

# Significance Determination Process Timeliness Review

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# Introduction

- [Inspection Manual Chapter \(IMC\) 0307, Appendix A](#) Metric E-3 relates to SDP timeliness

## 03.03 E-3 SDP Completion Timeliness for Potentially Greater-than-Green Findings

Definition:	The time from the identification date (i.e., the date the issue of concern was brought to the licensee's attention by the NRC, the date the performance deficiency was self-revealed, or the date the licensee documented the condition resulting from the performance deficiency in the corrective action program) to the date a final significance determination is issued for all potentially greater-than-green findings is within 255 days.		
Criteria:	<b>Green</b> ≤ 1 finding not finalized within 255 days	<b>Yellow</b> 2 -3 findings not finalized within 255 days	<b>Red</b> ≥ 4 findings not finalized within 255 days

- **Basis:** This review is considered a program area evaluation as part of the ROP Self-Assessment process. Staff commenced this review in response to two consecutive years of Yellow performance and anticipating CY2022 to also result in Yellow metric performance.
- **Objectives:**
  - Identify any common causal factors affecting SDP timeliness and propose solutions
  - Identify other opportunities for improvements to the SDP with the NRC's [Principles of Good Regulation](#) in mind
- **Team Members:** Dave Aird and Alex Garmoe, NRR/DRO/IRAB

# Status and Outreach

- Completed document reviews, data analysis, review of all potentially GTG findings since 2018
  - 17 potentially greater-than-Green findings scoped into the review
  - 11 exceeded the 255-day metric
    - Contributing causes: Time to develop a performance deficiency, investigations, first-of-a-kind issue (cyber), deterministic flowchart interpretation, time to review licensee provided information
- Presented status at ROP Public Meeting in May ([ML22144A257](#))
- Developed a list of ideas - currently performing both internal and external outreach

# Ideas from the review team

1. Pause the SDP metric clock for findings that are under investigation from NRC OI
2. Extend the SDP metric to 280 days by considering the OE 160-day congressional metric
3. Require all cornerstones to implement IFRM
4. Enhance SERP form and IFRB form discussion on timeliness
5. Enhance SDP tracker to have a “timeliness challenged” category
6. Reinforce guidance to indicate that preliminary GTG is an option to keep process moving
7. Reinforce best available information to support the established SDP timeline
8. Reinforce that a performance deficiency does not need be a root-cause level of analysis
9. Update guidance documents to make it clear the difference between metrics and interim goals as well as incorporate any of the above approved recommendations

See following slides for supporting information on these recommendations

# 1: Pausing for OI investigations

- This change would affect 3 of the late findings since 2018, but not the overall outcome of the self-assessment metric in any of the applicable years.
- OE stops their metric clock for the 160-day congressional metric, so this change would be consistent with other agency metrics
- Minor drawback of this changed related to automated data analysis

## 2: Increase metric goal to 280 days

- OE Metric: For cases that do not include an OI investigation: 100% completed within 160 calendar days.
  - The start date is generally the inspection exit date (there are some exceptions) which aligns with the SDP's 120-day PD goal. Therefore,  $120 + 160 = 280$ .
  - Since the SDP is still based on the identification date and the OE metric is based on the inspection exit date, there will only be perfect alignment if the exit is exactly 120 days after the identification date.
- A transition to 280 days would have had no effect on any late findings since 2018 (all exceeded 280). However, if a 280-day overall SDP metric was in place since the start of the ROP (with the same Green/Yellow/Red performance thresholds as defined in the current ROP Self-Assessment), two years of Yellow would have been Green and two years of Red would have been Yellow.

### 3: Implement IFRM for all cornerstones

- Require all cornerstones to implement the IFRM process to include filling out an IFRB form
  - These include the cornerstones of Emergency Preparedness, Public Radiation Safety, Occupational Radiation Safety, and Security
- Current guidance in [IMC 0609, Attachment 5](#) allows for IFRBs in any cornerstone, but it is not a requirement.
  - Six of the 11 late findings since 2018 were in these cornerstones, although 3 of the 6 had a corresponding OI investigation that would not have been alleviated by an IFRB
  - More internal outreach necessary to determine feasibility and define responsibilities

## 4: More discussion of timeliness at SERPs and IFRBs

- Both the IFRB and the SERP forms include a section on timeliness – see screenshots below
- For those findings that are expect to meet the metric, include a discussion of possible/most likely risks to the timeline
- When conducting the SERP, ensure DRO representative facilitates discussion on timeliness

Issue Start Date	120 Days	165 Days	255 Days
Click to add date	Click to add date	Click to add date	Click to add date
Will all timeliness metrics be met? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<i>If no, please explain:</i>			

Section 2 - ISSUE OVERVIEW			
Lead branch to complete prior to SERP in coordination with SRA			
Issue Start Date	120 Days	165 Days	255 Days
See IMC 0307 Appendix A, Section 03.03 for guidance	Interim goal for determining performance deficiency	Interim goal for issuing apparent violation	Metric for issuing escalated SDP enforcement action
Click to add date	Click to add date	Click to add date	Click to add date
Is the assessment expected to exceed any timeliness metrics? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<i>If yes, please explain.</i>			

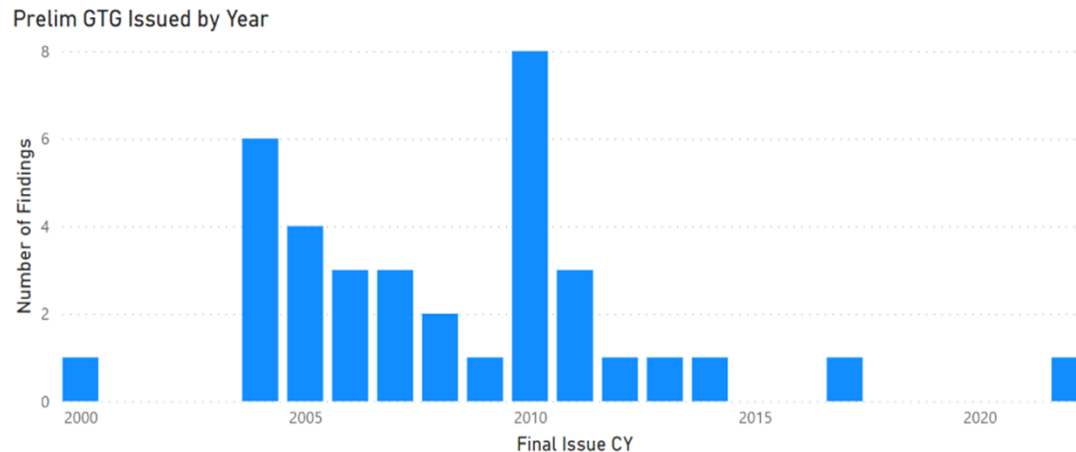


## 5: SDP tracker improvements

- Enhance SDP tracker and biweekly DD calls to have a “timeliness challenged” category
  - The SDP tracker is non-public internal tracking spreadsheet
- Accomplish this by setting/keeping the 120-day PD goal and highlighting those findings that have exceeded.

## 6: Preliminary GTG option for choice letters

- No specific examples of findings that needed a second preliminary SERP solely on a “threshold” debate, but there are examples of using preliminary GTG in a positive way to keep the timeline moving.
- This is not a process change - clarify language in the guidance similar to what was done recently with respect to highlighting the availability of a modified-SERP in certain circumstances.
- Preliminary GTG was used much more in the past. See distribution below:



## 7: Reinforce best available information

- Current definition in [IMC 0609](#):

*“Best Available Information – Information that is accessible, applicable, and ready for use at the time of the review to determine the safety significance of the inspection finding. It is important that the NRC make appropriate and timely decisions on inspection findings in order to ensure that findings are appropriately considered in the assessment process and to communicate the results of inspection findings to the public in a timely manner. To accomplish this, it is expected that both licensees and the NRC will use information that is most reflective of the circumstances associated with the inspection finding and is available at the time of the significance determination.”*

- The intent is not to restrict what information the licensee wants to provide, but to ensure that the information is made available in a way that supports the established SDP timeline

## 8: Performance Deficiency as proximate cause

- Current language in SDP basis document needs to be emphasized during training or other opportunities
- From [IMC 0308, Attachment 3](#):

*“The determination of cause does not need to be based on a rigorous root cause evaluation (which might take a licensee months to complete), but rather on a reasonable assessment and judgment of the staff. The term “proximate cause” is intended to describe a cause that was a significant contributor to the occurrence of the degraded condition.”*

## 9: General clean-up of the guidance

- Changes potentially required in the following guidance documents:
  - IMC 0609, Significance Determination Process
  - IMC 0609, Att 1, Significance and Enforcement Review Panel (SERP) Process
  - IMC 0609, Att 5, Inspection Finding Review Board
  - IMC 0308, Att 3, Technical Basis for Significance Determination Process
  - IMC 0307, App A, ROP Self-Assessment Metrics and Data Trending

## Next Steps

- Receive external stakeholder views at September ROP public meeting and at the planned November ROP public meeting
- More internal communication on ideas/recommendations
- Management will review and approve final recommendations
- Finalize report/memo by the end of CY2022
- Guidance changes to start beginning of CY2023

# Questions / Discussion

