ENERGY*SOLUTIONS*

September 29, 2021 ES-2021-007

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

Subject: Resubmittal of Kewaunee Solutions Decommissioning Quality Assurance Program (DQAP), Revision 0

Kewaunee Power Station
NRC Docket No. 50-305
NRC License No. DPR-43

References:
1. Letter from Stoddard, D.G. (Dominion Energy Kewaunee, Inc.), and Robuck, K. W. (Energy*Solutions* LLC), "Application for Order Approving Transfer of Control of KPS License and Conforming License Amendments," dated May 10, 2021.
2. Letter from van Noordennen, Gerard P. (EnergySolutions), "Kewaunee Solutions Decommissioning Quality Assurance Program (DQAP), Revision 0," dated September 16, 2021.

Dominion Energy Kewaunee, Inc. (DEK) and Energy*Solutions*, LLC, (Energy*Solutions*) submitted an "Application for Order Approving Transfer of Control of KPS License and Conforming License Amendments" for Kewaunee Power Station (KPS) to the U. S. Nuclear Regulatory Commission (NRC) for review in a letter dated May 10, 2021 (Reference 1) (the "Application"). The Application stated Kewaunee Solutions would develop a Kewaunee Solutions Quality Assurance program for KPS that would comply with 10 CFR 50.54(a).

In a previous submittal, dated September 16, 2021 (Reference 2), Energy*Solutions* had inadvertently marked the DQAP as "Proprietary Information." This marking was removed as a minor change in accordance with the applicable Energy*Solutions* procedure, without advancing the revision level of the DQAP.

The purpose of this letter is to resubmit Revision 0 of the Kewaunee Solutions Decommissioning Quality Assurance Program (DQAP) for NRC approval prior to implementation. This revision is reflective of the Application as it complies with 10 CFR 50.54(a). The DQAP would be implemented at the time of license transfer following NRC approval, or, in the alternative, a statement from the NRC that the requirements of 10 CFR 50.54(a) have been met.

Attachment 1 provides Revision 0 of the Kewaunee Solutions DQAP. Attachment 2 provides the 10 CFR 50.54(a) Assessment.

There are no regulatory commitments made in this submittal.

Q004
NRR

If the NRC has any questions, please contact me at 860-462-9707.

I declare under penalty of perjury that the foregoing is true and correct. Executed on the 29th day of September 2021.

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Attachments:

1. Kewaunee Solutions Decommissioning Quality Assurance Program (DQAP), Revision 0
2. 50.54(a) Assessment

Cc: w/ Enclosures

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ATTACHMENT 1

KEWAUNEE SOLUTIONS
DECOMMISSIONING QUALITY ASSURANCE PROGRAM

REVISION 0

KEWAUNEE POWER STATION

KEWAUNEE SOLUTIONS

Kewaunee Solutions
Decommissioning Quality Assurance Program
(DQAP)
Revision 0

QA Manager Prepared By:

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Sep 14 2021 6:57 PM

Anthony R. Bejma, Kewaunee Solutions QA Manager **Date**

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John Sauger, Energy*Solutions* President **Date**
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Kewaunee Solutions President Approval:

September 15, 2021

Ken Robuck, Kewaunee Solutions President **Date**

Introduction

On February 25, 2013 Dominion Energy Kewaunee (DEK) certifed to the Nuclear Regulatory Commission (NRC) that operations at Kewaunee Power Station (KPS) would permanenetly cease in accordance with 10 CFR 50.82(a)(1)(i). On May 14, 2013 DEK certified to the NRC that the fuel had been permanetly removed from the reactor vessel in accordance with 10 CFR 50.82(a)(1)(i). The transfer of all spent fuel from the spent fuel pool to the Independent Spent Fuel Storage Factility (ISFSI) was completed in 2017, and the facility was placed in the SAFSTOR condition.

On May 10, 2021 DEK and Energy*Solutions* submitted a request to the NRC to transfer control of the renewed facility operating license DPR-43 ("License") for KPS, as well as the 10 CFR 72.210 general license for the on-site ISFSI, from DEK's parent entity, Dominion Nuclear Projects, Inc. (Dominion), to Energy*Solutions* so as to implement the accelerated decommissioning of the KPS. This will include changing the plant status from SAFSTOR to DECON. Upon license transfer, the name of KPS Licensee will change to Kewaunee Solutions.

To address this changing environment at KPS, a Kewaunee Solutions Decommissioning Quality Assurance Program (DQAP) has been developed to support station activities and the operation of the Independent Spent Fuel Storage Installation (ISFSI).

The DQAP reflects the quality activities pertaining to a decommissioning nuclear site through compliance with established regulatory requirements set forth by the NRC. The DQAP ensures the protection of the public health and safety through performance-based assessments and compliance-based auditing utilizing implementing procedures and instructions. The DQAP describes the responsibilities for implementing important to safety requirements, establishing and maintaining the DQAP, and assessing the performance of activities subject to the DQAP. The implementation of the DQAP is executed through implementing procedures in a graded approach commensurate with the items' and activities' importance to safety.

The DQAP includes a general description of the organizational structure and functional responsibilities of station management regarding the implementation of important to safety activities and key facility activities at KPS. The DQAP also outlines the key responsibilities for the Quality Assurance (QA) staff and program expectations for the various station organizations. The DQAP satisfies the requirements of 10 CFR 50 Appendix B, *Quality Assurance Criteria for Nuclear Power Plants and Fuel Processing Plants*, 10 CFR 71, Subpart H, *Quality Assurance for Packaging and Transportation of Radioactive Material*, 10 CFR 72, Subpart G, *Quality Assurance for Independent Storage of Spent Nuclear Fuel and High-Level Radioactive Waste*. Additional regulatory commitments are listed within Appendix C of the DQAP.

The DQAP is considered a Quality Assurance Project Plan (QAPP) under the Energy*Solutions* QA Program (ES-QA-PG-001). The DQAP provides controls that are equivalent with the requirements of ES-QA-PG-001, and is subject to documented assessment versus future revisions to ES-QA-PG-001.

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1 ORGANIZATION

Kewaunee Solutions (KS) is responsible for the establishment and execution of the Quality Assurance Program for the Kewaunee Power Station (KPS). The KS organizational structure of functions involved with implementing the DQAP as well as associated interfaces, is described below. A high level organizational structure of functional areas involved is also presented in Appendix A. The titles of managers used in the DQAP are generic; their functional titles and their formal titles may vary. Actual reporting structure may include intermediate positions not shown on Appendix A. Unless otherwise specifically prohibited, responsibilities of managers as described in the DQAP may be delegated to, and performed by, other qualified individuals.

The ultimate responsibility for operation, maintenance, inspection, test, modification, decommissioning, and storage of spent fuel resides with the Kewaunee Solutions President. The President has corporate resposibility for overall plant nuclear safety and shall take any measures needed to ensure acceptable performance of the staff in operating, maintaining, and providing technical support to the plant to ensure safe management of nuclear fuel. The General Manager (GM) reports to the Kewaunee Solutions President, and has the overall responsibility for the establishment and execution of the DQAP.

Onsite and offsite organizations shall be established for decommissioning activities. The onsite and offsite organizations shall include the positions for activities affecting safety of the nuclear fuel.

Lines of authority, responsibility and communication shall be established and defined for the highest management levels through intermediate levels to include all organizational positions responsible for decommissioning activities. These relationships shall be documented and updated as appropriate, in the form of organization charts, functional descriptions of departmental responsibilities and relationships, and job descriptions for key personnel positions, or in equivalent forms of documentation.

Responsibilities

The authorities and duties of persons and organizations performing activities affecting the important to safety functions of the Structures, Systems, and Components (SSC) defined in Appendix B are established and delineated in writing. These activities include both the performing functions of attaining quality objectives and the QA functions.

The GM is responsible for spent fuel safety, decommissioning of the station and nuclear oversight. The DQAP is reviewed and approved by the Quality Assurance Manager (QAM), and the GM.

The GM shall be responsible for overall management of the KPS decommissioning and associated site support functions. The individual shall delegate in writing the succession to this responsibility during their absence.

The GM is responsible for apprising management of the effectiveness of the DQAP implementation and is the arbitrator for non-conformances of unusual complexity. The GM also directs actions to be taken based on reports and trending of quality issues submitted by the QAM. Direction for implementing the DQAP activities is provided by the GM through the QAM.

Management of line organizations at KPS are responsible to ensure that the quality of organizational work and activities meets the requirements set forth in the DQAP and KPS implementing procedures.

Quality Assurance

The QAM reports to the GM and shall not be assigned responsibilities that would prevent the required attention to important to safety matters. Although reporting to the GM with other line organizations, the QAM shall have the necessary independence from other line management to ensure effective oversight for all organizations. The QAM has the following responsibilities:

- Management of day-to-day oversight of implementation of the DQAP for all important to safety activities
- Authority and obligation to raise any conditions adverse to quality that are not otherwise effectively resolved via the KS Corrective Action Program to the GM for resolution
- Assuring important to safety activities at KPS are performed in accordance with implementing procedures
- Managing the performance of audits, surveillances, and inspections in order to verify that important to safety activities have been correctly performed
- Reporting on oversight activities to the GM
- Authority to stop work when quality is adversely affected

Quality Assurance (QA) personnel report directly to the QAM and implement the relevant provisions of the DQAP utilizing written implementing procedures. They perform independent oversight of line functions and activities. A member of the QA organization shall not perform oversight of activities for which the member has direct responsibility. Further, they have the responsibility and authority to stop work when quality is adversely affected and immediately raise concerns to the QAM.

QA personnel shall have sufficient authority and organizational freedom to identify any quality problems and to verify implementation of corrective actions. Additionally, QA personnel shall have direct access to appropriate levels of management necessary to perform their function and shall be independent from cost and schedule when opposed to quality and nuclear safety considerations.

The individuals who carry out radiation protection and quality assurance functions may report to the appropriate onsite manager; however, they shall have sufficient organizational freedom to ensure their ability to perform their assigned functions.

Station Management

The GM delegates to the KS management team the day-to-day responsibilities for the ISFSI and decommissioning. The GM has periodic meetings with the management team to review plans and progress and to address stakeholder, quality, and project management issues. The managers described below report to the GM.

The Decommissioning Plant Manager (DPM) is responsible for overall safety of plant operations and decommissioning site operations, including fire protection activities at the decommissioning site, and shall delegate in writing the succession to this position during their absence. The DPM shall approve, prior to implementation, each proposed test, experiment, or modification to systems or equipment that affect the safe storage of nuclear fuel, and shall have control over those onsite activities necessary for safe storage of the nuclear fuel. The DPM is responsible for implementing the Independent Safety Review (ISR) function in accordance with Appendix D.

The Radiation Protection Manager is responsible for all Radiation Protection (RP) program implementation activities, including RP operations, RP engineering and the as low as reasonably achievable (ALARA) Program.

The Engineering Manager is responsible for the engineering of ISFSI and decommissioning activities, and ensuring adequate technical review is applied to changes, tests and experiments. This includes engineering related to dry fuel storage of fuel / GTCC, as well as configuration control of the facility.

The Licensing Manager (LM) is responsible for the day-to-day licensing activities, interfaces with the Nuclear Regulatory Commission (NRC), and is the Single Point of Contact for licensing and regulatory matters and concerns. The LM is responsible for assessing DQAP changes for determining compliance with licensing basis requirements, and for managing submittals to the NRC.

The Waste Manager is responsible for implementing radioactive waste, hazardous waste, mixed waste activities, and waste shipments, including Low Level Radioactive Waste (LLRW) products and services scope provided to KS by Energy*Solutions* or other suppliers.

The ISFSI Manager is responsible for overseeing all ISFSI activities, including ISFSI Operations and Maintenance, ISFSI fire protection, Security Plans, and Emergency Plan.

Management may be comprised of on-site and off-site staff, and individuals may be responsible for more than one functional area. Although not required to be named as separate functional managers in the DQAP, implementing procedures shall clearly establish roles and responsibilities in the organization that include but are not limited to the following activities as they may apply to DQAP scope: Training, Final Status Survey (FSS), Procurement, Corrective Actions, Document Control and Records.

Delegation of Quality Assurance Work

KS may delegate the execution of portions of the work under the DQAP to others such as contractors, agents, or consultants; however, KS retains overall responsibility for those activities and the DQAP. Delegation is clearly identified in documentation and KS retains the right to verify compliance with KS quality and regulatory requirements applicable to that organization's QA Program.

Reporting

KS management is involved with QA matters on a continuing basis. Periodic reports summarizing the quality of KPS activities are reviewed and approved by the QAM. These reports contain status of program adherence to the DQAP, issues identified, unresolved items, and/or other items of interest. These reports are submitted to the GM and other KS management as deemed appropriate.

The GM shall periodically have an Independent Management Assessment (IMA) performed to evaluate the effectiveness of the DQAP, as described in Appendix D.

2 QUALITY ASSURANCE PROGRAM

The QA Program for the Kewaunee Power Station (KPS) is described in the DQAP. This DQAP provides control over important to safety structures, systems and compoenents (SSCs) and selected decommissioning related activities to an extent consistent with their importance to ensure safety and compliance as defined in procedures. The DQAP includes specific monitoring activities which are measured against acceptance criteria in a manner sufficient to provide KS management assurance that the important to safety activities are performed in an acceptable manner. The DQAP requirements apply to SSCs designated as important to safety defined in Appendix B.

The DQAP satisfies the requirements of 10 CFR 50 Appendix B, *Quality Assurance Criteria for Nuclear Power Plants and Fuel Processing Plants*; 10 CFR 71, *Subpart H, Quality Assurance for Packaging and Transportation of Radioactive Material*; 10 CFR 72, Subpart G, *Quality Assurance for Independent Storage of Spent Nuclear Fuel and High-Level Radioactive Waste.* Additional regulatory commitments are listed within Appendix C of the DQAP.

Implementation of the DQAP is controlled through separately issued implementing procedures, instructions, and drawings. Each organization is responsible for the establishment and implementation of procedures and instructions prescribing the important to safety activities for which they are responsible.

Important to safety activities shall be accomplished under suitably controlled conditions. Controlled conditions include the use of appropriate equipment; suitable environmental conditions for accomplishing the activity, such as adequate cleanliness; and assurance that all prerequisites for the given activity have been satisfied. The DQAP takes into account the need for special controls, processes, test equipment, tools, and skills to attain the required quality, and the need for verification of quality by inspection and test.

Changes to the DQAP will be implemented in accordance with 50.54(a)(3) and 10 CFR 71.106(b).

Program Control and Authority

KS Management is responsible for ensuring that the applicable portions of the DQAP are properly documented, approved, and implemented (with trained staff, necessary materials, and approved procedures available) before an activity within the scope of the DQAP is executed. Disputes arising between departments or organizations on QA matters that cannot be resolved at a lower level of management will be referred to the GM.

Additional requirements for specific programs are described in Appendix D, *Administrative Controls*.

Personnel Training and Qualifications

Individual managers are responsible for ensuring that personnel working under their cognizance are provided with the necessary indoctrination training and resources to accomplish assigned activities which fall under the scope of the DQAP.

Members of the KS staff (including audit and inspection personnel) shall have the appropriate qualifications necessary to perform their assigned duties defined in implementing procedures. These implementing procedures provide the criteria utilized for determining and assessing appropriate staff qualification. Additionally, Appendix D cites references that stipulate the use of specific industry standards addressing qualifications. Training programs are established and implemented to ensure that personnel achieve and maintain suitable proficiency. Personnel training and qualification records are maintained in accordance with approved procedures.

QA Lead Auditors are qualified and certified in accordance with approved procedures. Training methods, minimum experience requirements, and certification practices are in accordance with established procedures and based on criteria set forth in QA implementing procedures. Proficiency evaluations are performed and documented as defined in approved procedures.

Performance / Verification

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

b. Personnel performing independent 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.

3 DESIGN CONTROL

The program will ensure that the activities associated with the design of important to safety SSCs and modifications thereto, are executed in a planned, controlled, and orderly manner.

The program utilizes the guidance of NUREG/CR 6407 to classify sSSCs such that appropriate quality requirements are identified and documented on drawings, component lists, or procurement documents, as applicable.

The program includes provisions to control design inputs, processes, outputs, changes, interfaces, records, and organizational interfaces.

Design inputs (e.g., performance, conditions of the facility license, quality, and quality verification requirements) shall be correctly translated into design outputs (e.g., specifications, drawings, procedures, and instructions).

The final design output shall relate to the design input in sufficient detail to permit verification.

The design process shall ensure that materials, parts, equipment and processes are selected and independently verified consistent with their importance to safety to ensure they are suitable for their intended application.

Changes to final designs (including field changes and modifications) and dispositions of nonconforming items to either use-as-is or repair shall 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. The original design organizations for the ISFSI are identified in Appendix B. Subsequent changes to the original design can be made by KS as defined in the design control process.

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 shall be defined in procedures.

Design documentation and records, which provide evidence that the design and design verification process was performed in accordance with the DQAP, shall be collected, stored, and maintained in accordance with documented procedures. This documentation includes final design documents, such as drawings, specifications, and revisions thereto and documentation which identifies the important steps, including sources of design inputs that support the final design.

Design Verification

The program will verify the acceptability of design activities and documents for the design of items. The selection and incorporation of design inputs and processes, outputs and changes are verified.

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.

When a test program is used to verify the acceptability of a specific design feature, the test program will demonstrate acceptable performance under conditions that simulate the most adverse design conditions that are expected to be encountered.

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 important to safety function.

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 or manager may perform the design verification and controls for this are defined in approved procedures.

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 is identified, the verification is satisfactorily accomplished and the results are properly recorded.

4 PROCUREMENT DOCUMENT CONTROL

The program will ensure that purchased items and services are of acceptable quality.

The program includes provisions for evaluating prospective suppliers and ensuring that selected suppliers continue to provide acceptable products and services.

The program includes provisions for taking corrective action with suppliers (qualified or

otherwise) whose products and services are not considered acceptable.

The program includes provisions for source verification (inspection, audit, etc.) for accepting purchased items and services identified as important to safety when determined necessary.

The program includes provisions for invoking applicable technical, regulatory, administrative, and reporting requirements (e.g., specification, codes, standards, tests, inspections, special processes, records, certifications, 10 CFR 21) applicable to the procurement to be specified in procurements documents.

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.

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.

The procurement of components, including spare and replacement parts, is subject to quality and technical requirements suitable for their intended service.

The program includes provisions for the identification of critical characteristics and methods of acceptance for the dedication of a commercial grade item or service for its use in an important to safety function(s).

5 INSTRUCTIONS, PROCEDURES AND DRAWINGS

Measures are established to assure that quality activities are prescribed by and performed in accordance with documented instructions, procedures, or drawings. These instructions, procedures, and drawings include, as appropriate, quantitative or qualitative acceptance criteria for determining that activities have been satisfactorily accomplished. Controls are established which ensure that instructions, procedures, and drawings are current and accurately reflect the facility design and regulatory requirements.

Changes or deviations from established instructions, procedures, or drawings for SSCs and other quality activities that have current important to safety functions, require the same review and approval as the original document. Instructions, procedures, and drawings, including changes and deviations subject to the DQAP, shall be maintained as required by administrative procedures.

Administrative controls may be established that provide the methods by which temporary changes can be made to procedures which are approved, including the designation of persons authorized to approve such changes.

6 DOCUMENT CONTROL

The program will control the development, review, approval, issue, use, and revision of documents, as applicable.

The scope of the document control program includes, but is not limited to:

a. Safety Analysis Report(s);

b. NRC License Documents, including Technical Specifications;

c. Design Documents and Drawings;

d. Procurement Documents;

e. Procedures, Manuals, Plans, Directives, Policies, Instructions, etc., and;

f. Other documents as defined in procedures.

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.

Copies of controlled documents are distributed to and used by the person performing the activity.

The distribution of new and revised controlled documents is in accordance with procedures. Superseded documents are controlled to prevent inadvertent use.

7 CONTROL OF PURCHASED MATERIALS, EQUIPMENT AND SERVICES

The program will 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 quality of the item or service. Control of items and services for important to safety applications are clearly and adequately specified in procurement documents.

The program is executed in all phases of procurement. As necessary, this may require verification of activities of suppliers below the primary supplier of the item or service.

Procedures shall describe each organization's responsibilities for the control of purchased material, equipment, and services including the interfaces between all affected organizations.

Controls for the audits of suppliers providing important to safety items and services are provided for in Section 18.

Controls for the inspection (source verification/surveillance/inspection) of suppliers providing important to safety items and services are provided for in Section 10.

Suppliers on the Energy*Solutions* Approved Suppliers List may be added to the KS Approved Suppliers List.

KS considers that other 10 CFR 50 licensees, Authorized Nuclear Inspection Agencies, National Institute of Standards and Technology (NIST), or other State and Federal agencies which may provide items or services to the KPS facilities are not required to be evaluated or audited.

8 IDENTIFICATION AND CONTROL OF MATERIALS, PARTS AND COMPONENTS

The program will identify and control important to safety items to prevent the use of incorrect or defective items.

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.

9 CONTROL OF SPECIAL PROCESSES

This program will ensure that special processes identified as important to safety are properly controlled. The criteria that establish which processes are special are described in procedures. The following are examples of special processes:

a. Welding;

b. Heat treating;

c. NDE (Non-Destructive Examination);

d. Chemical cleaning; and

e. Unique fabricating or test processes which require in-process controls.

Special processes are accomplished by qualified personnel, using appropriate equipment, and procedures in accordance with applicable codes, standards, specifications, criteria, and other special requirements.

10 INSPECTION

The program will ensure inspections of important to safety activities are planned, executed and documented in order to verify conformance with instructions, procedures, and drawings for accomplishing the activity.

Provisions to ensure inspection planning is properly accomplished are to be established. Planning activities shall identify the characteristics and activities to be inspected, the inspection techniques, the acceptance criteria, and the organization responsible for performing the inspections.

Provisions to identify inspection hold points, beyond which work is not to proceed without the consent of the inspection organizations are to be defined.

Inspection results are to be documented by the inspector and reviewed by qualified personnel.

Unacceptable inspection results shall be evaluated and resolved in accordance with procedures.

Inspections are performed by qualified personnel other than those who performed or directly supervised the work inspected. While performing the inspection activity, inspectors functionally report to the QAM.

11 TEST CONTROL

The program will demonstrate that items will perform satisfactorily in service using approved test procedures.

The test control program includes, as appropriate, proof tests before installation, pre-operational tests, post-maintenance tests, post-modification tests, and operational tests.

Test procedures shall be developed which include:

a. Instructions and prerequisites to perform the test;

b. Use of proper test equipment;

c. Acceptance criteria; and

d. Mandatory inspections, as required.

Test results are evaluated and documented to assure that test objectives and inspection requirements have been satisfied.

Unacceptable test results shall be evaluated and documented for impact on safety and reportability.

12 CONTROL OF MEASURING AND TEST EQUIPMENT

The program will control the calibration, maintenance, and use of measuring and test equipment (M&TE) consistent with activities important to safety to ensure accuracy.

Calibration reference standards shall be based on traceability to nationally recognized standards. Where national standards do not exist, measuring and test equipment is calibrated against standards that have an accuracy of at least four (4) 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. Special calibration and control measures are not required when normal commercial practices provide adequate accuracy (e.g., rulers, tape measures, levels, and other such devices).

The types of equipment covered by the program (e.g., instruments, tools, gauges, and reference and transfer standards) are defined in procedures.

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, stability characteristics, and other conditions affecting its performance.

Measuring and test equipment is labeled, tagged, or otherwise controlled to indicate its traceability to calibration test data.

Measuring and test equipment found damaged or out of calibration is tagged or segregated. The acceptability shall be determined of items measured, inspected, or tested with a damaged or out-of-calibration device.

13 HANDLING, STORAGE AND SHIPPING

The program will control the handling, storage, shipping, cleaning, and preserving of items to ensure the items maintain acceptable quality.

Special protective measures (e.g., containers, shock absorbers, accelerometers, inert gas atmospheres, specific moisture content levels, and temperature levels, etc.) are specified and provided when required to maintain acceptable quality .

Specific procedures shall be developed and used for cleaning, handling, storage, packaging, shipping, and preserving items when required to maintain acceptable quality.

Items are marked and labeled during packaging, shipping, handling, and storage to identify, maintain, and preserve the item's integrity and identify the need for any special controls.

USNRC-Licensed Packages

KS shall meet the requirements of 10 CFR 71, Subpart H and 10 CFR 72, Subpart G and DOT 49 CFR for restrictions concerning handling, storage, and shipping of NRC Licensed packages, except as may be allowed by NRC and/or DOT exemptions granted for specialty packages.

Transportation cask handling and operation shall conform to the handling and operating procedure for each licensed cask.

Prior to the shipment of a transport cask, conditions of the NRC's Certificate of Compliance (specifications, tests, and inspections) shall be satisfied. Required shipping papers shall be prepared and shall accompany the shipment in accordance with regulatory requirements and approved procedures.

Established safety restrictions concerning handling, storage, and shipping shall be included in the handling and operating procedures for storage and transport casks.

14 INSPECTION, TEST, AND OPERATING STATUS

The program will ensure that required inspections and tests and the operating status of items important to safety 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. Operating status is identified by the use of tags, markings, stamps, or other suitable means.

Items whose required inspections and tests are incomplete or inconclusive may be released for further processing. Controls are provided in procedures for establishing limitations on the release, applying status indications, and documenting the basis for the conditional release of the item and any limitations.

The application and removal of inspection, test, and operating status indicators are controlled in accordance with procedures.

15 NONCONFORMING MATERIALS, PARTS OR COMPONENTS

KS establishes measures to control important to safety materials, parts, and components which do not conform to requirements. The measures used to control nonconforming materials, parts, and components are described by approved procedures.

Management at all levels and each individual working at the facility is responsible for promptly identifying and reporting the identification of nonconforming materials, parts, and components.

Interfaces with the Corrective Action Program described in Section 16 will be established to ensure the prompt identification, documentation, and correction of nonconforming materials, parts, and components installed in SSCs.

Nonconforming items are properly controlled by approved procedures describing the identification, documentation, segregation requirements, disposition, and notification to the affected organizations to prevent their inadvertent installation or use. Nonconforming items are reviewed and either accepted, rejected, repaired, or reworked in accordance with approved procedures.

16 CORRECTIVE ACTION

Each individual working at the facility is responsible for promptly identifying and reporting conditions adverse to quality. Management at all levels encourages the identification of conditions that are adverse to quality.

Significant conditions adverse to quality shall require cause determination, a corrective action that should prevent recurrence, and be documented and reported to appropriate levels of management. Follow-up action shall be taken to verify effective implementation of the required corrective actions to prevent recurrence and to verify that they are effectively implemented.

Specific responsibilities within the Corrective Action Program may be delegated, but KS maintains responsibility for the program's effectiveness.

Reports of conditions that are adverse to quality are analyzed to identify negative performance trends. Significant conditions adverse to quality and significant trends are reported to the appropriate levels of management.

17 QUALITY ASSURANCE RECORDS

The program will ensure that sufficient records of important to safety items and activities affecting quality (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 the completed work.

Controls for the administration, identification, receipt, storage, preservation, safekeeping, retrieval, and disposition of records are provided in procedures.

Management of the electronic storage of records will utilize the guidance provided in the following industry standards as described in approved procedures:

- NIRMA TG-11-1998 (reaffirmed - 2001), Authentication of Records and Media
- NIRMA TG-15-1998 (reaffirmed - 2001), Management of Electronic Records
- NIRMA TG-16-1998 (reaffirmed - 2001), Software Configuration Management and Quality Assurance
- NIRMA TG-21-1998 (reaffirmed - 2001), Required Records Protection, Disaster Recovery and Business Continuation

In an approval dated May 10, 2017, DEK was granted exemptions by the NRC to allow elimination of the requirement to maintain records that are no longer necessary due to the permanently defueled condition and decommissioning status of the KPS. The NRC granted DEK a partial exemption from the record keeping requirements of 10 CFR 50.71(c); 10 CFR Part 50, Appendix B, Criterion XVII; and 10 CFR 50.59(d)(3) for the KPS to advance the schedule to remove records associated with structures, systems, and components (SSCs) that have been or will be removed from NRC licensing basis documents by appropriate change mechanisms.

Records generated for SSCs that were once classified as safety-related or quality-related but no longer have a safety function do not need to be retained for purposes of the DQAP (but may need to be retained for other purposes, such as compliance with 10 CFR 50.75(g), other regulations, or for business reasons).

18 AUDITS

KS establishes measures for a system of planned and documented audits in order to verify compliance with all aspects of the DQAP, and determines the effective implementation of programs covered by the DQAP. QA internal and supplier audits are planned and performed by qualified auditors utilizing approved written procedures and/or checklists. External audits by licensees/utilities, Contractors, or Consultants acting for KS to satisfy KS audit requirements shall have the results evaluated by KS to ensure acceptability.

Lead Auditors shall have experience, training or qualifications commensurate with the scope and complexity of their audit responsibility. Individuals performing audits shall not have direct responsibilities in the areas being audited.

Scheduling, preparation, personnel selection, performance, reporting, response, follow-up, and records management for audits are performed in accordance with written procedures. Audit scopes and schedules are based upon the status of work progress, important to safety activities being performed, and regulatory requirements.

Internal audits for the DQAP shall continue a 24-month cycle with a 25% grace period, except as otherwise provided for below. Grace periods are not intended to be used repetitively, merely as an administrative convenience to extend audit intervals. Therefore, the next performance due date is based on the originally scheduled date (audit clock resets backwards).

Internal audit frequencies of well-established activities (i.e., those required by the DQAP to meet the criteria of 10 CFR 50, Appendix B, and conformance of facility operation to provisions of the Technical Specifications and applicable license conditions other than fire protection and security requirements) may be extended one year at a time beyond the two-year interval based on the results of an annual evaluation of the applicable functional area and objective evidence that the functional area activities are being satisfactorily accomplished. The evaluation shall include a detailed performance analysis of the functional area based upon applicable internal and external source data and due consideration of the impact of any functional area changes in responsibility, resources or management. However, the internal audit frequency interval shall not exceed a maximum of four years. If an adverse trend is identified in the applicable functional area, the extension of the internal audit frequency interval shall be rescinded and an audit scheduled as soon as practicable. In addition, the following applies:

- The next due date for an extended internal audit is two years from the date the audit was performed.
- A 90-day grace period may be applied to an extended internal audit interval. Grace periods are not intended to be used repetitively, merely as an administrative convenience to extend audit intervals. In this case, the next performance due date is based on the reset scheduled date (audit clock resets backwards).

When specific audits are identified as requiring a more frequent periodicity, the shortest periodicity will be adhered to for activities covered by those specific regulatory requirements. The frequency of internal audits will be prescribed by the site implementing procedures which govern the conduct of QA audits.

Surveillances may be performed and documented when it is determined advantageous to monitor or observe an item or activity to verify conformance. Surveillance should be documented in sufficient detail to identify the activity covered, identify individuals doing surveillance, and to document results and corrective measures necessary. Surveillance conducted by or under the direction of a Lead Auditor may be integrated into and credited toward required audit activities.

External audits of suppliers providing important to safety materials, parts, equipment, or services are scheduled and performed based on the importance of the activity and to confirm implementation of the supplier's QA Program at a frequency of not greater than three (3) years with a 90 day grace period. A 25% (i.e. 9 month) grace period for extenuating circumstances is allowed, with justification, as described in administrative procedures. The supplier audit requirement shall not apply to standard off-the-shelf items and bulk commodities where required quality can adequately be determined by receipt inspection or post-installation test.

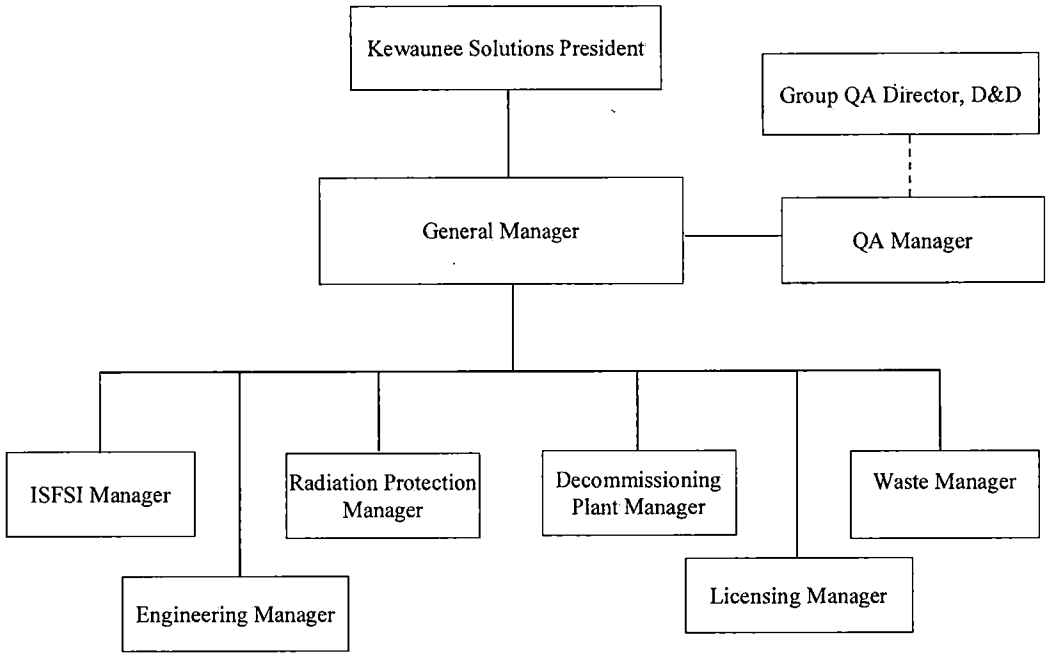
Audit reports shall be prepared, reviewed, approved, and distributed in accordance with approved procedures.

Results of audits are reviewed with the management of the organization audited. Responsible management in the areas audited shall implement the necessary corrective actions required to address deficiencies. These actions are documented and reviewed periodically and, if needed, re-examined during re-audits of the subject area to verify deficient areas have completed corrective actions.

Audit records shall be retained in accordance with approved implementing procedures.

Appendix A

Kewaunee Solutions (KS) Organization Chart



Functional Organization Chart using Generic Titles. Alignment with actual titles maintained current in approved company documents.

All positions are not defined and ultimate reporting is to Kewaunee Solutions President.

Appendix B

Important to Safety (ITS) Structures, Systems and Components (SSCs)

The pertinent quality assurance requirements of 10 CFR 50, Appendix B, 10 CFR 71 Subpart H and 10 CFR 72 Subpart G will be applied, as a minimum, to all quality activities affecting the ITS SSCs as defined by 10 CFR 71 and 10 CFR 72 that are associated with spent fuel storage and transportation packages.

The safety classification of SSCs of the Plant and ISFSI Facility may be revised based on engineering evaluations and a revision to the KS DSAR during the decommissioning process. These modifications are controlled in accordance with the KS Design Control process and are not considered a reduction in the commitments to the DQAP.

The safety classification of NRC Licensed ISFSI Dry Fuel Storage Components and Transportation Packages may not be revised using the KS Design Control process. These modifications must be made by the NRC Certificate Holder. The Certificate Holder is responsible for design and licensing controls for these components under their NRC approved Quality Assurance Program. KS utilizes these types of components and packages under the provisions of NRC General License for Radioactive Material Transportation Packages (10 CFR 71) and Spent Fuel Storage (10 CFR 72).

The storage of GTCC Waste Containers at the ISFSI in regard to 10 CFR 72 is addressed in NUREG-2215, "Standard Review Plan for Spent Fuel Dry Storage Systems and Facilities" (April, 2020).

For the definition of Quality Categories A, B, and C refer to NUREG/CR-6407.

Important-to-Safety SSCs associated with spent fuel storage and radioactive material transportation packages are defined below:

A. Dry Spent Fuel Storage (10 CFR 72)

SSC	Quality Category	Design/License Responsible
Stainless Steel Fuel Storage Canister(s) and Internals	Note 1	Note 2
Concrete Cask Overpack(s)	Note 1	Note 2
ISFSI Pad(s)	ITS-C	KS

B. Transport of Spent Fuel and GTCC Waste (10 CFR 71)

SSC	Quality Category	Design/License Responsible
Stainless Steel Fuel Storage Canister(s) and Internals	Note 1	Note 2
Stainless Steel GTCC Waste Container(s) and Basket(s)	Note 1	Note 2
Licensed Transport Cask(s)	Note 1	Note 2

C. Radioactive Material Transport Packages (10 CFR 71)

Radioactive Material Transport Packages subject to the provisions of 10 CFR 71, Subpart C, "General Licenses" are "Important-to-Safety" and subject to the applicable requirements of the DQAP.

Notes:

1. See the applicable CofC holder's Final Safety Analysis Report (FSAR) and associated specifications for additional classification information (Transnuclear / Orano for NUHOMS system and NAC for NAC MAGNASTOR system).
2. Design / Licensing Authority is Transnuclear / Orano for NUHOMS system, and NAC for NAC MAGNASTOR system.

Appendix C

Regulatory Requirements and Commitments

Regulatory Requirements:

1. 10 CFR 50, Appendix B, *Quality Assurance Criteria for Nuclear Power Plants and Fuel Processing Plants.*
2. 10 CFR 71, Subpart H, *Quality Assurance for Packaging and Transportation of Radioactive Material.*
3. 10 CFR 72, Subpart G, *Quality Assurance for Independent Storage of Spent Nuclear Fuel and High-Level Radioactive Waste.*

Regulatory Commitments:

Note: KPS has previously loaded NUHOMS and MAGNASTOR Dry Cask Storage Systems (DCSSs) in use at the ISFSI, and use of additional DCSS systems are planned for GTCC in the future. The DCSS CofC holder QA Programs used for these DCSS systems may be committed to earlier revisions of Regulatory Guide 7.10.

1. Regulatory Guide 7.10, *Establishing Quality Assurance Programs for Packaging Used in the Transportation of Radioactive Material* (Revision 3 - see Note above), with exception to the annual audit frequency. KPS is on a 24-month audit frequency in accordance with implementing plant procedures.
2. NUREG/CR-6407, *Classification of Transportation Packaging and Dry Fuel Storage System Components According to Important* to *Safety (2/96).*

   Note: The following is implemented through Management Controls (Ref. Appendix D).
3. Regulatory Guide 4.15, *Quality Assurance for Radiological Monitoring Programs (Normal Operations) (Revision 1 – February, 1979)*

Alternatives:

1. Suppliers providing commercial grade calibration and testing services, who are accredited by a nationally recognized accrediting body, as described in Nuclear Energy Institute (NEI) 14-05 guidelines, may be used without additional qualification, provided the conditions of the associated NRC Safety Evaluation are met. Controls shall be established in applicable procedures to ensure the requirements of the NRC Safety Evaluation are satisfied prior to acceptance.

Appendix D

Administrative Controls

A. INDEPENDENT REVIEWS

1.0 Independent Management Assessment (IMA)

The GM shall periodically have an IMA performed to evaluate the effectiveness of the KPS QA Program as detailed in approved administrative procedures. These IMAs are performed by individual(s) designated by the GM who are independent of KPS oversight activities and who have the appropriate level of expertise in the activities assessed. These periodic IMAs shall be performed on a 24-month frequency with a 90-day grace period, which is not to impact the established 24-month cycle for the assessment. The IMA results are communicated via a written report in a timely manner to a level of management having the authority to execute effective corrective action. In addition, these results are reported to the KS management team through the GM.

2.0 Independent Safety Review (ISR)

Independent Safety Reviewers perform ISRs of proposed changes, tests and experiments to important to safety SSCs, activities, program documents, and procedures that are subject to the DQAP requirements as detailed in approved administrative procedures. Independent Safety Reviewers shall be individuals without direct responsibility for the performance of activities under review, and shall be competent and knowledgeable in the subject area being reviewed. Independent Safety Reviewers shall have at least 5 years of professional experience and either a Bachelor's Degree in Engineering or the Physical Sciences or shall have equivalent qualifications in accordance with ANSI N18.1·1971. Independent Safety Reviews must be completed prior to implementation of proposed activities. The manager responsible for the overall operational activities (or designee) shall document the appointment of Independent Safety Reviewers as defined in procedures.

B. SCOPE SUBJECT TO MANAGEMENT CONTROLS IN LIEU OF DQAP CONTROLS

3.0 Facility Staff Qualifications

3.1 Facility staff responsible for the safe storage of nuclear fuel and selected decommissioning activities shall meet or exceed the minimum qualifications of ANSI N18.1-1971 for comparable positions as defined in approved procedures except for: a) the radiation protection manager who shall meet or exceed the qualifications of Regulatory Guide 1.8, September 1975.

4.0 Procedures, Programs and Manuals

4.1 Procedures

Note: The section below was previously moved from the KPS Technical Specifications to the Dominion Energy Nuclear Quality Assurance Program Description (QAPD).

4.1.1 Written procedures shall be established, implemented, and maintained covering the following activities:

A. Quality assurance for effluent and environmental monitoring (Regulatory Guide 4.15, Revision 1, Ref. Appendix C);

B. Fire Protection Program implementation;

C. Radioactive Effluent Controls Program; and

Note: The intention of including the next requirement is to ensure that, in the event radioactive storage tanks are brought online, then the requirement for procedures would apply. It is not intended to require that standing procedures are required in the absence of radioactive storage tanks.

D. Storage Tank Radioactivity Monitoring Program

ATTACHMENT 2

50.54(a) ASSESSMENT

KEWAUNEE POWER STATION

50.54(a) Assessment

Presentation of DQAP Revision 0 in 10 CFR 50.54(a) Context:

The primary justification for the DQAP complying with 50.54(a) is based on 50.54(a)(3)(ii):

(ii) *The use of a quality assurance alternative or exception approved by an NRC safety evaluation, provided that the bases of the NRC approval are applicable to the licensee's facility;*

Specifically, the DQAP Rev. 0 is very closely aligned with the SONGS DQAP Rev. 6 that was approved by the NRC with Safety Evaluation Report (SER) dated September 24, 2018 (Ref. ADAMS Accession No. ML18101A231). In addition, the facility bases of the NRC approval at SONGS are the same as Kewaunee (i.e., fully off-loaded Spent Fuel Pool stored in ISFSI; PA isolated to ISFSI; RV/RVI not started). In fact, the alignment between the two documents is so close, the remainder of the presentation will focus upon the differences between the NRC-approved SONGS DQAP Rev. 6 and the KS Rev. 0 DQAP, described in the 10 CFR 50.54(a) context, with one exception noted below:

Additional grace period for external audits for extenuating circumstances, with justification, was included based on the NRC SER issued to Callaway station (Ref. SER dated August 6, 2020, ADAMS Accession No. ML20216A681).

1) Differences from NRC-approved SONGS DQAP Rev. 6 related to Organization

There are significant differences in Section 1 and Appendix A of the DQAP that are justified based on 50.54(a)(3)(iii and iv):

(iii) The use of generic organizational position titles that clearly denote the position function, supplemented as necessary by descriptive text, rather than specific titles;

(iv) The use of generic organizational charts to indicate functional relationships, authorities, and responsibilities, or, alternately, the use of descriptive text;

In particular, the 'Station Management' subsection of Section 1.0 "Organization" and Appendix A "Kewaunee Solutions (KS) Organization Chart" are different from the SONGS DQAP due to the following reasons:

a) Differences between the corporate structure of Southern California Edison (SCE) and Energy*Solutions*;

b) Distinctions in the organization particular to the SONGS circumstance, with a Decommissioning General Contract (DGC) division of responsibilities;

c) Language from the Dominion QATR that was carried forward into the KS DQAP;

d) Reasonable and ordinary differences due to a differing approach to management structure.

2) Differences from NRC-approved SONGS DQAP Rev. 6 related to administrative improvements and clarifications, spelling corrections, punctuation, or editorial, compliant with 50.54(a)(3).

50.54 (a)(3) (excerpt): In addition to quality assurance program changes involving administrative improvements and clarifications, spelling corrections, punctuation, or editorial items, the following changes are not considered to be reductions in commitment:

The following changes are justified based on this 50.54(a)(3) language:

a) Changes in the "Introduction" Section to reflect factual elements related to the differences in ownership and historical circumstances between SONGS and KPS.

b) Changes in Section 1 "Organization" that are factual elements related to the differences in ownership and associated contractual circumstances.

c) Moving some content from Appendix D into Section 1 "Organization."

d) Clarified the Section 18 "Audits" grace period for guidance related to internal and supplier audits.

e) Add clarifying content in Section 18 "Audits" related to use of surveillances to capture in-progress activities as part of the overall audit effort.

f) Appendix B changed to reflect NAC system in lieu of Holtec system.

g) Appendix B re-written to reflect that KS will defer to TN and NAC as the design authority for the dry fuel storage systems in use at Kewaunee, and to clarify the source of the quality classifications as the NUHOMS / MAGNASTOR CofC and associated specifications.

h) Appendix C, 'Note' was added prior to Regulatory Guide 7.10 to clarify that the QA Programs of DCSS CofC Holders may commit to varying revisions of RG 7.10.

i) Appendix C, 'Note' was added prior to Regulatory Guide 4.15 to clarify that Management Controls govern.

j) Alternative 2 (Palo Verde M&TE related SER) was removed from Appendix C to align with the outcome of the NRC "SONGS-RAI-1" as reflected in SONGS DQAP Rev. 8 that was effective post-FTO.

k) Appendix D changed as follows:

- Minor edits in Section A, 1.0 and 2.0, to add reference to administrative procedures. This was considered a clarification to align with the net effect of the SONGS DQAP and SONGS DSAR.
- Renamed Section B to more accurately reflect the purpose of the Section, as it was used at SONGS.
- Removed the note below Section B header, as it was an artifact of the SONGS licensing trail irrelevant to the KS DQAP.

- Moved Section B, 1.0 and 2.0, into Section 1 'Organization' of the DQAP.
- Edited language in Section B, 3.1, to reflect the outcome of the NRC "SONGS-RAI-2" as reflected in SONGS DQAP Rev. 8 that was effective post-FTO.
- Added note above Section 4.1.1(d) to clarify purposes of inclusion of Storage Tank Radioactivity Monitoring Program in this section.

3) The following differences from NRC-approved SONGS DQAP Rev. 6 are considered justifiable without 10 CFR 50.54 consideration as follows:

   a) Certain scope that is included in the current NRC-approved governing QA Program at Kewaunee (Dominion Energy Topical Report DOM-QA-1, Rev. 29) was considered acceptable for use in the DQAP. This includes the following content:

      - Paragraph in Section 7 "Control of Purchased Materials, Equipment and Services" related to use of current Licensee QA Programs etc. without need to audit (Ref. QATR page C-10).
      - Content in Section 17 "Quality Assurance Records" related to NRC exemption for Kewaunee records (Ref. QATR page C-8).
      - Content in Section 18 "Audits" related to extending certain internal audit frequencies for up to four years (Ref. QATR page 70).
      - Content in Appendix C was changed to align with Regulatory Guide 4.15 Rev. 1 vs. Rev. 2 (Ref. QATR pages 42 and C-21). In addition, a 'note' was added prior to RG 4.15 to clarify the cross-tie between Appendix C and Appendix D, which has the net effect of applying Appendix D Management Controls to implementation, as opposed to applying the controls embodied in the DQAP 18 criteria.
      - Content in Appendix D, 4.0, was changed to align with current QATR including former Technical Specification reference (Ref. QATR page 42). A cross-reference was added to Appendix C (see above).

   b) Certain changes were considered to be clearly additive in nature, and therefore clearly not a reduction in commitment without application of 10 CFR 50.54(a). This includes the following content:

      - Subsection in Section 13 "Handling, Storage and Shipping" related to use of NRC licensed packages (from ES QAP).