 CFR 50.82(a)(1). This conditional based exception relies on an NRC issued License Amendment (LA) to the Administrative Technical Specifications and the associated SER for the specific unit and the submittal of the CFH Training Program to the NRC for review and approval. This would be considered a corresponding change to implement the specific unit's LA with the associated SER for a unit that has permanently ceased power operations and has docketed a certification of permanent cessation of operations and permanent defueling under 	YES

	YES, NO, or N/A
<p>10 CFR 50.82(a)(1) and entered decommissioning. This LAR was submitted to the NRC by Entergy IPEC via outgoing letter NL-19-013 (ML 19105B236) and provided requested changes to the Unit 2 and Unit 3 Administrative Technical Specifications.</p> <ul style="list-style-type: none"> The second conditional based exception that is being included in the change and is considered a reduction in commitments to the previously approved QAPM provides an allowance to credit alternative experience to determine the qualifications for the position of CFH and operators for a unit that has permanently ceased power operations and has Certified under 10 CFR 50.82(a)(1). This change was previously approved by the NRC for Vermont Yankee [Reference Letter to Vermont Yankee from the NRC, dated June 16, 2016 (ADAMS Accession Nos. ML16165A466 and ML16165A467), which included an associated SER] based on their docketing of the certification of permanent cessation of operations and permanent defueling under 10 CFR 50.82(a)(1). This is a consistent approval basis to the condition that IPEC Units 2 and 3 will achieve when the same milestone is met. This allows the conditional based exception to be included in the QAPM and implemented based on the associated Vermont Yankee SER without requiring prior NRC approval. <p>These conditional based exceptions can only be applied in conjunction with the implementation of the associated unit's LA to the Administrative Technical Specifications and the docketing of the certifications of permanent cessation of operations and permanent defueling under 10 CFR 50.82(a)(1).</p>	
<p>4. Is the proposed change a change to a QA standard approved by the NRC which is more recent than the QA standard currently established in the QA Program?</p> <p>Basis for Answer: None of the proposed changes affect QA standards approved by the NRC other than the addition of conditional based exceptions as described in the response to Question 3.</p>	N/A
<p>5. Is the proposed change a change involving the use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles?</p> <p>Basis for Answer: None of the proposed changes affect the use of generic organizational position titles.</p>	N/A
<p>6. Is the proposed change a change involving the use of generic organizational charts to indicate functional relationships, authorities, and responsibilities, or alternately, the use of descriptive text?</p> <p>Basis for Answer: None of the proposed changes include the use of generic organizational charts to indicate functional relationships, authorities, and responsibilities.</p>	N/A

	YES, NO, or N/A
<p>7. Is the proposed change an elimination of Quality Assurance Program information that duplicates language in quality assurance regulatory guides and quality assurance standards to which Entergy Nuclear (EN) is committed?</p> <p>Basis for Answer: None of the proposed changes include the elimination of Quality Assurance Program information that duplicates language in Quality Assurance Regulatory Guides and Quality Assurance Standards</p>	N/A
<p>8. Does the proposed change continue to ensure that persons and organizations performing Quality Assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations?</p> <p>Basis for Answer: There are no changes to the Quality Assurance functions or reporting lines.</p>	YES
<p>9. Is a change to the QAPM required? If YES, process change per EN-LI-113. If NO, distribute as indicated on the last page of this attachment.</p> <p>Basis for Answer: A revision to the IPEC QAPM is required to allow the implementation of conditional based exceptions to support the implementation of NRC approved LAs to the Administrative Technical Specifications for a unit that has permanently ceased power operations and has Certified under 10 CFR 50.82(a)(1).</p>	YES

Indian Point Energy Center QAPM Revision 1LBDCR NO: 2020-02

QAPM CHANGE REVIEW RESULTS


- ☐ Change is editorial in accordance with 10 CFR 50.54(a)(3) and 10 CFR 71.106, thus, does not represent a reduction in commitment. The change can be implemented upon approval of parent change document. (Question 1 is YES)
- ☐ Does not represent a reduction of commitment, and can be implemented upon approval of parent change document. (Questions 4, 5, 6, 7, and 8 are YES or N/A)
- ☒ Represents a reduction of commitment with prior NRC approval. The safety evaluation issued by the NRC has been evaluated and it directly applies to the changes being proposed for EN. The change can be implemented upon approval of parent change document. (Question 3 is YES)
- ☐ Represents a reduction of commitment; however, the change has sufficient basis to demonstrate continued compliance with Appendix B and USAR commitments. Therefore, the proposed change should be submitted for NRC review/approval. (Questions 2 is YES and Question 3 is NO)
- ☐ Represents a reduction of commitment with insufficient basis to demonstrate continued compliance. Therefore, the activity should not be processed.

Billy L. Higginbotham
Preparer



04/15/2020
Date

Joe P. Pennington
Manager, QA



/ 04/15/2020
Date

Indian Point Energy Center QAPM Revision 1
LBDCR NO: 2020-02

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	IPEC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
RBS	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
WF3	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Site Review Due Date: 04/23/2020

Site Review Input:

Record references below. If there are none state **None**.

ANO: NONE	IPEC: <i>None</i>
GGNS: NONE	PLP/BRP: NONE
RBS: NONE	
WF3: NONE	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☐ WF3 ☐
IPEC ☒ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

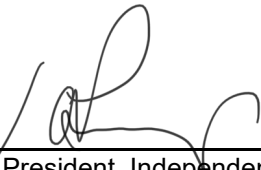
Steven O'Brien  , 4-27-2020
Site QA Supervisor / Date

CHANGE DISPOSITION

☒ Approved for implementation

☐ Disapproved

☐ Approved for submittal to the NRC

Approved by/Date: Oscar Limpias /  / 05/04/2020
Vice President, Independent Oversight

Distribution: Original – Attach to Parent Document;
Copy – Quality Assurance



Entergy

Quality Assurance Program Manual Indian Point Energy Center (IPEC)

Indian Point 1 Nuclear Power Plant

Docket No. 50-003

License No. DPR-05

Docket No. 72-51

Docket No.: 71-0240

Indian Point 2 Nuclear Power Plant

Docket No. 50-247

License No. DPR-26

Docket No. 72-51

Docket No.: 71-0240

Indian Point 3 Nuclear Power Plant

Docket No. 50-286

License No. DPR-64

Docket No. 72-51

Docket No.: 71-0240

TABLE OF CONTENTS

<u>SECTION</u>	<u>PAGE</u>
B. PERFORMANCE/VERIFICATION (continued)	
13. Corrective Action	15
14. Document Control	16
15. Records	16
C. AUDIT	
1. Methodology	17
2. Performance	17
D. INDEPENDENT SAFETY REVIEW	
1. Description	20

Table 1- Regulatory Commitments

A. Regulatory Guide 1.8 Revision 1, dated September 1975 “Personnel Qualification and Training”	21
B. Regulatory Guide 1.30 , dated August 1972 “Quality Assurance Requirements for the Installation, Inspection, and Testing of Instrumentation and Electric Equipment”	243
C. Regulatory Guide 1.33 Revision 2, dated February 1978 “Quality Assurance Program Requirements”	254
D. Regulatory Guide 1.37 , dated March 1973 “Quality Assurance Requirements for Cleaning of Fluid Systems and Associated Components of Water-Cooled Nuclear Power Plants”	298
E. Regulatory Guide 1.38 Revision 2, dated May 1977 “Quality Assurance Requirements for Packaging, Shipping, Receiving, Storage and Handling of Items for Water-Cooled Nuclear Power Plants”	3029
F. Regulatory Guide 1.39 Revision 2, dated September 1977 “Housekeeping Requirements for Water-Cooled Nuclear Power Plants”	354

TABLE OF CONTENTS

<u>SECTION</u>	<u>PAGE</u>
Table 1- Regulatory Commitments (continued)	
G. Regulatory Guide 1.58 Revision 1, dated September 1980 “Qualifications of Nuclear Power Plant Inspection, Examination, and Testing Personnel”	365
H. Regulatory Guide 1.64 Revision 2, dated June 1976 “Quality Assurance Requirements for the Design of Nuclear Power Plants”	376
I. Regulatory Guide 1.74 dated February 1974 “Quality Assurance Terms and Definitions”	387
J. Regulatory Guide 1.88 Revision 2, dated October 1976 “Collection, Storage and Maintenance of Nuclear Power Plant Quality Assurance Records”	398
K. Regulatory Guide 1.94 Revision 1, dated April 1976 “Quality Assurance Requirements for Installation, Inspection and Testing of Structural Steel during the Construction Phase of Nuclear Power Plants”	410
L. Regulatory Guide 1.116 Revision 0-R, dated June 1976 “Quality Assurance Requirements for Installation, Inspection and Testing of Mechanical Equipment and Systems”	443
M. Regulatory Guide 1.123 Revision 1, dated July 1977 “Quality Assurance Requirements for control of Procurement of Items and Services for Nuclear Power Plants”	454
N. Regulatory Guide 1.144 Revision 1, dated September 1980 “Auditing of Quality Assurance Programs for Nuclear Power Plants”	487
O. Regulatory Guide 1.146 Revision 0, dated August 1980 “Qualification of Quality Assurance Program Audit Personnel for Nuclear Power Plants”	510

Table 1

Regulatory Commitments

A. Regulatory Guide 1.8 Revision 1, dated September 1975

Clarification/Exception

1. General

IPEC is committed to Sections 1 – 4 of ANSI/ANS 3.1-1978 with following clarifications and exceptions.

Qualification requirements for personnel shall meet ANSI/ANS 3.1-1978 except the following:

- a. The radiation protection manager shall meet or exceed the qualifications of Regulatory Guide 1.8, Revision 2, 1987.
- b. Managers required to hold an SRO license are specified in the applicable unit's Technical Specifications. *Certified Fuel Handlers replace the SRO License position for a unit that has permanently ceased power operations and certified defueled in accordance with 10 CFR 50.82 as documented in the specific unit's Technical Specifications.*
- c. Licensed Operators shall be qualified in accordance with the requirements of 10 CFR 55. *Certified Fuel Handlers, for a unit that has permanently ceased power operations and certified defueled in accordance with 10 CFR 50.82, are qualified in accordance with a program submitted to and approved by the NRC.*

Individuals filling positions who met the previous commitment at the time of implementation of this commitment can be considered to meet any more restrictive aspects of the requirements of this commitment for that position without further review and documentation.

Table 1
Regulatory Commitments

A. Regulatory Guide 1.8 (continued)

- | | |
|--|--|
| 3. ANSI/ANS 3.1
Section 4 | Individuals assigned to professional-technical comparable positions shall have the authority and specified qualifications to accomplish the functional responsibilities of the position. |
| 4. ANSI/ANS 3.1
Section 4.4.5 | Individuals who do not possess the formal education and minimum experience requirements for the manager responsible for quality assurance should not be eliminated automatically when other factors provide sufficient demonstration of their abilities. These other factors are evaluated on a case-by-case basis and approved and documented by senior management. As a minimum, the Special Requirements of ANSI/ANS 3.1-1993 Section 4.3.7 must be met if the manager responsible for Quality Assurance does not meet the requirements of section 4.4.5 of ANSI/ANS 3.1-1978. |
| 5. ANSI/ANS 3.1
Section 5 | IPEC will maintain a training program for the unit staff that meets the applicable regulations and either a) is accredited by the National Nuclear Accrediting Board (NNAB) or b) meets the standards of section 5 of ANSI/ANS 3.1-1978. |
| 6. ANSI/ANS 3.1
Sections 4.3.1 and
4.5.1 | For a unit that has permanently ceased power operations and certified defueled in accordance with 10 CFR 50.82, the nuclear power plant experience is amended to also include experience acquired at a defueled reactor site that is directly related to the storage or handling of spent nuclear fuel in a spent fuel pool. Specifically, individuals will obtain the necessary on-site experience to fill the position of Certified Fuel Handler or operators, based on their assigned functions and validation of equivalent training and experience rather than requiring at least six months of the nuclear power plant experience at the plant for which an individual seeks a license or to be an operator as defined in Sections 4.3.1 and 4.5.1 of ANSI/ANS 3.1-1978. |

Table 1
Regulatory Commitments

C. Regulatory Guide 1.33 (continued)

Clarification/Exception

- | | | |
|-----|-------------------------------|--|
| 13. | ANSI N18.7
Section 5.1 | Instead of the requirements of this section to have a summary document, a method of cross-referencing these requirements to the implementing procedures will be maintained. |
| 14. | ANSI N18.7
Section 5.2.2 | The person who holds a senior reactor operators license for the affected unit and approves a temporary change to a procedure is not required to be in charge of the shift. For a unit that has permanently ceased power operations and certified defueled in accordance with 10 CFR 50.82 the senior reactor operator is replaced with a Certified Fuel Handler. |
| 15. | ANSI N18.7
Section 5.2.2 | In addition to the temporary procedure change process described for changes which clearly do not change the intent of a procedure, temporary procedure changes which may change the intent of a procedure may be made following the process described in this section. Except that the person normally responsible for approving revisions to the procedure is the approval authority for the change. |
| 16. | ANSI N18.7
Section 5.2.6 | Instead of the requirements of this section concerning non-conforming conditions, non-conforming conditions will be evaluated and controlled in accordance with the corrective action program. |
| 17. | ANSI N18.7
Section 5.2.6 | The requirement of the fifth paragraph of this section to have a log of the status of temporary modifications is not applicable to temporary modifications for routine tasks installed in accordance with procedures. These procedures shall provide assurance that approvals are obtained, temporary modification activities are independently verified by an individual cognizant of the purpose and the effect of the temporary modification, and that activities are adequately documented to indicate the status of the temporary modification. |
| 18. | ANSI N18.7
Section 5.2.7.1 | This section will be implemented by adding the words “Where practical” in front of the first and fourth sentences of the fifth paragraph. For modifications where the requirements of the fourth sentence are not considered practical, a review in accordance with the provisions of 10 CFR 50.59 will be conducted. |

QAPM Change Evaluation

NOTE

The basis for the answers should be of sufficient depth and detail to support the conclusions reached and allow for independent review. Simply stating the change does not decrease the effectiveness without stating why is not acceptable.

Editorial corrections (i.e., spelling, punctuation, typographical or grammatical errors, and incorrect cross-references) are not considered changes and, therefore, a Quality Assurance Program Regulatory Review is not required. All boxes should be marked "N/A" and proceed to signature page of the evaluation form. If questions 4-8 do not apply to the change being reviewed, then the associated boxes should be marked "N/A". [10 CFR 50.54 (a)(3)]

	YES, NO, or N/A
<p>1. Is this change an editorial change as defined in 10 CFR 50.54(a)(3) and 10 CFR 71.106? If yes, provide basis, mark remaining questions "N/A" and state "not a reduction in commitment." Proceed to approval page of attachment.</p> <p>Basis for Answer:</p>	No
<p>2. For any YES answer in the 10 CFR 50.54(a) QAPM Change Screening or for the QA-initiated change, does the proposed change represent a reduction in commitment or process(es) described or established in the approved QA Program?</p> <p>Basis for Answer: The change to the Entergy QAPM Revision 38 and IPEC QAPM Revision 1 to allow a grace period not to exceed 25% for audit interval for supplier audits is a reduction in commitment from the previously approved QAPMs. The current requirement of a 90-day grace period was submitted and approved in the Entergy QAPM, Rev. 3, submitted via CNRO2000-00012 and accepted by the NRC, ADAMS Accession No.: ML003711648 and IPEC QAPM, Rev 0, submitted via NL-20-04 and accepted by the NRC. While the 25% grace period represents a reduction in commitment from the previously approved Entergy and IPEC QAPMs, the change has been previously evaluated and approved by the NRC, as documented in Southern Nuclear Company SER, approved June 17, 2005, ADAMS Accession No.: ML051570349.</p>	Yes
<p>3. If item 2 above is YES, is the proposed change limited to the use of a quality assurance alternative or exception approved by the NRC safety evaluation report (SER), for which the bases of the NRC approval are applicable to Entergy?</p>	Yes

If YES, explain how all of the NRC approval bases from the SER are incorporated or covered by the Entergy QA Program.

This exemption is not allowed under 10 CFR 71.106 and cannot be used to reduce commitments under part 71.

Basis for Answer: As allowed by 10 CFR 50.54(a), the licensee may use a QA exception previously approved by the NRC in a safety evaluation, provided that the bases of the NRC approval are applicable to the licensee's facility. This change has been evaluated and approved in SER "SAFETY EVALUATION BY THE OFFICE OF NUCLEAR REACTOR REGULATION PROPOSED CHANGE TO THE QUALITY ASSURANCE PROGRAM COMMON SAFETY REVIEW BOARD CONDUCT OF OPERATIONS SOUTHERN NUCLEAR OPERATING COMPANY, INC. JOSEPH M. FARLEY NUCLEAR PLANT, UNITS 1 AND 2 EDWIN I. HATCH NUCLEAR PLANT, UNITS 1 AND 2 VOGTLE ELECTRIC GENERATING PLANT, UNITS 1 AND 2 DOCKET NOS. 50-348, 50-364, 50-321, 50-366, 50-424, AND 50-425," dated June 17, 2005, ADAMS Accession No.: ML051570349. Below is an evaluation of this SER as it relates to Entergy.

The SER approved the following reductions in commitments for Southern Nuclear Company (SNC):

- 1) Adoption of a standard conduct of operations for the Safety Review Board (SRB). The reduction in commitment was to have the SRB review the PRB performance instead of review reports and meeting minutes of the PRB. The evaluation stated that "Subjects requiring independent review by the independent review body are described in Section 4.3.4 of ANS N18.7-1976. Review of the reports and minutes of the onsite operating organization (Plant Review Board) is not an explicit requirement of Section 4.3.4. A performance-based review of the activities of the PRB is an acceptable alternative to review of documentation."

At Entergy, the Safety Review Committee (SRC) is the equivalent of the SNC SRB and the On-site Safety Review Committee (OSRC) is the equivalent of SNC PRB. The Entergy and IPEC QAPMs do not explicitly list review of reports and minutes of the OSRC by the SRC as a requirement. Per the evaluation, review of the OSRC reports is not an explicit requirement; therefore, Entergy will not make changes to its QAPMs to reflect this part of the SER.

- 2) Change 2 of the SER SNC proposes to adopt a standard list description of QA audit topics. SNC states that adoption of a standard description of audit topics would not reduce the scope or effectiveness of the audit program. SNC made this change to standardize audits topics between SNC's three nuclear plants. The evaluation states, in part, "Section 4.5 of ANSI N18.7-1976 specifies that a comprehensive system of planned

and documented audits shall be carried out to verify compliance with all aspects of the administrative controls and QA program...The list of audit topics contained in the Farley QA program description is consistent with the guidance of ANS N18.7-1976, Section 4.5, Audit Program.”

The Entergy and IPEC QAPMs and NMM procedure, EN-QV-109, Audit Process, complies with ANS N18.7 – 1976, Section 4.5 in that a list of required audit topics are identified. Therefore, no changes are required to the Entergy and IPEC QAPM to adopt this portion of the SER.

- 3) Change 3 of the SER proposes that SNC adopt a maximum 24-month audit interval, except where noted. The evaluation states, in part, “A similar change in maximum audit intervals, based on performance-based audit scheduling, has been previously approved by the NRC staff in U.S. NRC letter to Boston Edison Company, “Issuance of Amendment No. 168 to Facility Operating License No. DPR-35, Pilgrim Nuclear Power Station,” November 12, 1996.(Reference 6). The proposed implementation of a maximum 24-month interval for the specified audits is consistent with the guidance of AL 95-06 and is, therefore, acceptable.”

Entergy and IPEC QAPMs currently provides audit intervals of 24-month in accordance with Regulatory Guide 1.33 Revision 2, dated February 1978. Entergy was allowed to take exception to section C.4 of Reg Guide 1.33. Instead of meeting the requirements of this section, Entergy will perform audits at frequencies as discussed in QAPM Section C.2.a, which allows for performance-based auditing and performance of audits at indicated frequencies. Therefore, no changes are required to the Entergy and IPEC QA program to meet the intent of this SER.

- 4) Change 4 of the SER proposed standard criteria for extending audit intervals. Specifically,
- Audits shall be performed at the intervals designated herein for each audit area. Schedules shall be based on the month in which the audit starts.
 - Entergy and IPEC QAPM C.2.a currently states, “Audit frequencies will be implemented as required by the applicable Code of Federal Regulations, safety analysis report, and commitments by various correspondences to the NRC. Audits will be conducted at a frequency in accordance with either Section C.2.a.1 or Section C.2.a.2” of the QAPM. The QAPM does not explicitly discuss audit start date as it relates to scheduling. However, EN-QV-109, Audit Process, implements the QAPM requirements for scheduling and further defines

<p>how audit start dates are determined. Specifically, “Compliance to periodicity is achieved by employing the time between the previous first day of active auditing and the next first day of active auditing in the same calendar month for an audit. If any audit (Appendix B or non-Appendix B) is completed earlier than the scheduled 12 or 24-month period, then the date of early completion becomes the new start date for the next 12 or 24-month audit period. Thus, no changes are needed to the Entergy and IPEC QAPM to adopt this SER.</p> <ul style="list-style-type: none"> • A maximum extension not to exceed 25 percent of the audit interval shall be allowed. That is to say that, for audits on a 24-month frequency, the maximum time between specific audits shall not exceed 30 months. Likewise, audits on an annual (12 month) frequency shall not be extended beyond 15 months. <ul style="list-style-type: none"> ○ Entergy and IPEC QAPM currently employs a more conservative extension period of 90 days for internal audits. Since the approach is more conservative than what is in the SER, Entergy and IPEC will not implement this change in its QAPMs. • When an audit interval extension greater than one month is used, the next audit for that particular audit area will be scheduled from the original anniversary month rather than from the month of the extended audit. <ul style="list-style-type: none"> ○ Entergy and IPEC QAPM already implements this process for audits that are extended. The QAPMs currently state, “A grace period of 90 days may be applied to the 24-month frequency for internal audits. For activities deferred in accordance with the 90-day grace period, the next performance due date will be based on their originally scheduled date.” • Item B shall also apply to supplier audits and evaluations except that a total combined time interval for any three consecutive inspection or audit intervals should not exceed 3.25 times the specified inspection or audit interval. (Item B is the extension period for internal audits above) <ul style="list-style-type: none"> ○ Entergy and IPEC QAPM currently define the extension period for supplier audits as a 90-day grace period. For those audits that are deferred in accordance with the 90-day grace period, the next performance date will be based on their originally scheduled date. <p>Due to challenges imposed by the pandemic and being challenged to complete supplier audits due to travel restrictions, Entergy is adopting this less conservative approach for extending supplier audits to prevent the supplier from expiring prior to the audit being able to be</p>	
--	--

<p>performed. This will be a reduction in commitment from the currently approved QAPM but has been previously approved by the NRC in the referenced SER.</p> <p>The change to the Entergy and IPEC QAPMs in Table 1 N.2 is being changed to read, "This section requires that supplier audits be performed on a triennial basis. A grace period not to exceed 25% for audit interval may be applied to this activity. For activities deferred in accordance with the 25% grace period, the next performance date will be based on their originally scheduled date. A total combined time interval for any three consecutive inspection or audit intervals should not exceed 3.25 times the specified inspection or audit interval."</p> <p>This review ensures that once the changes are incorporated, the Entergy QAPM and the IPEC QAPM continue to comply with 10 CFR 50 App. B, ANSI N18.7 section 3.4, SRP section 17.3, NUREG-0800 and 10 CFR 50.54(a)(3)</p>	
<p>4. Is the proposed change a change to a QA standard approved by the NRC which is more recent than the QA standard currently established in the QA Program?</p> <p>Basis for Answer:</p>	N/A
<p>5. Is the proposed change a change involving the use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles?</p> <p>Basis for Answer:</p>	N/A
<p>6. Is the proposed change a change involving the use of generic organizational charts to indicate functional relationships, authorities, and responsibilities, or alternately, the use of descriptive text?</p> <p>Basis for Answer:</p>	N/A
<p>7. Is the proposed change an elimination of Quality Assurance Program information that duplicates language in quality assurance regulatory guides and quality assurance standards to which Entergy Nuclear (EN) is committed?</p> <p>Basis for Answer:</p>	N/A

<p>8. Does the proposed change continue to ensure that persons and organizations performing Quality Assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations?</p> <p>Basis for Answer: The change to QAPM Table 1 N.2 does not impact QA organizational functions and persons performing Quality Assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule.</p>	Yes
<p>9. Is a change to the QAPM required? If YES, process change per EN-LI-113. If NO, distribute as indicated on the last page of this attachment.</p> <p>Basis for Answer: The Entergy QAPM and IPEC QAPM need to be revised to allow a grace period not to exceed 25% for audit interval for the performance of supplier audits.</p>	Yes

QAPM CHANGE REVIEW RESULTS

- ☐ Change is editorial in accordance with 10 CFR 50.54(a)(3) and 10 CFR 71.106, thus, does not represent a reduction in commitment. The change can be implemented upon approval of parent change document. (Question 1 is YES)
- ☐ Does not represent a reduction of commitment, and can be implemented upon approval of parent change document. (Questions 4, 5, 6, 7, and 8 are YES or N/A)
- ☒ Represents a reduction of commitment with prior NRC approval. The safety evaluation issued by the NRC has been evaluated and it directly applies to the changes being proposed for EN. The change can be implemented upon approval of parent change document. (Question 3 is YES)
- ☐ Represents a reduction of commitment; however, the change has sufficient basis to demonstrate continued compliance with Appendix B and USAR commitments. Therefore, the proposed change should be submitted for NRC review/approval. (Questions 2 is YES and Question 3 is NO)
- ☐ Represents a reduction of commitment with insufficient basis to demonstrate continued compliance. Therefore, the activity should not be processed.

Alisha Johnson-Thomas
Preparer

Alisha Johnson-Thomas
Thomas

Digitally signed by Alisha
Johnson-Thomas
Date: 2020.07.13 12:58:07 -
05'00'

Joe Pennington
Manager, QA

Joe
Pennington

Digitally signed by Joe
Pennington
Date: 2020.07.13 13:33:25 -
05'00'

/ Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: _____

Site Review Input:

Record references below. If there are none state **None**.

ANO: None	IPEC:
GGNS:	PLP/BRP:
RBS:	
WF3:	

Site QA Supervisor acknowledges completion of reviews below

ANO ☒ GGNS ☐ RBS ☐ WF3 ☐
IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

John R.
Harrison

Digitally signed by John R. Harrison
DN: cn=John R. Harrison, c=US,
o=Nuclear Independent Oversight,
ou=NSO3,
email=jharr22@entergy.com
Reason: I am approving this document
Date: 2020.06.30 13:01:12 -0500

Site QA Supervisor

/

/

Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input type="checkbox"/> No
GGNS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: _____

Site Review Input:

Record references below. If there are none state **None**.


ANO:	IPEC:
GGNS: None	PLP/BRP:
RBS:	
WF3:	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☒ RBS ☐ WF3 ☐
IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

Baogia Nguyen

 Digitally signed by Baogia Nguyen
Date: 2020.07.08 09:49:01 -05'00'

/

Site QA Supervisor

/

Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes <input type="checkbox"/> No	IPEC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes <input type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes <input type="checkbox"/> No
RBS	<input type="checkbox"/> Yes <input type="checkbox"/> No		
WF3	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Site Review Due Date: N/A

Site Review Input:

Record references below. If there are none state **None**.

ANO:	IPEC: None
GGNS:	PLP/BRP:
RBS:	
WF3:	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☐ WF3 ☐
 IPEC ☒ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

Steven A. O'Brien
 Digitally signed by Steven A. O'Brien
 Date: 2020.07.06 13:57:49 -04'00'

Site QA Supervisor

/ 7/6/2020
 / Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: 7/13/2020

Site Review Input:


Record references below. If there are none state **None**.

ANO:	IPEC:
GGNS:	PLP/BRP: None
RBS:	
WF3:	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☐ WF3 ☐
IPEC ☐ PLP/BRP ☒

Site QA Supervisor acknowledgement (print & sign) /date

John R. Walker  / 7/13/2020
Site QA Supervisor / Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: 07/08/2020

Site Review Input:

Record references below. If there are none state **None**.

ANO:	IPEC:
GGNS:	PLP/BRP:
RBS: None	
WF3:	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☒ WF3 ☐
IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

John Jackson

Site QA Supervisor

/ 07/08/2020

/ Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: July 9, 2020

Site Review Input:

Record references below. If there are none state **None**.

ANO:	IPEC:
GGNS:	PLP/BRP:
RBS:	
WF3: None	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☐ WF3 ☒
IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

John M. Solaski Digitally signed by John M. Solaski
Date: 2020.07.08 08:44:36 -05'00'

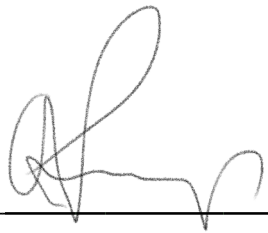
Site QA Supervisor

/ Date

CHANGE DISPOSITION

- ☒ Approved for implementation
- ☐ Disapproved
- ☐ Approved for submittal to the NRC

Approved by/Date: Oscar Limpias
Vice President, Independent Oversight

 / 07/14/2020

Distribution: Original – Attach to Parent Document;
Copy – Quality Assurance

QAPM Change Evaluation**NOTE**

The basis for the answers should be of sufficient depth and detail to support the conclusions reached and allow for independent review. Simply stating the change does not decrease the effectiveness without stating why is not acceptable.

Editorial corrections (i.e., spelling, punctuation, typographical or grammatical errors, and incorrect cross-references) are not considered changes and, therefore, a Quality Assurance Program Regulatory Review is not required. All boxes should be marked "N/A" and proceed to signature page of the evaluation form. If questions 4-8 do not apply to the change being reviewed, then the associated boxes should be marked "N/A". [10 CFR 50.54 (a)(3)]

	YES, NO, or N/A
<p>1. Is this change an editorial change as defined in 10 CFR 50.54(a)(3) and 10 CFR 71.106? If yes, provide basis, mark remaining questions "N/A" and state "not a reduction in commitment." Proceed to approval page of attachment.</p> <p>Basis for Answer:</p>	No
<p>2. For any YES answer in the 10 CFR 50.54(a) QAPM Change Screening or for the QA-initiated change, does the proposed change represent a reduction in commitment or process(es) described or established in the approved QA Program?</p> <p>Basis for Answer: The change to the Entergy QAPM Revision 38 and IPEC QAPM Revision 1 to reduce the meeting frequency for the Safety Review Committee meeting from twice per year to once per year is a reduction in commitment from the previously approved QAPMs. Entergy is committed to ANSI N18.7-1976, section 4.3.2.2, defining the meeting frequency for the independent review body as no less than twice per year. Entergy never took exception to this requirement; thus, Entergy is committed to this requirement in Revision 0 of the Entergy QAPM, submitted via CNRO1998-00025 and accepted by the NRC, letter dated November 6, 1998; and IPEC QAPM, Rev 0, submitted via NL-20-04 and accepted by the NRC. While changing the SRC meeting frequency to once per year represents a reduction in commitment from the previously approved Entergy and IPEC QAPMs, the change has been previously evaluated and approved by the NRC, as documented in Nuclear Management Company, LLC, (NMC) SER, dated January 13, 2005, ADAMS Accession No.: ML050210276. This SER removes the requirement for the SRC completely; however, Entergy will use this SER to reduce the frequency for the meeting of the Safety Review Committee (SRC) and the SRC will still meet once per year and perform reviews as specified by ANSI N18.7 -1976. The On-site Safety</p>	Yes

<p>Review Committee and Nuclear Independent Oversight currently perform the reviews the Safety Review Committee performs, and these reviews will be used to supplement the reviews by the SRC when the meeting frequency is reduced.</p> <p>Detailed information for the adoption of this SER is described in Item 3 below.</p>	
<p>3. If item 2 above is YES, is the proposed change limited to the use of a quality assurance alternative or exception approved by the NRC safety evaluation report (SER), for which the bases of the NRC approval are applicable to Entergy?</p> <p>If YES, explain how all of the NRC approval bases from the SER are incorporated or covered by the Entergy QA Program.</p> <p><u>This exemption is not allowed under 10 CFR 71.106 and cannot be used to reduce commitments under part 71.</u></p> <p>Basis for Answer: As allowed by 10 CFR 50.54(a), the licensee may use a QA exception previously approved by the NRC in a safety evaluation, provided that the bases of the NRC approval are applicable to the licensee's facility. This change has been evaluated and approved in SER "SAFETY EVALUATION BY THE OFFICE OF NUCLEAR REACTOR REGULATION QUALITY ASSURANCE INDEPENDENT REVIEW PROGRAM ALTERNATIVE DUANE ARNOLD ENERGY CENTER KEWAUNEE NUCLEAR POWER PLANT MONTICELLO NUCLEAR GENERATING PLANT PALISADES NUCLEAR PLANT POINT BEACH NUCLEAR PLANT, UNITS 1 AND 2 PRAIRIE ISLAND NUCLEAR GENERATING PLANT, UNITS 1 AND 2 DOCKET NOS. 50-331, 50-305, 50-263, 50-255, 50-266, 50-301, 50-282, and 50-306," dated January 13, 2005, ADAMS Accession No.: ML050210276.</p> <p>Below is an evaluation of this SER as it relates to Entergy and discussed in items 1-6.</p> <p>For purpose of this evaluation, the term OSRC (Off-site Safety Review Committee) in the SER is synonymous with SRC (Safety Review Committee) for Entergy. The term PORC (Plant On-Site Review Committee) in the SER is synonymous with the term OSRC (On-site Safety review Committee) for Entergy. The SER approved the following reduction in commitment for Nuclear Management Company, LLC.:</p> <p>1. PORC will perform the independent review of safety evaluations for changes in the facility as described in the final safety analysis report (FSAR) prior to implementation of the change. PORC will evaluate the effect on safety and if a technical specification (TS) change or NRC review is required. As applicable, the PORC review be will augmented</p>	<p>Yes</p>

by another review that is completed during the design process. The NMC QATR requires that design verification be performed by any competent individual(s) or group(s) other than those who performed the original design but who may be from the same organization. These reviews verify that changes in the facility do not result in a loss of adequate design or safety margins.

At Entergy, the On-site Safety Review Committee already reviews the 10 CFR 50.59 Safety Evaluations as outlined in EN-OM-119, On-site Safety Review Committee, section 5.0[6](b) (Reference ANSI N18.7 - 1976, 4.3.4(1)). Therefore, no additional changes are needed in the Entergy and IPEC QAPMs to implement this portion of the SER.

2. A qualified person, independent of the preparer, will review changes in the procedures as described in the FSAR prior to implementation of the change. The procedure review process includes an independent evaluation of changes to determine if a TS change or other NRC approval is required. The QATR will require that independent assessments of selected procedure changes be performed to verify that procedure reviews and revision controls are effectively implemented. Independent assessments are performed by the Nuclear Oversight Organization to verify effective implementation of procedures and processes.

Entergy has procedural requirements currently in place that require procedure reviews and revision controls to be effectively implemented (Ref. EN-AD-101, NMM Procedure Process and EN-AD-104, Site Procedure Control Process). Nuclear Independent Oversight (NIO) audits the procedure review and revision process during the Document Control Audit. NIO also audits procedures and their changes during the performance of functional area audits. Therefore, no additional changes are required for Entergy and IPEC QAPMs to implement this portion of the SER.

3. PORC will perform the independent review of TS changes and license amendments relating to nuclear safety prior to implementation, except in those cases where the change is identical to a previously reviewed proposed change.

The On-site Safety Review Committee currently performs reviews of TS changes and license amendments per EN-OM-119, section 5.0[6](3) (Ref QAPM Table 1, C.7 and C.8; ANSI N18.7-1976, 4.3.4(3)). Therefore, no additional changes to the Entergy and IPEC QAPMs are required to implement this portion of the SER.

4. PORC will perform the independent review of violations, deviations, and reportable events which require reporting to the NRC in writing within

24 hours. This review will include the results of investigations and recommendations resulting from such investigations to prevent or reduce the probability of recurrence of the event.

The Entergy On-site Safety Review Committee currently performs review of reports made in accordance with 10 CFR 50.73 per EN-OM-119, section 5.0[6](b)(6) (Ref QAPM Table 1, C.9 and C.23; ANSI N18.7-1976, 4.3.4(4)). Therefore, no additional changes to the Entergy and IPEC QAPMs are required to implement this portion of the SER.

5. PORC will perform an independent review of any matter related to nuclear safety that is requested by the Site Vice President, Site Director, Plant Manager, any PORC member, or by other NMC organizations.

Per EN-OM-119, section 5.0[6](b)(9), the Entergy On-site Safety Review committee currently performs review of, "Other items as identified by the GMPO, OSRC or the SRC and any other matter involving safe operations of the unit (which may include procedure related items) (Ref. QAPM Table 1, C.9; ANSI N18.7-1976, 4.3.4(5)). Therefore, no additional changes to the Entergy and IPEC QAPMs are required to implement this portion of the SER.

6. a. The licensee's review and assessment programs include review of significant proposed plant changes or tests, verification that reportable events are promptly investigated and corrected, and looking for trends which may not be apparent to the day-to-day observer. The Nuclear Oversight management and management responsible for the areas assessed, will review the results of all independent assessments.

Entergy currently has in place the Aggregate Performance Review Meeting (APRM) and the Department Performance Review Meeting (DPRM). The APRM is a meeting conducted by members of the site's leadership team to review performance monitoring inputs, assess performance, identify and monitor performance Aggregate Performance Issues (APIs), and conduct analysis and planning for actions to resolve performance APIs at the site level. The DPRM is a meeting conducted by members of a department to review performance monitoring inputs, assess performance, identify and monitor performance APIs, and conduct analysis and planning for actions to resolve performance APIs at the department level (Ref EN-LI-121, trending and Performance Review Process). Nuclear Independent Oversight also bins, aggregates, analyzes, and trends site and fleet functional area performance to identify and communicate actual or potential site or fleet issues (Ref EN-FAP-QV-204, Nuclear Independent Oversight Trending and Analysis).

<p>The OSRC and SRC currently performs review of significant plant changes or tests and verification that reportable events are promptly investigated and corrected as outlined in EN-OM-119 and EN-QV-130, respectively.</p> <p>Lastly, NIOS bins selected data streams in the functional area performance drivers to assist in identifying and analyzing emerging or adverse trends before performance declines or is self-revealed through a consequential result. Nuclear safety culture codes are also used to provide a picture of performance in the functional area. Therefore, no additional changes are required to the Entergy and IPEC QAPMs to implement this portion of the SER.</p> <p>b. PORC and the Nuclear Oversight Organization, collectively, will perform the independent review of the corrective actions for significant conditions adverse to quality. Provisions for independent assessments of the audit program are incorporated into the QATR to ensure the effectiveness of the oversight process.</p> <p>The SRC performs and independent review of corrective actions for significant conditions adverse to quality per EN-QV-130, Att. 9.6. Additionally, Entergy NIOS performs the independent review of the corrective actions for significant conditions adverse to quality, as outlined in EN-QV-126, Oversight Follow-up Procedure. A review of significant conditions adverse to quality is also performed in each functional area audit. Independent assessments of the audit program are already incorporated into EN-QV-128, Assessments of Nuclear Independent Oversight. This function is performed by the Nuclear Industry Evaluation Program (NIEP) and provides a process for the performance of an independent audit of the adequacy/effectiveness of implementation of the QA Program. Therefore, no additional changes are required to the Entergy and IPEC QAPMs to implement this portion of the SER.</p> <p>c. NMC periodically performs independent reviews of matters involving the safe operation of its fleet of nuclear power plants, with a minimum of one such review being conducted for each generating site each year. The review addresses matters that plant and corporate management determine warrant special attention, such as plant programs, performance trends, employee concerns, or other matters related to safe plant operations. The review is performed by a team consisting of personnel with experience and competence in the activities being reviewed, but independent (from cost and schedule considerations) from the organizations responsible for those activities. The review is supplemented by outside consultants or organizations as necessary to ensure the team has the requisite expertise and competence. Results are documented and reported to</p>	
--	--

<p>responsible management.</p> <p>Since Entergy is not eliminating the SRC but reducing the meeting frequency from twice per year to once per year, Entergy will maintain an annual independent review per site. The review will continue to satisfy the requirements of an independent review. Therefore, Entergy will meet the intent of this portion of the SER. The only change to the Entergy and IPEC QAPMs is to change the meeting frequency from twice per year to once per year, which requires an exception to ANSI N18.7 -1976, section 4.3.2.2 (QAPM Table 1.C.5), to which Entergy is currently committed.</p> <p>Section 2.2 of the SER discusses organizational freedom as defined in ANSI N18.7-1976. Since the SRC will remain in place, the SRC will continue to maintain its independence when discharging its independent review responsibilities and continues to meet the intent of this portion of the SER.</p> <p>Conclusion: The practices described in the evaluation above have been found acceptable by the NRC in the referenced SER. The Entergy SRC, NIOS, and OSRC will continue to satisfy the requirements of independent review bodies as discussed above except the SRC will meet once per year per site instead of twice per year. The persons performing Quality Assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule. This review ensures that once the changes are incorporated, the Entergy QAPM and the IPEC QAPM continue to comply with 10 CFR 50 App. B, ANSI N18.7 section 3.4, SRP section 17.3, NUREG-0800 and 10 CFR 50.54(a)(3)</p>	
<p>4. Is the proposed change a change to a QA standard approved by the NRC which is more recent than the QA standard currently established in the QA Program?</p> <p>Basis for Answer:</p>	N/A
<p>5. Is the proposed change a change involving the use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles?</p> <p>Basis for Answer:</p>	N/A
<p>6. Is the proposed change a change involving the use of generic organizational charts to indicate functional relationships, authorities, and responsibilities, or alternately, the use of descriptive text?</p> <p>Basis for Answer:</p>	N/A

<p>7. Is the proposed change an elimination of Quality Assurance Program information that duplicates language in quality assurance regulatory guides and quality assurance standards to which Entergy Nuclear (EN) is committed?</p> <p>Basis for Answer:</p>	N/A
<p>8. Does the proposed change continue to ensure that persons and organizations performing Quality Assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations?</p> <p>Basis for Answer: The change to the Entergy and IPEC QAPMs Table 1 C.5 does not impact QA organizational functions and persons performing Quality Assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule.</p>	Yes
<p>9. Is a change to the QAPM required? If YES, process change per EN-LI-113. If NO, distribute as indicated on the last page of this attachment.</p> <p>Basis for Answer: The Entergy QAPM and IPEC QAPM need to be revised to reduce the required meeting frequency for the Safety Review Committee from twice per year to once per year.</p>	Yes

QAPM CHANGE REVIEW RESULTS

- ☐ Change is editorial in accordance with 10 CFR 50.54(a)(3) and 10 CFR 71.106, thus, does not represent a reduction in commitment. The change can be implemented upon approval of parent change document. (Question 1 is YES)
- ☐ Does not represent a reduction of commitment, and can be implemented upon approval of parent change document. (Questions 4, 5, 6, 7, and 8 are YES or N/A)
- ☒ Represents a reduction of commitment with prior NRC approval. The safety evaluation issued by the NRC has been evaluated and it directly applies to the changes being proposed for EN. The change can be implemented upon approval of parent change document. (Question 3 is YES)
- ☐ Represents a reduction of commitment; however, the change has sufficient basis to demonstrate continued compliance with Appendix B and USAR commitments. Therefore, the proposed change should be submitted for NRC review/approval. (Questions 2 is YES and Question 3 is NO)
- ☐ Represents a reduction of commitment with insufficient basis to demonstrate continued compliance. Therefore, the activity should not be processed.

Alisha Johnson-Thomas

Preparer

Alisha Johnson-Thomas

Digitally signed by Alisha

Johnson

Date: 2020.07.13 11:39:34 -05'00'

Joe Pennington

Manager, QA

Joe

Pennington

Digitally signed by Joe

Pennington

Date: 2020.07.13 13:31:43 -05'00'

Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: 07/13/2020

Site Review Input:

Record references below. If there are none state **None**.

ANO: None	IPEC:
GGNS:	PLP/BRP:
RBS:	
WF3:	

Site QA Supervisor acknowledges completion of reviews below

ANO ☒ GGNS ☐ RBS ☐ WF3 ☐
IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

John R.
Harrison

Digitally signed by John R. Harrison
DN: cn=John R. Harrison, c=US,
o=Nuclear Independent Oversight,
ou=INSEC3,
email=jharr22@entergy.com
Reason: I am approving this document
Date: 2020.07.10 10:00:35 -0500

Site QA Supervisor

/

/

Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input type="checkbox"/> No
GGNS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: 07/13/2020

Site Review Input:

Record references below. If there are none state **None**.

ANO:	IPEC:
GGNS: None	PLP/BRP:
RBS:	
WF3:	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☒ RBS ☐ WF3 ☐
 IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

Baogia Nguyen

 Digitally signed by Baogia Nguyen
 Date: 2020.07.08 11:31:47 -05'00'

/

Site QA Supervisor

/

Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes <input type="checkbox"/> No	IPEC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes <input type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes <input type="checkbox"/> No
RBS	<input type="checkbox"/> Yes <input type="checkbox"/> No		
WF3	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Site Review Due Date: N/A

Site Review Input:

Record references below. If there are none state **None**.

ANO:	IPEC: None
GGNS:	PLP/BRP:
RBS:	
WF3:	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☐ WF3 ☐
IPEC ☒ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

Steven A. O'Brien

Digitally signed by Steven A. O'Brien
Date: 2020.07.14 02:17:46 -04'00'

/ 7/14/2020
Site QA Supervisor / Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: 07/13/2020

Site Review Input:


Record references below. If there are none state **None**.

ANO:	IPEC:
GGNS:	PLP/BRP: None
RBS:	
WF3:	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☐ WF3 ☐
IPEC ☐ PLP/BRP ☒

Site QA Supervisor acknowledgement (print & sign) /date

John R. Walker  / 7/13/2020
Site QA Supervisor / Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes	<input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes	<input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes	<input type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes	<input type="checkbox"/> No
RBS	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			
WF3	<input type="checkbox"/> Yes	<input type="checkbox"/> No			

Site Review Due Date: 07/13/2020

Site Review Input:

Record references below. If there are none state **None**.

ANO:	IPEC:
GGNS:	PLP/BRP:
RBS: None	
WF3:	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☒ WF3 ☐
IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

John Jackson

Site QA Supervisor



/

0708/2020

Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes <input type="checkbox"/> No	IPEC	<input type="checkbox"/> Yes <input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes <input type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes <input type="checkbox"/> No
RBS	<input type="checkbox"/> Yes <input type="checkbox"/> No		
WF3	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

Site Review Due Date: July 10, 2020

Site Review Input:

Record references below. If there are none state **None**.

ANO:	IPEC:
GGNS:	PLP/BRP:
RBS:	
WF3: None	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☐ WF3 ☒
IPEC ☐ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

John M. Solaski Digitally signed by John M. Solaski
Date: 2020.07.08 18:57:04 -05'00'

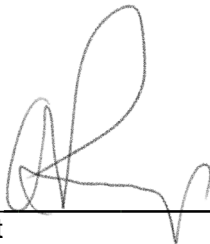
Site QA Supervisor

/ Date

CHANGE DISPOSITION

- ☒ Approved for implementation
- ☐ Disapproved
- ☐ Approved for submittal to the NRC

Approved by/Date: Oscar Limpias
Vice President, Independent Oversight

 , 07/14/2020

Distribution: Original – Attach to Parent Document;
Copy – Quality Assurance



Entergy

Quality Assurance Program Manual Indian Point Energy Center (IPEC)

Indian Point 1 Nuclear Power Plant

Docket No. 50-003

License No. DPR-05

Docket No. 72-51

Docket No.: 71-0240

Indian Point 2 Nuclear Power Plant

Docket No. 50-247

License No. DPR-26

Docket No. 72-51

Docket No.: 71-0240

Indian Point 3 Nuclear Power Plant

Docket No. 50-286

License No. DPR-64

Docket No. 72-51

Docket No.: 71-0240

Table 1
Regulatory Commitments

C. Regulatory Guide 1.33 Revision 2, dated February 1978

Clarification/Exception

1. Section C.1 IPEC will provide procedures for the guide's Appendix A activities as discussed. However, IPEC does not consider all activities listed to be "safety-related" (e.g., activities in 7.e).
2. Section C.4 This section establishes minimum 2-year audit frequency for all safety related functions and recommends audit frequencies specific to Corrective Action, Facility Operation, and Staff Performance, Training, and Qualifications. IPEC will perform audits at frequencies as discussed in QAPM Section C.2.a instead of this section.
3. ANSI N18.7
Section 1 Sentences 4 and 5 state, "However, applicable sections of this standard should be used as they apply to related activities. Activities included are: Design Changes, Purchasing, Fabricating..." With regard to radioactive material transportation activities, IPEC will only implement the requirements associated with those activities conducted in accordance with the applicable NRC Quality Assurance Program Approval for Radioactive Material Packages.
4. ANSI N18.7
Section 4.3.1 The specific areas of experience described in this section are not applicable to the on-site safety review committee but the committee must be comprised of site operating or engineering supervisory personnel. Additionally, the off-site safety review committee need contain experience in only a majority of the areas.
5. ANSI N18.7
Section 4.3.2.2
& 4.3.2.3 *Instead of the requirements of section 4.3.2.2, the independent safety review committee will meet once per year.* The statement that "no more than a minority of the quorum shall have line responsibility for the operation of the plant" in section 4.3.2.3 is not applicable to the on-site safety review committee.

Table 1
Regulatory Commitments

N. Regulatory Guide 1.144 Revision 1, dated September 1980

Clarification/Exception

- | | |
|----------------------------------|--|
| 1. RG 1.144
Section C.3.a.(2) | This section is not applicable. |
| 2. RG 1.144
Section C.3.b.(2) | In addition to the requirements of this section, previously evaluated and approved active suppliers for which auditing is not the selected method of source verification should be evaluated concurrent with the award of a contract. Regardless of the evaluation results, active suppliers (except those excluded under C.3.b(1)) are source verified (audit, surveillance or inspection) within two years prior to award of a contract or have source verification performed. Inactive suppliers are evaluated prior to supplying items or services. An audit shall be conducted if required to determine the acceptability of procured items or services (i.e., acceptability cannot be determined by receipt inspection or another method allowable under 10 CFR 50 Appendix B, Criterion VII). |
| 3. RG 1.144
Section C.3.b.(2) | This section requires that supplier audits be performed on a triennial basis. A 90-day grace period not to exceed 25% for audit interval may be applied to this activity. For activities deferred in accordance with the 90-day 25% grace period, the next performance date will be based on their originally scheduled date. A total combined time interval for any three consecutive inspection or audit intervals should not exceed 3.25 times the specified inspection or audit interval. |
| 4. RG 1.144
Section C.3.b.(2) | Instead of the annual documented evaluation of suppliers discussed in this section, an ongoing evaluation of supplier performance is conducted which takes into account, where applicable, the other considerations of this section and paragraph of the Regulatory Guide. |

QAPM Change Evaluation**NOTE**

The basis for the answers should be of sufficient depth and detail to support the conclusions reached and allow for independent review. Simply stating the change does not decrease the effectiveness without stating why is not acceptable.

Editorial corrections (i.e., spelling, punctuation, typographical or grammatical errors, and incorrect cross-references) are not considered changes and, therefore, a Quality Assurance Program Regulatory Review is not required. All boxes should be marked "N/A" and proceed to signature page of the evaluation form. If questions 4-8 do not apply to the change being reviewed, then the associated boxes should be marked "N/A". [10 CFR 50.54 (a)(3)]

	YES, NO, or N/A
<p>1. Is this change an editorial change as defined in 10 CFR 50.54(a)(3) and 10 CFR 71.106? If yes, provide basis, mark remaining questions "N/A" and state a "not reduction in commitment." Proceed to approval page of attachment.</p> <p>Basis for Answer:</p> <p>Organizational changes are being made within Entergy Nuclear and are not "Editorial" as defined 10 CFR 50.54(a)(3) and 10 CFR 71.106. No QAPM responsibilities were eliminated with this change.</p> <p>One editorial change is being made on this revision of the IPEC QAPM. IPEC QAPM Revision 2, Section A.2.b.5 through A.2.b.8 are being changed to A.2.b.4.(a) through A.2.b.4.(d). The numbering in this section (A.2.b.5 through A.2.b.8) changed in error on IPEC QAPM Revision 1 and continued in IPEC QAPM Revision 2. This editorial change will return the numbering in IPEC QAPM, Section A.2.b.5 through A.2.b. 8 to the correct format.</p>	NO
<p>2. For any YES answer in the 10 CFR 50.54(a) QAPM Change Screening or for the QA-initiated change, does the proposed change represent a reduction in commitment or process(es) described or established in the approved QA Program?</p> <p>Basis for Answer:</p> <p>The Entergy IPEC QAPM, Revision 0 was issued on April 03, 2020 in preparation for decommissioning IPEC Units 2 and 3 (Reference letter NL-20-024 (ML20113E817) to the NRC dated April 22, 2020). Two subsequent revisions were made to the IPEC QAPM in 2020. IPEC QAPM Revision 1 was issued on June 01, 2020 to reflect the certified defueled status of IPEC Unit 2. IPEC QAPM Revision 2 was issued July 16, 2020 to reflect changes to Supplier Quality Assurance (QA) audit grace period and SRC meeting frequency.</p>	NO

	YES, NO, or N/A
<p>This change to the IPEC QAPM, Revision 2 is limited to organizational changes as allowed by 10 CFR 50.54(a)(3) (iii) which allows "The use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles" and 10 CFR 50.54(a)(3) (vi) which states "Organizational revisions that ensure that persons and organizations performing quality assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations" are not considered as reductions in commitment.</p> <p>This change to the IPEC QAPM, Revision 2 represents an organizational change with respect to the reporting relationship of the site records management only. The site management position responsible for records management will now report to the Site Vice President via the Site Performance Improvement (PI) Manager. The regulatory assurance manager reporting relationship will continue to report to an offsite officer (Vice President of Regulatory Assurance).</p> <p>This revision does not alter any authority, independence, or organizational freedom previously established for organizations performing quality assurance functions as described in the QAPM.</p>	
<p>3. If item 2 above is YES, is the proposed change limited to the use of a quality assurance alternative or exception approved by the NRC safety evaluation report (SER), for which the bases of the NRC approval are applicable to Entergy?</p> <p>If YES, explain how all of the NRC approval bases from the SER are incorporated or covered by the Entergy QA Program.</p> <p><u>This exemption is not allowed under 10 CFR 71.106 and cannot be used to reduce commitments under part 71.</u></p> <p>Basis for Answer:</p> <p>This change is limited to organizational changes as allowed by 10 CFR 50.54(a)(3) (iii) which allows "The use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles" and 10 CFR 50.54(a)(3) (vi) which states "Organizational revisions that ensure that persons and organizations performing quality assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations" are not considered as reductions in commitment.</p>	NO

	YES, NO, or N/A
<p>4. Is the proposed change a change to a QA standard approved by the NRC which is more recent than the QA standard currently established in the QA Program?</p> <p>Basis for Answer: This change is limited to organizational changes as allowed by 10 CFR 50.54(a)(3) (iii) and (vi). No changes are being made to existing IPEC QAPM QA standards.</p>	N/A
<p>5. Is the proposed change a change involving the use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles?</p> <p>Basis for Answer:</p> <p>This change is limited to organizational changes as allowed by 10 CFR 50.54(a)(3) (iii) which allows "The use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles" and 10 CFR 50.54(a)(3) (vi) which states "Organizational revisions that ensure that persons and organizations performing quality assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations" are not considered as reductions in commitment.</p> <p>The generic position titles remain in lower case in keeping with the QAPM format and 10 CFR 50.54(a)(3) (iii).</p> <p>This change will alter the reporting relationship of the site management position responsible for records management as described in section A.2.b.8 of the IPEC QAPM. The site management position responsible for records management currently reports to an off-site executive position (Vice President of Regulatory Assurance). This change will have the site management position responsible for records management report to the Site Vice President via the Site Performance Improvement (PI) Manager as described in Section A.2.b.3.</p> <p>This revision does not alter any authority, independence, or organizational freedom previously established for organizations performing quality assurance functions as described in the QAPM.</p>	YES
<p>6. Is the proposed change a change involving the use of generic organizational charts to indicate functional relationships, authorities, and responsibilities, or alternately, the use of descriptive text?</p> <p>Basis for Answer:</p> <p>This change is limited to organizational changes as allowed by 10 CFR 50.54(a)(3) (iii) and (vi).</p>	N/A
<p>7. Is the proposed change an elimination of Quality Assurance Program information that duplicates language in quality assurance regulatory guides and quality assurance standards to which Entergy Nuclear (EN) is committed?</p>	N/A

	YES, NO, or N/A
<p>Basis for Answer:</p> <p>This change is limited to organizational changes as allowed by 10 CFR 50.54(a)(3) (iii) and (vi).</p>	
<p>8. Does the proposed change continue to ensure that persons and organizations performing Quality Assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations?</p> <p>Basis for Answer:</p> <p>These generic position titles remain in lower case in keeping with QAPM format and 10 CFR 50.54(a)(3) (iii) that allows "The use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles." Additionally, 10 CFR 50.54(a)(3) (vi) states</p> <p>"Organizational revisions that ensure that persons and organizations performing quality assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations" are not considered as reductions in commitment.</p> <p>This change has no impact on the authority, organizational freedom, or independence from cost or schedule of organizations performing quality assurance functions as they continue to have organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations as described in section A.2.a and A.2.b of the IPEC QAPM.</p>	YES
<p>9. Is a change to the QAPM required? If YES, process change per 8 EN-LI-113. If NO, distribute as indicated on the last page of this attachment.</p> <p>Basis for Answer:</p> <p>Yes, this change will require revision of IPEC QAPM sections A.2.b.3 and A.2.b.8 to reflect the change in reporting relationship of the site management position responsible for records management. The site management position responsible for records management currently reports to an off-site executive position (Vice President of Regulatory Assurance). This change will revise section A.2.b.3 and A.2.b.8 to have the site management position responsible for records management report to the Site Vice President via the Site Performance Improvement (PI) Manager. Additionally, editorial changes will be made to Section A.2.b formatting which change the section numbering from A.2.b.5 through A.2.b.8 to A.2.b.4.(a) through A.2.b.4.(d).</p> <p>This change will be incorporated in revision 3 of the Entergy IPEC QAPM.</p>	YES

QAPM CHANGE REVIEW RESULTS

- ☐ Change is editorial in accordance with 10 CFR 50.54(a)(3) and 10 CFR 71.106, thus, does not represent a reduction in commitment. The change can be implemented upon approval of parent change document. (Question 1 is YES)
- ☒ Does not represent a reduction of commitment and can be implemented upon approval of parent change document. (Questions 4, 5, 6, 7, and 8 are YES or N/A)
- ☐ Represents a reduction of commitment with prior NRC approval. The safety evaluation issued by the NRC has been evaluated and it directly applies to the changes being proposed for EN. The change can be implemented upon approval of parent change document. (Question 3 is YES)
- ☐ Represents a reduction of commitment; however, the change has sufficient basis to demonstrate continued compliance with Appendix B and USAR commitments. Therefore, the proposed change should be submitted for NRC review/approval. (Questions 2 is YES and Question 3 is NO)
- ☐ Represents a reduction of commitment with insufficient basis to demonstrate continued compliance. Therefore, the activity should not be processed.

Billy L. Higginbotham Billy L. Higginbotham Digitally signed by Billy L. Higginbotham
Date: 2021.01.11 09:20:57 -06'00' / January 11, 2021
Preparer Date

Joe P. Pennington Joe Pennington Digitally signed by Joe
Pennington
Date: 2021.01.11 10:12:28
-06'00' / January 11, 2021
Manager, QA Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	IPEC	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
RBS	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
WF3	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			

Site Review Due Date: January 18, 2021

Site Review Input:

Record references below. If there are none state **None**.

ANO: N/A	IPEC: None
GGNS: N/A	PLP/BRP: N/A
RBS: N/A	
WF3: N/A	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☐ WF3 ☐
IPEC ☒ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

Steven A. O'Brien Digitally signed by Steven A. O'Brien
Date: 2021.01.13 12:11:19 -05'00' / January 13, 2021
Steve O'Brien /
Site QA Supervisor / Date

CHANGE DISPOSITION

- ☒ Approved for implementation
- ☐ Disapproved
- ☐ Approved for submittal to the NRC

Approved by/Date: Oscar Limpias  / January 13, 2021
Vice President, Independent Oversight

Distribution: Original – Attach to Parent Document;
Copy – Quality Assurance



Entergy

Quality Assurance Program Manual Indian Point Energy Center (IPEC)

Indian Point 1 Nuclear Power Plant

Docket No. 50-003

License No. DPR-05

Docket No. 72-51

Docket No.: 71-0240

Indian Point 2 Nuclear Power Plant

Docket No. 50-247

License No. DPR-26

Docket No. 72-51

Docket No.: 71-0240

Indian Point 3 Nuclear Power Plant

Docket No. 50-286

License No. DPR-64

Docket No. 72-51

Docket No.: 71-0240

A.2.b. (continued)

1. The IPEC executive management position reports through the applicable executive position responsible for each designated operating group. This position is responsible for overall plant nuclear safety at the site, and is responsible for establishing the policies, goals, and objectives and the implementation of the QAPM at the IPEC site.
2. A management position responsible for overall plant operations assures the safe, reliable, and efficient operation of the plant within the constraints of applicable regulatory requirements and the operating license. Different aspects of these responsibilities may be fulfilled by separate managers. The onsite safety review committee reports to the management position responsible for plant operations.
3. A management position responsible for performance improvement, emergency planning, training, security, ~~and~~ corrective action program, ~~and records management~~. Different aspects of these responsibilities may be fulfilled by separate managers.
4. The following site positions report directly to an executive position offsite:
 - ~~5.~~(a) A management position responsible for quality assurance who has overall authority and responsibility for establishing, controlling, and verifying the implementation and adequacy of the quality assurance program as described in this QAPM. This position has the authority and responsibility to escalate matters directly to the highest level nuclear executive officer when needed. This position reports to the executive responsible for nuclear oversight through the corporate management position responsible for nuclear oversight (offsite).
 - ~~6.~~(b) A management position responsible for materials, purchasing, and contracts, procurement, services, receipt, storage, and issue of materials, parts, and components. Different aspects of these responsibilities may be fulfilled by separate managers. This site position reports to an executive (supply chain – offsite) who has a functional interface with the executive responsible for engineering and technical services.
 - ~~7.~~(c) A management position responsible for engineering, the development and maintenance of engineering programs, plant design bases, policies, and procedures and for providing engineering services. This position reports to the executive responsible for engineering through the corporate management (offsite). Different aspects of these responsibilities (e.g., fuel design) may be fulfilled by separate managers.

A.2.b.4. (continued)

~~g.~~(d) A management position responsible for regulatory assurance ~~and records management~~. This position is responsible for maintaining the licensing basis and oversight of licensing and regulatory programs and reports to the executive responsible for regulatory assurance through the corporate management (offsite).

- c. The on-site and off-site safety review committees independently review activities to provide additional assurance that the IPEC facility is operated and maintained in accordance with the Operating Licenses and applicable regulations that address nuclear safety.

3. Responsibility

- a. IPEC has the responsibility for the scope and implementation of an effective quality assurance program.
- b. IPEC may delegate all or part of the activities of planning, establishing, and implementing the quality assurance program to others, but retains the responsibility for the program's effectiveness.
- c. IPEC is responsible for ensuring that the applicable portion(s) of the quality assurance program is properly documented, approved, and implemented (people are trained and resources are available) before an activity within the scope of the QAPM is undertaken by IPEC or by others.
- d. Individual managers are to ensure that personnel working under their management cognizance are provided the necessary training and resources to accomplish their assigned tasks within the scope of the QAPM.
- e. Procedures that implement the QAPM are approved by the management responsible for the applicable quality function. These procedures are to reflect the QAPM and work is to be accomplished in accordance with them.

4. Authority

- a. When IPEC delegates responsibility for planning, establishing, or implementing any part of the overall QA program, sufficient authority to accomplish the assigned responsibilities is delegated.
- b. The management position responsible for quality assurance has the responsibility and the authority to stop unsatisfactory work and control further processing, delivery, installation, or use of non-conforming items or services. Cost and schedule considerations will not override safety considerations.

QAPM Change Evaluation**NOTE**

The basis for the answers should be of sufficient depth and detail to support the conclusions reached and allow for independent review. Simply stating the change does not decrease the effectiveness without stating why is not acceptable.

Editorial corrections (i.e., spelling, punctuation, typographical or grammatical errors, and incorrect cross-references) are not considered changes and, therefore, a Quality Assurance Program Regulatory Review is not required. All boxes should be marked "N/A" and proceed to signature page of the evaluation form. If questions 4-8 do not apply to the change being reviewed, then the associated boxes should be marked "N/A". [10 CFR 50.54 (a)(3)]

	YES, NO, or N/A
<p>1. Is this change an editorial change as defined in 10 CFR 50.54(a)(3) and 10 CFR 71.106? If yes, provide basis, mark remaining questions "N/A" and state a "not reduction in commitment." Proceed to approval page of attachment.</p> <p>Basis for Answer:</p> <p>Organizational changes are being made within the Entergy Nuclear senior executive organization which are not "Editorial" as defined 10 CFR 50.54(a)(3) and 10 CFR 71.106. No QAPM responsibilities were eliminated with this change.</p>	NO
<p>2. For any YES answer in the 10 CFR 50.54(a) QAPM Change Screening or for the QA-initiated change, does the proposed change represent a reduction in commitment or process(es) described or established in the approved QA Program?</p> <p>Basis for Answer:</p> <p>This organizational change will eliminate the position Sr. Vice President (VP) Nuclear Operations, change the reporting relationships for all three COO, Nuclear Operations positions from reporting to the Sr VP Nuclear Operations to reporting to the Executive VP, Nuclear Operations / CNO, create a new position Senior Vice President, Nuclear Corporate Services reporting to the CNO, and change the reporting relationships for the following positions from reporting to the Sr. VP Nuclear Operations to reporting to the new position Sr. VP, Nuclear Corporate Services: VP, Outage Services, VP, Operations Support, and VP, Regulatory Assurance.</p> <p>This change to the Entergy Indian Point Energy Center (IPEC) Quality Assurance Program Manual (QAPM), Revision 2 is limited to organizational changes as allowed by 10 CFR 50.54(a)(3) (iii) which allows "The use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles" and 10 CFR 50.54(a)(3) (vi) which states</p>	NO

	YES, NO, or N/A
<p>“Organizational revisions that ensure that persons and organizations performing quality assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations” are not considered as reductions in commitment.</p> <p>This revision does not alter any authority, independence, or organizational freedom previously established for organizations performing quality assurance functions as described in the QAPM.</p>	
<p>3. If item 2 above is YES, is the proposed change limited to the use of a quality assurance alternative or exception approved by the NRC safety evaluation report (SER), for which the bases of the NRC approval are applicable to Entergy?</p> <p>If YES, explain how all of the NRC approval bases from the SER are incorporated or covered by the Entergy QA Program.</p> <p><u>This exemption is not allowed under 10 CFR 71.106 and cannot be used to reduce commitments under part 71.</u></p> <p>Basis for Answer:</p> <p>This change is limited to the Entergy Nuclear senior executive organizational changes as allowed by 10 CFR 50.54(a)(3) (iii) and 10 CFR 50.54(a)(3) (vi).</p>	NO
<p>4. Is the proposed change a change to a QA standard approved by the NRC which is more recent than the QA standard currently established in the QA Program?</p> <p>Basis for Answer:</p> <p>This change is limited to organizational changes as allowed by 10 CFR 50.54(a)(3) (iii) and (vi). No changes are being made to existing IPEC QAPM QA standards.</p>	N/A
<p>5. Is the proposed change a change involving the use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles?</p> <p>Basis for Answer:</p> <p>This change is limited to organizational changes as allowed by 10 CFR 50.54(a)(3) (iii) which allows “The use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles” and 10 CFR 50.54(a)(3) (vi) which states “Organizational revisions that ensure that persons and organizations performing quality assurance functions</p>	YES

continue to

	YES, NO, or N/A
<p>have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations” are not considered as reductions in commitment.</p> <p>The generic position titles remain in lower case in keeping with the IPEC QAPM format and 10 CFR 50.54(a)(3) (iii).</p> <p>This change will eliminate the position Sr. Vice President (VP) Nuclear Operations, change the reporting relationships for all three COO, Nuclear Operations positions from reporting to the Sr VP Nuclear Operations to reporting to the Executive VP, Nuclear Operations / CNO, create a new position Sr VP, Nuclear Corporate Services reporting to the CNO, and change the reporting relationships for the following positions from reporting to the Sr VP Nuclear Operations to reporting to the new position Sr VP, Nuclear Corporate Services: VP, Outage Services, VP, Operations Support, and VP, Regulatory Assurance.</p> <p>This revision does not alter any authority, independence, or organizational freedom previously established for organizations performing quality assurance functions as described in the IPEC QAPM.</p>	
<p>6. Is the proposed change a change involving the use of generic organizational charts to indicate functional relationships, authorities, and responsibilities, or alternately, the use of descriptive text?</p> <p>Basis for Answer:</p> <p>This change is limited to organizational changes as allowed by 10 CFR 50.54(a)(3) (iii) and (vi).</p>	N/A
<p>7. Is the proposed change an elimination of Quality Assurance Program information that duplicates language in quality assurance regulatory guides and quality assurance standards to which Entergy Nuclear (EN) is committed?</p> <p>Basis for Answer:</p> <p>This change is limited to organizational changes as allowed by 10CFR50.54(a)(3) (iii) and (vi).</p>	N/A
<p>8. Does the proposed change continue to ensure that persons and organizations performing Quality Assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations?</p> <p>Basis for Answer:</p>	YES

	YES, NO, or N/A
<p>These generic position titles remain in lower case in keeping with QAPM format and 10CFR50.54(a)(3) (iii) that allows "The use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles." Additionally, 10 CFR 50.54(a)(3) (vi) states "Organizational revisions that ensure that persons and organizations performing quality assurance functions continue to have the requisite authority and organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations" are not considered as reductions in commitment.</p> <p>This change has no impact on the authority, organizational freedom, or independence from cost or schedule of organizations performing quality assurance functions as they continue to have organizational freedom, including sufficient independence from cost and schedule when opposed to safety considerations as described in section A.2.a and A.2.b of the IPEC Quality Assurance Program Manual.</p>	
<p>9. Is a change to the QAPM required? If YES, process change per EN-LI-113. If NO, distribute as indicated on the last page of this attachment.</p> <p>Basis for Answer:</p> <p>Yes, this change will require revision of IPEC QAPM sections A.2.a.3 and A.2.a.4. to reflect the elimination of the position Sr. Vice President (VP) Nuclear Operations, change the reporting relationships for all three COO, Nuclear Operations positions from reporting to the Sr VP Nuclear Operations to reporting to the Executive VP, Nuclear Operations / CNO, create a new position Sr VP, Nuclear Corporate Services reporting to the CNO. This will also change the reporting relationships for the following positions from reporting to the Sr VP Nuclear Operations to reporting to the new position Sr VP, Nuclear Corporate Services: VP, Outage Services, VP, Operations Support, and VP, Regulatory Assurance.</p> <p>This change will be incorporated in revision 3 of the Entergy IPEC QAPM.</p>	YES

QAPM CHANGE REVIEW RESULTS

- ☐ Change is editorial in accordance with 10 CFR 50.54(a)(3) and 10 CFR 71.106, thus, does not represent a reduction in commitment. The change can be implemented upon approval of parent change document. (Question 1 is YES)
- ☒ Does not represent a reduction of commitment and can be implemented upon approval of parent change document. (Questions 4, 5, 6, 7, and 8 are YES or N/A)
- ☐ Represents a reduction of commitment with prior NRC approval. The safety evaluation issued by the NRC has been evaluated and it directly applies to the changes being proposed for EN. The change can be implemented upon approval of parent change document. (Question 3 is YES)
- ☐ Represents a reduction of commitment; however, the change has sufficient basis to demonstrate continued compliance with Appendix B and USAR commitments. Therefore, the proposed change should be submitted for NRC review/approval. (Questions 2 is YES and Question 3 is NO)
- ☐ Represents a reduction of commitment with insufficient basis to demonstrate continued compliance. Therefore, the activity should not be processed.

Billy L. Higginbotham

Preparer

Billy L. HigginbothamDigitally signed by Billy L. Higginbotham
Date: 2021.01.11 09:48:18 -06'00'January 11, 2021

Date

Joe P. Pennington

Manager, QA

Joe PenningtonDigitally signed by Joe Pennington
Date: 2021.01.11 10:16:43 -06'00'January 11, 2021

Date

QA Site Supervisor Review:

Applicable Site QA Supervisor Reviews Required
(see attached sheets for documentation of reviews)

☒ Yes ☐ No

ANO	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	IPEC	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
GGNS	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	PLP/BRP	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
RBS	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
WF3	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			

Site Review Due Date: **January 18, 2021**

Site Review Input:

Record references below. If there are none state **None**.

ANO: N/A	IPEC: None
GGNS: N/A	PLP/BRP: N/A
RBS: N/A	
WF3: N/A	

Site QA Supervisor acknowledges completion of reviews below

ANO ☐ GGNS ☐ RBS ☐ WF3 ☐
IPEC ☒ PLP/BRP ☐

Site QA Supervisor acknowledgement (print & sign) /date

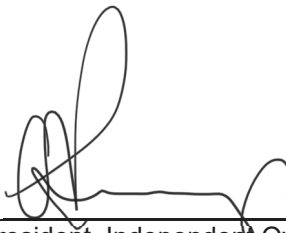
Steven A. O'Brien
 Digitally signed by Steven A. O'Brien
 Date: 2021.01.13 12:14:09 -05'00'
Steve O'Brien / January 13, 2021
 Site QA Supervisor / Date

Sheet Page 7 of 7

LBDCR NO: 2020-12

CHANGE DISPOSITION

- ☒ Approved for implementation
☐ Disapproved
☐ Approved for submittal to the NRC

Approved by/Date: Oscar Limpias  / January 8, 2021
Vice President, Independent Oversight

Distribution: Original – Attach to Parent Document;
Copy – Quality Assurance

A.2. (continued)**a.****Corporate Organization**

1. The chief executive officer (CEO) is responsible for overall corporate policy and provides executive direction and guidance for the corporation as well as promulgates corporate policy through the Company's senior management staff. Responsibility for developing, implementing, and verifying execution of the Quality Assurance Program is delegated to the chief nuclear officer, the highest level nuclear executive, and authority for developing and verifying execution of the program to the executive responsible for nuclear oversight.
2. The chief nuclear officer, the highest level nuclear executive officer, is responsible for providing top-level direction for the safe and reliable operation of the IPEC facility. The highest level nuclear executive officer provides guidance with regards to company quality assurance policy. This position is responsible for providing engineering services, nuclear safety, and operations support. Supply chain and information technology are no longer a functional area exclusively within the nuclear organizational structure. However, the oversight and governance of these functional areas remain within the nuclear organization through this executive position that is responsible for nuclear operations. The off-site safety review committee reports to this executive.
3. The following executives report to the highest level nuclear executive officer and provide governance and oversight in regards to implementing company quality assurance policy:
 - (a) The chief operating officer, the executive responsible for nuclear operations, is responsible for implementing quality assurance policies, goals, and objectives and the implementation of all activities associated with the safe and reliable operation of the IPEC facility
 - (a)(b) The senior vice president responsible for ~~nuclear operations~~nuclear corporate services is responsible for ~~the implementation of all activities associated with the safe and reliable operation of the IPEC facility. This position is also responsible for~~ providing nuclear safety, operations support, outage services, regulatory assurance and implementing quality assurance policies, goals, and objectives of corporate support activities.
 - (b)(c) The executive responsible for engineering and technical services is responsible for providing engineering services, project management services and implementing major projects and modifications including implementing quality assurance policies, goals, and objectives
 - (e)(d) The executive responsible for oversight establishes the policies, goals, and objectives of the quality assurance policy and provides guidance and interpretation for implementing the

A.2.a.3.(c) (continued)

company quality assurance policy and is responsible for governance and implementation of the quality assurance program in accordance with regulatory requirements. Independent oversight groups report to this executive.

~~**A.2.a.3.(c)**~~ (continued)

(1) The following management positions report to this executive:

- A management position that is responsible for nuclear oversight activities and is independent of production. This position provides overall direction for the implementation of the quality assurance program.
- A management position that is responsible for oversight and governance of the QAPM. This position has authority and responsibility for establishing, controlling, and verifying the implementation and adequacy of the quality assurance program as described in this QAPM including activities related to vendor quality. This position has the authority for Stop Work and responsibility to escalate matters directly to the highest level nuclear executive officer when needed.

4. The following executives report to the senior vice president responsible for ~~nuclear operations~~nuclear corporate services and provide governance and oversight in regards to implementing company quality assurance policy:

~~(a) The chief operating officer, the executive responsible for nuclear operations, is responsible for implementing quality assurance policies, goals, and objectives and the implementation of all activities associated with the safe and reliable operation of the IPEC facility.~~

~~(b)~~(a) The executive responsible for operations support is responsible for implementing quality assurance policies, goals, and objectives of corporate support activities.

~~(c)~~(b) The executive responsible for production and outage services is responsible for providing outage services and implementing quality assurance policies, goals, and objectives of corporate support activities.

~~(d)~~(c) The executive responsible for regulatory assurance is responsible for regulatory interfaces, licensing activities, corporate nuclear security, corporate emergency planning and implementing quality assurance policies, goals, and objectives.

b. IPEC Site Organization

A.2.b.4. (continued)

~~g.~~(d) A management position responsible for regulatory assurance ~~and records management~~. This position is responsible for maintaining the licensing basis and oversight of licensing and regulatory programs and reports to the executive responsible for regulatory assurance through the corporate management (offsite).

- c. The on-site and off-site safety review committees independently review activities to provide additional assurance that the IPEC facility is operated and maintained in accordance with the Operating Licenses and applicable regulations that address nuclear safety.

3. Responsibility

- a. IPEC has the responsibility for the scope and implementation of an effective quality assurance program.
- b. IPEC may delegate all or part of the activities of planning, establishing, and implementing the quality assurance program to others, but retains the responsibility for the program's effectiveness.
- c. IPEC is responsible for ensuring that the applicable portion(s) of the quality assurance program is properly documented, approved, and implemented (people are trained and resources are available) before an activity within the scope of the QAPM is undertaken by IPEC or by others.
- d. Individual managers are to ensure that personnel working under their management cognizance are provided the necessary training and resources to accomplish their assigned tasks within the scope of the QAPM.
- e. Procedures that implement the QAPM are approved by the management responsible for the applicable quality function. These procedures are to reflect the QAPM and work is to be accomplished in accordance with them.

4. Authority

- a. When IPEC delegates responsibility for planning, establishing, or implementing any part of the overall QA program, sufficient authority to accomplish the assigned responsibilities is delegated.
- b. The management position responsible for quality assurance has the responsibility and the authority to stop unsatisfactory work and control further processing, delivery, installation, or use of non-conforming items or services. Cost and schedule considerations will not override safety considerations.

Enclosure 2, Attachment B

CNRO2021-00011

IPEC QAPM Revision 03 Complete Copy

(56 pages to follow)



Entergy

Quality Assurance Program Manual Indian Point Energy Center (IPEC)

Indian Point 1 Nuclear Power Plant

Docket No. 50-003

License No. DPR-05

Docket No. 72-51

Docket No.: 71-0240

Indian Point 2 Nuclear Power Plant

Docket No. 50-247

License No. DPR-26

Docket No. 72-51

Docket No.: 71-0240

Indian Point 3 Nuclear Power Plant

Docket No. 50-286

License No. DPR-64

Docket No. 72-51

Docket No.: 71-0240



POLICY STATEMENT

Entergy Indian Point Energy Center (IPEC) and Entergy Nuclear Operations, Inc. (ENOI) shall maintain and operate the IPEC facility in a manner that will ensure the health and safety of the public and workers. The facility shall be operated in compliance with the requirements of the Code of Federal Regulations, the applicable Nuclear Regulatory Commission (NRC) Facility Operating Licenses, and applicable laws and regulations of the state and local governments.

The Quality Assurance Program (QAP) described herein and associated implementing documents provide for control of activities that affect the quality of safety-related nuclear plant structures, systems, and components. The QAP is also applied to certain quality-related equipment and activities that are not safety-related, but support safe plant operations, or where other regulatory or industry guidance establishes program requirements.

The Quality Assurance Program Manual (QAPM) is the top-level policy document that establishes the manner in which quality is to be achieved and presents our overall philosophy regarding achievement and assurance of quality. Implementing documents assign more detailed responsibilities and requirements and define the organizational interfaces involved in conducting activities within the scope of the QAPM. Compliance with the QAPM and implementing documents is mandatory for personnel directly or indirectly associated with implementation of the QAP.

Responsibility for developing, implementing, and verifying execution of the Quality Assurance Program is delegated to the chief nuclear officer (highest level nuclear executive) and authority for developing and verifying execution of the program to the executive responsible for oversight.

TABLE OF CONTENTS

<u>SECTION</u>	<u>PAGE</u>
A. MANAGEMENT	
1. Methodology	1
2. Organization	1
3. Responsibility	5
4. Authority	5
5. Personnel Training and Qualification	6
6. Corrective Action	6
7. Regulatory Commitments	7
B. PERFORMANCE/VERIFICATION	
1. Methodology	7
2. Design Control	8
3. Design Verification	9
4. Procurement Control	10
5. Procurement Verification	11
6. Identification and Control of Items	11
7. Handling, Storage, and Shipping	11
8. Test Control	12
9. Measuring and Test Equipment Control	13
10. Inspection, Test, and Operating Status	14
11. Special Process Control	14
12. Inspection	15

TABLE OF CONTENTS

<u>SECTION</u>	<u>PAGE</u>
B. PERFORMANCE/VERIFICATION (continued)	
13. Corrective Action	15
14. Document Control	16
15. Records	16
C. AUDIT	
1. Methodology	17
2. Performance	17
D. INDEPENDENT SAFETY REVIEW	
1. Description	20
Table 1- Regulatory Commitments	
A. Regulatory Guide 1.8 Revision 1, dated September 1975 “Personnel Qualification and Training”	21
B. Regulatory Guide 1.30 , dated August 1972 “Quality Assurance Requirements for the Installation, Inspection, and Testing of Instrumentation and Electric Equipment”	24
C. Regulatory Guide 1.33 Revision 2, dated February 1978 “Quality Assurance Program Requirements”	25
D. Regulatory Guide 1.37 , dated March 1973 “Quality Assurance Requirements for Cleaning of Fluid Systems and Associated Components of Water-Cooled Nuclear Power Plants”	29
E. Regulatory Guide 1.38 Revision 2, dated May 1977 “Quality Assurance Requirements for Packaging, Shipping, Receiving, Storage and Handling of Items for Water-Cooled Nuclear Power Plants”	30
F. Regulatory Guide 1.39 Revision 2, dated September 1977 “Housekeeping Requirements for Water-Cooled Nuclear Power Plants”	35

TABLE OF CONTENTS

<u>SECTION</u>	<u>PAGE</u>
Table 1- Regulatory Commitments (continued)	
G. Regulatory Guide 1.58 Revision 1, dated September 1980 “Qualifications of Nuclear Power Plant Inspection, Examination, and Testing Personnel”	36
H. Regulatory Guide 1.64 Revision 2, dated June 1976 “Quality Assurance Requirements for the Design of Nuclear Power Plants”	37
I. Regulatory Guide 1.74 dated February 1974 “Quality Assurance Terms and Definitions”	38
J. Regulatory Guide 1.88 Revision 2, dated October 1976 “Collection, Storage and Maintenance of Nuclear Power Plant Quality Assurance Records”	39
K. Regulatory Guide 1.94 Revision 1, dated April 1976 “Quality Assurance Requirements for Installation, Inspection and Testing of Structural Steel during the Construction Phase of Nuclear Power Plants”	41
L. Regulatory Guide 1.116 Revision 0-R, dated June 1976 “Quality Assurance Requirements for Installation, Inspection and Testing of Mechanical Equipment and Systems”	44
M. Regulatory Guide 1.123 Revision 1, dated July 1977 “Quality Assurance Requirements for control of Procurement of Items and Services for Nuclear Power Plants”	45
N. Regulatory Guide 1.144 Revision 1, dated September 1980 “Auditing of Quality Assurance Programs for Nuclear Power Plants”	48
O. Regulatory Guide 1.146 Revision 0, dated August 1980 “Qualification of Quality Assurance Program Audit Personnel for Nuclear Power Plants”	51

A. MANAGEMENT**1. Methodology**

- a. The Quality Assurance Program Manual (QAPM) provides a consolidated overview of the quality program controls associated with IPEC quality related items and activities. The interface and coordination with the Entergy Fleet QAPM ensure the requirements of the IPEC QAPM are satisfied. The QAPM describes the quality assurance organizational structure, functional responsibilities, levels of authority, and interfaces.
- b. The requirements and commitments contained in the QAPM are mandatory and must be implemented, enforced, and adhered to by all individuals and organizations. Employees are encouraged to actively participate in the continued development of the QAPM as well as its implementation. Changes should be promptly communicated when identified.
- c. The QAPM applies to all activities associated with structures, systems, and components that are safety related or controlled by 10 CFR 72. The QAPM also applies to transportation packages controlled by 10 CFR 71. The methods of implementation of the requirements of the QAPM are commensurate with the item's or activity's importance to safety. The applicability of the requirements of the QAPM to other items and activities is determined on a case-by-case basis. The QAPM implements 10 CFR 50 Appendix B, 10 CFR 71 Subpart H, and 10 CFR 72 Subpart G.
- d. The QAPM is implemented through the use of approved procedures (e.g., policies, directives, procedures, instructions, or other documents) which provide written guidance for the control of quality related activities and provide for the development of documentation to provide objective evidence of compliance.

2. Organization

The organizational structure responsible for implementation of the QAPM is described below. The organizational structure consists of corporate and IPEC functions. The specific organization titles for the quality assurance functions described are identified in procedures. The authority to accomplish the quality assurance functions described is delegated to the incumbent's staff as necessary to fulfill the identified responsibility.

A.2. (continued)**a. Corporate Organization**

1. The chief executive officer (CEO) is responsible for overall corporate policy and provides executive direction and guidance for the corporation as well as promulgates corporate policy through the Company's senior management staff. Responsibility for developing, implementing, and verifying execution of the Quality Assurance Program is delegated to the chief nuclear officer, the highest level nuclear executive, and authority for developing and verifying execution of the program to the executive responsible for nuclear oversight.
2. The chief nuclear officer, the highest level nuclear executive officer, is responsible for providing top-level direction for the safe and reliable operation of the IPEC facility. The highest level nuclear executive officer provides guidance with regards to company quality assurance policy. This position is responsible for providing engineering services, nuclear safety, and operations support. Supply chain and information technology are no longer a functional area exclusively within the nuclear organizational structure. However, the oversight and governance of these functional areas remain within the nuclear organization through this executive position that is responsible for nuclear operations. The off-site safety review committee reports to this executive.
3. The following executives report to the highest level nuclear executive officer and provide governance and oversight in regards to implementing company quality assurance policy:
 - (a) The chief operating officer, the executive responsible for nuclear operations, is responsible for implementing quality assurance policies, goals, and objectives and the implementation of all activities associated with the safe and reliable operation of the IPEC facility
 - (b) The senior vice president responsible for nuclear corporate services is responsible for providing nuclear safety, operations support, outage services, regulatory assurance and implementing quality assurance policies, goals, and objectives of corporate support activities.
 - (c) The executive responsible for engineering and technical services is responsible for providing engineering services, project management services and implementing major projects and modifications including implementing quality assurance policies, goals, and objectives
 - (d) The executive responsible for oversight establishes the policies, goals, and objectives of the quality assurance policy and provides

A.2.a.3.(d) (continued)

guidance and interpretation for implementing the company quality assurance policy and is responsible for governance and implementation of the quality assurance program in accordance with regulatory requirements. Independent oversight groups report to this executive.

(1) The following management positions report to this executive:

- A management position that is responsible for nuclear oversight activities and is independent of production. This position provides overall direction for the implementation of the quality assurance program.
- A management position that is responsible for oversight and governance of the QAPM. This position has authority and responsibility for establishing, controlling, and verifying the implementation and adequacy of the quality assurance program as described in this QAPM including activities related to vendor quality. This position has the authority for Stop Work and responsibility to escalate matters directly to the highest level nuclear executive officer when needed.

4. The following executives report to the senior vice president responsible for nuclear corporate services and provide governance and oversight in regards to implementing company quality assurance policy:

- (a) The executive responsible for operations support is responsible for implementing quality assurance policies, goals, and objectives of corporate support activities.
- (b) The executive responsible for production and outage services is responsible for providing outage services and implementing quality assurance policies, goals, and objectives of corporate support activities.
- (c) The executive responsible for regulatory assurance is responsible for regulatory interfaces, licensing activities, corporate nuclear security, corporate emergency planning and implementing quality assurance policies, goals, and objectives.

b. IPEC Site Organization

The following IPEC site management positions describe the site QAPM functional responsibilities, which may be delegated to others as established in this document. These individuals may report through an additional layer of management but shall maintain sufficient authority and organizational freedom to implement the assigned responsibilities.

A.2.b. (continued)

1. The IPEC executive management position reports through the applicable executive position responsible for each designated operating group. This position is responsible for overall plant nuclear safety at the site, and is responsible for establishing the policies, goals, and objectives and the implementation of the QAPM at the IPEC site.
2. A management position responsible for overall plant operations assures the safe, reliable, and efficient operation of the plant within the constraints of applicable regulatory requirements and the operating license. Different aspects of these responsibilities may be fulfilled by separate managers. The onsite safety review committee reports to the management position responsible for plant operations.
3. A management position responsible for performance improvement, emergency planning, training, security, corrective action program, and records management. Different aspects of these responsibilities may be fulfilled by separate managers.
4. The following site positions report directly to an executive position offsite:
 - (a) A management position responsible for quality assurance who has overall authority and responsibility for establishing, controlling, and verifying the implementation and adequacy of the quality assurance program as described in this QAPM. This position has the authority and responsibility to escalate matters directly to the highest level nuclear executive officer when needed. This position reports to the executive responsible for nuclear oversight through the corporate management position responsible for nuclear oversight (offsite).
 - (b) A management position responsible for materials, purchasing, and contracts, procurement, services, receipt, storage, and issue of materials, parts, and components. Different aspects of these responsibilities may be fulfilled by separate managers. This site position reports to an executive (supply chain – offsite) who has a functional interface with the executive responsible for engineering and technical services.
 - (c) A management position responsible for engineering, the development and maintenance of engineering programs, plant design bases, policies, and procedures and for providing engineering services. This position reports to the executive responsible for engineering through the corporate management (offsite). Different aspects of these responsibilities (e.g., fuel design) may be fulfilled by separate managers.

A.2.b.4. (continued)

- (d) A management position responsible for regulatory assurance. This position is responsible for maintaining the licensing basis and oversight of licensing and regulatory programs and reports to the executive responsible for regulatory assurance through the corporate management (offsite).
- c. The on-site and off-site safety review committees independently review activities to provide additional assurance that the IPEC facility is operated and maintained in accordance with the Operating Licenses and applicable regulations that address nuclear safety.

3. Responsibility

- a. IPEC has the responsibility for the scope and implementation of an effective quality assurance program.
- b. IPEC may delegate all or part of the activities of planning, establishing, and implementing the quality assurance program to others, but retains the responsibility for the program's effectiveness.
- c. IPEC is responsible for ensuring that the applicable portion(s) of the quality assurance program is properly documented, approved, and implemented (people are trained and resources are available) before an activity within the scope of the QAPM is undertaken by IPEC or by others.
- d. Individual managers are to ensure that personnel working under their management cognizance are provided the necessary training and resources to accomplish their assigned tasks within the scope of the QAPM.
- e. Procedures that implement the QAPM are approved by the management responsible for the applicable quality function. These procedures are to reflect the QAPM and work is to be accomplished in accordance with them.

4. Authority

- a. When IPEC delegates responsibility for planning, establishing, or implementing any part of the overall QA program, sufficient authority to accomplish the assigned responsibilities is delegated.
- b. The management position responsible for quality assurance has the responsibility and the authority to stop unsatisfactory work and control further processing, delivery, installation, or use of non-conforming items or services. Cost and schedule considerations will not override safety considerations.

A. (continued)**5. Personnel Training and Qualification**

- a. Personnel assigned to implement elements of the quality assurance program are capable of performing their assigned tasks.
- b. Training programs are established and implemented to ensure that personnel achieve and maintain suitable proficiency.
- c. Personnel training and qualification records are maintained in accordance with procedures.
- d. Additional details concerning Personnel Training and Qualification may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guides 1.8, 1.58, and 1.146).

6. Corrective Action

- a. It is the responsibility of each individual to promptly identify and report conditions adverse to quality. Management at all levels encourages the identification of conditions that are adverse to quality.
- b. A corrective action program is established and implemented that includes prompt identification, documentation, and correction of conditions adverse to quality. The corrective action program for significant conditions adverse to quality shall require cause determination and a corrective action plan that precludes repetition.
- c. Specific responsibilities within the corrective action program may be delegated, but IPEC maintains responsibility for the program's effectiveness.
- d. Non-conforming items are properly controlled to prevent their inadvertent test, installation, or use. They are reviewed and either accepted, rejected, repaired, or reworked.
- e. Reports of conditions that are adverse to quality are analyzed to identify trends in quality performance. Significant conditions adverse to quality and significant trends are reported to the appropriate level of management.
- f. Additional details concerning corrective action activities may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.33).

A. (continued)**7. Regulatory Commitments**

- a. Except where alternatives are identified, IPEC complies with the QA guidance documents listed on Table 1. If the guidance in one of these documents is in conflict with the QAPM, the guidance provided in the QAPM is the controlling guidance. Additionally, the following clarifications apply to all guidance documents listed in Table 1:
 - 1. For modifications and nonroutine maintenance, guidance applicable to construction-like activities is applicable to comparable plant activities. Except that the inspection of modifications, repairs, rework, and replacements shall be in accordance with the original design and inspection requirements or a documented approved alternative.
 - 2. The definitions provided by Regulatory Guide 1.74 and associated clarifications as described in Table 1 apply wherever the defined term is used in the QAPM and associated guidance documents.
 - 3. Clarification to a guidance document applies wherever the guidance document is invoked.
 - 4. In each of the ANSI standards, other documents (e.g., other standards, codes, regulations, tables, or appendices) are referenced or described. These other documents are only quality assurance program requirements if explicitly committed to in the QAPM. If not explicitly committed to, these documents are not considered as quality assurance program requirements, although they may be used as guidance.
 - 5. Guidance applicable to safety related items and activities is applicable to comparable items and activities controlled by 10 CFR 72 and transportation packages controlled by 10 CFR 71.
- b. The NRC is to be notified of QAPM changes in accordance with 10 CFR 50.54(a)(3) or 10 CFR 50.54(a)(4).

B. PERFORMANCE/VERIFICATION**1. Methodology**

- a. Personnel performing work activities such as design, engineering, procurement, manufacturing, construction, installation, startup, maintenance, modification, operation, and decommissioning are responsible for achieving acceptable quality.
- b. Personnel performing verification activities are responsible for verifying the achievement of acceptable quality and are different personnel than those who performed the work.

B.1 (continued)

- c. Work is accomplished and verified using instructions, procedures, or other appropriate means that are of a detail commensurate with the activity's complexity and importance to safety.
- d. Criteria that define acceptable quality are specified, and quality is verified against these criteria.

2. Design Control

- a. The design control program is established and implemented to assure that the activities associated with the design of systems, components, structures, and equipment and modifications thereto, are executed in a planned, controlled, and orderly manner.
- b. The program includes provisions to control design inputs, processes, outputs, changes, interfaces, records, and organizational interfaces.
- c. Design inputs (e.g., performance, regulatory, quality, and quality verification requirements) are to be correctly translated into design outputs (e.g., specifications, drawings, procedures, and instructions).
- d. The final design output is to relate to the design input in sufficient detail to permit verification.
- e. The design process is to ensure that items and activities are selected and independently verified consistent with their importance to safety to ensure they are suitable for their intended application.
- f. Changes to final designs (including field changes and modifications) and dispositions of non-conforming items to either use-as-is or repair are to be subjected to design control measures commensurate with those applied to the original design and approved by the organization that performed the original design or a qualified designee.
- g. Interface controls (internal and external between participating design organizations and across technical disciplines) for the purpose of developing, reviewing, approving, releasing, distributing, and revising design inputs and outputs are defined in procedures.
- h. Design documentation and records, which provide evidence that the design and design verification process was performed in accordance with this program, shall be collected, stored, and maintained in accordance with documented procedures. This documentation includes final design documents, such as drawings and specifications, and revisions thereto and documentation which identifies the important steps, including sources of design inputs that support the final design.
- i. Additional details concerning design control activities may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.64).

B. (continued)**3. Design Verification**

- a. A program is established and implemented to verify the acceptability of design activities and documents for the design of items. The selection and incorporation of design inputs and design processes, outputs, and changes are verified.
- b. Verification methods include, but are not limited to, design reviews, alternative calculations, and qualification testing. The extent of this verification will be a function of the importance to safety of the item, the complexity of the design, the degree of standardization, the state of the art, and the similarity with previously proven designs. Standardized or previously proven designs will be reviewed for applicability prior to use.
- c. When a test program is used to verify the acceptability of a specific design feature, the test program is to demonstrate acceptable performance under conditions that simulate the most adverse design conditions that are expected to be encountered.
- d. Independent design verification is to be completed before design outputs are used by other organizations for design work and before they are used to support other activities such as procurement, manufacture, or construction. When this timing cannot be achieved, the unverified portion of the design is to be identified and controlled. In all cases, the design verification is to be completed before relying on the item to perform its function.
- e. Individuals or groups responsible for design reviews or other verification activities shall be identified in procedures and their authority and responsibility shall be defined and controlled. Design verification shall be performed by any competent individuals or groups other than those who performed the original design but who may be from the same organization. The designer's immediate supervisor may perform the design verification provided:
 - 1. the supervisor is the only technically qualified individual capable of performing the verification,
 - 2. the need is individually documented and approved in advance by the supervisor's management, and
 - 3. the frequency and effectiveness of the supervisor's use as a design verifier are independently verified to guard against abuse.

B.3 (continued)

- f. Design verification procedures are to be established and implemented to ensure that an appropriate verification method is used, the appropriate design parameters to be verified are chosen, the acceptance criteria are identified, the verification is satisfactorily accomplished, and the results are properly recorded.
- g. Additional details concerning design verification activities may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.64).

4. Procurement Control

- a. A program is established and implemented to ensure that purchased items and services are of acceptable quality.
- b. The program includes provisions for evaluating prospective suppliers and selecting only qualified suppliers.
- c. The program includes provisions for ensuring that qualified suppliers continue to provide acceptable products and services.
- d. The program includes provisions (e.g., source verification, receipt inspection, pre-installation and post-installation tests, and certificates of conformance) for accepting purchased items and services.
- e. Applicable technical, regulatory, administrative, and reporting requirements (e.g., specifications, codes, standards, tests, inspections, special processes, and 10 CFR Part 21) are invoked for procurement of items and services.
- f. The program includes provisions for ensuring that documented evidence of an item's conformance to procurement requirements is available at the site before the item is placed in service or used unless otherwise specified in procedures.
- g. The program includes provisions for ensuring that procurement, inspection, and test requirements have been satisfied before an item is placed in service or used unless otherwise specified in procedures.
- h. The procurement of components, including spare and replacement parts, is subject to quality and technical requirements suitable for their intended service.
- i. Appropriate controls for the selection, determination of suitability for intended use (critical characteristics), evaluation, receipt, and quality evaluation of commercial grade items are to be imposed to ensure that the items will perform satisfactorily in service.

B.4 (continued)

- j. Additional details concerning procurement control may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guides 1.33 and 1.123).

5. Procurement Verification

- a. A program is established and implemented to verify the quality of purchased items and services at intervals and to a depth consistent with the item's or service's importance to safety, complexity, and quantity and the frequency of procurement.
- b. The program is executed in all phases of procurement. As necessary, this may require verification of activities of suppliers below the first tier.
- c. Additional details concerning procurement verification may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guides 1.123 and 1.144).

6. Identification and Control of Items

- a. A program is established and implemented to identify and control items to prevent the use of incorrect or defective items.
- b. Identification of each item is maintained throughout fabrication, erection, installation, and use so that the item can be traced to its documentation. Traceability is maintained to an extent consistent with the item's importance to safety.
- c. Additional details concerning identification and control of items may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.33).

7. Handling, Storage, and Shipping

- a. A program is established and implemented to control the handling, storage, shipping, cleaning, and preserving of items to ensure the items maintain acceptable quality.
- b. Special protective measures (e.g., containers, shock absorbers, accelerometers, inert gas atmospheres, specific moisture content levels, and temperature levels) are specified and provided when required to maintain acceptable quality.
- c. Specific procedures are developed and used for cleaning, handling, storage, packaging, shipping, and preserving items when required to maintain acceptable quality.

B.7 (continued)

- d. Items are marked and labeled during packaging, shipping, handling, and storage to identify, maintain, and preserve the items' integrity and indicate the need for special controls.
- e. Additional details concerning handling, storage, and shipping activities may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.38).

8. Test Control

- a. A test control program is established and implemented to demonstrate that items will perform satisfactorily in service.
- b. Criteria are defined that specify when testing is required.
- c. The test control program includes, as appropriate, proof tests before installation, pre-operational tests, post-maintenance tests, post-modification tests, and operational tests.
- d. Test procedures are developed that include:
 - 1. instructions and prerequisites to perform the test,
 - 2. use of proper test equipment,
 - 3. acceptance criteria, and
 - 4. mandatory inspections as required.
- e. Test results are evaluated to assure that test objectives and inspection requirements have been satisfied.
- f. Unacceptable test results shall be evaluated.
- g. Additional details concerning test control may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.33).

B. (continued)**9. Measuring and Test Equipment Control**

- a. A program is established and implemented to control the calibration, maintenance, and use of measuring and test equipment. Measuring and test equipment does not include permanently installed operating equipment or test equipment used for preliminary checks where data obtained will not be used to determine acceptability or be the basis for design or engineering evaluation. Additionally, calibration and control measures are not required for rulers, tape measures, levels and other such devices if normal commercial manufacturing practices provide adequate accuracy.
- b. The types of equipment covered by the program (e.g., instruments, tools, gauges, and reference and transfer standards) are defined in procedures.
- c. Measuring and test equipment is calibrated at specified intervals or immediately before use on the basis of the item's required accuracy, intended use, frequency of use, and stability characteristics and other conditions affecting its performance.
- d. Measuring and test equipment is labeled, tagged, or otherwise controlled to indicate its calibration status and to ensure its traceability to calibration test data.
- e. Measuring and test equipment is calibrated against standards that have an accuracy of at least four times the required accuracy of the equipment being calibrated or, when this is not possible, have an accuracy that ensures the equipment being calibrated will be within the required tolerance.
- f. If nationally recognized standards exist, calibration standards are to be traceable to them. Except where calibration standards with the same accuracy as the instruments being calibrated are shown to be adequate for the requirements, calibration standards are to have a greater accuracy than the standards being calibrated.
- g. Measuring and test equipment found out of calibration is tagged or segregated. The acceptability shall be determined of items measured, inspected, or tested with an out-of-calibration device.
- h. Additional details concerning measuring and test equipment control may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guides 1.30, 1.33, 1.94, 1.116, and 1.123).

B. (continued)**10. Inspection, Test, and Operating Status**

- a. The status of required inspections and tests and the operating status of items is verified before release, fabrication, receipt, installation, test, and use, as applicable. This verification is to preclude inadvertent bypassing of inspections and tests and to prevent inadvertent operation of controlled equipment.
- b. The application and removal of inspection, test, and operating status indicators are controlled in accordance with procedures.
- c. Additional details concerning inspection, test, and operating status control may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.33).

11. Special Process Control

- a. A program is established and implemented to ensure that special processes are properly controlled.
- b. The criteria that establish which processes are special are described in procedures. The following are special processes:
 - 1. welding,
 - 2. heat-treating,
 - 3. NDE (Non-Destructive Examination),
 - 4. chemical cleaning, and
 - 5. unique fabricating or testing processes that require in-process controls.
- c. Special processes are accomplished by qualified personnel, using appropriate equipment, and procedures in accordance with applicable codes, standards, specifications, criteria, and other special requirements.
- d. Additional details concerning special process control may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.33).

B. (continued)**12. Inspection**

- a. A program is established and implemented for inspections of activities in order to verify conformance to the documented instructions, procedures and drawings for accomplishing the activity. The inspection program may be implemented by or for the organization performing the activity to be inspected.
- b. Provisions to ensure inspection planning is properly accomplished are to be established. Planning activities are to identify the characteristics and activities to be inspected, the inspection techniques, the acceptance criteria, and the organization responsible for performing the inspection.
- c. Provisions to identify inspection hold points, beyond which work is not to proceed without the consent of the inspection organization, are to be defined.
- d. Inspection results are to be documented by the inspector and reviewed by qualified personnel.
- e. Unacceptable inspection results shall be evaluated and resolved in accordance with procedures.
- f. Inspections are performed by qualified personnel other than those who performed or directly supervised the work being inspected. While performing the inspection activity the inspectors functionally report to the associated management position responsible for quality assurance.
- g. Additional details concerning inspections may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guides 1.33 and 1.58).

13. Corrective Action

- a. Procedures shall provide for identification, evaluation, and resolution of conditions adverse to quality.
- b. Reworked, repaired, and replacement items are to be inspected and tested in accordance with the original inspection and test requirements or specified alternatives.
- c. Additional details concerning corrective action activities may be found in Section A.6 and the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.33).

B. (continued)**14. Document Control**

- a. A program is established and implemented to control the development, review, approval, issue, use, and revision of documents.
- b. The scope of the document control program includes:
 - 1. safety analysis report,
 - 2. design documents,
 - 3. procurement documents,
 - 4. Technical Specifications,
 - 5. procedures, manuals, and plans,
 - 6. corrective action documents, and
 - 7. other documents as defined in procedures.
- c. Revisions of controlled documents are reviewed for adequacy and approved for release by the same organization that originally reviewed and approved the documents or by a designated organization that is qualified and knowledgeable.
- d. Copies of controlled documents are distributed to and used by the person performing the activity.
- e. The distribution of new and revised controlled documents is in accordance with procedures. Superseded documents are controlled.
- f. Additional details concerning document control may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.33).

15. Records

- a. A program is established and implemented to ensure that sufficient records of items and activities (e.g., design, engineering, procurement, manufacturing, construction, inspection and test, installation, pre-operation, startup, operations, maintenance, modification, decommissioning, and audits) are generated and maintained to reflect completed work.
- b. The program provides provisions for the administration, receipt, storage, preservation, safekeeping, retrieval, and disposition of records.

B.15 (continued)

- c. The program includes provisions for the use of various record storage media to maintain QA records. Procedures are developed to implement the regulatory guidance associated with the media used. The NRC Generic Letter 88-18 "Plant Record Storage on Optical Disk" is implemented for optical disk media. The Regulatory Issue Summary 2000-18 "Guidance on Managing QA Records in Electronic Media" is implemented for electronic media.
- d. Additional details concerning record requirements may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guide 1.88).

C. AUDIT**1. Methodology**

- a. Personnel responsible for carrying out audits are maintained cognizant of day-to-day activities by the ongoing involvement in the quality assurance program requirements so that they can act in a management advisory function.
- b. Organizations performing audits are to be technically and performance oriented commensurate with the activity being reviewed.
- c. Personnel performing audits have no direct responsibilities in the area they are assessing.
- d. Audits are accomplished using instructions, procedures, or other appropriate means that are of a detail commensurate with the activity's complexity and importance to safety.

2. Performance

- a. A program of planned and periodic audits is established and implemented to confirm that activities affecting quality comply with the QAPM and that the QAPM has been implemented effectively. Audit frequencies will be implemented as required by the applicable Code of Federal Regulations, safety analysis report, and commitments by various correspondences to the NRC. Audits will be conducted at a frequency in accordance with either Section C.2.a.1 or Section C.2.a.2 below. Audits of stand alone Independent Spent Fuel Storage Installations (ISFSIs) (e.g. those not sited with an operating nuclear power plant) may be conducted in accordance with Section C.2.a.4.

C.2.a (continued)

1. Audit frequencies will be determined in accordance with a performance based audit-scheduling program. The scheduling program, through an expert panel, uses assessment indicators to identify and schedule audits based on performance results and importance of the activity relative to safety. Potential audit subject areas are periodically assessed against appropriate performance criteria. From these reviews a determination is made in regard to the depth, scope, and scheduling of specific audits. Functional areas important to safety are assessed annually ($\pm 25\%$) to identify strengths and weaknesses (if applicable) to determine the level and focus of independent oversight activities for the upcoming year. The basis for the assessment shall include the results of audits and surveillance, NRC inspections, LERs, self-assessments, and applicable conditions reports (e.g., non-conformance and corrective action reports). Personnel changes, change/increase in functional area responsibilities, industry operating experience, and INPO evaluations (if performed) will also be considered. Each area will be assigned a rating with a comparison to previous years. This assessment will be documented, reviewed, and approved by quality assurance management.

This document is considered a quality assurance record and will be available for NRC review. Audit subject areas of Section C.2.a.2 shall continue to be audited on the frequencies designated unless expert panel judgment, based on performance results, determines such an audit to be unnecessary. In such cases the expert panel basis shall be documented.

2. Audit schedules assure that the following areas are audited at the indicated frequencies, or more frequently as performance dictates.
 - a. The conformance of each unit's operation to provisions contained within the Technical Specifications and applicable license conditions is audited at least once every 24 months.
 - b. The performance, training, and qualifications of the entire staff are audited at least once every 24 months.

C.2.a.2. (continued)

- c. The results of actions taken to correct deficiencies occurring in unit equipment, structure, systems, or method of operation that affect nuclear safety is audited at least once every 24 months.
 - d. The performance of activities required by the QAPM to meet the criteria of 10 CFR 50, Appendix B is audited at least once every 24 months.
 - e. The Offsite Dose Calculations Manual and Process Control Program and implementing procedures are audited at least once every 24 months.
 - f. The radiological environmental monitoring program and the results thereof is audited at least once every 24 months.
 - g. A fire protection and loss prevention program inspection and audit shall be performed using either off-site licensee personnel or an outside fire protection firm at least once every 24 months.
 - h. The fire protection program and implementing procedures audit shall be performed at least once every 24 months.
 - i. A fire protection and loss prevention program inspection and audit shall be performed using an outside fire consultant at least once every 36 months.
- 3. A grace period of 90 days may be applied to the 24-month frequency for internal audits. For activities deferred in accordance with the 90-day grace period, the next performance due date will be based on their originally scheduled date.
 - 4. The audit schedule for stand alone ISFSIs may combine audits to cover the areas defined in section C.2.a.2 that are invoked by the ISFSI technical specifications.
- b. Audits shall provide an objective evaluation of quality related practices, procedures, instructions, activities, and items and a review of documents and records, as applicable.
 - c. Audits shall be performed in accordance with approved written procedures or checklists. Items from previous audits shall be reviewed and reaudited, as appropriate. The checklists are used as guides to the auditor.

C.2 (continued)

- d. Scheduling and resource allocation are based on the status and safety importance of the activity or process being assessed.
- e. Scheduling is dynamic and resources are supplemented when the effectiveness of the quality assurance program is in doubt.
- f. Audit reports are written and distributed to the appropriate levels of management for review. Follow-up action, including re-look at deficient areas, is initiated as deemed appropriate.
- g. Implementation of delegated portions of the quality assurance program is assessed.
- h. Audits are conducted using predetermined acceptance criteria.
- i. Additional details concerning audits may be found in the Regulatory Guides and associated Standards as committed to in Section A.7 and Table 1 (e.g., Regulatory Guides 1.33 and 1.144).

D. INDEPENDENT SAFETY REVIEW**1. Description**

- a. Independent safety review is performed to meet IPEC's commitment to NUREG-0737, Section I.B.1.2, "Independent Safety Engineering Group," as described in each IPEC unit's safety analysis report.

Table 1

Regulatory Commitments

A. Regulatory Guide 1.8 Revision 1, dated September 1975

Clarification/Exception

1. General

IPEC is committed to Sections 1 – 4 of ANSI/ANS 3.1-1978 with following clarifications and exceptions.

Qualification requirements for personnel shall meet ANSI/ANS 3.1-1978 except the following:

- a. The radiation protection manager shall meet or exceed the qualifications of Regulatory Guide 1.8, Revision 2, 1987.
- b. Managers required to hold an SRO license are specified in the applicable unit's Technical Specifications. Certified Fuel Handlers replace the SRO License position for a unit that has permanently ceased power operations and certified defueled in accordance with 10 CFR 50.82 as documented in the specific unit's Technical Specifications.
- c. Licensed Operators shall be qualified in accordance with the requirements of 10 CFR 55. Certified Fuel Handlers, for a unit that has permanently ceased power operations and certified defueled in accordance with 10 CFR 50.82, are qualified in accordance with a program submitted to and approved by the NRC.

Individuals filling positions who met the previous commitment at the time of implementation of this commitment can be considered to meet any more restrictive aspects of the requirements of this commitment for that position without further review and documentation.

Table 1
Regulatory Commitments

A. Regulatory Guide 1.8 (continued)

2. General

The following qualifications may be considered equivalent to a bachelor's degree:

- a. 4 years of post secondary schooling in science or engineering,
- b. 4 years of applied experience at a nuclear facility in the area for which qualification is sought,
- c. 4 years of operational or technical experience/training in nuclear power, or
- d. any combination of the above totaling 4 years.

Years of experience used to meet the education requirements as allowed by this exception shall not be used to also meet the experience requirements.

Table 1
Regulatory Commitments

A. Regulatory Guide 1.8 (continued)

- | | |
|--|--|
| 3. ANSI/ANS 3.1
Section 4 | Individuals assigned to professional-technical comparable positions shall have the authority and specified qualifications to accomplish the functional responsibilities of the position. |
| 4. ANSI/ANS 3.1
Section 4.4.5 | Individuals who do not possess the formal education and minimum experience requirements for the manager responsible for quality assurance should not be eliminated automatically when other factors provide sufficient demonstration of their abilities. These other factors are evaluated on a case-by-case basis and approved and documented by senior management. As a minimum, the Special Requirements of ANSI/ANS 3.1-1993 Section 4.3.7 must be met if the manager responsible for Quality Assurance does not meet the requirements of section 4.4.5 of ANSI/ANS 3.1-1978. |
| 5. ANSI/ANS 3.1
Section 5 | IPEC will maintain a training program for the unit staff that meets the applicable regulations and either a) is accredited by the National Nuclear Accrediting Board (NNAB) or b) meets the standards of section 5 of ANSI/ANS 3.1-1978. |
| 6. ANSI/ANS 3.1
Sections 4.3.1 and
4.5.1 | For a unit that has permanently ceased power operations and certified defueled in accordance with 10 CFR 50.82, the nuclear power plant experience is amended to also include experience acquired at a defueled reactor site that is directly related to the storage or handling of spent nuclear fuel in a spent fuel pool. Specifically, individuals will obtain the necessary on-site experience to fill the position of Certified Fuel Handler or operators, based on their assigned functions and validation of equivalent training and experience rather than requiring at least six months of the nuclear power plant experience at the plant for which an individual seeks a license or to be an operator as defined in Sections 4.3.1 and 4.5.1 of ANSI/ANS 3.1-1978. |

Table 1
Regulatory Commitments

B. Regulatory Guide 1.30, dated August 1972

Clarification/Exception

- | | |
|----------------------------------|--|
| 1. ANSI N45.2.4
General | ANSI N45.2.4 identifies various tests to be performed. The applicability of these tests will be determined as discussed in QAPM Section B.8 and based upon the significance of change or modification. |
| 2. ANSI N45.2.4
Section 3 | Documented routine inspections and audits of the storage area may be performed instead of the requirements of this Section. |
| 3. ANSI N45.2.4
Section 5.2 | In some cases, testing requirements may be met by post-installation surveillance testing in lieu of a special post-installation test. |
| 4. ANSI N45.2.4
Section 6.2.1 | The last sentence of this section states: "Items requiring calibration shall be tagged or labeled on completion indicating date of calibration and identity of the person that performed the calibration." Instead of requiring the tagging or labeling of all equipment this statement is changed to require the equipment to be suitably marked to indicate the date of the next required calibration and the identity of the person that performed the calibration. |

Table 1
Regulatory Commitments

C. Regulatory Guide 1.33 Revision 2, dated February 1978

Clarification/Exception

- | | | |
|----|--|--|
| 1. | Section C.1 | IPEC will provide procedures for the guide's Appendix A activities as discussed. However, IPEC does not consider all activities listed to be "safety-related" (e.g., activities in 7.e). |
| 2. | Section C.4 | This section establishes minimum 2-year audit frequency for all safety related functions and recommends audit frequencies specific to Corrective Action, Facility Operation, and Staff Performance, Training, and Qualifications. IPEC will perform audits at frequencies as discussed in QAPM Section C.2.a instead of this section. |
| 3. | ANSI N18.7
Section 1 | Sentences 4 and 5 state, "However, applicable sections of this standard should be used as they apply to related activities. Activities included are: Design Changes, Purchasing, Fabricating..." With regard to radioactive material transportation activities, IPEC will only implement the requirements associated with those activities conducted in accordance with the applicable NRC Quality Assurance Program Approval for Radioactive Material Packages. |
| 4. | ANSI N18.7
Section 4.3.1 | The specific areas of experience described in this section are not applicable to the on-site safety review committee but the committee must be comprised of site operating or engineering supervisory personnel. Additionally, the off-site safety review committee need contain experience in only a majority of the areas. |
| 5. | ANSI N18.7
Section 4.3.2.2
& 4.3.2.3 | Instead of the requirements of section 4.3.2.2, the independent safety review committee will meet once per year. The statement that "no more than a minority of the quorum shall have line responsibility for the operation of the plant" in section 4.3.2.3 is not applicable to the on-site safety review committee. |

Table 1
Regulatory Commitments

C. Regulatory Guide 1.33 (continued)

Clarification/Exception

- | | |
|---|---|
| 6. ANSI N18.7
Section
4.3.4.(1) & (2) | 10 CFR 50.59 was revised through Federal Register Notice 19991001 R1N3150-AF94 eliminating the terms "safety evaluation" and "unreviewed safety question." The term "safety evaluation" has been replaced with 10 CFR 50.59 "evaluation." The term "unreviewed safety question," as defined in the previous version of 10 CFR 50.59 (a)(2), was replaced by criteria provided in 50.59(c)(2) to determine if a license amendment pursuant to 50.90 is required prior to implementing the change, test, or experiment. |
| 7. ANSI N18.7
Section 4.3.4(2) | Reviews associated with changes to the technical specifications will be performed in accordance with Section 4.3.4(3) instead of this section. |
| 8. ANSI N18.7
Section 4.3.4(3) | Revision to proposed Technical Specification changes only requires review in accordance with this section when the revision involves a significant change to the technical basis for the proposed change. The independent review body discussed in this section is the on-site safety review committee. Voting members having a potential conflict of interest refrain from voting on documents under review. |
| 9. ANSI N18.7
Section 4.3.4(4) | In place of the requirements of this section, the on-site and off-site safety review committees shall review facility operations to detect potential nuclear safety hazards and all reports made in accordance with 10 CFR 50.73. |
| 10. ANSI N18.7
Section 4.3.4(5) | An example of the matters reviewed by the on-site safety review committee in accordance with this section is a change to the Emergency Plan (except editorial changes). |
| 11. ANSI N18.7
Section 4.5 | This section establishes minimum 2-year audit frequency for all safety related functions. IPEC will perform audits at frequencies as discussed in QAPM Section C.2.a instead of this section. |
| 12. ANSI N18.7
Section 4.5 | The independent review body discussed in this section is the off-site safety review committee. |

Table 1
Regulatory Commitments

C. Regulatory Guide 1.33 (continued)

Clarification/Exception

- | | |
|--|--|
| 13. ANSI N18.7
Section 5.1 | Instead of the requirements of this section to have a summary document, a method of cross-referencing these requirements to the implementing procedures will be maintained. |
| 14. ANSI N18.7
Section 5.2.2 | The person who holds a senior reactor operator's license for the affected unit and approves a temporary change to a procedure is not required to be in charge of the shift. For a unit that has permanently ceased power operations and certified defueled in accordance with 10 CFR 50.82 the senior reactor operator is replaced with a Certified Fuel Handler. |
| 15. ANSI N18.7
Section 5.2.2 | In addition to the temporary procedure change process described for changes which clearly do not change the intent of a procedure, temporary procedure changes which may change the intent of a procedure may be made following the process described in this section. Except that the person normally responsible for approving revisions to the procedure is the approval authority for the change. |
| 16. ANSI N18.7
Section 5.2.6 | Instead of the requirements of this section concerning non-conforming conditions, non-conforming conditions will be evaluated and controlled in accordance with the corrective action program. |
| 17. ANSI N18.7
Section 5.2.6 | The requirement of the fifth paragraph of this section to have a log of the status of temporary modifications is not applicable to temporary modifications for routine tasks installed in accordance with procedures. These procedures shall provide assurance that approvals are obtained, temporary modification activities are independently verified by an individual cognizant of the purpose and the effect of the temporary modification, and that activities are adequately documented to indicate the status of the temporary modification. |
| 18. ANSI N18.7
Section 5.2.7.1 | This section will be implemented by adding the words "Where practical" in front of the first and fourth sentences of the fifth paragraph. For modifications where the requirements of the fourth sentence are not considered practical, a review in accordance with the provisions of 10 CFR 50.59 will be conducted. |

Table 1
Regulatory Commitments

C. Regulatory Guide 1.33 (continued)

Clarification/Exception

- | | |
|--|---|
| 19. ANSI N18.7
Section 5.2.8 | In lieu of a “master surveillance schedule,” the following requirement shall be complied with: “A surveillance testing schedule(s) shall be established reflecting the status of all in-plant surveillance tests and inspections.” |
| 20. ANSI N18.7
Section 5.2.9 | The requirements of the Physical Security Plan shall be implemented in place of these general requirements. |
| 21. ANSI N18.7
Section
5.2.13.1 | Consistent with ANSI N45.2.11 Section 7.2, minor changes to documents, such as inconsequential editorial corrections, or changes to commercial terms and conditions may not require that the revised document receive the same review and approval as the original documents. |
| 22. ANSI N18.7
Section 5.2.14 | Where marking, tagging, or physical separation of the non-conforming item is not feasible, the non-conforming item may be controlled by the use of appropriate documentation. |
| 23. ANSI N18.7
Section 5.2.15 | Required procedure reviews following the occurrences discussed in Section 5.2.15, paragraph 3, sentence 3, are determined and controlled in accordance with the QAPM Section A.6 instead of this section. |
| 24. ANSI N18.7
Section 5.2.15 | This section requires plant procedure review by an individual knowledgeable in the area affected by the procedure no less frequently than every two years to determine if changes are necessary or desirable. Instead of this review, controls are in effect to ensure that procedures are reviewed for possible revision upon identification of new or revised source material potentially affecting the intent of procedures. |
| 25. ANSI N18.7
Section 5.3.9 | Instead of the requirements of this section, the format and content of the emergency operating procedures follow the applicable NRC approved format for the specific unit. |
| 26. ANSI N18.7
Section 5.3.9.3 | IPEC's NRC accepted Emergency Plan will be implemented in lieu of the requirements in this section. |

Table 1
Regulatory Commitments

D. Regulatory Guide 1.37, dated March 1973

Clarification/Exception

- | | |
|------------------------------|--|
| 1. General | Instead of using the cleanliness level classification system of ANSI N45.2.1, the required cleanliness for specific items and activities is addressed on a case-by-case basis. Cleanliness is maintained, consistent with the work being performed to prevent introduction of foreign material. As a minimum, cleanliness inspections are performed prior to system closure and such inspections are documented. |
| 2. Section C.3 | The water quality for final flushes of fluid systems and associated components is at least equivalent to the quality of the operating system water, except for the oxygen and nitrogen content. |
| 3. Section C.4 | As an alternate to the requirements of this section, contamination levels in expendable products may be based upon safe practices and industrial availability with documented engineering evaluations. Contaminant levels are controlled such that subsequent removal by standard cleaning methods results in the achievement of final acceptable levels that are not detrimental to the materials. |
| 4. ANSI N45.2.1
Section 5 | Any nonhalogenated material may be used which is compatible with the parent material not just plastic film. |

Table 1
Regulatory Commitments

E. Regulatory Guide 1.38 Revision 2, dated May 1977

Clarification/Exception

- | | |
|----------------------------------|---|
| 1. ANSI N45.2.2
Section 3.2 | Storage of an item in a higher-level storage area meets the lower level storage requirements. |
| 2. ANSI N45.2.2
Section 3.2 | As an alternate to the requirements in Section 3.2.1 items (4), (5), and 7, Section 3.2.2, Section 3.2.3 item (1), and Section 3.2.4 item (2), the storage atmosphere may be controlled such that it is free of harmful contaminants in concentration that could produce damage to the stored item and protecting weld end preparations and threads by controlling the manner in which the item is stored. |
| 3. ANSI N45.2.2
Section 3.7.1 | Cleated, sheathed boxes may be used up to 1000 lb. rather than 500 lb. as specified in 3.7.1(1). Special qualification testing may be required for loads over 1000 lb. |
| 4. ANSI N45.2.2
Section 3.7.2 | Skids and runners will normally be fabricated from a minimum 2 X 4 inch nominal lumber size and laid flat except where this is impractical because of the small dimensions of the container. If forklift handling is required, minimum floor clearance for forklift tines will be provided. |
| 5. ANSI N45.2.2
Section 4.3.4 | Inspections of packages and/or preservative coatings are made immediately prior to loading rather than after loading. |
| 6. ANSI N45.2.2
Section 5.2.1 | Warehouse personnel will normally visually scrutinize incoming shipments for damage of the types listed in this section, this activity is not necessarily performed prior to unloading. Separate documentation of the shipping damage inspection is not necessary. Release of the transport agent after unloading and the signing for receipt of the shipment provides adequate documentation of completion of the shipping damage inspection. Any non-conformances noted will be documented and dispositioned. Persons performing the visual scrutiny during unloading are not considered to be performing an inspection function as defined under Reg. Guide 1.74; therefore, while they will be trained to perform this function, they may not be certified (N45.2.6) as an inspector. |

Table 1
Regulatory Commitments

E. Regulatory Guide 1.38 (continued)

Clarification/Exception

- | | |
|--|---|
| 7. ANSI N45.2.2
Section 5.2.2 | <p>The second division of this subsection requires six additional inspection activities if an item was not inspected or examined at the source. IPEC will consider that a source inspection has been conducted if the supplier of the item is required to comply with ANSI N45.2.2 for the purchased item and if the supplier's program has been audited and found acceptable in the area (i.e., the supplier performs a source inspection of his supplier or conducts a receipt inspection that includes, as applicable, the six additional items listed).</p> <p>Instead of the requirement that receiving inspections be performed in an area equivalent to the level of storage required for the item, receiving inspections will be performed in a manner and in an environment which does not endanger the requisite quality of an item. The receiving inspection's location environmental controls may be less stringent than storage environmental requirements for that item; however, the short time spent in the less stringent receiving inspection area shall be of such duration that it will not adversely affect the item being received.</p> |
| 8. ANSI N45.2.2
Section 5.2.3 | <p>The "Special Inspection" procedure is not required to be attached to the item or container but shall be readily available to inspection personnel.</p> |
| 9. ANSI N45.2.2
Section 6.2.1 | <p>Items which fall within the Level D classification of the standard will be stored in an area which may be posted to limit access, but other positive controls such as fencing or guards may not be provided.</p> |
| 10. ANSI N45.2.2
Section 6.2.4 | <p>The sentence is replaced with the following: "The use or storage of food, drinks, and salt tablet dispensers in any storage area shall be controlled and shall be limited to designated areas where such use or storage is not deleterious to stored items."</p> |

Table 1
Regulatory Commitments

E. Regulatory Guide 1.38 (continued)

Clarification/Exception

- | | |
|--|---|
| 11. ANSI N45.2.2
Section 6.2.5 | The sentence is replaced with the following: "Exterminators or other appropriate measures shall be used to control animals to minimize possible contamination and mechanical damage to stored material. If evidence of animal activity is detected, a survey or inspection will be utilized to determine the extent of the damage." |
| 12. ANSI N45.2.2
Section 6.3.3 | An alternate to the stated requirement is the following: "Hazardous chemicals, paints, solvents, and other materials of a like nature shall be stored in approved cabinets or containers which are not in close proximity to installed systems required for safe shutdown." |
| 13. ANSI N45.2.2
Section 6.4.2 | Care of items in storage shall be exercised in accordance with the following: "Types of components that could require maintenance while in storage shall be identified and evaluated for specific maintenance requirements. Maintenance activities 6.4.2 (6) through 6.4.2 (8) listed in this requirement shall be considered during this evaluation and any deviations shall be justified and documented." |
| 14. ANSI N45.2.2
Section 6.5 | The last sentence of this section is not applicable to the operations phase. |
| 15. ANSI N45.2.2
Section 6.6 | IPEC will comply with this section's requirements with the clarification that, for record purposes, only the access of personnel without key cards into indoor storage areas shall be recorded. Unloading or pickup of material shall not be considered "access," nor shall inspection by NRC or other regulatory agents, nor shall tours by nonlicensee employees who are accompanied by licensee employees. |

Table 1
Regulatory Commitments

E. Regulatory Guide 1.38 (continued)

Clarification/Exception

- | | |
|--|--|
| 16. ANSI N45.2.2
Section 7.3 | Re-rating hoisting equipment will be considered only when necessary. Prior to performing any lift above the load rating, the equipment manufacturer must be contacted for his approval and direction. The manufacturer must be requested to supply a document granting approval for a limited number of lifts at the new rating and any restrictions involved, such as modifications to be made to the equipment and the test lift load. At all times, the codes governing re-rating of hoisting equipment must be observed. |
| 17. ANSI N45.2.2
Appendix (A-3)
Section A.3.4.1 | During printing of the standard, a transposition occurred between the last sentence of A3.4.1(4) and A3.4.1(5). The correct requirements are: (4) "However, preservatives for inaccessible inside surfaces of pumps, valves and pipe systems containing reactor coolant water shall be the water flushable type." (5) "The name of the preservative used shall be indicated to facilitate touch up." |
| 18. ANSI N45.2.2
Appendix (A-3)
Section A.3.4.2 | There may be cases involving large or complex shaped items for which an inert or dry air purge is provided, rather than a static gas blanket, in order to provide adequate protection due to difficulty of providing a leak proof barrier. In these cases, a positive pressure purge flow may be utilized as an alternate to a leakproof barrier. |
| 19. ANSI N45.2.2
Appendix (A-3)
Section A.3.5.1 | Instead of the requirement for non-metallic plugs and caps to be brightly colored, non-metallic plugs and caps shall be an appropriately visible color. |
| 20. ANSI N45.2.2
Appendix (A-3)
Section A.3.5.2 | This paragraph limits halogen and sulfur content of tape. The use of tapes containing greater amounts of halogens than those identified will be allowed after appropriate evaluation; however, the quantities shall not be such that harmful concentrations could be leached or released by breakdown of the compounds under expected environmental conditions. |

Table 1
Regulatory Commitments

E. Regulatory Guide 1.38 (continued)

Clarification/Exception

- | | |
|--|--|
| 21. ANSI N45.2.2
Appendix (A-3)
Section A.3.7.1 | In lieu of A.3.7.1(3) and (4), IPEC will comply with the following: Fiberboard boxes shall be securely closed either with a water resistant adhesive applied to the entire area of contact between the flaps, or all seams and joints shall be sealed with not less than 2-inch wide, water resistant tape. |
| 22. ANSI N45.2.2
Appendix (A-3)
Section A.3.9 | Instead of the requirement that container markings appear on a minimum of two sides of the container, preferably on one side and one end, IPEC will comply with the following: Containers are adequately marked for storage, identification, and retrieval. Multiple marking requirements are imposed, where necessary. |
| 23. ANSI N45.2.2,
Appendix (A-3)
Section A.3.9 | Instead of the requirement that container markings be no less than 3/4" high, IPEC will comply with the following: Container markings are of a size which permits easy recognition. |
| 24. ANSI N45.2.2,
Appendix (A-3)
Section A.3.9 | Instead of the specific container marking requirements, IPEC will comply with the following: The information required in container marking is evaluated on a case-by-case basis. |
| 25. ANSI N45.2.2
Appendix (A-3)
Section A.3.9 | The last paragraph of A.3.9 could be interpreted as prohibiting any direct marking on bare austenitic stainless steel and nickel alloy metal surfaces. As a alternate, paragraphs A.3.9.(1) and (2) may be used to control marking on the surface of austenitic stainless steels and nickel base alloys based on documented engineering evaluations. Contamination levels are controlled such that the material used for marking is not detrimental to the materials marked. |

Table 1
Regulatory Commitments

F. Regulatory Guide 1.39 Revision 2, dated September 1977

Clarification/Exception

- | | |
|----------------------------------|---|
| 1. ANSI N45.2.3
General | The ANSI five level zone designation system may not be utilized, but the intent of the standard will be met for the areas of housekeeping, plant and personnel safety, and fire protection. |
| 2. ANSI N45.2.3
Section 3.1 | This section is not applicable. |
| 3. ANSI N45.2.3
Section 3.2.3 | The Fire Protection Program shall be used in lieu of the general requirements in this section. |
| 4. ANSI N45.2.3
Section 3.3 | The first paragraph is not applicable to the operations phase. |
| 5. ANSI N45.2.3
Section 3.4 | This section is not applicable. |
| 6. ANSI N45.2.3
Section 3.5 | Subparagraph (1) is not applicable to the operations phase; (2), (3), and (4) will be implemented. |

Table 1
Regulatory Commitments

G. Regulatory Guide 1.58 Revision 1, dated September 1980

Clarification/Exception

- | | |
|--------------------------------|---|
| 1. General | IPEC may choose not to apply the requirements of this guide to those personnel who are involved in day-to-day operations, surveillance, maintenance, and certain technical and support services whose qualifications are controlled by the Technical Specifications or other QAPM commitment requirements. |
| 2. General | General certification of inspectors in accordance with this guide is approved by a manager responsible for quality. |
| 3. ANSI N45.2.6
Section 1.2 | Paragraph 4 requires that the standard be imposed on personnel other than licensee employees; the applicability of this standard to suppliers will be documented and applied, as appropriate, in procurement documents for such suppliers. |
| 4. ANSI N45.2.6
Section 1.2 | The requirements of this standard do not apply to personnel using later editions of ASNT contained within 10 CFR 50.55a approved ASME editions or addenda. |
| 5. ANSI N45.2.6
Section 2.3 | This section requires, in part, that any person who has not performed inspection, examination, or testing activities in his qualified area for a period of one year shall be re-evaluated. A 90-day grace period may be applied to this activity. For activities deferred in accordance with the 90-day grace period, the next performance due date will be based on their originally scheduled date. |
| 6. ANSI N45.2.6
Section 2.5 | This section's requirements are clarified with the stipulation that, where no special physical characteristics are required, none will be specified. The converse is also true: if no special physical requirements are stipulated, none are considered necessary. |
| 7. ANSI N45.2.6
Section 3.5 | IPEC reserves the right to use personnel who do not meet these experience requirements but have shown capability through training and testing or capability demonstration. |

Table 1 Regulatory Commitments

H. Regulatory Guide 1.64 Revision 2, dated June 1976

Clarification/Exception

1. ANSI N45.2.11
Section 5.2.4 For the documentation of inter-disciplinary design reviews, there must be documented evidence of the acceptability of design documents, or portions thereof, prior to release (material, stress, physics, mechanical, electrical, concrete, etc.). Indication of the positive concurrence of those who determine the design acceptability relative to their respective disciplinary area of concern should be on the document or on a separate form traceable to the document. A document that indicates the reviewer's comments need not be retained.

Table 1
Regulatory Commitments

I. Regulatory Guide 1.74, dated February 1974

Clarification/Exception

- | | |
|-----------------------------|---|
| 1. ANSI N45.2.10, Section 2 | Definitions for “Certificate of Conformance” and “Certificate of Compliance” will be exchanged based upon the guidance in ANSI N45.2.13 Section 10.2. |
|-----------------------------|---|

Table 1
Regulatory Commitments

J. Regulatory Guide 1.88 Revision 2, dated October 1976

Clarification/Exception

1. RG 1.88
Section C

IPEC will meet the requirements of NFPA No. 232-1975, "Standards for the Protection of Records", as allowed by the Regulatory Guide 1.88 – 1976 or ANSI/ ASME NQA-1-1983, Supplement 17S-1 Section 4.4 in lieu of N45.2.9 Section 5.6 or the discussions in this section for Records Storage Facilities with the clarification that penetrations providing fire protection, lighting, temperature/humidity control, or communications are acceptable as long as the penetration maintains the required fire resistance.

Except that as an alternate to these requirements non-permanent records (e.g., 3 years retention records) may be stored and maintained by the originating organization in one-hour minimum fire rated file cabinets located in environmentally controlled facilities that have suitable fire protection. Suitable fire protection is provided by either an automatic sprinkler system or a combination of two or more of the following: 1) automatic fire alarms, 2) hose stations, or 3) portable extinguishers.
2. ANSI N45.2.9
Section 1.4

Documents are considered completed when they are "completely filled out" (i.e., when sufficient information is recorded to fulfill the record's intended purpose) and the adequacy of the document (e.g., legibility) has been accepted by the document control or records management organizations or designees.
3. ANSI N45.2.9
Section 3.2.2

The requirements for an index discussed in this section are considered to only require that a method of retrieving the record and controlling the identified information be established.
4. ANSI N45.2.9
Section 5.4.2

Instead of the requirements of this section, IPEC will comply with the following: Records shall not be stored loosely. They shall be secured for storage in file cabinets or on shelving in containers. Methods other than binders, folders, or envelopes (e.g., dividers or boxes) may be used to organize records for storage. This section is not applicable to special processed records controlled in accordance with Section 5.4.3 when the requirements of this section are not appropriate for the record type.

Table 1
Regulatory Commitments

J. Regulatory Guide 1.88 (continued)

Clarification/Exception

- | | |
|----------------------------------|---|
| 5. ANSI N45.2.9
Section 5.4.3 | Instead of the requirements of this section, IPEC will comply with the following: Provisions shall be made for special processed records such as radiographs, photographs, negatives, microfilm, and magnetic media to prevent damage from excessive light, stacking, electromagnetic fields, temperature, and humidity as appropriate to the record type with appropriate consideration of packaging and storing recommendations as provided by the manufacturer of these materials. |
| 6. ANSI N45.2.9
Section 5.5 | Routine general office and nuclear site security systems and access controls are provided; no special security systems are required to be established for record storage areas. |
| 7. ANSI N45.2.9
Section 5.6 | IPEC will meet the requirements of NFPA No. 232 – 1975, “Standards for the Protection of Records”, as allowed by the Regulatory Guide 1.88 – 1976 or ANSI/ASME NQA-1-1983, Supplement 17S-1 Section 4.4 in lieu of this section for Records Storage Facilities with the clarification that penetrations providing fire protection, lighting, temperature/humidity control, or communications are acceptable as long as the penetration maintains the required fire resistance. |

Except that as an alternate to these requirements non-permanent records (e.g., 3 years retention records) may be stored and maintained by the originating organization in one-hour minimum fire rated file cabinets located in environmentally controlled facilities that have suitable fire protection. Suitable fire protection is provided by either an automatic sprinkler system or a combination of two or more of the following: 1) automatic fire alarms, 2) hose stations, or 3) portable extinguishers.

Table 1
Regulatory Commitments

K. Regulatory Guide 1.94 Revision 1, dated April 1976

Clarification/Exception

- | | |
|----------------------------------|---|
| 1. ANSI N45.2.5
Section 2.5.2 | The last sentence requires that all items inspected with maintenance and test equipment, which is found to be out of calibration, shall be considered unacceptable. IPEC will comply with QAPM Section B.9.g as an alternate. QAPM Section B.9.g requires an evaluation to determine the validity of previous measurements. |
| 2. ANSI N45.2.5
Section 4.5 | When using ACI-305-72 and ACI-306-66, IPEC may apply the following requirements: |

PLACING TEMPERATURES OF CONCRETE

A. During hot weather concreting, placing temperatures of concrete will be limited to the following: 1) Concrete members less than 3 feet in least dimension will not exceed 90°F; 2) Concrete members from 3 feet to 6 feet in least dimension will not exceed 70°F; and 3) Concrete members more than 6 feet in least dimension will have placing temperature as near 50°F as can be obtained by use of ice as necessary up to 100 percent of adding mixing water; and by shading aggregate and sprinkling the coarse aggregate the day it is to be used. Care will be taken so that no unmelted ice remains in the concrete at the end of the mixing period.

B. During cold weather concreting: In heating the water and aggregate, live steam to heat the fine and coarse aggregate shall not be used. The permissible range for concrete temperature shall be as follows: 1) Sections less than 3 feet in least dimensions 55°F to 75°F; and 2) Mass concrete 3 feet or more in least dimension 45°F to 65°F. The mixing water and aggregate will be purchased as required. The materials will be free of ice, snow and frozen lumps before they enter the mixer.

- | | |
|----------------------------|---|
| 3. ANSI N45.2.5
Table B | In accordance with ASME QA92-003 (ASME NQA-1 Interpretations), testing of non-shrink grout does not fall under the jurisdiction of N45.2.5 Table B; but the designer is responsible for identifying necessary testing and frequency requirements. |
|----------------------------|---|

Table 1
Regulatory Commitments

K. Regulatory Guide 1.94 (continued)

Clarification/Exception

**4. ANSI N45.2.5
Section 4.8**

For the performance of correlation tests, the requirements of this standard may be modified as discussed below:

Table B, REINFORCING STEEL: In-process testing of reinforcing steel will include the mechanical properties of yield strength, tensile strength and percent elongation on full size specimens for each bar size for each 50 tons or fraction thereof from each mill heat. Bend tests are performed during material qualification testing only, except as noted below for bar sizes #14 through #18.

Table A, "Required Qualification Tests" as applied to reinforcing steel will include bend tests as required by ASTM A615 and summarized in the following: a) For bar sizes #3 through #11, one full size specimen from largest bar size rolled from each mill heat, unless material from one heat differs by three or more designation numbers. When this occurs, one bend test shall be made from both the highest and lowest designation number of the deformed bars rolled; b) For bar sizes #14 through #18, Supplementary Requirements S1 of ASTM A615 will be applied, i.e., one fullsize specimen for each bar size for each mill heat. If supplementary requirements are not followed for mill tests, they will be applied as in-process tests.

In-process test specimens may be selected at the rebar fabrication shop, prior to start of fabrication of the rebar from the heat or fraction thereof represented by the test specimen.

Acceptance criteria for any failed test (qualifications as well as in-process) may be the same as that for tensile tests specified in Subarticle CC-2331.2 of ASME Section III, Div. 2 Code (1975). This states that if a test specimen fails to meet the specified strength requirements, two (2) additional specimens from the same heat and of the same bar size would be tested, and if either of the two additional specimens fails to meet the specified strength requirements, the material represented by the tests would be rejected for the specified use. Alternative use of rejected material under strict control may be subject to evaluation by engineering.

Table 1
Regulatory Commitments

K. Regulatory Guide 1.94 (continued)

Clarification/Exception

- | | |
|---------------------------------------|---|
| 5. ANSI N45.2.5
Section 4.9 | IPEC may interpret the terms "horizontal, vertical and diagonal bars" to apply respectively to the following types of splice positions: a. Horizontal, including 10° to horizontal; b. Vertical, including 10° to vertical; and c. 45° angle, including 10° to 80° angle. The words "splicing crew" are interpreted to refer to all project members that are actively engaged in preparing and assembling cadweld mechanical splices at the final splice location. Separate test cycles will be established for each bar size and each splice position. |
| 6. ANSI N45.2.5
Section 5.5 | IPEC will comply with inspection requirements of the applicable welding codes and any exceptions instead of this section. |

Table 1
Regulatory Commitments

L. Regulatory Guide 1.116 Revision 0-R, dated June 1976

Clarification/Exception

- | | |
|------------------------------|---|
| 1. ANSI N45.2.8
Section 3 | Documented routine inspections and audits of the storage area may be performed instead of the requirements of this section. |
|------------------------------|---|

Table 1
Regulatory Commitments

M. Regulatory Guide 1.123 Revision 1, dated July 1977

Clarification/Exception

- | | |
|-----------------------------------|--|
| 1. RG 1.123
Paragraph C.6.e | This paragraph shall be implemented as originally written in N45.2.13 (i.e., with the verb "should" instead of the verb "shall"). IPEC retains the ultimate responsibility for performance of purchased equipment. The appropriate engineering discipline will exercise this management/engineering prerogative with respect to the final decision on post installation test requirements. |
| 2. ANSI N45.2.13
Section 1.2.2 | Item c is an option which may be used to assure quality; however, any option given in 10 CFR 50 Appendix B, Criterion VII as implemented by the QAPM may also be used. |
| 3. ANSI N45.2.13
Section 1.3 | Instead of the definition provided for QA Program Requirements, IPEC will comply with the following: "Those individual requirements of the QAPM which, when invoked in total or in part, establish quality assurance program requirements for the activity being controlled. Although not specifically used in the QAPM, ANSI N45.2 may be imposed upon suppliers." |
| 4. ANSI N45.2.13
Section 3.1 | The "same degree of control" is stipulated to mean "equivalent level of review and approval." The changed document may not always be reviewed by the originator; however, at least an equivalent level of management/supervision shall review and approve any changes. |
| 5. ANSI N45.2.13
Section 3.1 | Changes to procurement documents which are changes in quantity, estimated price, cost codes, taxes, format or editorial changes that do not affect the quality of the item or service do not require an equivalent level of review and approval as the original document. |

Table 1
Regulatory Commitments

M. Regulatory Guide 1.123 (continued)

Clarification/Exception

5a. ANSI N45.2.13 Section 3.2	<p>When purchasing commercial-grade (as defined in 10 CFR 21) calibration services from NVLAP or A2LA accredited calibration laboratories, procurement documents are not required to impose a quality assurance program consistent with ANSI N45.2-1971. In such cases, accreditation may be accepted in lieu of the Purchaser imposing a QA Program consistent with ANSI N45.2-1971, provided all the following are met:</p> <ul style="list-style-type: none">• The accreditation is to ANSI/ISO/IEC 17025.• The accrediting body is either NVLAP A2LA.• The published scope of accreditation for the calibration laboratory covers the needed measurement parameters, ranges, and uncertainties.• The purchase documents require calibration/report to include identification of the laboratory equipment/standards used.• The purchase documents require reporting as-found calibration data when calibrated items are found to be out-of-tolerance.
6. ANSI N45.2.13 Section 3.4	The requirements of the QAPM will be implemented instead of this section.
7. ANSI N45.2.13 Section 4.2	Supplier evaluations may be performed any time prior to placing the purchased item in service.
8. ANSI N45.2.13 Section 8.2 Item b	Non-conformance notices for conditions described in this section are only required to be submitted to IPEC when the non-conformance could adversely affect the end use of an item relative to safety, interchangeability, operability, reliability, integrity or maintainability.

Table 1

Regulatory Commitments

M. Regulatory Guide 1.123 (continued)

Clarification/Exception

- | | |
|---|---|
| 9. ANSI N45.2.13
Section 10.2
Item d | The section states that the certificate should be attested to by a person who is responsible for this QA function whose function and position are described in the Purchaser's/Supplier's QA program. As an alternate to this requirement, IPEC will use the following: "The person attesting to a certificate shall be an authorized and responsible employee of the supplier, and shall be identified by the supplier." |
|---|---|

Table 1
Regulatory Commitments

N. Regulatory Guide 1.144 Revision 1, dated September 1980

Clarification/Exception

- | | |
|----------------------------------|--|
| 1. RG 1.144
Section C.3.a.(2) | This section is not applicable. |
| 2. RG 1.144
Section C.3.b.(2) | In addition to the requirements of this section, previously evaluated and approved active suppliers for which auditing is not the selected method of source verification should be evaluated concurrent with the award of a contract. Regardless of the evaluation results, active suppliers (except those excluded under C.3.b(1)) are source verified (audit, surveillance or inspection) within two years prior to award of a contract or have source verification performed. Inactive suppliers are evaluated prior to supplying items or services. An audit shall be conducted if required to determine the acceptability of procured items or services (i.e., acceptability cannot be determined by receipt inspection or another method allowable under 10 CFR 50 Appendix B, Criterion VII). |
| 3. RG 1.144
Section C.3.b.(2) | This section requires that supplier audits be performed on a triennial basis. A grace period not to exceed 25% for audit interval may be applied to this activity. For activities deferred in accordance with the 25% grace period, the next performance date will be based on their originally scheduled date. A total combined time interval for any three consecutive inspection or audit intervals should not exceed 3.25 times the specified inspection or audit interval. |
| 4. RG 1.144
Section C.3.b.(2) | Instead of the annual documented evaluation of suppliers discussed in this section, an ongoing evaluation of supplier performance is conducted which takes into account, where applicable, the other considerations of this section and paragraph of the Regulatory Guide. |

Table 1
Regulatory Commitments

N. Regulatory Guide 1.144 (continued)

Clarification/Exception

- | | |
|--|--|
| 4a. RG 1.144
Section C.3.b.(2) | For suppliers of commercial-grade (as defined in 10 CFR 21) calibration services with accreditation by NVLAP or A2LA, a documented review of the supplier's accreditation by the purchaser may be used in lieu of performing an audit, accepting an audit by another licensee, performing a commercial-grade survey, inspecting or testing following delivery, or performing in-process surveillances during performance of the service. This review shall include, at a minimum, verification of all the following: <ul style="list-style-type: none">• The accreditation is to ANSI/ISO/IEC 17025.• The accrediting body is either NVLAP A2LA.• The published scope of accreditation for the calibration laboratory covers the needed measurement parameters, ranges, and uncertainties. |
| 5. ANSI N45.2.12
Section 4.3.1 | Pre-audit and post-audit conferences may be fulfilled by a variety of communications, such as telephone conversation. |
| 6. ANSI N45.2.12
Section 4.3.1 | Pre-audit and post-audit conferences are only held when deemed necessary by quality assurance or when requested by the audited organization. |
| 7. ANSI N45.2.12
Section 4.3.2.2 | This subsection could be interpreted to limit auditors to the review of only objective evidence; sometimes and for some program elements, no objective evidence may be available. IPEC will comply with an alternate sentence which reads: "When available, objective evidence shall be examined for compliance with QAPM requirements. If subjective evidence is used (e.g., personnel interviews) then the audit report must indicate how the evidence was obtained." |

Table 1
Regulatory Commitments

N. Regulatory Guide 1.144 (continued)

Clarification/Exception

- | | |
|---|--|
| 8. ANSI N45.2.12
Section 4.3.3 | Pre-audit and post-audit conferences are only held when deemed necessary by quality assurance or when requested by the audited organization. |
| 9. ANSI N45.2.12
Section 4.3.3 | Pre-audit and post-audit conferences may be fulfilled by a variety of communications, such as telephone conversation. |
| 10. ANSI N45.2.12
Section 4.4 | Instead of the last sentence of the last paragraph of the section, IPEC will comply with the following: The audit report shall be issued within thirty working days after the last day of the audit. The last day of an audit shall be considered to be the day of the post-audit conference. If a post-audit conference is not held because it was deemed unnecessary, the last day of the audit shall be considered to be the date the post-audit conference was deemed unnecessary as documented in the audit report. |
| 11. ANSI N45.2.12
Section 4.5.1 | The QAPM Section A.6 corrective action program may be used instead of these requirements as long as the appropriate time limits are applied to significant conditions adverse to quality. Also, no additional documentation is necessary if needed corrective actions are taken and verified prior to audit report issuance. |

Table 1
Regulatory Commitments

O. Regulatory Guide 1.146 Revision 0, dated August 1980

Clarification/Exception

- | | |
|--|--|
| 1. ANSI N45.2.23
Section 2.3.1.3 | Holders of NRC-issued Reactor Operator/Senior Reactor Operator Licenses comply with the requirements of this section and may be awarded two credits. |
| 2. ANSI N45.2.23
Section 2.3.4 | Prospective lead auditors shall demonstrate their ability to effectively implement the audit process and lead an audit team. They shall have participated in at least one audit within the year preceding the individual's effective date of qualification. Upon successful demonstration of the ability to effectively lead audits, licensee management may designate a prospective lead auditor as a "lead auditor". |
| 3. ANSI N45.2.23
Sections 3.2 and
5.3 | These sections require that an annual assessment be performed of each lead auditor's qualification and that each lead auditor's records be updated annually. A 90-day grace period may be applied to these activities. For activities deferred in accordance with the 90-day grace period, the next performance due date will be based on their originally scheduled date. |