



**UNITED STATES
NUCLEAR REGULATORY COMMISSION**

REGION IV
1600 EAST LAMAR BOULEVARD
ARLINGTON, TEXAS 76011-4511

March 19, 2020

Mr. Eric Larson, Site Vice President
Entergy Operations, Inc.
Grand Gulf Nuclear Station
P.O. Box 756
Port Gibson, MS 39150

**SUBJECT: GRAND GULF NUCLEAR STATION – BIENNIAL PROBLEM IDENTIFICATION
AND RESOLUTION INSPECTION REPORT 05000416/2020010**

Dear Mr. Larson:

On January 30, 2020, the U.S. Nuclear Regulatory Commission (NRC) completed a problem identification and resolution inspection at your Grand Gulf Nuclear Station and discussed the results of this inspection with you and other members of your staff. The results of this inspection are documented in the enclosed report.

The NRC inspection team reviewed the station's corrective action program and the station's implementation of the program to evaluate its effectiveness in identifying, prioritizing, evaluating, and correcting problems and to confirm that the station was complying with NRC regulations and licensee standards for corrective action programs. Based on the samples reviewed, the team determined that your staff's performance in each of these areas adequately supported nuclear safety.

The team also evaluated the station's processes for use of industry and NRC operating experience information and the effectiveness of the station's self-assessments and audits. Based on the samples reviewed, the team determined that your staff's performance in each of these areas adequately supported nuclear safety.

Finally, the team reviewed the station's programs to establish and maintain a safety-conscious work environment and interviewed station personnel to evaluate the effectiveness of these programs. The NRC found that the station has established and maintains a work environment where staff employees indicated that they felt free to raise and pursue resolution of safety concerns without fear of retaliation. However, the team also found evidence of challenges within your primary contractor organization's safety-conscious work environment. These morale issues could have a deleterious effect on contractor performance if allowed to continue.

One finding of very low safety significance (Green) is documented in this report. This finding involved a violation of NRC requirements. We are treating this violation as a non-cited violation (NCV) consistent with Section 2.3.2 of the Enforcement Policy.

If you contest the violation, or the significance or severity of the violation documented in this inspection report, you should provide a response within 30 days of the date of this inspection report, with the basis for your denial, to the U.S. Nuclear Regulatory Commission, ATTN: Document Control Desk, Washington, DC 20555-0001; with copies to the Regional Administrator, Region IV; the Director, Office of Enforcement; and the NRC Resident Inspector at Grand Gulf Nuclear Station.

If you disagree with a cross-cutting aspect assignment in this report, you should provide a response within 30 days of the date of this inspection report, with the basis for your disagreement, to the U.S. Nuclear Regulatory Commission, ATTN: Document Control Desk, Washington, DC 20555-0001; with copies to the Regional Administrator, Region IV; and the NRC Resident Inspector at Grand Gulf Nuclear Station.

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

Sincerely,

Ami N. Agrawal, Team Leader
Inspection Program and Assessment Team
Division of Reactor Safety

Docket No. 05000416
License No. NPF-29

Enclosure:
As stated

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GRAND GULF NUCLEAR STATION – BIENNIAL PROBLEM IDENTIFICATION AND
RESOLUTION INSPECTION REPORT 05000416/2020010 – MARCH 19, 2020

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**U.S. NUCLEAR REGULATORY COMMISSION
Inspection Report**

Docket Number: 05000416

License Number: NPF-29

Report Number: 05000416/2020010

Enterprise Identifier: I-2020-010-0007

Licensee: Entergy Operations, Inc.

Facility: Grand Gulf Nuclear Station

Location: Port Gibson, MS

Inspection Dates: January 13, 2020, to January 30, 2020

Inspectors: R. Azua, Senior Reactor Inspector
B. Correll, Reactor Inspector
H. Freeman, Senior Project Engineer
S. Hedger, Emergency Preparedness Inspector
T. Steadham, Senior Resident Inspector

Approved By: Ami N. Agrawal, Team Leader
Inspection Program and Assessment Team
Division of Reactor Safety

Enclosure

SUMMARY

The U.S. Nuclear Regulatory Commission (NRC) continued monitoring the licensee's performance by conducting a biennial problem identification and resolution inspection at Grand Gulf Nuclear Station in accordance with the Reactor Oversight Process. The Reactor Oversight Process is the NRC's program for overseeing the safe operation of commercial nuclear power reactors. Refer to <https://www.nrc.gov/reactors/operating/oversight.html> for more information.

List of Findings and Violations

Failure to Correct Conditions Adverse to Quality Associated with Oil Traceability			
Cornerstone	Significance	Cross-Cutting Aspect	Report Section
Mitigating Systems	Green NCV 05000416/2020010-01 Open	[P.3] - Resolution	71152B
The NRC inspectors identified a Green finding and associated non-cited violation of 10 CFR Part 50, Appendix B, Criterion XVI, "Corrective Action," for the licensee's failure to restore the traceability of oil in safety-related components. Specifically, in September 2018 NRC inspectors had identified 10 safety-related components where the licensee failed to maintain adequate records of oil additions. In each case, maintenance records were missing the required issue tickets as a record of the source and quality of the oil that had been added. As of January 29, 2020, the inspectors determined that the licensee had failed to take corrective actions to restore the quality classification of the oil additions for 9 of the 10 components.			

Additional Tracking Items

None.

INSPECTION SCOPES

Inspections were conducted using the appropriate portions of the inspection procedures (IPs) in effect at the beginning of the inspection unless otherwise noted. Currently approved IPs with their attached revision histories are located on the public website at <http://www.nrc.gov/reading-rm/doc-collections/insp-manual/inspection-procedure/index.html>. Samples were declared complete when the IP requirements most appropriate to the inspection activity were met consistent with Inspection Manual Chapter (IMC) 2515, "Light-Water Reactor Inspection Program - Operations Phase." The inspectors reviewed selected procedures and records, observed activities, and interviewed personnel to assess licensee performance and compliance with Commission rules and regulations, license conditions, site procedures, and standards.

OTHER ACTIVITIES – BASELINE

71152B - Problem Identification and Resolution

Biennial Team Inspection (IP Section 02.04) (1 Sample)

The inspectors performed a biennial assessment of the licensee's corrective action program, use of operating experience, self-assessments and audits, and safety-conscious work environment.

- **Corrective Action Program Effectiveness:** The inspectors assessed the corrective action program's effectiveness in identifying, prioritizing, evaluating, and correcting problems. The inspectors also conducted a 5-year review of condition reports associated with the station service water system. The inspectors reviewed approximately 150 condition reports from those that had been issued since the last biennial problem identification and resolution inspection completed in November 2018.
- **Operating Experience, Self-Assessments and Audits:** The inspectors assessed the effectiveness of the station's processes for use of operating experience, self-assessments and audits. The inspectors reviewed 5 examples of industry operating experience that the licensee received during the assessment period and 15 examples of self-assessments and audits that had been performed during the assessment period.
- **Safety-Conscious Work Environment:** The inspectors assessed the effectiveness of the station's programs to establish and maintain a safety-conscious work environment. The inspectors interviewed 39 licensee employees in focus group interviews of members from operations, engineering, radiation protection, and electrical maintenance. Additionally, the inspectors conducted seven additional focus groups and individual interviews with the primary contractor organization onsite (Day & Zimmerman). The inspectors interviewed the employee concerns coordinator and reviewed the results of the most recent safety-culture survey.

INSPECTION RESULTS

Assessment - Corrective Action Program Effectiveness	71152B
<p>Overall, based upon the condition reports reviewed and the meetings attended, the team concluded that the licensee's corrective action program met regulatory requirements and self-imposed standards that support nuclear safety. The team's overall impression is that performance has continued to improve over the past two assessments, but identified areas that may warrant management attention and action as deemed appropriate.</p> <p><u>Effectiveness of Problem Identification:</u></p> <p>Based on the samples reviewed, the team determined that the licensee was identifying and documenting problems at an appropriately low threshold that supported nuclear safety. Over the 15-month assessment period, the licensee had initiated over 12,500 condition reports - an average of about 830 per month. During the inspection, the team noted that the licensee typically documented potential deficiencies and observations that were identified during the inspection without hesitation when they could not promptly provide an answer or a basis for acceptability for the condition. However, the team did note that one observation regarding the acceptability of dissimilar connectors on a whitey valve could not be immediately answered in which the on-shift operating crew did not initiate a condition report until 4-days after being raised. While this delay did not meet the licensee management's expectations, ultimately, the team found the condition was acceptable.</p> <p><u>Effectiveness of Prioritization and Evaluation:</u></p> <p>The team found that the licensee was appropriately prioritizing issues in accordance with licensee standards. The team observed management appropriately providing guidance and oversight during the management performance review group (PRG) meetings. The team observed members raising questions about classifications and recommending actions during the PRG meetings without any apparent reservations. The team found that the licensee had classified just over 25 percent of the condition reports as adverse conditions. The team's review of sample of condition reports classified as non-adverse did not identify any that should have been classified as adverse and addressed under the corrective action program, as required.</p> <p>The team did note several instances where the use of effectiveness reviews was not conducted in an expected manner. Effectiveness reviews are specified by the licensee's program to evaluate whether corrective actions to prevent recurrence (CAPR) for significant conditions adverse to quality are effective. Examples include a few effectiveness reviews that accepted less than 100 percent (i.e., 90 percent) as being acceptable. The team concluded this was inconsistent with the purpose of measuring the effectiveness of a corrective action to prevent recurrence. The team found one effectiveness review that was not performed (i.e. cancelled), because as it stated, the effectiveness review was not based upon a CAPR and was therefore not required; however, the assignee did not obtain management's approval to cancel the action. Finally, the team noted some effectiveness reviews that were not completed in the time-frame or frequency that had been specified by management. The team concluded that none of the examples impacted the evaluation to correct conditions adverse to quality.</p>	

Effectiveness of Corrective Actions:

Based upon the samples reviewed, the team found that the corrective actions associated with adverse conditions were generally appropriate and implemented in a timeframe appropriate to the significance of the condition. However, the team did find examples where the licensee's corrective actions did not adequately address the condition. As documented in NRC Inspection Report 05000416/2019004, the licensee missed a number of opportunities to adequately correct a condition adverse to quality associated with containment airlock inner door (NCV 05000416/2019004-04). As documented in that inspection, the inspectors found that the work performed to correct previously identified conditions were inadequate to correct the identified conditions. Additionally, the team documented a finding in this report where the licensee failed to promptly identify and correct a condition adverse to quality associated with oil traceability. These types of findings indicate a need for increased management oversight to ensure conditions adverse to quality are appropriately addressed.

Assessment – Operating Experience, Self-Assessments and Audits

71152B

The inspectors found that the licensee routinely shared operating experience with all departments as part of the weekly PRG meetings. The licensee typically assigned operating experience that may have an impact on the station to specific organizations for relevance and evaluation. The inspectors concluded that the licensee's use of operating experience was appropriate.

The inspectors found that the self-assessments that were reviewed were critical, identified weaknesses and issues, and corrective actions were taken.

Assessment – Safety-Conscious Work Environment

71152B

The licensee had established and maintained a work environment where staff employees felt free to raise and pursue resolution of safety concern using a variety of options including: the condition report process, supervision, open-door policy, employee concerns program, ethics hotline, and the NRC. Nearly all indicated that they had never found a need to go beyond the condition reporting process or to their supervision to get an issue resolved. Many individuals expressed confidence that the plant's performance was headed in the right direction under the current leadership's oversight and that management focus was on the safe operation of the plant rather than the perception from previous years where that focus was on production.

However, the team also found some work environment challenges within the primary contractor workforce (Day and Zimmerman). Through interviews with the contractor staff employees, the team identified morale issues in some of the departments. These issues seem to stem from a perception that contractor management would take actions against them for such things as reporting work issues outside of their management chain-of-command, for appearing to be sitting idle in their breakroom, or for slowing down a work effort (even if the reason was for personnel or equipment safety). The team brought these observations to senior plant management's attention. While the team did not identify any safety issue that had not or would not be raised by the contractor workforce during these interviews, the team concluded that if not addressed, contractor staff morale could negatively impact performance in this area.

Overall, the team concluded that all the licensee work groups interviewed at the Grand Gulf Nuclear Station maintained a healthy safety-conscious work environment. However, the

inspectors found that morale issues within the contractor workforce could have a deleterious effect on staff performance and potentially on plant safety if allowed to continue.

Failure to Correct Conditions Adverse to Quality Associated with Oil Traceability			
Cornerstone	Significance	Cross-Cutting Aspect	Report Section
Mitigating Systems	Green NCV 05000416/2020010-01 Open	[P.3] - Resolution	71152B

The NRC inspectors identified a Green finding and associated non-cited violation of 10 CFR Part 50, Appendix B, Criterion XVI, "Corrective Action," for the licensee's failure to restore the traceability of oil in safety-related components. Specifically, in September 2018 NRC inspectors had identified 10 safety-related components where the licensee failed to maintain adequate records of oil additions. In each case, maintenance records were missing the required issue tickets as a record of the source and quality of the oil that had been added. As of January 29, 2020, the inspectors determined that the licensee had failed to take corrective actions to restore the quality classification of the oil additions for 9 of the 10 components.

Description: As described in NRC Inspection Report 05000416/2018004 (ML19038A437), NRC inspectors had identified that the licensee failed to maintain adequate quality records of oil additions to 10 safety-related components in 4 different systems. At that time, the licensee entered the issue into their corrective action program as Condition Report CR-2018-10179, and performed an adverse condition analysis which identified 19 corrective actions to address the programmatic and human performance causes that contributed to the improper oil additions. The inspectors reviewed the licensee's corrective actions for this non-cited violation.

Because the original issue was related to oil contamination of the reactor core isolation cooling (RCIC) turbine, the licensee's corrective actions had focused on restoring the oil quality in the RCIC turbine only. For the other nine components (residual heat removal pumps, standby service water pumps, emergency diesel generators), the licensee verified that the predictive maintenance levels were within specification (contaminants and viscosity). The licensee did not implement any corrective actions to restore the quality level of the oil in these remaining components. The inspectors noted that while oil sample results for contaminants and viscosity are important in determining component operability, they do not reestablish either traceability or quality.

The inspectors reviewed the work order history for the residual heat removal pumps (since the last untraceable oil addition in each pump), and did not identify any instances where the licensee completely drained and filled the systems with traceable oil. The licensee confirmed that, except for the RCIC turbine, none of the other nine identified components have been drained and filled with traceable oil.

Corrective Actions: Licensee corrective actions included entering the issue into their corrective action program.

Corrective Action References: Condition Report CR-GGN-2020-00915

Performance Assessment:

Performance Deficiency: The failure to restore the traceability of oil in safety-related components is a performance deficiency.

Screening: The inspectors determined the performance deficiency was more than minor because if left uncorrected, it would have the potential to lead to a more significant safety concern. Specifically, the quality level requirements of the oil ensure that components important to safety are properly lubricated. The failure to maintain those quality requirements

in the absence of interim corrective actions adversely affects equipment reliability and thus could have the potential to create a more significant safety concern.

Significance: The inspectors assessed the significance of the finding using Appendix A, "The Significance Determination Process (SDP) for Findings At-Power." Since the finding does not represent a loss of system function, the finding screens to a Green significance.

Cross-Cutting Aspect: P.3 - Resolution: The organization takes effective corrective actions to address issues in a timely manner commensurate with their safety significance.

Enforcement:

Violation: As required by 10 CFR Part 50, Appendix B, Criterion XVI, "Corrective Action," measures shall be established to assure that conditions adverse to quality, such as deficiencies and deviations, are promptly identified and corrected.

Contrary to the above, from September 2018 through January 29, 2020, the licensee failed to promptly correct conditions adverse to quality. Specifically, the licensee failed to either restore or implement plans to restore the required quality level of oil after it was identified that oil of unknown quality (undocumented) had been added to the following safety-related components:

- Divisions 1, 2, and 3, residual heat removal pumps
- Divisions 1, 2, and 3, standby service water pumps
- Divisions 1, 2, and 3, emergency diesel generators

Enforcement Action: This violation is being treated as a non-cited violation, consistent with Section 2.3.2 of the Enforcement Policy.

Observations - Corrective Action Program Observations

71152B

During the inspection, the team had the following observations associated with the implementation of the corrective action program that warrant additional management attention:

1. Accuracy of Documents – The team noted examples within one root cause evaluation associated with a secondary containment door that had either inconclusive or inaccurate information within the evaluation. The inspectors found that the root cause was inclusive because it did not specifically identify the cause of the failure, but left it to the reader as to infer whether the failure was due to the design of the hinge(s) or to an unorthodox installation. Root causes should specify the cause so a CAPR can be developed to address the cause. A second example within this root cause evaluation concluded that a contributing cause was that air pressure differences caused the door to open uncontrollably hitting the door stops and causing subsequent impact vibrations. The inspectors review of the door's layout revealed that the door stop was too low to hit the personnel access door (the personnel access door is located within a larger equipment door) even if the door could swing far enough to reach it (prevented by the closing device). Because the document was a high-level document with management oversight, this should have been caught and addressed during the review process. The licensee wrote Condition Report CR-2020-00873.

2. Identification and verification – During the walk down of the secondary containment door, the team noted that the mounting hardware of the bottom hinge was different than the upper hinges. This was apparently caused during the repair process and was not an approved design change. The licensee wrote Condition Report CR-2020-00916.
3. Address Issues as Documented – The team identified a cause evaluation of a failed component stating that the failure was likely to have been caused by a manufacturing defect, but the condition report did not address or evaluate the need to issue a Part 21 notification. The failed part had been in service for a number of years, but apparently was disposed of before it could be evaluated. When identified by the NRC, the licensee re-evaluated the statement and chose to remove it because of the part's operating history. During the inspection, the team noted that the licensee staff did identify other issues during PRG meetings that should be evaluated for Part 21 notification.

None of these observations impacted the licensee's overall evaluations or implementation of corrective actions.

EXIT MEETINGS AND DEBRIEFS

The inspectors verified no proprietary information was retained or documented in this report.

- On January 30, 2020, the inspectors presented the biennial problem identification and resolution inspection results to Mr. E. Larson and other members of the licensee staff.

DOCUMENTS REVIEWED

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
71152B	Calculations	Calculation PRA-GG-01-001	GGNS Level-1 Model Revision 3 PSA Summary Report	0
		XC-N1111-01007	GGNS Level 1 PSA, Revision 2	0
	Corrective Action Documents	Condition Reports (CR-GGN-)	2015-04067, 2015-07209, 2016-00572, 2016-02950, 2016-03178, 2016-04834, 2016-08997, 2017-01559, 2017-03404, 2017-06021, 2017-06705, 2018-01595, 2018-04934, 2018-06543, 2018-07783, 2018-09679, 2018-09705, 2018-10179, 2018-10441, 2018-10852, 2018-10947, 2018-11276, 2018-11371, 2018-11492, 2018-11960, 2018-12031, 2018-12069, 2018-12101, 2018-12103, 2018-12302, 2018-13032, 2018-13038, 2018-13042, 2018-13050, 2018-13206, 2018-13234, 2019-00042, 2019-00096, 2019-00222, 2019-00223, 2019-00285, 2019-00485, 2019-00710, 2019-00968, 2019-01048, 2019-01049, 2019-01050, 2019-01051, 2019-01052, 2019-01504, 2019-02009, 2019-02309, 2019-02489, 2019-02717, 2019-03060, 2019-03562, 2019-03822, 2019-03877, 2019-03940, 2019-03971, 2019-04821, 2019-05198, 2019-05538, 2019-05539, 2019-05936, 2019-06009, 2019-06159, 2019-06252, 2019-06295, 2019-06699, 2019-07477, 2019-09175, 2019-09528, 2019-09810, 2019-09933, 2019-10084, 2020-00280, 2020-00794, 2020-00802, 2020-00968, 2020-00978, 2020-00984	
			2020-00358, 2020-00375, 2020-00380, 2020-00389, 2020-00448, 2020-00481, 2020-00509, 2020-00512, 2020-00557, 2020-00736, 2020-00853, 2020-00873, 2020-00879, 2020-00888, 2020-00915, 2020-00916, 2020-00933, 2020-00958, 2020-00968, 2020-00974, 2020-00984	
	Engineering Evaluations	PSA-GGNS-01	Grand Gulf Nuclear Station Probabilistic Risk Assessment Summary Report	0

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
		PSA-GGNS-08-02	GGNS PRA Model Corrections and Refinements for Revision 4B	0
	Miscellaneous		Fire Drill Report, Date: 6-28-19, Time: 14:00, Shift/Team: C	6/28/2019
			Operations High Intensity Oversight Plan, Grand Gulf Nuclear Station Operations Department	7/13/2017
			Grand Gulf Nuclear Station Standard Audit Template, Audit: Emergency Preparedness Program QA-7-2019-GGNS-01	11
		Attachment 9.10, Organizational & Programmatic Screening	CR Number: CR-GGN-2019-1052, Title: NCV for Failure to Follow Emergency Plan	3/25/2019
		Combustible Control Permit Number: 978	Unit 1, Building: SSW A (Pump House, Valve Room, Basin), Fire Area: 64	1/30/2020
		Combustible Control Permit Number: 979	Unit 1, Building: SSW B (Pump House, Valve Room, Basin), Fire Area: 65	1/30/2020
		CR Number CR-GGN-2019-10364	Condition Analysis, Event Title: Security Equipment Preventative Maintenance Strategies	0
		CR-GGN-2016-00572	Apparent Cause Evaluation, Event Title: Inadequate Procedures Lead to NRC-Identified Performance Deficiency	1
		CR-GGN-2016-02950	Root Cause Evaluation, Event Title: Startup from RF 20 "B" Phase Current Differential Relay Scram	2, 3, 4
		CR-GGN-2016-04834	Root Cause Evaluation, Event Title: OPRM Reactor Scram; Operator Response to Equipment Failure Evaluation	1, 2, 3, 4, 5
		CR-GGN-2018-10441	Root Cause Evaluation, Event Title: Manual RX Scram from Heater Drain System	2
		CR-GGN-2019-06699	Human Performance Evaluation, Title: Unexpected Door Alarm/Secure Area Boundary Violation	9/11/2019
		CR-GGN-2019-9175	Adverse Condition Analysis, Event Title: Green NCV on EN-DC-161 Implementation	0
		Effectiveness Review (LO-GLO-)	2018-00193, 2018-00194, 2019-0009	

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
		ES-04	Electrical Terminations and Splices	05
		FLP-GM-MNTFUND	Maintenance Fundamentals	0
		GLP-SEC-PERSCH	Personnel Searches	0
		GNRO-2019/00033	Supplemental Licensee Event Report 2018-009-01, Reactor Manual Shutdown Due to Feedwater Level Control Changes Grand Gulf Nuclear Station, Unit 1, Docket No. 50-416, License No. NPF-29	8/7/2019
		GPCS-EM-INIT	Electrical Maintenance Training Program Description	11
		GPCS-IC-INIT	I&C Maintenance Training Program Description	16
		GSMS-LOR-00285	Conservative Decision-Making Scenario 1	0
		LO-CA# LO-GLO-2016-0009, CA-36	CR# CR-GGN-2016-04834	11/13/2018
		LO-CA# LO-GLO-2016-0009, CA-37	CR# CR-GGN-2016-04834	10/18/2018
		LO-CA# LO-GLO-2016-0009-CA-34/35	CR# CR-GGN-2016-04834	
		LO-CA# LO-GLO-2018-00081 CA 11	CR# CR-GGN-2016-02950	6/11/2019
		LO-CA# LO-GLO-2018-80 CA-15	CR# CR-GGN-2016-02950	2/26/2019
		OE-NOE-2019-267	[OE review of ...] NRC-2-2017-032-IA-19-027, Confirmatory Order Mechanical Planner at Vogtle was the Subject of Employment Discrimination	
		OE-NOE-2019-269	[OE review of ...] CR-WF3-2018-00054 - NCV GREEN Failure to Meet RG 1.9 Emergency Diesel Testing Requirements during Surveillance Test Results in Missed Surveillance	

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
		OE-NOE-2019-272	[OE review of ...] NRC Information Notice 2019-09: Spent Fuel Cask Movement Issues	
		Procedure Request (PR-PRGGN-)	2015-00777	
		SEG-04	System Engineering Strategy	006
		Standing Order 18-0023	Procedure Changes Associated with 12/12/2018 Reactor Scram	0, 1
		Work Tracker Document (WT-WTGGN-)	2018-0311	
	Procedures	01-S-11-10	GGNS Employee's Security Responsibilities	055
		02-S-01-27	Operations Section Procedure - Operation's Philosophy	72
		04-1-01-E51-1	System Operating Instruction, Reactor Core Isolation Cooling System	141
		05-1-02-I-1	Reactor Scram	126
		05-1-02-V-018	Electrical System Grounds	0
		05-1-02-V-019	Loss of 125 VDC	0
		05-1-02-V-020	Loss of Control Room Annunciators	0
		05-1-02-V-21	Reactor Pressure Control Malfunctions	1
		06-OP-1T48-M-0003	Secondary Containment Integrity Check	112
		11-S-51-3	Personnel, Packages, and Vehicle Searches	37
		14-S-02-21	Preparer's Guide for Simulator Evaluation Scenarios	10
		EN-DC-115	Engineering Change Process	21
		EN-DC-117	Post-Modification Testing and Special Instructions	14
		EN-DC-151	PSA Maintenance and Update	6, 7
		EN-DC-159	System and Component Monitoring	16
		EN-FAP-LI-001	Performance Improvement Review Group (PRG) Process	13, 14
		EN-LI-102	Corrective Action Program	35, 38
		EN-LI-104	Self-Assessment and Benchmark Process	14, 15
EN-LI-118	Cause Evaluation Process	28, 30		
EN-LI-121	Trending and Performance Review Process	25, 26		

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
		EN-MA-100	Maintenance Fundamentals Program	3
		EN-NS-232	General Employee Security Responsibilities	2
		EN-OM-126	Management and Oversight of Supplemental Personnel	4
		EN-OM-126-3	Qualification of Supplemental Supervisors	4
		EN-TQ-125	Fire Brigade Drills	8, 9, 10
	Self-Assessments	LO-GLO-2019-00198-CA-1	Pre-NRC IP 92723 Inspection Assessment	10/10/2019