UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION IV
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May 9, 2003

Clay C. Warren, Vice President of
Nuclear Energy
Nebraska Public Power District
P.O. Box 98
Brownville, Nebraska 68321

SUBJECT: COOPER NUCLEAR STATION - NRC INSPECTION REPORT 50-298/03-08

Dear Mr. Warren:

On February 28, 2003, the NRC completed an inspection at your Cooper Nuclear Station. The enclosed inspection report documents the inspection findings which were discussed on March 26, 2003, with Mr. M. Coyle and other members of your staff.

This inspection examined activities related to the NRC Confirmatory Action Letter, dated January 30, 2003, and The Strategic Improvement Plan, Revisions 1 and 2. Within these areas, the inspection consisted of selected examination of procedures and representative records, observations of plant equipment, and interviews with personnel.

Based on the results of this inspection no findings of significance were identified.

In accordance with 10 CFR 2.790 of the NRC's "Rules of Practice," a copy of this letter, its enclosure, and your response will be made available electronically for public inspection in the NRC Public Document Room or from the Publicly Available Records (PARS) component of NRC's document system (ADAMS). ADAMS is accessible from the NRC Web site at http://www.nrc.gov/reading-rm/adams.html (the Public Electronic Reading Room).

Should you have any questions concerning this inspection, we will be pleased to discuss them with you.

Sincerely,

/RA/

Arthur T. Howell III, Director
Division of Reactor Projects

Docket: 50-298
License: DPR-46

Enclosure:
NRC Inspection Report
50-298/03-08

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ENCLOSURE

U.S. NUCLEAR REGULATORY COMMISSION
REGION IV

Docket:	50-298
License:	DPR-46
Report No.:	50-298/03-08
Licensee:	Nebraska Public Power District
Facility:	Cooper Nuclear Station
Location:	P.O. Box 98 Brownville, Nebraska
Dates:	February 24-28, 2003
Team Leader:	T. Farnholtz, Senior Project Engineer
Inspectors:	F. Brush, Senior Resident Inspector G. Warnick, Resident Inspector L. Willoughby, Resident Inspector
Approved By:	A. Howell, Director Division of Reactor Projects

SUMMARY OF FINDINGS

Cooper Nuclear Station
NRC Inspection Report 50-298/03-08

IR 05000298-03-08; 02/24/2003-02/28/2003; Cooper Nuclear Station; special inspection to verify provisions of the NRC Confirmatory Action Letter and the licensee's Strategic Improvement Plan.

The inspection was conducted by one region based inspector and three resident inspectors. No findings of significance were identified. The significance of most findings is indicated by their color (Green, White, Yellow, Red) using IMC 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 3, dated July 2000.

This inspection was the first of a series of inspections performed by the NRC to assess Nebraska Public Power District's progress with respect to the implementation of their improvement plan and to verify the provisions outlined in the NRC Confirmatory Action Letter dated January 30, 2003. The inspection primarily focused on the areas specified in the Confirmatory Action Letter which includes: (1) emergency preparedness; (2) human performance; (3) material condition and equipment reliability; (4) plant modifications and configuration control; (5) corrective action program, utilization of industry operating experience, and self-assessments; and (6) engineering programs. In addition, the inspection reviewed the licensee's development and utilization of performance indicators and assessed how the findings of the Procedure 95003 supplemental inspection (NRC inspection report 50-298/02-07) had been incorporated into the Strategic Improvement Plan, Revision 2.

The team concluded that the licensee completed the improvement plan steps as scheduled and satisfied the intent of all steps reviewed during this inspection.

During this inspection, the team reviewed a total of 49 closure packages associated with the licensee's Strategic Improvement Plan, Revision 2, and 11 closure packages associated with Revision 1. Of these, 5 were identified as being incomplete such that additional information was required to assess whether the step had been completed as specified. One step was closed with known discrepancies.

Procedure revision problems were identified primarily consisting of a lack of adequate annotations to clearly indicate those revisions associated with the Strategic Improvement Plan. The result of this observation was the potential for subsequent revisions effectively reversing those put in place by the Strategic Improvement Plan. The team identified one case where this occurred without adequate justification.

The licensee performed an engineering evaluation to support the replacement of the four service water pump discharge check valves. This evaluation did not include consistent descriptions of various system operating parameters and some justifications for the adequacy of the replacement check valves were unclear.

The Strategic Improvement Plan required the creation and implementation of a Design Basis Information/Licensing Basis Information database to be used by engineering and operations personnel for the purpose of preparing plant modification packages and operability determinations. The team noted that no explicit improvement plan step existed to actually begin using the database once creation, implementation, and training were complete.

Several examples of changes made in accordance with the Strategic Improvement Plan that did not completely address the issue or were not adequately justified were identified. A procedure revision that did not fully meet the action plan step requirement was identified. Preventive maintenance frequencies were not adequately supported from a technical standpoint for main transformer or service air compressor maintenance tasks. Vital bus undervoltage relay reset values were changed as required by the improvement plan but no adequate periodic verification of this setpoint was in place.

A total of 67 performance indicators had been developed or identified by the licensee to be used in tracking schedule completion and effectiveness of the Strategic Improvement Plan. The team reviewed a sample of these performance indicators and concluded that, in general, they appeared appropriate and provided useful information. It was determined that not enough time had passed to assess long-term trends as shown by the performance indicators.

The team selected a sample of findings and observations identified in the Procedure 95003 supplemental inspection to determine if the licensee had appropriately incorporated them into the Strategic Improvement Plan, Revision 2. The licensee did have a tracking document for these items and they were included in the improvement plan.

A violation of very low safety significance, which was identified by the licensee, was reviewed by the inspectors. Corrective actions taken or planned by the licensee have been entered into the licensee's corrective action program. This violation and the corrective action tracking number is described in Section 4 of this report.

Report Details

The following documents are available to the public in the NRC Agencywide Documents Access and Management System (ADAMS) using the appropriate accession number. ADAMS is accessible from the NRC Web site at http://www.nrc.gov/reading-rm/adams.html (the Public Electronic Reading Room).

The Strategic Improvement Plan, Revision 1; dated June 10, 2002; ADAMS Accession Number ML023010136

The Strategic Improvement Plan, Revision 2; dated November 25, 2002; ADAMS Accession Number ML030340146

Confirmatory Action Letter (CAL); dated January 30, 2003; ADAMS Accession Number ML030310263

The Strategic Improvement Plan consists of a series of individual steps, each with an assigned scheduled completion date. As each step is completed, the licensee creates a closure package containing all associated documents, drawings, procedures, etc., that support the closure of that step. An independent reviewer checklist is completed for each step to ensure package completeness and is included in the closure package. The team reviewed the completed closure packages for the steps indicated in this report.

1. CAL Item 1 - Emergency Preparedness

The team did not review this CAL item during the inspection.

2. CAL Item 2 - Human Performance

a. Scope

The team reviewed the following completed Strategic Improvement Plan, Revision 2, action plan steps associated with CAL Item 2, Human Performance:

Action Plan	Steps
5.1.4.1	9, 18, 25, 26

The team reviewed the licensee's closure packages and supporting documentation and conducted interviews with various licensee personnel knowledgeable of the specific steps.

b. Observations and Findings

The team identified observations and findings associated with the following action plan step in the area of Human Performance:

Strategic Improvement Plan, Revision 2, Action Plan 5.1.4.1 - Human Performance

Step 18 - Revise the Human Error Review Board process to improve the focus on organizational/jobsite conditions. This will be accomplished through removal of focus on individual disciplinary action.

The team identified that the step closure package was not complete in that additional material or interviews with associated personnel were required to understand the actions taken and the basis for those actions. In this case, only the revised pages of the associated procedure were provided in the closure package instead of the entire procedure. This made it difficult to determine if all actions had been completed. This observation was documented in Notification 10229188.

The team identified a step in the revised procedure that referred to the possible suspension of qualifications of individuals under certain conditions. This could be interpreted as an individual disciplinary action. Upon discussion with the licensee, it was agreed that this reference would be assessed for removal from the procedure. This was documented in Notification 10229715.

c. Conclusions

The licensee completed the CAL related improvement plan steps as scheduled, and the actions taken met the intent of the associated steps. Incomplete Strategic Improvement Plan step closure packages required additional information to verify adequate completion. A procedure revision was performed that did not fully address the improvement plan step requirement.

3. CAL Item 3 - Material Condition and Equipment Reliability

a. Scope

The team reviewed the following completed Strategic Improvement Plan, Revision 2, action plan steps associated with CAL Item 3, Material Condition and Equipment Reliability:

Action Plan	Steps
5.3.1.1	3c, 3d
5.3.1.2.a	3a
5.3.1.2.c	1, 2, 3, 4, 5, 6, 7
5.3.1.2.f	1a, 7
5.3.1.2.h	1a, 1b, 1c
5.3.1.2.i	2a, 3a,
5.3.1.2.j	6, 7
5.3.1.2.k	1a, 1b, 1c, 2

The team reviewed the following Strategic Improvement Plan, Revision 1, action plan steps associated with equipment excellence:

Action Plan	Steps
5.3.1.1	1.1, 1.2, 1.3, 2.4

The team reviewed the licensee's closure packages and supporting documentation and conducted interviews with various licensee personnel knowledgeable of the specific steps. Plant walkdowns and equipment observations were also conducted for applicable equipment.

b. Observations and Findings

The team identified observations and findings associated with the following action plan steps in the area of Material Condition and Equipment Reliability:

1. Strategic Improvement Plan, Revision 2, Action Plan 5.3.1.2.a - Service Water (Long-Standing Equipment Issue)

   Step 3 - Replace the four SW [Service Water] Pump Discharge Check Valves to improve performance and extend their service life.

   Step 3a - Develop Part Evaluation.

Change Evaluation Document 6009562 describes a design change for the replacement check valves. Some aspects of the change evaluation were unclear in that some statements did not appear to include consistent descriptions of various system operating parameters. The design pressure-temperature rating of the replacement valves was stated as 75 psi at 85°F. This was not consistent with the design temperature of the SW-2 piping used in the system (145°F). The justification for this discrepancy was not clear in the evaluation.

In addition, the evaluation stated that the maximum river water temperature allowed to be admitted to the service water system is 95°F. No basis for this value was provided in the Change Evaluation Document. The service water system would be required to remain available to remove decay heat with potential river water temperatures greater than 95°F. After discussion of these issues with the licensee, it was determined that the replacement check valves were appropriate for the application. These observed weaknesses in the Change Evaluation Document were documented in Notification 10229328.

2. Strategic Improvement Plan, Revision 2, Action Plan 5.3.1.2.c - Off-Site Power/Switchyard Reliability Improvement (Long-Standing Equipment Issue)

   Step 1 - Implement Recommendations of SOER [Significant Operating Event Review] 99-1, "Loss of Grid."

The licensee made changes to the entry conditions of Emergency Operating Procedure 5.3Grid in accordance with the recommendations of the Significant Operating Event Review (SOER) 99-1. The licensee later made additional procedure changes to the entry conditions of Procedure 5.3Grid. The team identified that the procedure had not been annotated to indicate that the initial changes to the entry conditions had been made as a result of the Strategic Improvement Plan effort. Additionally, the procedure did not list the applicable improvement plan documents in the reference section of the procedure. These annotations are important to clearly associate these changes with a Strategic Improvement Plan commitment.

In July 2002, the licensee performed a switchyard and transformer walkdown using third-party personnel. One of the items identified was that the main transformers' oil cooling fins were covered with seeds from local cottonwood trees. The team questioned what preventive maintenance tasks were scheduled for cleaning the main transformers' fins. Preventive maintenance tasks were in place to clean the fins each refueling outage and the north side fins every 36 months. However, the inspectors noted that cottonwood seeds are generated annually. No justification or explanation was provided in the step closure package for the difference between the established oil cooling fin cleaning frequencies and the annual generation of the cottonwood seeds. As a result of the team's questions, the licensee generated a Notification (10229290) to reevaluate the frequency and timing of the preventive maintenance tasks to clean the main transformer oil coolers.

3. Strategic Improvement Plan, Revision 2, Action Plan 5.3.1.2.c - Off-Site Power/Switchyard Reliability Improvement (Long-Standing Equipment Issue)

   Step 4 - Adjust the Second Level Undervoltage Relays to have a reset dead-band less than the present 1%.

The licensee changed the reset values for the vital bus undervoltage relays from 1 to 0.5 percent above the drop out value. This allowed the relays to reset faster when bus voltage drops after large motors are started to preclude inadvertent starting of an emergency diesel generator. The team identified that the acceptable ranges for the relay reset voltage values were not included in the applicable surveillance procedure. The concern was that any degradation of the relay reset voltage values could potentially go undetected. This observation was documented in Notification 10229407.

4. Strategic Improvement Plan, Revision 2, Action Plan 5.3.1.2.i - Air Systems (Long-Standing Equipment Issue)

   Step 3a - Service Air Compressor Near Term Reliability - Change the frequency of the compressor overhaul PM [Preventive Maintenance] back to once per year and implement compressor overhauls as specified in the PM Program.

The licensee revised the required preventive maintenance program to overhaul the service air compressors every 48 weeks. Compressor C was overhauled in January 2002. This compressor was then scheduled for its next overhaul in April 2003. The change was made as required by the improvement plan but the actions taken were not

consistent with the specified maintenance frequency. The licensee did not provide adequate justification in the action step closure package for extending the overhaul period 3 months beyond the one year time frame specified in the improvement plan. This observation was documented in Notification 10215696.

5. Strategic Improvement Plan, Revision 1, Action Plan 5.3.1.1 - System Equipment Performance

   Step 1.2 - Develop and update general PM task list, "commitment related."

The purpose of this improvement plan step was to review preventive maintenance tasks associated with Refueling Outage 21. The team identified that the step closure package was not complete in that additional material or interviews with associated personnel were required to understand the actions taken and the basis for those actions. The meaning and intent of this step and the associated deliverable ("Commitment related task lists updated") was not clearly defined and was not clear. Additional documentation and several discussions with knowledgeable licensee personnel provided sufficient data to understand the scope, purpose, and intent of this step. A Notification (10229488) was generated regarding this observation.

c. Conclusions

The licensee completed the CAL related improvement plan steps as scheduled, and the actions taken met the intent of the associated steps. Discrepancies in an engineering evaluation performed in accordance with the Strategic Improvement Plan did not contain sufficient technical information to support the stated conclusions. A procedure revision was not adequately annotated to indicate that the revision was associated with an improvement plan action and was subsequently changed without regard to improvement plan requirements. Service air compressor preventive maintenance was not conducted in accordance with the new frequency established by the improvement plan. Main transformer oil cooling fin cleaning frequencies were not technically supported. Vital bus undervoltage relay setpoints were not verified during surveillance testing. Incomplete Strategic Improvement Plan step closure packages required additional information to verify adequate completion.

4. CAL Item 4 - Plant Modifications and Configuration Control

a. Scope

The team reviewed the following completed Strategic Improvement Plan, Revision 2, action plan steps associated with CAL Item 4, Plant Modification and Configuration Control:

Action Plan	Steps
5.2.1.2	1
5.3.3.1	1, 2, 3, 4, 5, 6, 7

5.3.3.3	1
5.3.3.4	1a, 1b, 1c, 1d, 1e, 2a, 2b, 2c

The team reviewed the licensee's closure packages and supporting documentation and conducted interviews with various licensee personnel knowledgeable with the specific steps.

b. Observations and Findings

The team identified observations and findings associated with the following action plan steps in the area of Plant Modification and Configuration Control:

1. Strategic Improvement Plan, Revision 2, Action Plan 5.3.3.1 - Design Basis Information/Licensing Basis Information (DBI/LBI) Translation Project

   Step 7 - Complete DBI/LBI Translation Project Implementation.

The team identified that the closure package for this step was not complete in that additional material or interviews with associated personnel were required to understand the actions taken and the basis for those actions. The package did not contain sufficient detail concerning the implementation of the Design Basis Information/Licensing Basis Information project. This was documented in Notification 10229623.

2. Strategic Improvement Plan, Revision 2, Action Plan 5.3.3.4 - Design Modification Process

   Step 1c - Establish clear milestones within the modification process for activities such as document development, training updates, configuration document updates, etc.

   Step 1d -
   - Revise modification process Procedure 3.4, Configuration Change Control, to specify participation from site groups outside of Engineering (i.e., Operations, Maintenance, Training, etc.) in the development of conceptual and final design.
   - This includes establishing controls in the design change process to require craft input prior to completing conceptual design (transfer from Action Plan 5.2.6.3).

   Step 2b - Establish expectations for design engineers' field support during design development and implementation on assigned modifications/design changes (transfer from Action Plan 5.2.6.3).

   Step 2c - Review modification process implementing procedures and revise as appropriate to ensure that consideration of component design life and availability/longevity of manufacturer spare parts and one-for-one replacements are appropriately prompted such that planned replacement can be implemented.

Engineering Procedure 3.4, “Configuration Change Control,” was revised in accordance with Steps 1c, 1d, 2b, and 2c. Engineering Division Procedure EDP-03, “CED Guidance,” was revised in accordance with Step 2b. Engineering Division Procedure EDP-06, “Design Inputs,” was revised in accordance with Step 2c. These three procedures were all revised after August 2002.

The team identified that the revisions to these procedures were not annotated as required by Administrative Procedure 0.4.2, “Departmental Approved Procedures,” Revision 1, and Administrative Procedure 0-PWG-01, “Procedures Writers Guide,” Revision 3. Procedures 0.4.2 and 0-PWG-01, issued in August 2002, required that procedures revised as a result of the Strategic Improvement Plan be annotated such that the revisions are clearly associated with a commitment. These annotations are important to ensure that changes made as a result of the Strategic Improvement Plan are not changed during subsequent revisions without appropriate evaluation.

During the inspection, it was noted that the licensee had identified these same discrepancies on January 30, 2003, and wrote a Notification and a Work Order to correct these problems.

The failure to properly annotate revisions to the specified engineering procedures as required by the procedure change procedures is a finding that is greater than minor because, if left uncorrected, it could lead to a more significant safety concern. However, the finding is only of very low safety significance (Green) because no procedure revisions were performed that affected the guidance incorporated by the Strategic Improvement Plan steps. The significance of this issue was determined to be Green because it was greater than minor, not suited for Significance Determination Process analysis, and confirmed by management review.

Technical Specification 5.4.1.a requires written procedures be established, implemented, and maintained covering activities specified in Regulatory Guide 1.33, Revision 2, Appendix A, February 1978. Regulatory Guide 1.33, Appendix A, Item 1, requires that administrative procedures be implemented for the procedure change process. Administrative Procedures 0.4.2, “Departmental Approved Procedures,” Revision 1, and 0-PWG-01, “Procedure Writers Guide,” Revision 3, require that procedures revised as a result of the Strategic Improvement Plan be annotated such that the revisions are clearly associated with a commitment. Contrary to the above, engineering procedures were revised without the required annotation to specify Strategic Improvement Plan commitments. Because this failure to follow the administrative procedures for the procedure change process is of very low safety significance and has been entered into the corrective action program as Notification 10181034 and Work Order 4292744, this licensee-identified violation is being treated as a noncited violation.

Another aspect of this finding was that Strategic Improvement Plan steps were closed with known discrepancies. The licensee identified the discrepancies described above

on January 30, 2003, and a Work Order was written. However, no action was taken to correct the procedures prior to closing the associated action plan steps on January 31, 2003. The team considered it inappropriate to close these steps without first correcting the procedure annotations. This was documented in Notification 10230696.

3. Strategic Improvement Plan, Revision 2, Action Plan 5.3.3.4 - Design Modification Process

   Step 1c - Establish clear milestones within the modification process for activities such as document development, training updates, configuration document updates, etc.

The team identified that the step closure package was not complete in that additional material or interviews with associated personnel were required to understand the actions taken and the basis for those actions. A color coded chart depicting the milestones and the associated key necessary to interpret the chart was not included in the step closure package. This deficiency was documented in Notification 10229594.

4. Strategic Improvement Plan, Revision 2, Action Plan 5.2.1.2 - Operability Determinations

   Strategic Improvement Plan, Revision 2, Action Plan 5.3.3.1 - DBI/LBI Translation Project

   Strategic Improvement Plan, Revision 2, Action Plan 5.3.3.4 - Design Modification Process

These Action Plans did not contain steps to implement the use of the Design Basis Information/Licensing Basis Information database (ATLAS) after creation and installation on the Local Area Network. The intent was to provide this database to engineering and operations personnel for use in the modification and operability determination processes, but no requirement to begin using it existed in the Strategic Improvement Plan. This deficiency was documented in Notification 10229375.

c. Conclusions

The licensee completed the CAL related improvement plan steps as scheduled and the actions taken met the intent of the associated steps. A licensee identified noncited violation for failure to follow procedures was identified when three engineering procedures were revised without adequate annotations to denote that the changes were associated with the Strategic Improvement Plan. This violation was determined to have very low safety significance (Green). The Design Basis Information/Licensing Basis Information database had no provisions in the improvement plan to require its use. Incomplete Strategic Improvement Plan step closure packages required additional information to verify adequate completion and, in one case, an improvement plan step was closed with known discrepancies.

5. CAL Item 5 - Corrective Action Program, Utilization of Industry Operating Experience, and Self-Assessments

a. Scope

The team reviewed the following completed Strategic Improvement Plan, Revision 2 action plan steps associated with CAL Item 5, Corrective Action Program, Utilization of Industry Operating Experience, and Self-Assessments:

Action Plan	Steps
5.2.7.1	1e, 1i
5.2.7.2	6a

The team reviewed the following Strategic Improvement Plan, Revision 1 action plan steps associated with Oversight and Assessment, Corrective Action, Operating Experience, and Self-Assessment:

Action Plan	Steps
5.1.5.1	07
5.2.7.1	01, 02, 07, 08, 09
5.2.7.3	08

The team reviewed the licensee's closure packages and supporting documentation and conducted interviews with various licensee personnel knowledgeable of the specific steps.

b. Observations and Findings

No findings of significance were identified.

c. Conclusions

The licensee completed the CAL related improvement plan steps as scheduled and the actions taken met the intent of the associated steps.

6. CAL Item 6 - Engineering Programs

a. Scope

The team reviewed the following completed Strategic Improvement Plan, Revision 2 action plan steps associated with CAL Item 6, and Engineering Programs:

Action Plan	Steps
5.3.2.1	10, 15

The team reviewed the licensee's closure packages and supporting documentation and conducted interviews with various licensee personnel knowledgeable of the specific steps.

b. Observations and Findings

The team identified observations and findings associated with the following action plan steps in the area of Engineering Programs:

> Strategic Improvement Plan, Revision 2, Action Plan 5.3.2.1 - Engineering Programs
>
> Step 15 - Develop a separate BWRVIP [Boiling Water Reactor Vessel Internals Program] Program document and implementing procedure.

The team identified that the step closure package was not complete in that additional material or interviews with associated personnel were required to understand the actions taken and the basis for those actions. The package was closed without the independent reviewer checklist completed. Block 6 regarding a feedback form was left blank on the checklist. This observation was documented in Notification 10229353.

c. Conclusions

The licensee completed the CAL-related improvement plan steps as scheduled and the actions taken met the intent of the associated steps. An incomplete Strategic Improvement Plan step closure package was identified which required additional information to verify adequate completion.

7. Review of Performance Indicators

a. Scope

The team performed a general review of the 67 performance indicators used to track schedule completion and effectiveness of the Strategic Improvement Plan to assess the quality and appropriateness of those indicators. Of these, a sample was selected for more in-depth review based on risk significance and trending. Specifically, the team reviewed the following performance indicators:

(1) Gaseous Effluent (YTD)
(2) Temporary Modifications
(3) Risk Significant Functional Failures (18-month total)
(4) Chemistry Performance
(5) Corrective Action Program Performance Index
(6) Human Performance Event Free Days
(7) On-Schedule Completion of Adverse Findings
(8) Overdue PMs
(9) SOER Implementation

(10) Temporary Modifications
(11) Timeliness of CNS Response to industry Issues
(12) Strategic Improvement Plan (TIP) Schedule Adherence

b. Observations and Findings

The team reviewed the 67 performance indicators used by the licensee to evaluate the effectiveness of the improvement plan. The original information provided by the licensee was incomplete and, in some cases, incorrect. The licensee stated that an error had been made in that the database used to generate the performance indicator graphs had not been updated. During the course of the inspection, the licensee re-generated the graphs and supplied amplifying information as to the actual status of individual performance indicators. Notification 10229511 was generated to document this condition.

The licensee had developed specific performance indicators to track adherence to the schedule of action plan steps and effectiveness of individual focus areas and the overall Strategic Improvement Plan. In some cases, the same indicator was used to measure multiple focus areas. Several of the performance indicators were index indicators that had inputs from several sources and displayed the cumulative results as a single graph. For example, the Corrective Action Program Performance Index is made up of four different values and weighted as follows:

Significant Condition Report Quality	35 percent
Resolve Condition Report Quality	30 percent
On-Time Completion	20 percent
Backlog	15 percent

The measure of the Significant Condition Report Quality and Resolve Condition Report Quality was based upon scores provided by the Corrective Action Review Board. The team reviewed a sample of four Corrective Action Review Board Score Checklists completed for Significant Condition Reports.

c. Conclusions

The team reviewed a sample of the performance indicators credited by the Strategic Improvement Plan and concluded that, in general, they appeared appropriate and provided useful information. However, the licensee experienced difficulty providing accurate and updated information.

8. 95003 Inspection Observations

a. Scope

The team reviewed a sample of performance problem areas identified during the Procedure 95003 supplemental inspection (NRC Inspection Report 50-298/02-07) to assess how the licensee addressed the issues in Revision 2 of the improvement plan.

b. Observations and Findings

The licensee developed an NRC Issues Disposition Spreadsheet to track the Procedure 95003 supplemental inspection issues and other NRC-identified performance problems. It was confirmed that the items reviewed were included in the spreadsheet and were incorporated into the Strategic Improvement Plan, Revision 2.

c. Conclusions

The licensee developed a tracking mechanism to capture and incorporate NRC identified performance problems and the Procedure 95003 supplemental inspection issues into the Strategic Improvement Plan, Revision 2.

9. Management Meetings

On March 26, 2003, a public meeting was held to present the results of the inspection to Mr. M. Coyle and other members of the licensee staff. The licensee acknowledged the inspection results.

The inspectors asked the licensee whether any materials examined during the inspection should be considered proprietary. No proprietary information was identified.

Supplemental Information

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C. Warren, Vice President, Nuclear Energy and Chief Nuclear Officer
N. Wetherell, Manager, Maintenance
A. Williams, Manager, ESD
L. Young, Senior Consultant

NRC

S. Schwind, Senior Resident Inspector, Cooper Nuclear Station

LIST OF ACRONYMS USED

ADAMS	Agencywide Documents Access and Management System
BWRVIP	Boiling Water Reactor Vessel Internals Program
CAL	Confirmatory Action Letter
CED	Change Evaluation Document
DBI/LBI	Design Basis Information/Licensing Basis Information
NRC	Nuclear Regulatory Commission
PM	Preventive Maintenance
SOER	Significant Operating Event Review

LIST OF DOCUMENTS REVIEWED

The following documents were selected and reviewed by the team to accomplish the objectives and scope of this inspection:

Strategic Improvement Plan, Revision 2, Step Closure Documents

Action Plan	Step	CAP ID, Revision 2	CAP ID, Revision 1
5.1.4.1	9	RCR 2002-2410-11	
5.1.4.1	18	RCR 2002-2410-18	
5.1.4.1	25	RCR 2002-1018-14	
5.1.4.1	26	RCR 2002-1018-15	
5.2.1.2	1	RCR 2002-2416-2	
5.2.7.1	1e	RCR 2002-2429-6	
5.2.7.1	1i	RCR 2002-1036-4	
5.2.7.2	6a	RCR 2002-2430-7	
5.3.1.1	3c	RCR 2002-2435-8	
5.3.1.1	3d	RCR 2002-2435-9	RCR 2002-1049-15
5.3.1.2.a	3a	RCR 2002-2436-5	
5.3.1.2.c	1	RCR 2002-2438-2	RCR 2002-1044-3
5.3.1.2.c	2	RCR 2002-2438-3	RCR 2002-1044-3
5.3.1.2.c	3	RCR 2002-2438-4	
5.3.1.2.c	4	RCR 2002-2438-5	RCR 2002-1044-4
5.3.1.2.c	5	RCR 2002-2438-6	RCR 2002-1044-11
5.3.1.2.c	6	RCR 2002-2438-7	
5.3.1.2.c	7	RCR 2002-2438-8	RCR 2002-1044-10
5.3.1.2.f	1a	RCR 2002-2441-2	
5.3.1.2.f	7	RCR 2002-2441-20	
5.3.1.2.h	1a	RCR 2002-2443-2	
5.3.1.2.h	1b	RCR 2002-2443-3	
5.3.1.2.h	1c	RCR 2002-2443-4	
5.3.1.2.i	2a	RCR 2002-2444-4	
5.3.1.2.i	3a	RCR 2002-2444-6	
5.3.1.2.j	6	RCR 2002-2445-8	
5.3.1.2.j	7	RCR 2002-2445-9	
5.3.1.2.k	1a	RCR 2002-2446-2	
5.3.1.2.k	1b	RCR 2002-2446-3	
5.3.1.2.k	1c	RCR 2002-2446-4	
5.3.1.2.k	2	RCR 2002-2446-5	
5.3.2.1	10	RCR 2002-2447-11	
5.3.2.1	15	RCR 2002-2447-17	
5.3.3.1	1	RCR 2002-2448-2	RCR 2002-1039-2
5.3.3.1	2	RCR 2002-2448-3	RCR 2002-1039-3
5.3.3.1	3	RCR 2002-2448-4	RCR 2002-1039-4
5.3.3.1	4	RCR 2002-2448-5	RCR 2002-1039-5

5.3.3.1	5	RCR 2002-2448-6	RCR 2002-1039-6
5.3.3.1	6	RCR 2002-2448-7	RCR 2002-1039-7
5.3.3.1	7	RCR 2002-2448-8	
5.3.3.3	1	RCR 2002-2449-2	RCR 2002-1038-2
5.3.3.4	1a	RCR 2002-2450-2	RCR 2001-0969-1
5.3.3.4	1b	RCR 2002-2450-3	RCR 2001-0969-2
5.3.3.4	1c	RCR 2002-2450-4	RCR 2002-0051-10
5.3.3.4	1d	RCR 2002-2450-5	RCR 2002-0717
5.3.3.4	1e	RCR 2002-2450-6	RCR 2002-0717
5.3.3.4	2a	RCR 2002-2450-7	RCR 2002-0777 RCR 2002-1232-1
5.3.3.4	2b	RCR 2002-2450-8	RCR 2002-1034
5.3.3.4	2c	RCR 2002-2450-9	

Strategic Improvement Plan, Revision 1, Step Closure Documents

Action Plan	Step	CAP ID, Revision 1
5.1.5.1	07	RCR 2002-1026
5.2.7.1	01	RCR 2002-1015-2
5.2.7.1	02	RCR 2002-1015-3
5.2.7.1	07	RCR 2002-1015-8
5.2.7.1	08	RCR 2002-1015-15
5.2.7.1	09	RCR 2002-1015-16
5.2.7.3	08	RCR 2002-1040-21
5.3.1.1	1.1	RCR 2002-1049-2
5.3.1.1	1.2	RCR 2002-1049-3
5.3.1.1	1.3	RCR 2002-1049-4
5.3.1.1	2.4	RCR 2002-1049-11

Notifications

10181034
10215696
10229188
10229290
10229353
10229375
10229407
10229488
10229511

10229594
10229623
10229715
10230696

Work Orders

4292744

Procedures

Administrative Procedure 0.4.2, “Departmental Approved Procedures,” Revision 1
Administrative Procedure 0.4, “Procedure Change Process,” Revision 34
Administrative Procedure 0-PWG-01, “Procedure Writer’s Guide,” Revision 3
Administrative Procedure 0-CNS-63, “The Strategic Improvement Plan (TIP) Progress Monitoring and Action Plan Closure,” Revision 3

Emergency Procedure “5.3Grid,” Revisions 0,1,2,3

6.1.EE.303 “Emergency Bus Undervoltage (27) Relay Testing and Calibration (Div 1),” Revision 4

Engineering Evaluations

Change Evaluation Documents 6009562, 6008750