



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION IV
1600 EAST LAMAR BLVD
ARLINGTON, TEXAS 76011-4511

May 4, 2012

John Conway
Senior Vice President and
Chief Nuclear Officer
Pacific Gas and Electric Company
77 Beale Street, B32
San Francisco, CA 94105

**SUBJECT: DIABLO CANYON POWER PLANT – NRC PROBLEM IDENTIFICATION AND
RESOLUTION INSPECTION REPORT 05000275/2012007 AND
05000323/2012007**

Dear Mr. Conway:

On March 22, 2012, the U.S. Nuclear Regulatory Commission (NRC) completed a Problem Identification and Resolution biennial inspection at your Diablo Canyon Power Plant Units 1 and 2. The enclosed inspection report documents the inspection results, which were discussed on March 22, 2012, with Mr. J. Becker and other members of your staff.

This inspection was an examination of activities conducted under your license as they relate to problem identification and resolution and compliance with the Commission's rules and regulations and the conditions of your license. Within these areas, the inspection involved examination of selected procedures and representative records, observations of activities, and interviews with personnel.

Based on the inspection sample, the inspection team concluded that the implementation of the corrective action program and overall performance related to identifying, evaluating, and resolving problems at Diablo Canyon was generally effective. Licensee identified problems were entered into the corrective action program at an appropriately low threshold. Problems were effectively prioritized and evaluated commensurate with the safety significance of the problems. Corrective actions were effectively implemented in a timely manner commensurate with their importance to safety and addressed the identified causes of problems. Lessons learned from industry operating experience were effectively reviewed and applied when appropriate. Audits and self-assessments were effectively used to identify problems and appropriate actions. Finally, Diablo Canyon effectively established and maintained a Safety Conscious Work Environment.

No findings were identified during this inspection.

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter, its enclosure, and your response (if any) will be available electronically for public inspection in the NRC Public Document Room or from the Publicly Available Records (PARS) component of

J. Conway

- 2 -

NRC's Agencywide Document Access and Management System (ADAMS). ADAMS is accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html> (the Public Electronic Reading Room).

Sincerely,

/RA/

Ryan Alexander,
Branch Chief (Acting), Technical Support Branch
Division of Reactor Safety

Docket Nos.: 05000275, 05000323
License Nos: DPR-80, DPR-82

Enclosure:
Inspection Report 05000275/2012007 and 05000323/2012007
w/Attachment: Supplemental Information

cc w/Enclosure
Electronic Distribution

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 ADAMS ACCESSION NUMBER: **ML12115A130**

SUNSI Rev Compl.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	ADAMS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Reviewer Initials	RDA
Publicly Avail.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Sensitive	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Sens. Type Initials	RDA
RI:DRP/B	SPE:DRP/C	SRI:DRP/B	PE: DRP/B	C:DRS/TSB	C:DRP/B
CPeabody	BHagar	MPeck	NMakris	NOKeefe	RAlexander
CP (preparer)/RA/	BH (email)/RA/	MP (email)/RA/	NM (email)/RA/	CFO /RA/	RDA /RA
04/02/2012	04/02/2012	03/29/2012	03/29/2012	04/27/2012	05/04/2012

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U.S. NUCLEAR REGULATORY COMMISSION

REGION IV

Docket: 05000275, 05000323
License: DPR-80, DPR-82
Report: 05000275/2012007, 05000323/2012007
Licensee: Pacific Gas and Electric Company
Facility: Diablo Canyon Power Plant
Location: 7½ Miles NW of Avila Beach, CA
Dates: March 5 - 22, 2012
Team Leader: Charles Peabody, Resident Inspector, Wolf Creek
Inspectors: Bob Hagar, Senior Project Engineer
Michael Peck, Senior Resident Inspector
Nestor Makris, Project Engineer
Approved By: Ryan Alexander, Branch Chief (Acting)
Technical Support Branch
Division of Reactor Safety

SUMMARY OF FINDINGS

IR 05000275/2012007 & 05000323/2012007; 3/05/2012 – 3/22/2012; Diablo Canyon Power Plant Biennial Baseline Inspection of the Identification and Resolution of Problems.

The team inspection was performed by the resident inspector at Wolf Creek (team lead), the senior resident inspector at Diablo Canyon, a Region IV based senior project engineer, and a Region IV based project engineer. The significance of most findings is indicated by their color (Green, White, Yellow, or Red) using Inspection Manual Chapter 0609, "Significance Determination Process." Findings for which the significance determination process does not apply may be Green or be assigned a severity level after NRC management review. The NRC's program for overseeing the safe operation of commercial nuclear power reactors is described in NUREG 1649, "Reactor Oversight Process," Revision 4, dated December 2006.

Identification and Resolution of Problems

The team reviewed approximately 350 condition reports, work orders, engineering evaluations, root and apparent cause evaluations, and other supporting documentation to determine if problems were being properly identified, characterized, and entered into the corrective action program for evaluation and resolution. The team reviewed a sample of system health reports, self-assessments, trending reports and metrics, and various other documents related to the corrective action program.

Based on this sample, the team concluded the Diablo Canyon corrective action program implementation was generally effective. Diablo Canyon staff consistently identified problems and entered those problems into the corrective action program at an appropriately low threshold. Problems were prioritized and evaluated commensurate with the safety significance of the problems. Corrective actions were implemented in a timely manner and addressed the identified causes of problems.

The licensee appropriately evaluated industry-operating experience for relevance to the facility and entered applicable items in the corrective action program. The licensee used industry-operating experience when performing root cause and apparent cause evaluations. The licensee performed effective quality assurance audits and self-assessments which were self-critical, of an appropriate level of detail, and that identified issues and causes appropriate to the circumstances. The team determined that the licensee had established and maintained a safety-conscious work environment.

A. NRC-Identified and Self-Revealing Findings

No findings were identified.

B. Licensee-Identified Violations

None

REPORT DETAILS

4. OTHER ACTIVITIES (OA)

4OA2 Problem Identification and Resolution (71152)

The team based the following conclusions on the sample of corrective action documents that were initiated in the assessment period, which ranged from January 1, 2010, to the end of the onsite portion of the inspection on March 22, 2012.

.1 Assessment of the Corrective Action Program Effectiveness

a. Inspection Scope

The team reviewed approximately 350 condition reports and notifications, including associated root cause, apparent cause, and working group evaluations (low level), from approximately 35,000 that had been issued between January 1, 2010, and March 23, 2012, to determine if problems were being properly identified, characterized, and entered into the corrective action program for evaluation and resolution. The team reviewed a sample of system health reports, operability determinations, self-assessments, trending reports and metrics, and various other documents related to the corrective action program. The team evaluated the licensee's efforts in establishing the scope of problems by reviewing selected logs, work requests, self-assessment results, audits, system health reports, action plans, and results from surveillance tests and preventive maintenance tasks. The team reviewed work requests and attended the licensee's daily notification review team and the corrective action review board meetings to assess the reporting threshold, prioritization efforts, and significance determination process, as well as observing the interfaces with the operability assessment and work control processes when applicable. The team's review included verifying the licensee considered the full extent of cause and extent of condition for problems, as well as how the licensee assessed generic implications and previous occurrences. The team assessed the timeliness and effectiveness of corrective actions, completed or planned, and looked for additional examples of similar problems. The team conducted interviews with plant personnel to identify other processes that may exist where problems may be identified and addressed outside the corrective action program.

The team also reviewed corrective action documents that addressed past NRC-identified violations to ensure that the corrective actions addressed the issues as described in the inspection reports. The inspectors reviewed a sample of corrective actions closed to other corrective action documents to ensure that corrective actions were still appropriate and timely.

The team considered risk insights from both the NRC's and Diablo Canyon risk assessments to focus the sample selection and plant tours on risk significant systems and components. The team selected the significant areas/systems of seismic hazards and the intake structure. The samples reviewed by the team focused on, but were not limited to, these systems.

b. Assessments

1. Assessment - Effectiveness of Problem Identification

The team determined that the licensee was effectively identifying problems at a low threshold and entering them into the corrective action program. The team also concluded that, in accordance with the licensee's corrective action program guidance and NRC requirements, the licensee properly identified those deficiencies that met the definition of a condition adverse to quality, and entered them into the corrective action program. The team did not identify any conditions adverse to quality that were not placed in the corrective action program.

The team identified five instances in which the licensee identified that a weakness in the corrective action program had prevented the licensee from successfully addressing a technical issue. In these examples, the licensee developed corrective actions to address the technical issue, but did not address the identified weakness in their corrective action program. Those instances were:

- SAPN 50428905 documents that after the licensee had identified a corrective action to revise a procedure to provide guidance on the potential impact of NRC Information Notices on the current licensing basis, the licensee had failed to fully implement that action. In that notification, the licensee developed corrective actions to complete the subject revision, but did not address why the licensee had failed to implement it fully.
- In the licensee's quality assurance audit of 1R16 Design Changes, the audit team concluded that the extent-of-condition evaluations had not adequately addressed the impact of the ineffective owner acceptance review process on other temporary design changes. The audit report also stated that the impact of the ineffective owner acceptance review process on the other design changes would be addressed in SAPN 50365188. In that notification, the auditor concluded that appropriate corrective actions had been taken (and would continue to be taken) to prevent or mitigate errors in vendor performed design work and strengthen the owner acceptance review process. However, SAPN 50365188 did not address why the earlier extent-of-condition evaluations had not adequately addressed the impact of the ineffective owner acceptance review process on the other design changes.
- The licensee's quality assurance audit of 2010 engineering programs identified that human performance problems had not been evaluated for impact on the post-maintenance testing program. To address that deficiency, the licensee initiated and completed SAPN 50306153. However, SAPN 50306153 did not address why human performance

problems had not been evaluated for impact on the post-maintenance testing program.

- The licensee initiated SAPN 50353903 after receiving a non-cited violation associated with high-use fire doors. SAPN 50353903 notes that over the previous 3 years, the corrective action program had not been effective in identifying issues associated with high-use fire doors. It also stated that the corrective action program had not been effective in implementing corrective actions to address door-related issues. SAPN 50353903 indicated that evaluation of those issues was documented in SAPN 50357845. SAPN 50357845 was subsequently closed to SAPN 50358672. The team observed that SAPN 50358672 addressed the technical issues associated with high-use fire doors, but did not address the failures of the corrective action program that had been identified in SAPN 50353903.
- The licensee initiated SAPN 50367580 after receiving a different non-cited violation associated with high-use fire doors. The SAPN 50367580 record included a notation that action should be taken to complete an apparent-cause evaluation and to “determine why corrective actions conducted previously were not successful in preventing door failure.” The SAPN 50367580 record documents that this SAPN was subsequently downgraded such that instead of an apparent cause evaluation, a work group evaluation would be completed. The resulting work group evaluation did not address the action quoted above.

The team concluded that these collective examples (an issue of concern), was not a finding, because it did not meet the more than minor screening criteria detailed on Manual Chapter 0612, Appendix B. However, the licensee entered this item into its corrective action program as SAPN 50464362 for resolution.

2. Assessment - Effectiveness of Prioritization and Evaluation of Issues

The team determined that, in general, the licensee appropriately prioritized and evaluated issues commensurate with the safety significance of the identified problems during this assessment period. The team screened a number of condition reports that involved immediate operability and/or reportability issues, and including six condition reports that involved prompt operability reviews, to assess the quality, timeliness, and prioritization of operability assessments. The team noted that the immediate and prompt operability assessments reviewed were of appropriate thoroughness and were completed in a timely manner. Extent of cause and extent of condition evaluations were also appropriate to the circumstances.

3. Assessment – Effectiveness of Corrective Action Program

Based on a sample of 99 condition report notifications, the team concluded that the licensee developed appropriate corrective actions to address problems. The

team identified no corrective actions associated with conditions adverse to quality that were not completed in a timely manner.

Every team member noted instances in which the licensee's efforts to evaluate and correct identified problems were documented in several notifications that in many cases were not referenced to each other. Examples include:

- The licensee's response to a non-cited violation for a failure to follow a procedure included SAPN 50299740, Order 60023821, and related SAPNs 50259493, 50215872-30, 50087077, and 50181167.
- The licensee's response to a non-cited violation for a failure to appropriately evaluate and correct a condition adverse to quality included SAPN 50311167, Order 60025142, related SAPNs 50309610, 50310081, 50308225, 50307757, and 50311719, and related order 60025167.

The team considered that the practice of compiling corrective action program records in this way might result in the unintended consequence of reducing the accessibility and usefulness of those records as resources that could provide insights to assist future efforts at problem resolution.

.2 Assessment of the Use of Operating Experience

a. Inspection Scope

The team examined the licensee's program for reviewing industry operating experience, including reviewing the governing procedure and self assessments. A sample of 23 operating experience notifications that were issued during the assessment period were reviewed to assess whether the licensee had appropriately evaluated the notification for relevance to the facility. The team then examined whether the licensee had entered those items into the corrective action program and assigned actions to address the issues. The team reviewed a sample of root cause evaluations and corrective action documents to verify if the licensee had appropriately included industry-operating experience.

b. Assessment

Overall, the team determined that the licensee was adequately evaluating industry-operating experience for relevance to the facility, based on the sample size noted. The licensee entered the 23 applicable items into the corrective action program and evaluated them in accordance with station procedures.

.3 Assessment of Self-Assessments and Audits

a. Inspection Scope

The team reviewed a sample of 45 licensee self-assessments, surveillances, and audits to assess whether the licensee was regularly identifying performance trends and

effectively addressing them. The team reviewed audit reports to assess the effectiveness of assessments in specific areas. The team evaluated the use of self- and third party assessments, the role of the quality assurance department, and the role of the performance improvement group. The specific self-assessment documents reviewed are listed in the Attachment.

b. Assessment

The team concluded that the licensee had an effective self-assessment process. Diablo Canyon self-assessments were timely, self-critical, of an appropriate level of detail, identified issues, and causes appropriate to the circumstance. The Diablo Canyon Quality Assurance internal audits of various station departments were also timely, self critical, of an appropriate level of detail, and identified issues and causes appropriate to the circumstances. The Diablo Canyon Performance Improvement Group organized the assessments within the corrective action program, accurately tracked, and trended information and themes across station departments. The inspection team review of various third party assessments determined that Diablo Canyon regularly incorporated feedback from external sources and takes related corrective action as appropriate.

.4 Assessment of Safety-Conscious Work Environment

a. Inspection Scope

The inspection team conducted individual interviews with 37 licensee personnel. The interviewees represented various functional organizations and ranged across contractor, staff, and supervisor levels. These interviews were designed to elicit a qualitative assessment of the degree to which the participants believed the licensee had established and maintained a safety-conscious work environment at Diablo Canyon and were based upon the NRC's definition of a safety-conscious work environment:

An environment in which employees feel free to raise safety concerns, both to their management and to the NRC, without fear of retaliation and where such concerns are promptly reviewed, given the proper priority based on their potential safety significance, and appropriately resolved with timely feedback to employees.

b. Assessment

The team determined that the licensee had established and maintained a safety-conscious work environment. Based upon the responses received during the licensee personnel interviews, the team concluded that Diablo Canyon had established and was maintaining an environment where workers felt free to raise safety concerns, both to their management and to the NRC, without fear of retaliation. Licensee staff interviewed generally thought highly of their work environment. All groups understood the primary importance of safety; although schedule and budget concerns existed, none of the interviewed licensee personnel indicated that they felt these factors overshadowed nuclear safety concerns. Most of the Diablo Canyon personnel interviewed desired to participate personally in continuous improvement in the areas of safety, plant performance, and knowledge management.

40A6 Meetings

Exit Meeting Summary

On March 22, 2012, the team presented the inspection results to Mr. J. Becker, Site Vice President, and other members of the licensee staff. The licensee acknowledged the issues presented. The inspector asked the licensee whether any materials examined during the inspection should be considered proprietary. No proprietary information was retained.

**SUPPLEMENTAL INFORMATION
KEY POINTS OF CONTACT**

Licensee Personnel

T. Baldwin, Regulatory Services Manager
 J. Becker, Site Vice President
 G. Close, Problem Prevention and Resolution Manager
 S. David, Site Services Director
 T. Garrity, Corrective Action Program Supervisor
 P. Gerfen, Operations Manager
 R. Simmons, Engineering Manager
 J. Welsh, Station Director

NRC personnel

R. Alexander, Branch Chief (Acting)

LIST OF DOCUMENTS REVIEWED

PROCEDURES

<u>NUMBER</u>	<u>TITLE</u>	<u>REVISION / DATE</u>
WCAP-16638-P	Diablo Canyon Units 1 and 2 Replacement Steam Generator Program NSSS Licensing Report	1
TFB 11-036	Training Feedback Form	April 26, 2011
STA-213	Use of RETRAN to Assess DCPD Plant Simulator Operability Testing Performance Calculation	0
SCR-08-017	Simulator Deficiency	March 13, 2008
SCR 10-061	Simulator Deficiency	December 13, 2010
SCR 10-013	Simulator Deficiency	March 3, 2010
Plant Drawing 108003	Unit 2 Feedwater System Sheet 3	75
Plant Drawing 108003	Unit 2 Feedwater System Sheet 4	61

PROCEDURES

<u>NUMBER</u>	<u>TITLE</u>	<u>REVISION / DATE</u>
Plant Drawing 102003	Unit 1 Feedwater System Sheet 3	81
Plant Drawing 102003	Unit 1 Feedwater System Sheet 3A	69
Plant Drawing 102003	Unit 1 Feedwater System Sheet 4	76
OP1.DC10	Conduct of Operations	30
OP AP-15	Loss of Feedwater Flow, Unit 1	24
OP AP-15	Loss of Feedwater Flow, Unit 2	3
OM7.ID4	Apparent Cause Evaluation	22
OM7.ID3	Root Cause Evaluations	27
OM7.ID1	Problem Identification and Resolution	40A
OM4.ID14	Notification Review Team (NRT)	15
DCM No. S-3B	Auxiliary Feedwater System	20
AD1.ID2	Procedure Process Control	34
A0681337	Simulator Study	March 6, 2012
	2011 Emergency Preparedness Program Audit	May 23, 2011
	2011 Professional Assessment and Consultation, Inc Audit	November 21, 2011
	2011 Special Processes & Inservice Inspection (ISI) / Inservice Testing (IST) Programs Audit	November 30, 2011
	Equipment Reliability Self Assessment	January 7, 2010
	Self-Assessment of Licensed Operator Requalification Program and Simulator	February 28, 2011
	Emergency Planning Program Assessment	April 15, 2010
	Human Performance Self-Assessment	July 26, 2010

PROCEDURES

<u>NUMBER</u>	<u>TITLE</u>	<u>REVISION / DATE</u>
	2R15 Organizational Effectiveness Self-Assessment	January 29, 2010
	Nuclear Industry Evaluation Program Diablo Canyon Quality Program Implementation Assessment	March 26, 2010
	Ops Services Department Quarterly Performance Improvement Report	November 3, 2011
	Outage Management Quarterly Performance Improvement Report 1 st Quarter 2011	April 1, 2011
	Unit 1 63A and B 4kV Vital & Non-Vital System Health Report	February 2, 2012
	Unit 1 65A & B 120V Vital & Non Vital System Health Report	February 2, 2012
	Unit 1 O3B Auxiliary Feedwater System Health Report	January 25, 2012
	Unit 2 46 Loose Parts Monitoring System Health Report	February 2, 2012
	Unit 2 64A and B 480V Vital & Non-Vital System Health Report	February 2, 2012
	Unit 2 69 230kV System Health Report	February 2, 2012
	Diablo Canyon Power Plant Nuclear Safety Culture Improvement Plan	July 7, 2011
	PG&E Premier Survey (Site Vice President, DCPD)	December 2011
	PG&E Premier Survey (Vice President Engineering & Projects, DCPD)	December 2011
	3Q11 Nuclear Safety Culture Monitoring Panel Report	
	OP AP-15 Licensing Basis Impact Evaluation Screen	January 3, 2012
	OP AP-15, Unit 1 History Summary details	July 28, 2011
	OP AP-15, Units 1 & 2 History Summary details	March 6, 2008

PROCEDURES

<u>NUMBER</u>	<u>TITLE</u>	<u>REVISION / DATE</u>
	OP AP-15, Units 1 & 2 History Summary details	August 26, 2008
	OP AP-15, Unit 2 History Summary details	July 28, 2011
OM7.ID4	Apparent Cause Evaluation	22
OM7.ID3	Root Cause Evaluation	27
OM4-ID14	Notification Review Team	15
TS3.ID2	Licensing Basis Impact Evaluations	31
	3Q11 Nuclear Safety Culture Monitoring Panel Report	

MISCELLANEOUS DOCUMENTS

<u>NUMBER</u>	<u>TITLE</u>	<u>REVISION / DATE</u>
	Apparent Cause Evaluation Manual (DCPP ACE Manual for Web.doc)	14
	DCPP Event Investigation Manual (DCPP Event Investigation Team Manual)	5
	Engineering 3 rd Quarter 2010 Performance Improvement Report	
	Engineering 3 rd Quarter 2011 Performance Improvement Report	
	Strategic Projects 3 rd Quarter 2010 Performance Improvement Report	
	Strategic Projects 3 rd Quarter 2011 Performance Improvement Report	
	PG&E Memo from Supervisor, Quality Verification regarding 2011 Technical Specification Audit	October 5, 2011
	Diablo Canyon Nuclear Safety Culture Improvement Plan	July 7, 2011
	Site Security Logs	

AUDITS REPORTS

TITLE

1R16 Design Changes
2010 Engineering Programs
2010 Fire Protection
Learning Services Quarterly Performance Improvement
Report Fourth Period – 09/28/11 – 12/06/11
Learning Services Quarterly Performance Improvement
Report Third Period – 07/01/11 – 09/27/11
Learning Services 3rd Quarter 2010 Performance
Improvement Report
Security Services Performance Improvement Report 07/01/11
– 10/18/11
Security Services Quarterly Performance Improvement
Report Period 2010 April 1, 2010 to September 30, 2010

SYSTEM HEALTH REPORTS

NUMBER

TITLE

U1 03A	Feedwater
U1 03B	Auxiliary Feedwater
U1 03E	Digital Feedwater Control System
U1 09	Safety Injection
U1 10	Residual Heat Removal
U1 14	Component Cooling Water
U2 03B	Auxiliary Feedwater
U2 09	Safety Injection
U2 14	Component Cooling Water

Notifications

50043531	50044018	50070574	50081475	50082059	50082102
50043633	50043760	50043917	50076157	50086062	50252718
50087077	50181167	50215872	50232181	50252708	50259493

50262771	50274298	50289369	50293621	50293741	50296817
50264260	50268343	50272432	50277252	50283510	50291142
50274212	50274623	50295611	50295784	50295954	50296308
50292157	50292572	50296984	50297587	50298160	50299341
50297678	50299737	50299740	50301839	50302031	50302224
50301046	50304199	50304467	50304823	50305865	50307035
50301776	50303502	50304540	50304548	50304819	50305573
50302939	50306131	50306888	50307101	50307496	50308895
50306153	50307037	50307057	50307217	50307598	50308433
50307280	50308702	50309829	50309980	50310142	50311164
50308621	50308698	50308701	50308702	50309451	50309451
50309749	50309829	50309830	50311715	50312092	50312921
50309775	50310054	50312064	50312607	50312918	50316368
50311508	50318282	50319773	50321335	50323903	50333139
50313159	50313277	50313790	50314008	50315185	50316867
50316653	50333200	50339436	50344316	50344828	50428148
50316653	50333200	50339436	50369476	50374457	50374486
50317902	50319263	50319939	50320205	50320254	50320636
50321394	50322058	50322797	50323904	50324735	50326109
50326185	50326476	50326955	50327386	50327667	50328227
50328303	50328890	50329651	50331841	50335847	50336863
50336901	50337620	50337741	50341661	50351988	50353849
50341463	50347505	50347714	50347762	50348138	
50349627	50349697	50350095	50350426	50350640	50351831
50352200	50353829	50363838	50363874	50364486	50365185
50353900	50353902	50353903	50357698	50357845	50358232
50358672	50362384	50365188	50365923	50365974	50369540
50366052	50368182	50374461	50375271	50375348	50375751
50369577	50370379	50370632	50374430	50374718	50380766
50374487	50374719	50381092	50381347	50385593	50386142
50376983	50377848	50378875	50378879	50379379	
50379431	50380502	50380505	50381299	50383676	50383677
50383939	50384600	50385048	50386616	50387799	50388738
50384994	50385665	50386829	50388482	50388490	50390439
50390620	50390742	50390744	50390748	50390760	50391944
50391844	50392655	50392726	50392742	50393005	50393472
50391966	50391971	50393931	50394751	50400689	50400790
50393564	50394528	50394725	50398169	50405031	50405066
50401005	50410266	50411975	50412029	50412030	50412050
50409024	50410434	50411175	50411988	50420142	50427070
50412203	50413129	50414272	50414497	50414499	50414654
50415460	50415706	50415746	50415941	50416406	50417232
50417418	50418225	50419427	50420188	50420385	50420404
50421376	50421411	50422588	50424189	50424433	50424481
50424481	50424487	50424488	50425994	50428146	50430749
50428424	50428816	50428905	50428950	50451299	50455252
50430779	50430780	50431360	50433072	50433882	50434514

50434515	50435115	50435339	50435604	50435606	50435675
50435676	50435701	50435702	50435713	50435717	50435726
50435729	50435734	50435735	50435765	50435772	50435774
50435775	50435776	50435783	50435784	50435785	50435786

Orders

60004597	60005383	60029921	60028209	60024659	60026910
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Information Request
January 17, 2012
Biennial Problem Identification and Resolution Inspection –
Diablo Canyon Power Plant
Inspection Report Number 05000275/2012007 and 05000323/2012007

This inspection will cover the period from January 1, 2010 to January 1, 2012. All requested information should be limited to this period unless otherwise specified. To the extent possible, the requested information should be provided electronically in Adobe PDF or Microsoft Office format. Lists of documents should be provided in Microsoft Excel or a similar sortable format.

A supplemental information request will likely be sent during the week of February 20, 2012.

Please provide the following no later than February 10, 2012:

1. Document Lists

Note: for these summary lists, please include the document/reference number, the document title or a description of the issue, initiation date, and current status.

- a. Summary list of all corrective action documents related to significant conditions adverse to quality that were opened, closed, or evaluated during the period
- b. Summary list of all corrective action documents related to conditions adverse to quality that were opened or closed during the period
- c. Summary lists of all corrective action documents which were upgraded or downgraded in priority/significance during the period
- d. Summary list of all corrective action documents that subsume or “roll up” one or more smaller issues for the period
- e. Summary lists of operator workarounds, engineering review requests and/or operability evaluations, temporary modifications, and control room and safety system deficiencies opened, closed, or evaluated during the period
- f. Summary list of plant safety issues raised or addressed by the Employee Concerns Program (or equivalent)
- g. Summary list of all Apparent Cause Evaluations completed during the period
- h. Summary list of all Root Cause Evaluations planned or in progress but not complete at the end of the period.

2. Full Documents, with Attachments

- a. Root Cause Evaluations completed during the period
- b. Quality assurance audits performed during the period

- c. All audits/surveillances performed during the period of the Corrective Action Program, of individual corrective actions, and of cause evaluations
- d. Corrective action activity reports, functional area self-assessments, and non-NRC third party assessments completed during the period (do not include INPO assessments)
- e. Corrective action documents generated during the period for the following:
 - i. NCV's and Violations issued
 - ii. LER's submitted
- f. Corrective action documents generated for the following (for those that were evaluated but determined not to be applicable, provide a summary list):
 - i. NRC Information Notices, Bulletins, and Generic Letters issued or evaluated during the period
 - ii. Part 21 reports issued or evaluated during the period
 - iii. Vendor safety information letters (or equivalent) issued or evaluated during the period
 - iv. Other external events and/or Operating Experience evaluated for applicability during the period
- g. Corrective action documents generated for the following:
 - i. Emergency planning drills and tabletop exercises performed during the period
 - ii. Maintenance preventable functional failures which occurred or were evaluated during the period
 - iii. Adverse trends in equipment, processes, procedures, or programs which were evaluated during the period
 - iv. Action items generated or addressed by plant safety review committees during the period

3. Logs and Reports

- a. Corrective action performance trending/tracking information generated during the period and broken down by functional organization
- b. Corrective action effectiveness review reports generated during the period
- c. Current system health reports or similar information
- d. Radiation protection event logs during the period
- e. Security event logs and security incidents during the period (sensitive information can be provided by hard copy during first week on site)
- f. Employee Concern Program (or equivalent) logs (sensitive information can be provided by hard copy during first week on site)
- g. List of Training deficiencies, requests for training improvements, and simulator deficiencies for the period

4. Procedures

- a. Corrective action program procedures, to include initiation and evaluation procedures, operability determination procedures, apparent and root cause evaluation/determination procedures, and any other procedures which implement the corrective action program.
- b. Quality Assurance program procedures
- c. Employee Concerns Program (or equivalent) procedures
- d. Procedures which implement/maintain a Safety Conscious Work Environment

5. Other

- a. List of risk significant components and systems
- b. Organization charts for plant staff and long-term/permanent contractors

Note: "Corrective action documents" refers to condition reports, notifications, action requests, cause evaluations, and/or other similar documents, as applicable.

This information should be uploaded on the Certrec IMS website no later than February 10, 2012.

Please note that the NRC is not currently able to accept electronic documents on thumb drives or other similar digital media.