



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION III
2443 WARRENVILLE ROAD, SUITE 210
LISLE, ILLINOIS 60532-4352

June 4, 2021

Mr. Terry Brown
Site Vice President
Energy Harbor Nuclear Corp.
Davis-Besse Nuclear Power Station
5501 N. State Rte. 2, Mail Stop A-DB-3080
Oak Harbor, OH 43449-9760

SUBJECT: INFORMATION REQUEST TO SUPPORT UPCOMING PROBLEM
IDENTIFICATION AND RESOLUTION (PI&R) INSPECTION AT
DAVIS-BESSE NUCLEAR POWER STATION

This letter is to request information to support our scheduled problem identification and resolution (PI&R) inspection beginning August 2, 2021, at Davis-Besse Nuclear Power Station. This inspection will be performed in accordance with the NRC baseline Inspection Procedure 71152.

Experience has shown that these inspections can be extremely resource intensive both for the NRC inspectors and the utility staff. In order to minimize the impact that the inspection has on the site and to ensure a productive inspection, we have enclosed a list of documents required for the inspection.

The documents requested are copies of condition reports and lists of information necessary to ensure the inspection team is adequately prepared for the inspection. The information requested prior to the inspection may be provided in electronic format by either CD, DVD, or a file-sharing website and should be provided for NRC review by July 21, 2021. Mr. Roy Elliott, the Lead Inspector, will contact your staff to determine the best method of providing the requested information.

If there are any questions about the material requested, or the inspection in general, please contact Mr. Roy Elliott at 630-829-9588 or Roy.Elliott@nrc.gov.

This letter does not contain new or amended information collection requirements subject to the Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.). Existing information collection requirements were approved by the Office of Management and Budget, Control Number 3150-0011.

The NRC may not conduct or sponsor, and a person is not required to respond to, a request for information or an information collection requirement unless the requesting document displays a currently valid Office of Management and Budget control number.

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

Sincerely,

/RA/

Billy Dickson, Chief
Branch 2
Division of Reactor Projects

Docket No. 50-346 and 72-014
License No. NPF-3

Enclosure:
Requested Information to Support PI&R
Inspection

cc w/encl: Distribution via LISTSERV®

Letter to Terry Brown from Billy Dickson dated June 4, 2021.

SUBJECT: INFORMATION REQUEST TO SUPPORT UPCOMING PROBLEM
IDENTIFICATION AND RESOLUTION (PI&R) INSPECTION AT
DAVIS-BESSE NUCLEAR POWER STATION

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OFFICE	RIII		RIII				
NAME	RRuiz:ve via email		BDickson via email				
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OFFICIAL RECORD COPY

Requested Information to Support

Problem Identification and Resolution (PI&R) Inspection

Inspection Report 05000346/2021010

Please provide the information, if not provided via an accessible file-sharing website, on a disc (one for the team lead, one for the Resident Inspector Office, and one for each of the two other inspectors), if possible. Unless otherwise specified, the time frame for requested information is for the period of January 1, 2019 through the time the data request is answered. For requested lists, please provide the information in a sortable format such as an Excel spreadsheet, if possible. If lists are provided in a sortable format, the sort preference in the following items is not required as long as all of the requested information is provided.

In addition, inspectors will require computer access to the corrective action program (CAP) database while on site and, if possible, internet service and a printer.

PROGRAM DOCUMENTS

1. A current *copy* of administrative procedure(s) for the corrective action program (CAP), quality assurance audit program, self-assessment program, corrective action effectiveness review program, trending program, industry operating experience review program, and top-level documents for the work control programs, work scheduling programs, and aging management program(s). Also, include a *copy* of the current top-level QA program/QA topical report document.
2. A current *copy* of the Employee Concerns Program/Ombudsman administrative procedure(s).
3. Description of any substantive changes made to the corrective action program philosophy or operation since the last biennial PI&R Inspection in July 2019. Please include with each listed substantive change the effective date of the change. Administrative and non-substantive changes do not need to be listed.

ASSESSMENTS

4. A *copy* of Quality Assurance (QA) audits of the CAP and, if done, audits of the QA program.
5. A list of all other QA audits completed with a brief description of areas audited. Indicate where findings requiring corrective action were identified.
6. A *copy* of completed assessments of the CAP program, the QA program, and the self-assessment program.
7. A *copy* of your schedule for future assessments of the CAP and QA programs out to no more than two years.
8. A list of all other self-assessments completed with a brief description. Indicate which assessments resulted in condition reports (CRs) for adverse findings.

Enclosure

9. A list of CRs written for findings or concerns identified in self-assessments and audits that required follow-up action. Include a short description of the finding, its status, and include a cross-reference to the audit or self-assessment number.

CORRECTIVE ACTION DOCUMENTS

10. A *copy* of any completed root cause evaluations with a brief description of the issue. Provide status of any actions developed as part of the evaluations and a reference, if not part of the root cause package, to the documents and/or CRs directing and tracking the actions.
11. A list of all other causal evaluations completed with a brief description of the issue. Provide status of any actions developed as part of the evaluations and a reference, if not part of the evaluation package, to the documents and/or CRs directing and tracking the actions. Please sort by type of causal evaluation.
12. A list of all open CRs (including any outside of the default January 1, 2019 date range) sorted by significance level and then initiation date. Include each report's identification number, the date initiated, a brief description/title of the issue, system affected if any, significance level, priority level, assigned organization, and anticipated completion date, if available. Please indicate if the CR was associated with refueling outage activities.
13. A list of CRs closed, sorted by significance level and then initiation date. Include each document's identification number, a brief description/title, the significance level, the priority level, the date initiated and closed, assigned organization, system affected, and any cause codes assigned.
14. A list of CRs generated by the corporate office that involve or affect Davis-Besse Nuclear Power Station operation, sorted by significance level. Include the date initiated, a brief description/title of the issue, other site(s) affected, system affected, significance level, status, assigned organization, and closure date or anticipated completion date, if available.
15. A list of completed effectiveness reviews with a brief description of the results of those reviews. Include a cross-reference to the CR/corrective action/action item number for which the effectiveness review was conducted and, if applicable, tracking numbers for any additional follow-up actions.
16. A list of CRs initiated for identified inadequate or ineffective corrective or remedial actions. Include the date initiated, a brief description, status, significance level of the issue, system affected, assigned organization, priority level to correct, completion/closure date or, if applicable, anticipated completion date, if available. Include a cross-reference to the CR or evaluation that generated the original corrective action.
17. A *copy* of any performance reports or indicators used to track the corrective action program effectiveness since 2019. The most recent data and end-of-year 2019 & 2020 data will suffice; monthly or quarterly reports are not required.

TRENDS

18. A list of initiated CRs that identify trends of conditions adverse to quality. Include the date initiated, a brief description, significance level, priority level for each item, and date closed or anticipated closure date.
19. *Copies* of any completed trend reports that are associated with overall CAP or Self-Assessment Program performance and/or effectiveness.

OPERATING EXPERIENCE

20. A *copy* of the most recent operating experience program effectiveness review and/or assessment/QA audit.
21. A list of operating experience documents reviewed (after initial preliminary screening) and any associated CRs. Please provide identification of the originating organization, the initiating organization's document/reference number, your identification number if different than the originators, a brief description/title of the issue, and status of the review and any developed follow-up actions. Indicate the initiation date and the closure date or the anticipated closure date if available.

SYSTEMS AND COMPONENTS

22. A list of the top ten risk significant systems and top ten risk significant components.
23. A list of operability determinations/evaluations. Include a brief description/title of the issue, date initiated, date closed or date anticipated to be closed. Include any operability evaluations that are still open (including any outside of the default January 1, 2019 date range)
24. A list of systems and components considered Maintenance Rule (a)(1) at any time since January 1, 2019. Provide *copies* of the applicable Maintenance Rule action plans for those systems and the status of those action plans. Include dates when system/components entered (a)(1) status and, if applicable, returned to (a)(2) status.
25. A list of test failures (In-Service Tests or Technical Specifications surveillances) with a brief description of component/system failed. Indicate if the failure was a maintenance preventable failure. Please also include any failures of maintenance and test equipment calibrations that necessitated a review of past surveillances and/or tests.
26. A list of temporary modifications with a brief description of the modification, installation date, and date closed or anticipated closure date. Please also include any open temporary modifications regardless of date of installation. Temporary modifications specific to a refueling outage that are no longer installed may be excluded.
27. A list of rework items and repeat failures. Include cross-references to applicable Work Orders and CRs.
28. A list of plant trips, unplanned downpowers (greater than 20 percent), unplanned LCO entries, and LERs, including dates of these events.

29. A list of open work orders/equipment work requests with a brief description. Identify the work order as outage or non-outage, the date of initiation and scheduled or anticipated closure date, if available. Provide an explanation of the classification scheme of work orders and the procedure governing the classification. Please indicate the classification of the work orders on the list. Work requests/work orders not associated with a degraded equipment condition (e.g. work orders for voluntary plant upgrades) may be excluded.
30. A *copy* of any trend reports for work orders including status of maintenance scheduling and deferrals. Provide the most recent trend reports and those that existed at the end-of-year 2019 & 2020; copies of monthly reports are not required. Include a *copy* of a recent (within two months of the data submittal) graph or document showing the status of work week planning of work activities.
31. A list of open procedure change requests showing initiation date, title of change or procedure title (whichever is more relevant), status, responsible department, procedure number, priority assigned, and your identification number. Please provide an explanation of your priority system for procedures and from that priority, if applicable, when the request might be completed.

SCWE

32. *Copy* of the results of safety culture and/or safety conscious work environment (SCWE) surveys or self-assessments. Include any organizational effectiveness surveys conducted by internal or external organizations. Include a listing of any action(s) resulting from the survey(s) and the status of the action(s).
33. A list of any CRs that were flagged for containing potential SCWE issues or case files of potential SCWE issues identified through alternate avenues, such as the employee concerns programs. If items are considered sensitive, in lieu of describing issue in the data package, provide a paper *copy* to the lead inspector at the start of the inspection and make documents available for physical review onsite.

REGULATORY ISSUES

34. Copies of all causal evaluations initiated to address adverse trends identified in the areas of human performance or safety culture.
35. *Copies* of CRs, investigations/evaluations (ACE/RCE/other), and corrective actions taken for issues identified in NRC findings documented in and since the first quarter of 2019. Identify the status of the associated corrective actions and any effectiveness reviews completed or scheduled as a result. Include a *copy* of effectiveness reviews that were done. Include a cross-reference to the NRC's inspection report item identification number.

ADMIN

36. A *copy* of the latest Davis-Besse organizational chart and phone listing.
37. A list of the dates, times, and locations (or web links/phone bridge info if done remotely) for all scheduled CAP meetings. Include any work order screening meetings. Please also provide the time and location (or web links/phone bridge info if done remotely) of work group morning briefings/meetings.

5-YEAR REVIEW

NOTE: Requests in Items 38 through 41, below, refer to items and reports associated with the backup Alternating Current power systems (including Emergency Diesel Generators, SBO Diesel, FLEX Diesel(s), and the Startup Transformer).

38. A spreadsheet or equivalent sortable list of CRs associated with the above listed systems going back to January 1, 2016. Please indicate in the list a descriptive title of the CR, status (e.g. open, closed, working, etc.), classification/priority, initiation date, closure date, number of action items and indication if any remain open.
39. A *copy* of site performance indicators (PIs) associated with the above listed areas going back to 2016. Only need to provide a *copy* of any end-of-year documents or data. Also include a *copy* of the latest PI data.
40. A *copy* of any System Health reports, or equivalent documents, for the above systems, as they were presented in the fourth quarter reports/end-of-year of each year starting in 2016 until the current date. Provide a *copy* of the most recent report, if possible.
41. A *copy* of any Maintenance Rule (a)(1) action plans with completion status for any in-scope SSCs associated with the above program, that were developed since January 1, 2016.

Documents requested to be available onsite during the inspection in either paper or electronic, with search capability (preferred) format:

- a. Updated Final Safety Analysis Report.
- b. Technical Specifications.
- c. Procedures and procedure index.
- d. Copies of any self-assessments and associated CRs generated in preparation for the inspection.
- e. A *copy* of the QA manual.
- f. A list of issues brought to the ECP/ombudsman and the actions taken for resolution.
- g. A list of the codes used in the CAP and Work Orders system(s).
- h. A *copy* of the latest independent/offsite organization review of safety culture/safety conscious work environment and organizational effectiveness and internal equivalent assessments if not provided as part of the requested data package.

Other:

On the first day of the inspection, or early on the second day, please provide the inspection team a briefing of your CAP including an overview of your actions, if any, associated with recent industry efforts to improve the efficiency of the CAP. Include your expectations for personnel using the CAP and how the work order system fits into the overall scheme for addressing identified issues. Also please demonstrate how to use a site computer to access CAP data and perform searches.

The lead inspector may also request to interview approximately 20 to 30 personnel, through various means to possibly include focus-groups of 4 to 8 individuals, to seek information about the plant's SCWE. The lead inspector will randomly choose, from your furnished organization charts, people he would like to interview and provide those names and groupings to you and ask you to set up times and locations. For this, the inspector will need access to organizations charts showing position titles and names. The inspector will provide his selections at least one day prior to a suggested interview date to allow alternate selectees as needed (due to leave or being on a backshift, etc.). The inspectors may request your assistance in setting up times and locations in such a manner as to maintain appropriate social distancing, e.g., conducting interviews from across a conference room table or in a spacious room such as a training room. Each interview session will last about 30 to 60 minutes; the inspector will ask you to schedule the interview sessions at least 90 minutes apart.

The inspector will ask you to refrain from debriefing personnel after the interviews; your briefing of personnel prior to the sessions is acceptable but not required. Also, other team members may be talking to personnel, at random, throughout the plant to solicit their perceptions of the site's SCWE and CAP effectiveness.