DOE/ORO - 2051
Volume III of III

DWG. NO. K/GA 97-771

U. S. Department of Energy
Oak Ridge Operations

REGULATORY OVERSIGHT PROGRAM

July 1, 1993, to March 3, 1997

A Transitional Program for Regulation of the Gaseous Diffusion Plants at
Paducah, Kentucky and Portsmouth, Ohio

**US Department of Energy (DOE)
Oak Ridge Operations (ORO)**

**REGULATORY OVERSIGHT AGREEMENT (ROA)
Inspection-Related Activities
Paducah Gaseous Diffusion Plant (PGDP)**

DOE TO NRC REGULATORY OVERSIGHT TRANSITION

DOE/ORO/PGDP INSPECTION SUMMARY

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MASTER

**DOE Site Safety Representative (SSR) Report
July 1, 1993 Through March 2, 1997**

**PADUCAH GASEOUS DIFFUSION PLANT
(PGDP)**

DOE to NRC Regulatory Oversight Transition Summary
DOE/ORO/PGDP Inspection-Related Activities

April 18, 1997

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LIST OF ACRONYMS AND CODES

ACR	Area Control Room
AEA	Atomic Energy Act of 1954
AHJ	Authority Having Jurisdiction
ALARA	As Low As Reasonably Achievable
ANS	American Nuclear Society
ANSI	American National Standards Institute
AQ List	Augmented Quality (items) List
ASME	American Society of Mechanical Engineers
BPS	Business Prioritization System
CAAS	Criticality Accident Alarm System
CASOPS	Cascade Operations
CCZ	Contamination Control Zone
CFR	Code of Federal Regulations
CM	Configuration Management
CUP	Chemical, Utilities, and Power
CY	Calendar Year
DMSA	DOE Material Storage Area
DOE	U.S. Department of Energy
DOELAP	DOE Laboratory Accreditation Program
DOE/ORO	DOE Oak Ridge Operations Office
DOE/HQ	DOE Headquarters (Washington, D.C.)
DOT	U.S. Department of Transportation
EF	Enrichment Facility
EG	Engineering Guidelines
EOC	Emergency Operations Center
EPA	U.S. Environmental Protection Agency
E&WM	Environmental and Waste Management
ES&H	Environmental, Safety and Health
ESO	Engineering Service Order
FCA	Fissile Control Area
FSAR	Final Safety Analysis Report
FSD	Fire Services Department
FY	Fiscal Year
GDP	Gaseous Diffusion Plant
GET	General Employee Training
gpm	Gallons Per Minute
GPS	General Plant Support
H&SRC	Health and Safety Review Committee
HAUP	Higher Assay Upgrading Project
HAZMAT	Hazardous Materials
HAZOP	Hazards and Operability Studies
HAZWOPER	Hazardous Waste Operations and Emergency Response
HEPA	High-Efficiency Particulate Air
HEU	Highly Enriched Uranium
HP	Health Physics
HPFWS	High Pressure Fire Water System
H.R.	House of Representatives

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HQ	Headquarters
IAC	Immediate Action Change
IAEA	International Atomic Energy Agency
IFI	Inspection Followup Item
IFS	Inspection Followup System
INPO	Institute of Nuclear Power Operations
IRMS	Integrated Resources Management System
ISA	Independent Safety Assessment
JCO	Justification for Continued Operation
JPIC	Joint Public Information Center
LCO	Limiting Condition for Operation
LLW	Low Level Waste
LMES	Lockheed Martin Energy Systems
LMUS	Lockheed Martin Utility Services
MAP	Master Assessment Plan or Milestones, Activities, and Personnel
M&TE	Measuring & Test Equipment
MC&O	Management Controls and Oversight
MBA	Material Balance Area
MBWA	Management By Walking Around
MC&A	Material Control & Accountability
MMUS	Martin Marietta Utility Services
MS&C	Management Systems and Compliance
MSDS	Material Safety Data Sheet
MSR	Maintenance Service Request
NBL	New Brunswick Laboratory
NCS	Nuclear Criticality Safety
NCSA	Nuclear Criticality Safety Approval
NCSE	Nuclear Criticality Safety Evaluation
NCV	Non-Cited Violation
NDA	Non-Destructive Assay
NE	Nuclear Energy
NFPA	National Fire Protection Association
NIST	National Institute of Standards and Technology
NM	Nuclear Material
NMC&A	Nuclear Material Control & Accountability
NMMSS	Nuclear Materials Management and Safeguards System
NOD	Notice of Deviation
NOV	Notice of Violation
NQA	Nuclear Quality Assurance
NQA-1	ASME National Consensus Quality Assurance Standard for Nuclear Facilities
NRC	Nuclear Regulatory Commission
NSU	Nuclear Safety Upgrades
NUREG	Nuclear Regulatory Guide
NVLAP	National Voluntary Laboratory Accreditation Program
N/A	Not Applicable
O&M	Operations and Management
OCC	Office of Chief Counsel
OPSEC	Operations Security
ORE	Operational Readiness Evaluation
ORO	Oak Ridge Operations Office (of DOE)

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ORR	Operational Readiness Review
OSHA	Occupational Safety and Health Administration
OSR	Operational Safety Requirement
PA	Public Address
P&T	Packaging and Transportation
PBT	Performance Based Training
PGDP	Paducah Gaseous Diffusion Plant
PIMS	Procedures Information Management System
PM	Preventive Maintenance
POA	Plan of Action
PORC	Plant Operations Review Committee
PORTS	Portsmouth Gaseous Diffusion Plant
PR	Problem Report
PRB	Procedures Review Board
PRONET	Procedures Network
PSM	Process Safety Management
PSE	Preliminary Safety Evaluation
psi	Pounds Per Square Inch
PSR	Project Safety Review
PSS	Plant Shift Superintendent
Q List	Quality (items) List
QA	Quality Assurance
QAP	Quality Assurance Program
QC	Quality Control
QPP	Quality Program Plan
QUEST	Quality Uranium Enrichment System for Tomorrow
RCRA	Resource Conservation and Recovery Act
RD	Request for Disposal
RMDC	Records Management and Document Control
RO	Regulatory Oversight
RO Manual	Regulatory Oversight Inspection and Enforcement Manual
ROA	Regulatory Oversight Agreement
RO Manager	Regulatory Oversight Manager
RP	Radiation Protection
RWP	Radiation Work Permit
SAR	Safety Analysis Report
SARUP	SAR Upgrade
SAT	Systematic Approach to Training
SER	Safety Evaluation Report
SME	Subject Matter Expert
SNM	Special Nuclear Material
SPP	Standard Practice Procedure
SSC	Structures, Systems, and Components or Safety System Component
SSR	Site Safety Representative
TBD	To Be Determined
TDAG	Training Department Administrative Guide
TLD	Thermoluminescence dosimeter
TQL	Threshold Quality Level
TSA	Technical Safety Appraisal
TSCA	Toxic Substances Control Act

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TSD	Treatment, Storage, and/or Disposal or Technical Services Division
TSR	Technical Safety Requirement
UCNI	Unclassified Controlled Nuclear Information
U-235	Uranium Isotope 235
UE	Uranium Enrichment
UF ₄	Uranium Tetrafluoride
UF ₆	Uranium Hexafluoride
UL	Underwriters Laboratory
UMH	Uranium Material Handler
UO ₂ F ₂	Uranium Oxyfluoride
USEC	United States Enrichment Corporation
URI	Unresolved Item
USQ	Unreviewed Safety Question
USQD	Unreviewed Safety Question Determination
wt. %	Weight Percent

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EXECUTIVE SUMMARY

The President signed H.R. 776, the *Energy Policy Act of 1992* (the Act), into law (Public Law 102-486) on October 24, 1992. The Act amended the *Atomic Energy Act of 1954* (AEA), to establish a new government corporation, the United States Enrichment Corporation (USEC) for the purpose of managing and operating the uranium enrichment facilities at Paducah, Kentucky [Paducah Gaseous Diffusion Plant (PGDP)] and Piketon, Ohio [Portsmouth Gaseous Diffusion Plant (PORTS)]. These facilities were previously owned and operated by the United States Department of Energy (DOE). Therefore, to transfer responsibility for the two gaseous diffusion plants (GDP) from DOE to USEC, Congress mandated in Section 1403 of the Act, that USEC lease the GDPs from DOE. This leasing arrangement between these two entities (one government and one private) occurred on July 1, 1993 with the issuance of the, *Lease Agreement Between the United States Department of Energy and the United States Enrichment Corporation* (the Lease).

In addition to this GDP leasing mandate, the Congress, under Section 1701 of the AEA, as amended, commissioned the United States Nuclear Regulatory Commission (NRC) to promulgate standards that would apply to the two operating gaseous diffusion plants to protect the public health and safety from radiological hazards, and to provide for the common defense and security. These standards were issued by NRC as Part 76, *Certification of Gaseous Diffusion Plants*, to Title 10, *Code of Federal Regulations*, Chapter I, (10 CFR 76) on September 9, 1994 and became effective on October 24, 1994. This document was to be utilized by the NRC to certify and regulate the GDPs as a private enterprise. Until NRC assumed regulatory oversight for the GDPs, USEC assumed responsibility for the plants under DOE requirements and oversight for nuclear safety and safeguards and security.

DOE's nuclear safety and safeguards and security programs that were to be utilized to perform this regulatory oversight function until NRC assumed this responsibility, were derived from the DOE Orders System. The finalized critical set of nuclear safety and safeguards and security requirements and the bases for DOE regulatory oversight that were considered essential for the continued safe and secure operations of the GDPs were incorporated into the Lease as Exhibit D, *Regulatory Oversight Agreement between United States Department of Energy and United States Enrichment Corporation* (the ROA). The finalized structure of this document was patterned after NRC's NUREG-1324, *Proposed Method for Regulating Major Materials Licensees*, published in February 1992.

During the 44 months since the DOE Regulatory Oversight (RO) program was established, a DOE RO Manager was designated; RO tasks and responsibilities were assigned; a functional organizational structure was put into place (Figure 1) and staffed with matrixed DOE personnel and contractor support "specialists" that made up the core RO staff; Site Safety Representatives (SSR) were chosen, qualified, certified, and placed at both GDPs; a Regulatory Oversight Inspection and Enforcement Manual (RO Manual) was issued; and a total of 47 DOE RO inspections were performed at the PGDP facility during this period by the DOE Oak Ridge Operations (DOE/ORO) Office and 4 safety assessments were performed by DOE Headquarters (DOE/HQ) personnel. A total of 249 inspection issues were identified to the lessee, of which 118 issues were cited as violations of ROA requirements or deviations from commitments made to the DOE. Out of these 249 issues, all but 12 have been closed. These will be transferred to the NRC for follow-up inspection under their RO inspection program.

In addition to its direct RO inspection responsibilities, the DOE RO Manager's office also performed collateral inspection activities. These included performing:

- Operational Readiness Evaluation (ORE) inspections at the facilities to help them, in part, transition from Operational Safety Requirements (OSRs) to Technical Safety Requirements (TSRs);

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- On-site verification and validation inspections to attest to the assumptions and statements made in the upgraded Safety Analysis Report (SARUP) commissioned by DOE/ORO to be developed and delivered to USEC for their use in justifying the operating safety basis for the facility and to support DOE's independent Safety Evaluation Report (SER) which will be issued along with the SARUP;
- On-site inspections to verify the closure of at least 50% of the corrective actions committed to by the lessee that were to be accomplished prior to certification by the NRC as detailed in the DOE Compliance Plan submitted to the NRC in support of the USEC's application submittal to the NRC; and
- Regulatory reviews of USEC submitted event reports, Justifications for Continued Operations (JCO), and a host of other documents requiring the DOE RO Manager's attention and dispositioning.

These latter efforts, resulted, in cases, requesting the SSRs to perform limited site assessment inspections of these regulatory issues to determine if a larger, more safety significant, underlying issue existed. All on-site DOE/ORO inspection, verification, and validation activities, including DOE/HQ assessment activities were coordinated through the SSRs.

In addition to the regulatory issue reviews and site inspections identified above, the RO organization also facilitated the certification process, by working closely with USEC and the NRC to effect the certification effort. The RO staff assisted NRC personnel by familiarizing them on the operation of the gaseous diffusion technologies and programs, and worked with the resident inspectors to amplify on issues DOE had currently cited or was about to cite against the lessee's GDP operations. The NRC resident inspectors in turn, communicated and shared information freely with DOE, observing DOE protocol not to publicly disclose DOE inspection findings prior to release of the DOE Inspection Report. This spirit of cooperation, communication, and information exchange was in keeping with the Agreement into between DOE and NRC on August 11, 1994, entitled, *Agreement Establishing Guidance for NRC Inspection Activities at the Paducah and Portsmouth Gaseous Diffusion Plants Between Department of Energy Regulatory Oversight Manager and Nuclear Regulatory Commission*.

The activities described above have been captured on Figure 2, *DOE Regulatory Oversight Program MAP - Milestones, Activities, and Personnel*, attached to this document. The Figure depicts the major regulatory milestones in transitioning from DOE regulatory oversight to NRC regulatory oversight of the GDPs; interagency activities that have occurred between USEC, NRC, and DOE in the certification process; the DOE RO Inspection and Enforcement Program; regulatory and technical issue discussions; the training and certification of RO organization personnel; and the staffing levels that were maintained at PGDP during the ROA interim oversight period. Additionally, Attachment A was provided to address quantitatively, some of the critical items depicted in Figure 2.

The result of all these inspection and enforcement efforts has been the determination that PGDP is being operated with an acceptable nuclear safety program and with effective safeguards and security. There are still several nuclear safety upgrades in progress to support the remaining open DOE Compliance Plan, DOE inspection item, and SER corrective actions. There are also open regulatory issues associated with the TSR implementations, and regulatory-ordered and approved compensatory measures taken to resolve issues that have exceeded OSR bounding requirements (e.g., storage of enriched uranium-bearing equipment in the process buildings). Configuration management and the effectiveness of the site's corrective action process to evaluate issues generically to prevent the recurrence of problems also posed a problem at the facility, but in all cases, adequate compensatory management controls have been established to ensure adequate safety exists at PGDP.

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1.0 INTRODUCTION

On July 1, 1993, the US Department of Energy (DOE) signed a Lease Agreement with the newly created United States Enrichment Corporation (USEC) in compliance with the Energy Policy Act of 1992, which became law on October 24, 1992. The purpose of this leasing agreement was to transfer the operation and maintenance of the GDPs from DOE to USEC in order to privatize the current uranium enrichment process in the United States.

Simultaneous with the signing of the DOE/USEC Lease Agreement, USEC signed a contract with the newly established Martin Marietta Utility Services (MMUS) to operate both the PGDP and PORTS GDPs. Most of the operations personnel at both sites were then transferred to MMUS. The remaining personnel transferred to the newly created Martin Marietta Energy Systems (MMES) to handle the cylinder yards and other Non-Leased portions of the facilities. Both companies have now been renamed after the merger of Lockheed with Martin Marietta to Lockheed Martin Utility Services (LMUS) and Lockheed Martin Energy Systems (LMES), respectively.

The Energy Policy Act of 1992 also stipulated that after certain conditions were satisfied, regulatory oversight of the GDPs would transfer from DOE to NRC. This transference occurred at 12:01 a.m., on March 3, 1997. As a result, the DOE/ORO office requested that a transference document be compiled that would represent the DOE regulatory history of PGDP during the ROA interim period, and to serve as a baseline on the current status of the nuclear safety and safeguards and security programs at the time of the DOE regulatory oversight transfer to NRC.

1.1 Purpose

The primary purpose of this document was to document the DOE regulatory oversight inspection and enforcement (I&E) history of PGDP as it pertained to the regulatory framework of DOE's authority contained in the Regulatory Oversight Agreement, Exhibit D to the Lease Agreement between DOE and USEC dated July 1, 1993 (Vol. II, Appendix B). An additional purpose was to provide a formal mechanism by which DOE/ORO could communicate PGDP's I&E history to the NRC as a means of regulatory information transfer as agreed upon in the, *Joint Statement of Understanding Between the Nuclear Regulatory Commission and the Department of Energy on Implementing Energy Policy Act provisions on the Regulation of Gaseous Diffusion Uranium Enrichment Plants (Joint Statement)*, 59 Federal Register 4729, dated February 1, 1994 (Vol. II, Appendix C).

1.2 Scope

The scope of this document encompasses those inspection activities that occurred at the PGDP facility during the period July 1, 1993 through March 2, 1997. The term "inspection" as applied by DOE means the examination, review, or evaluation of any program or activity of USEC with respect to:

- The effectiveness of the program or activity in ensuring that the health and safety of the public and plant personnel are adequately protected;
- The safe operation of the facility; and

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- Compliance with any applicable DOE nuclear safety and safeguards and security requirements as defined in the Regulatory Oversight Agreement (ROA).

This report also provides a description of the Regulatory Oversight Program; its functional matrix organizational makeup; the elements of the program that provided assurance that the Leased Premises continued to comply with the Operational Requirements set forth in Chapter 3 of the ROA; a discussion on DOE's transitional support for the NRC Certification effort and on pending USEC/DOE transitional issues at PGDP; and an appraisal of the RO Program from a lessons learned perspective.

1.3 Approach

The format structure for this document was taken directly from Section 4.2, *Program for Oversight of USEC*, of the ROA. Data was compiled from all areas evaluated and enclosed as Attachments to this document. The data was then evaluated and translated into a series of figures to reflect the regulatory history of the facility. These figures are also attached to this report. Specific sections were then added to the report to address what the attached material represented. Finally, all attached material was then evaluated as a whole to render a ROA "lessons learned" regulatory performance profile, which can be used to further enhance the regulatory oversight process of other DOE facilities that may undergo privatization or regulatory oversight transference to another government agency.

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2.0 DOE PROGRAM FOR OVERSIGHT OF PGDP

The DOE Program for the regulatory oversight of PGDP is defined in Section 4.2, *Program for Oversight of USEC*, of Appendix A, *Safety Basis and Framework for DOE Oversight of the Gaseous Diffusion Plants*, to the ROA. Further definition of the RO Program can be found under Article IV, *DOE Oversight/Enforcement Authority*, and Appendix B, *Enforcement Process*, to the ROA.

2.1 Regulatory Oversight Mission

The fundamental mission of the DOE regulatory oversight function was to ensure that planned and existing operations at PGDP were conducted in a safe manner and in accordance with the plant operating requirements of Section 3, *Operational Requirements*, to the ROA.

2.2 RO Organizational Structure

The organizational structure established by DOE to transition its role from GDP manager to regulator necessitated a change in the structure of the GDP oversight program. The DOE RO Manager was established as the DOE manager for nuclear safety and safeguards and security oversight of the leased spaces at the GDPs (Vol. II, Appendix A). The DOE PGDP Site Manager would continue to serve both as manager and regulator over the non-leased spaces. The RO Manager, in turn, was responsible for discharging those nuclear safety oversight responsibilities traditionally assigned to both the DOE Headquarters and field organizations. Assistance from these organizations to serve in a matrixed capacity as DOE Project Managers, or to perform independent RO inspections, etc., were provided on an as-needed basis, and coordinated through the DOE RO Manager.

To accomplish the necessary scheduling and managing of DOE reviews and appraisals to verify GDP conformance with the Implementation Requirements in Section 3 of the ROA, the RO Manager established a functional matrix organization as illustrated in Figure 1. This organizational structure was not formalized and was staffed to the extent possible, with DOE personnel matrixed to the RO staff that were familiar with the ROA subject matter (programs) and the GDP facilities. This DOE RO staff was further augmented by a cadre of multi-disciplined contractor "specialists" that had NRC, INPO, or nuclear power operating experience that could move about the organization easily to serve in a variety of functions, roles, positions, and to act as lead inspectors/reviewers, as needed. This fluid organizational structure provided a very streamlined, cost-effective mix of personnel which helped to minimize the need to over staff to fulfill all RO obligations and/or contingencies. In turn, these same personnel could be transferred to new projects as they evolved, such as the DOE Compliance Plan Project. Again, this resulted in reducing the overall operating costs for startup and operation of these collateral efforts.

A discussion of the principal managers and staff for the GDP RO Program follows.

2.2.1 Assistant Manager for Enrichment Facilities (EF-20)

The Assistant Manager for Enrichment Facilities provided oversight of the DOE enforcement program and provided policy, programmatic, and implementation direction to the RO Manager. Further, all enforcement actions initiated by the RO Manager were reviewed in an advisory capacity.

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2.2.2 *Manager, Gaseous Diffusion Plants Management (NE-40)*

The Gaseous Diffusion Plants Management Manager provided concurrence in the DOE/NRC plan for transition of the regulatory oversight function of the GDPs; regulatory policies and guidance developed by the RO Manager; modifications to Exhibit D to the Lease Agreement between DOE and USEC; and restart as a result of the exercise of shutdown authority by the RO Manager.

2.2.3 *Regulatory Oversight (RO) Manager (EF-20)*

The RO Manager served as the primary enforcement officer for DOE over the leased spaces at the GDPs. With respect to enforcement actions, the RO Manager independently considered the recommendations of the RO staff and coordinated enforcement actions with the appropriate DOE Headquarters (DOE/HQ) office and obtained any necessary legal reviews. The RO Manager also approved and issued all escalated enforcement actions, including Orders, Notices of Proposed Imposition of Civil Penalties, Civil Penalties, and Severity Level I, II, and III Violations issued without civil penalties pursuant to the ROA.

2.2.4 *Regulatory Oversight Staff*

The RO staff was composed of a group of multi-disciplined individuals that could be utilized on a number of technical tasks involving the performance of reviews of proposed enforcement actions submitted by the Site Safety Representatives (SSR) and other DOE inspectors to ensure technical adequacy and conformance with established RO policy, guidance, and precedents. The RO staff also performed reviews of all inspection and enforcement findings; ensured representatives of the DOE/HQ technical staff had an opportunity to comment on the enforcement findings and proposed recommended action; participated in enforcement conferences as directed by the RO Manager; participated in scheduled conference calls with the SSRs; provided support to the SSRs by evaluating Justifications for Continued Operation (JCO) for potential Unreviewed Safety Question (USQ) conditions or for conditions discovered that placed the facility outside the operating bounds of the Operational Safety Requirements (OSRs); conducted periodic, scheduled DOE appraisals of the ROA (Functional Area Inspections); performed Operational Readiness Evaluations (ORE) for major modifications to the OSRs (such as the 2 3/4 weight percent enrichment upgrade); and performed reviews of event reports and other USEC-submitted documentation for RO Manager action, concurrence, and/or approval.

In addition, the RO Staff was used to provide unique project assistance, when needed, to support the NRC Certification effort of PGDP; for example, the OSR to Technical Safety Requirement (TSR) transition effort, DOE Compliance Plan Project, and the Safety Analysis Report Upgrade Project.

The RO staff had a contingent of administrative support personnel to track and trend regulatory performance history, track administrative actions required or DOE comments made to DOE/HQ, NRC, and/or USEC requests made. The administrative staff also optically digitized all documents received or were transmitted to maintain the integrity of the program.

2.2.5 *Site Safety Representatives (SSRs)*

The SSRs were site-based inspectors that managed all DOE inspection-related activities at the GDPs. The SSRs assigned all inspection report numbers utilized by the various DOE inspections

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conducted at the facility. The SSRs also attended inspection entrance and exit interviews; reviewed all violations of regulatory requirements and recommended enforcement action; prepared appropriate documentation of findings and enforcement action; recommended the severity level and mitigation of a civil penalty, if any; reviewed responses to Notices of Violations submitted by USEC to determine whether the corrective actions identified to prevent recurrence of the issue were appropriate; prepared, or provided input to, evaluations of USEC's responses to proposed civil penalties and orders, as appropriate; reviewed USQ conditions and supporting JCOs; and attended/participated in enforcement and management conferences and regulatory issues meetings with USEC.

2.3 Program Structure

The DOE RO Program was created to assure that the public and worker health and safety were protected and the common defense and security of the United States were provided for, with respect to the operation and maintenance of the PGDP, as its previous DOE management action was transferred over to the USEC. Under DOE RO inspection activities, if this protection could not be reasonably assured by USEC's actions, USEC would not be permitted to continue to operate or maintain the facility. Based on the Articles of the ROA, USEC has the ultimate responsibility for the safety of its activities and the safeguarding of nuclear facilities and materials used in its operation. The DOE RO function only ensures that USEC has adequately discharged this ultimate responsibility.

In order to accomplish this DOE RO function, the RO Manager established an inspection program that was not only aimed at confirming compliance on the part of USEC with the ROA Implementation Requirements, but also on evaluating the adequacy and effectiveness of USEC's performance to operate and maintain the facility. This was accomplished by the independent inspection effort of the SSRs. The SSRs had the freedom and authority to review or investigate any of the nineteen (19) functional areas of the ROA, and the RO Manager could direct the performance and identify the scope of special and functional area inspections as he or she deemed appropriate.

All inspections conducted were of two basic categorizations: routine and special. Routine inspections were performed on a planned, and scheduled basis and made up the core of the program. The purpose of routine inspections was to maintain ongoing assurance of USEC's compliance with the requirements of the ROA. This effort was characterized in large part by repetitive, cyclic inspection of the 19 functional areas described in Section 3 of the ROA by the SSRs. The SSRs devoted approximately 60% of their available on-site time to direct inspection. In addition, at least 15% of this direct inspection time was conducted outside normal hours and during each shift of facility operation.

The site-based inspection activity was supplemented by inspections and appraisals conducted and coordinated out of the DOE Oak Ridge office. These inspection and appraisal activities were conducted at a greater technical depth than those conducted by the SSRs. The frequency for these inspections were delineated in Section 4.2, Table 4.2, *DOE Appraisal Frequency*, of the ROA. In both the SSR inspections and ROA Functional Area inspections (DOE Appraisals), the RO Manager had the authority to modify the PGDP inspection program based on USEC's regulatory performance.

In contrast to the routine inspections, special inspections were performed in response to non-routine events or circumstances. The level and extent of effort expended on a special inspection was determined by the RO Manager based on the degree of threat or risk to public health and safety

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presented by the situation or the nature and source of the event resulting in the need for the special inspection. Examples where special inspections may result include, but are not limited to: allegations and concerns, incidents and unusual events, special follow up inspections of committed corrective actions not covered by the routine inspection program, response to threats, and a situation outside the defined written program of routine inspections necessitating a special inspection.

A listing and summary of all SSR, Functional Area and Special Inspections conducted at PGDP has been enclosed as Attachment B. The statistics associated with the issued DOE Inspection Reports as to the number and type of new and closed findings, has been provided as Attachment C. Specific details on each issue identified in each Inspection Report issued, including its history to closure or escalated enforcement action, has been provided in Attachment D.

2.4 Program Scope

The DOE RO inspection program was developed taking into account several factors which directly affect the scope, depth, and emphasis of the inspections conducted. These factors include:

- The inspection program requirements defined in the documents authorizing the RO function,
- The safety significance of lessee operations being inspected,
- The DOE resources available to implement the inspection program, and
- the NRC inspection activities planned to be conducted at PGDP as detailed in the NRC Master Assessment Plan.

As a result of these considerations, the RO staff developed and implemented a *Regulatory Oversight Inspection and Enforcement Manual* (RO Manual) which was issued on January 1, 1994. This document contains all the administrative and inspection procedures that are required to implement the 19 functional areas of the ROA. This document also provides the guidance necessary for the SSRs to conduct their day-to-day inspections of the leased GDPs.

2.5 Training & Qualification of ROA Inspection Personnel

2.5.1 SSR Training and Qualification

Formal training of the SSRs began in September 1993 which included 390 classroom hours of instruction with additional required reading and self-study. A significant portion of the course work consisted of the formalized Facility Representative's *Advance Nuclear Course* (M.L. Chew and Associates), NRC's *Fundamentals of Inspection* course (NRC-G-101), NRC's *Inspecting for Performance* course (NRC-G-303), the *Gaseous Diffusion Technology* training course (R.H. Dyer and Associates), and DOE's *Conduct of Operations* course. The SSRs also received site required training, such as *Facility Unescorted Access* training, site *General Employee Training* (GET), *Radiation Worker II* training, a 40-hour *HAZWOPER Basic 24 - Training for Hazardous Waste Operations* course, a Security briefing, and specialized nuclear criticality safety training courses.

On June 14, 1994, the two PGDP SSR candidates underwent an oral board examination in Oak Ridge, Tennessee to certify them as SSRs. Neither SSR had difficulty in the examination and no provisional qualification requirements were imposed on either of them. In addition, since their

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qualification, the SSRs have undergone continuing professional and personal development training. This training has enabled the SSRs to better relate to the diverse nature of responsibilities and pressures each of the GDP Managers has to deal with in order to meet production goals, as well as, to ensure the safety of their personnel, and the protection of plant equipment and security information.

2.5.2 DOE Matrixed and Contractor Personnel

All DOE matrixed and contracted inspection personnel underwent a one-week indoctrination training program which included, the *Gaseous Diffusion Technology* training course, *DOE Regulatory Oversight Manual* training, GET, site-specific security (*Facility Unescorted Access*), and in some cases, site-specific *Escort Training*. Those individuals given lead responsibilities during RO inspections or project management alignments, had to clearly demonstrate from previous experience, their capabilities in these areas before they were assigned these key tasks.

2.6 Inspection Follow-up System (IFS)

It was RO policy to carefully manage the follow-up of open inspection issues that required further review by DOE. As inspection issues were opened in the DOE Inspection Reports, which included Notices of Violations (NOV), Non-Cited Violations (NCV), Notices of Deviation (NOD), Unresolved Items (URI), and Inspection Follow-up Items (IFI), these items were entered into the DOE Inspection Follow-up System (IFS). The master IFS database was managed from Oak Ridge, Tennessee with the data files being periodically uploaded to the SSRs IFS database files. The overall responsibility for the accuracy of the data in the IFS database was assigned to the SSRs. The IFS data was completed concurrent with the issuance of each DOE Inspection Report.

Further, as information was received at DOE/ORO that was either directly (e.g., response to an NOV) or indirectly-related (e.g., JCO) to these issues, it was entered into the IFS to assure that appropriate consideration was given to the issue's safety significance. The issues were also prioritized for timely closeout, particularly those having high safety significance or those older than three months. Other older, less significant IFS issues were given higher priority for closure after the first annual Functional Area inspections were completed. All subsequent inspections of open IFS issues, whether leading to closeout or not, were documented in a DOE Inspection Report, and re-processed into the IFS similar to that in which it was initially issued. The final IFS printout summary for all PGDP inspection items has been enclosed as Attachment E.

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3.0 ROA AUDITS AND APPRAISALS

Section 4.2.2, *Audits and Appraisals*, of Chapter 4, *Department of Energy Oversight*, of the ROA provides the RO Program description for comprehensively evaluating PGDP to verify its conformance with the *Implementation Requirements* established in Section 3 of the ROA. The approach identified in the ROA, includes the performance of USEC self-assessments, in addition to DOE inspections, reviews, and other activities set forth in Chapter 4 of the ROA. This combination of USEC and DOE assessments, coupled with the USEC commitments contained within the ROA, were determined to provide the adequate assurance that the Leased Premises would continue to comply with the Nuclear Safety and Safeguards and Security requirements set forth in Chapter 3 of the ROA during the interim regulatory oversight period.

A summary of all DOE Appraisals and inspections conducted at PGDP has been compiled and enclosed as Attachment B. The Attachment begins by identifying the breakdown of DOE inspection types performed (SSR, Functional Area, Special, and DOE/HQ) and the DOE Directives that required SSR or Special Inspection follow-up action. A description of each inspection topic follows, then for more detail on each inspection activity itself, a table was provided to identify the inspection period, the exit meeting date, report issuance date, the date when all of the report's findings were closed, the type of inspection that was conducted (SSR, Special, or Functional Area inspection), the purpose of the inspection, the ROA areas inspected, and the number and types of new findings (violation, deviation, non-cited violation, unresolved item, and inspector follow-up item) raised and the number and types of findings closed. Attachment C was added to provide the statistical details associated with what reports/documents were issued during the 39 inspection periods DOE established for the ROA inspection effort (July 1, 1993 through March 2, 1997) which was also used to create the twelve (12) Figures attached to depict the ROA inspection effort.

In addition, Attachment D was provided to further amplify on the historical details associated with each inspection finding, including follow-up to eventual closeout. Attachment D was utilized by the SSRs to electronically monitor and track the status of each ROA inspection item during the ROA leasing period, and identifies all issues cited from the various inspection reports; USEC commitments that were to be verified as a result of a Management or Enforcement Conference action; and open DOE/HQ report findings that required SSR inspection follow-up for closure. For completeness, a copy of the official DOE tracking system, the Inspection Follow-up System (IFS) has been included as Attachment E.

As a collateral SSR follow-up responsibility, DOE/ORO issued a DOE Directive that required the SSRs to periodically provide status on the DOE/HQ performed Independent Self Assessment (ISA) Report. Though status of these issues was being tracked separately from the IFS and the Attachment D, *SSR Status Tracking System*, this ISA status report has been included in this report as Attachment F for completeness.

Finally, a summary of all USEC Internal Appraisal/Audits conducted since the ROA was implemented has been compiled and enclosed as Attachment G of this report. This attachment identifies those USEC Internal Appraisals/Audits conducted by ROA functional area, and by year performed.

A discussion involving the DOE and USEC appraisals conducted at PGDP follows. The DOE Appraisals include the DOE/HQ assessments performed and the DOE/ORO Functional Area inspections conducted. For discussion on the SSR, Special, and DOE Directive Follow-up inspections conducted, see Section 4.0 of this report.

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3.1 DOE/HQ Appraisals

3.1.1 Nuclear Safety Review (EH-11)

On October 4, 1993, a four-person team from the Office of Environment, Safety and Health, Office of Nuclear Safety, began a 2-week event review of a September 7, 1993, uranium hexafluoride (UF₆) leak that occurred in Building C-337-A. The leak occurred when one of the feed lines from the 5 West (5W) autoclave used to heat and vaporize UF₆ corroded through, releasing UF₆ gas under a pressure of about 60 psi (pounds per square inch) to the atmosphere. Fortunately, the leak was small (0.5 to 5.0 pounds of UF₆ was released) and thus the radiological and toxicological effects on the plant workers and the environment were minimal. Fifteen workers had measurable uptakes of uranium, nine of which exceeded plant administrative limits. The DOE/HQ investigation centered around the Implementation Requirements associated with ROA Operational Requirement 3.8, *Radiation Protection Programs, Systems, Designs, and Permits*, which resulted in 12 concerns being published in a report entitled, *Event Review at Paducah Gaseous Diffusion Plant (PGDP-94-01)*.

The report was issued on April 6, 1994 by DOE/HQ, and the DOE RO Manager submitted it to USEC on May 16, 1994 for a response and/or development of a corrective action plan to address the concerns. A direct response versus corrective action plan submittal was suggested because some of the DOE/HQ concerns identified were being resolved by USEC as part of another response it made to DOE/ORO. This latter response was in relation to DOE/ORO's Notice of Violation (NOV) 70-7001/93-10-01 contained in DOE SSR Inspection Report 70-7001/93-001, issued on October 5, 1993, involving the same C-337-A incident. If USEC identified like issues in the DOE/HQ report, USEC was requested to reference its corrective actions against the NOV item. USEC provided its response to the DOE/HQ report on August 26, 1994. The USEC response addressed all 12 DOE/HQ concerns.

As to the DOE/ORO SSR Inspection Report itself, it was initially issued as a single ROA violation on October 5, 1993. On February 20, 1994, DOE/ORO revised the NOV to that of an 8-part violation (issued primarily against ROA Operational Requirement 3.8), after DOE conducted a walkdown of the incident's conditions. On June 7, 1994, DOE/ORO imposed a civil penalty of \$20,000.00.

USEC's responses to both reports were evaluated by the PGDP-SSRs as to the completion adequacy of their stated corrective actions. The eight-part Notice of Violation 70-7001/93-10-01 (issued in DOE Inspection Report 70-7001/93-001) was closed in DOE Inspection Report 70-7001/96-02, and the twelve DOE/HQ report (PGDP-94-01) concerns were closed in DOE Inspection Report 70-7001/96-08.

3.1.2 Criticality Safety Management Assessment (NE-32)

On October 12, 1993, a Lawrence Livermore National Laboratory (LLNL) Team was formed to conduct a Criticality Safety Management Assessment at PGDP during the period October 12-15, 1993. The team was made up of four members (two from LLNL, one LLNL consultant, and one from DOE/HQ's Fission Energy and System Safety Group), whose site visit was coordinated through a member of the DOE NE-33 Staff. The focus of the assessment was on the PGDP Criticality Safety Group (CSG) to make a determination of the quality of the criticality safety program in place at the time of the inspection, and its functional relationship with plant operations.

The Team concluded that the site's Nuclear Criticality Safety Approval documentation needed

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improvement and left their specific concerns with the PGDP CSG to be disposed of by the lessee in accordance with its local corrective action program and to its site priorities. No formal report was issued, nor was there any further action requested of DOE/ORO to perform inspection verification activities.

3.1.3 Independent Self Assessment (ISA) of PGDP Operations

In accordance with the Energy Policy Act of 1992, after certain conditions were satisfied, regulatory oversight for the GDPs was to be transferred from DOE to NRC. In order to anticipate and address the projected change in oversight responsibility, the Secretary of Energy, under the organization of the DOE Oak Ridge Operations (DOE/ORO) office, commissioned a 10-member Independent Safety Assessment (ISA) Team to conduct a compliance and performance-based assessment at the PGDP facility during the period November 30, 1993 and December 17, 1993. The final report for this assessment effort was issued in February 1994.

The purpose of this assessment was threefold. First, the ISA was to examine those reciprocal functional areas that were specified in the DOE/USEC Lease ROA as they were currently being performed to determine whether these areas were achieving their intended objective of assuring nuclear safety and providing safeguards and security for the site. The Team concluded that the plant was being operated with an acceptable nuclear safety program and with effective safeguards and security.

Second, the Team was to assess the current state of compliance these programs were in when compared to the Implementation Requirements identified in Section 3 of the ROA. The Team found a total of 35 concerns, which they felt, if satisfied, would be expected to improve the nuclear safety and safeguards and security programs at PGDP. These 35 concerns have been tabulated for completeness in Attachment F of this report.

Third, the Team was to judge whether the functional areas defined by the ROA and the Implementation Requirements stipulated therein for each functional area, were adequately achieving their intended goals. The Team found that the 19 functional areas listed in the ROA, Appendix A, Section 3, Operational Requirements, adequately addressed the nuclear safety, safeguards, and security issues relevant to PGDP operations. The Team found no areas important to safety had been omitted. Recommendations were made pertaining to amending the basic objectives to two functional areas, Section 3.3, *Operations*, and Section 3.5, *Training and Qualification*.

The RO staff reviewed the ISA report when it was issued and determined no immediate corrective actions or special inspections were justified. DOE/HQ management upon receipt of the document formally requested DOE/ORO to act upon these recommendations by May 26, 1994 as documented in DOE Memorandum from NE-32 to EO-20, dated April 29, 1993, *Independent Safety Assessment (ISA)*. This memo was followed by a DOE Letter to USEC on May 17, 1994, CC-70-7003/94-001: *Revision to Appendix A to the Regulatory Oversight Agreement*. In this Letter, the DOE/ORO RO Manager proposed changes to ROA Sections 3.2.2.3, and 3.12.2.1, and proposed adding the following new sections: 3.2.2.4, 3.3.2.8, 3.3.2.9, and 3.19.2.3. USEC responded favorably to the request in its Letter to DOE/ORO dated June 30, 1994, and requested a follow-on technical meeting to discuss the changes further. Ultimately, no changes were made to the ROA since the Functional Area Team inspections began at PGDP on May 9, 1994. However, prior to the start of the Functional Area Team Inspections, the ISA concerns and necessary actions were made available to the RO Functional Area Teams so they could focus their inspection efforts on the specific concerns of the

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ISA. For additional details, See DOE Memorandum from EO-21 to NE-30 dated June 16, 1994, and Attachment F.

In addition, after the issuance of the ISA, USEC met with DOE/HQ and made a response to each concern identified in the report. These responses were delineated in LMUS Interoffice Memorandum, POEF-005-94-65, dated May 31, 1994, *USEC/MMUS Response to Independent Safety Appraisal*. USEC did not formally commit to the dates and actions outlined in their memo. However, MMUS/USEC personnel indicated they would work to completing the actions as if they were commitments. For completeness, these items have also been included in the Attachment F writeup.

As assurance that MMUS/USEC completed these corrective actions as scheduled, or had adequate justification for their not being completed, the RO Manager requested the SSRs to periodically status the items. This request was made under DOE Memorandum dated September 15, 1994, *ISA Concern Follow-Up*. As of January 10, 1995, the PGDP SSRs found that all 35 concerns had been closed out by USEC. The SSRs review of these actions indicated that the majority of the issues had not actually been resolved nor corrected. Instead, the issues were just transferred to another action item, or a statement was added that, *[N]o action is recommended or required at this time*. Others were tied to the FSAR Upgrade or to a Nuclear Safety Upgrade (NSU) Project (UEO-1036, *Uranium Enrichment (UE) Nuclear Safety Upgrades Program Plan, Part 4.0, Other DOE Requests*). Several of these NSU Projects have been further linked to DOE Compliance Plan Items. All these various connections and displacements have been identified in Attachment F. The Attachment also provides a discussion as to ultimately what action was required or taken to resolve the item to support the NRC Certification effort.

Although, the ISA corrective actions were not fully resolved under the ROA interim regulatory transition period, the ISA did serve as an indicator for concentrated inspections to be performed by the SSRs, and the DOE Functional Area inspection teams.

3.1.4 Radiological Control Evaluation (EH-16)

During the period of January 10-14, 1994, a five-person EH-16 Team conducted an evaluation of the Radiological Control Program at PGDP. Five programmatic issues were identified by the Team who presented their findings to plant management on January 14, 1994. The programmatic issues included:

- Need for Increased Involvement of the United States Enrichment Corporation (USEC) in issues which Effect the Radiological Program;
- The Standards and Contractor Interfaces for the Site-Wide Radiological Control Program Need to be Established Formally;
- Need for Substantive Improvement in Management Systems and Program Elements which Affect Contamination Control;
- Need to Develop or Improve Radiological Program Technical Bases; and
- Weaknesses in the Radiological Control Technician (RCT) Training Program.

The programmatic issues cited were to be addressed by the lessee in the context of further

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improvements in Radiological Control at the site. Individual deficiencies that made up the programmatic findings were to be disposed of by the lessee in accordance with its local corrective action program and to its site priorities. No further action was requested of DOE/ORO.

3.2 DOE Functional Area Inspections (DOE/ORO Appraisals)

A total of five (5) Functional Area Inspections covering the 19 ROA functional areas were performed in 1994. Sixty-nine (69) findings resulted from these inspections, of which all had been closed. These five inspections have been summarized below. Details on the findings from these inspection reports can be found in Attachment D.

Inspection Report (70-7001)	Subject	No. of Findings
94-14	Regulatory Oversight Appraisal of the <i>Operations</i> (ROA 3.3), <i>Training and Qualification</i> (ROA 3.5), and <i>Maintenance</i> (ROA 3.7) ROA Functional Areas.	15
94-16	Regulatory Oversight Appraisal of the <i>Organization Plan</i> (ROA 3.1), <i>Management Controls and Oversight</i> (ROA 3.2), <i>Quality Assurance</i> (ROA 3.6), and <i>Fire Protection</i> (ROA 3.10) ROA Functional Areas.	15
94-17	Regulatory Oversight Appraisal of the <i>Nuclear Material Safeguards</i> (ROA 3.12), <i>Packaging and Transporting Nuclear Materials</i> (ROA 3.14), <i>Sampling and Analysis</i> (ROA 3.15), and <i>Security</i> (ROA 3.18) ROA Functional Areas.	12
94-18	Regulatory Oversight Appraisal of the <i>Engineering Reviews</i> (ROA 3.4), <i>Emergency Preparedness</i> (ROA 3.13), and <i>Accident Analyses</i> (ROA 3.17) ROA Functional Areas.	7
94-20	Regulatory Oversight Appraisal of the <i>Radiation Protection Programs, Systems, Designs, and Permits</i> (ROA 3.8), <i>Nuclear Criticality Safety</i> (ROA 3.9), <i>Environmental Protection</i> (ROA 3.11), <i>Waste Management Program</i> (ROA 3.16), and <i>Chemical Safety</i> (ROA 3.19) ROA Functional Areas.	20

One Functional Area inspection (70-7001/95-16) was conducted in 1995 involving 10 ROA functional areas which are required to be conducted annually in accordance with the DOE appraisal frequency guidelines of Table 4.2, in Section 4 of the ROA. The inspection identified four violations of ROA requirements, of which one item still remains open (70-7001/95-16-04) and will be transferred to the NRC for follow-up inspection. Thirty-six (36) closures were also made during this inspection.

Because of the indeterminate state of the NRC Certification date, no Functional Area Inspections were performed in 1996. This relaxation of the Table 4.2 inspection requirements was authorized by the RO Manager. Additional background on DOE inspection priorities near the end of the ROA

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Project have been included in Section 4.3 of this report.

3.3 USEC Internal Appraisals/Audits

In accordance with Section 4.2.2 of the ROA, USEC was to conduct internal appraisals (i.e., self-assessments), which were to address all of the Implementation Requirements in Chapter 3 of the ROA at least annually. Further, the Implementation Requirements for half of the basic objectives in Chapter 3 were to be addressed during the first half of the each fiscal year. USEC was also to submit its schedule for internal appraisals to the RO Manager at the beginning of each fiscal year. In addition, USEC was to submit its internal appraisal reports and planned corrective actions, including completion schedules, to DOE within 30 days of the completion of the internal appraisal field work.

A compilation of the Appraisal Audits conducted by USEC, and their findings, during the fiscal years (FY) of 1994, 1995, and 1996, has been enclosed as Attachment G. USEC's Appraisal effort was viewed by the SSRs as evolutionary, beginning with the roll-up Appraisals accomplished in 1994, to performing performance-based audits in 1995, and finally performing audits on an integrated systems approach in 1996.

As to the 1994 Appraisals, these documents had no unique document identification number assigned to them, only that they involved a review of a particular ROA functional area (e.g., ROA Operational Requirement 3.1, *Organization Plan*). To accomplish these Appraisals, the PGDP Quality Assurance (QA) organization drew upon the results of specific audit reports it conducted over the spectrum of, in cases, individual ROA Implementation Requirements. The Appraisal did not identify all cited deficiencies from the individual audit reports. Instead, only those issues deemed "programmatic" were cited. For example, an audit finding stating, *the Health and Safety Review Committee (H&SRC) has not met on a monthly basis as required by procedure for the last six months*, would not be cited in the ROA Appraisal because the procedure that controls the activities of the H&SRC had been issued. Failure to follow the procedure, an implementation noncompliance, was not considered a finding against the ROA.

In FY 1995, the QA organization evolved to performing more performance-based audits, i.e., looking at the effectiveness of the programs established. This resulted in less findings because by now, the procedural controls to identify the scope and content of the programs had been identified and/or issued.

In FY 1996, the QA organization finally evolved to its current state of audit performance, that of integrating similarly-related Implementation Requirements and auditing against the total of these requirements systematically, i.e., performance of a vertical slice through all elements that make up that functional area, such as design controls.

DOE inspection guidance for the SSRs to conduct their inspection activity involving the USEC functional area internal appraisals, was provided in DOE Temporary Instruction, TI-3.3/01, Rev. 0, *Inspection of USEC Self-Assessment Activities*, dated November 11, 1994. SSR review of these reports were documented periodically in their monthly SSR inspection reports as these reports became available. The SSRs did focus their attention in this area more so, in DOE Inspection Report 70-7001/95-04. In this report, the SSRs identified five (5) specific weaknesses with these reports, and concluded that USEC's program for detecting and preventing problems was in violation of ROA Implementation Requirement 3.6.2.3. However, because the SSRs had observed that the

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lessee had identified and implemented improvements in the Quality Assurance internal appraisals conducted in calendar year 1995, involving greater quality documentation of the performance deficiencies identified, the SSRs reduced the severity of the issue to a Non-Cited Violation (70-7001/95-04-03). This item is now closed.

For completeness, a complete tabulation of all USEC performed Internal Appraisal/Audit Reports and findings identified during the entire time the ROA was in effect, has been enclosed as Attachment G. From review of Attachment G, there are still 9 outstanding corrective actions involving ROA deficiencies still open. All of these open items have been evaluated by the SSRs and were found to be similar to DOE Compliance Plan Items already characterized for USEC corrective action to meet NRC Certification requirements. No new issues were identified that have not already been addressed by either currently open DOE inspection items or DOE Compliance Plan Issues.

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4.0 DOE ROA OPERATIONAL OVERSIGHT ACTIVITIES

Section 4.2.3, *Operational Oversight*, of Chapter 4, *Department of Energy Oversight*, to the ROA provides the RO Program description for DOE to conduct day-to-day oversight inspections at the PGDP facility, as well as, conduct investigations of all events relating to nuclear safety or safeguards designated as requiring an investigation in DOE Order 5484.1A, *Environmental Protection, Safety, and Health Protection Information Reporting Requirements*. The first operational oversight provision was accomplished by the SSRs who were assigned to PGDP and were given office space by USEC. These two individuals reported to the DOE RO Manager and performed their day-to-day oversight function by maintaining a site presence for surveillance and inspection of operational activities to ensure that the plant continues to meet the Implementation Requirements set forth in Chapter 3 of the ROA. These inspections were documented in *Routine Inspection* reports.

The second operational oversight provision was normally accomplished by a contingent of DOE/ORO and DOE/HQ matrixed inspection personnel or by contracted personnel experienced in accident analysis and event and causal factors. These inspections were documented in *Special Inspection* reports.

See Attachments B-E for additional details on the kinds and types of findings identified in accomplishing these two activities. For pictorial representations of the data compiled in these Attachments, see Figures 1-12. A discussion involving SSR, Special, and DOE directed follow-up inspections conducted at PGDP follows.

4.1 Site Safety Representative (SSR) Inspections

ROP-IP-001, *Site Safety Representative Inspection Activities*, of the RO Manual, provided the guidance for how the SSRs were to conduct their inspection efforts. Basically, the SSRs were to spend approximately 60% of their available on-site time performing direct inspection of the lessee's operational activities. For their remaining time, the SSRs were to review open items for closure, and other administrative responsibilities. In addition, the inspector was to spend at least 15% of this direct inspection time outside normal working hours and during each shift of facility operation. The SSRs were responsible for ensuring that each PGDP facility or area was inspected at a frequency commensurate to the level of risk.

The SSRs performed 37 inspections over the 44 months the ROA was applicable. Their inspection effort resulted in 121 findings. The inspectors also closed 209 findings during the same period.

Initially, from July 1, 1993 to December 31, 1993, the SSRs performed 83 *Walkthrough Inspections*, which were rolled up into six (6) SSR Inspection Reports. The SSRs performed their walkthrough inspections utilizing checklists they had established to review particular elements of the RO Program, applicable to the facility or area under inspection. This two-step inspection process was terminated in early 1994, and was replaced by a single inspection report to cover the inspection period under review. The SSR inspection periods were set to occur monthly. This practice continued up through August 31, 1995, when the inspections went to a 6-week inspection coverage. Specifics on the SSR inspections can be found in Attachments B-E.

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4.2 Special Inspections

ROP-AP-001, *Policy and Guidance for Development of the DOE Regulatory Oversight Program*, of the RO Manual, provides the direction for what constitutes a *Special Inspection*. The purpose of the special inspection is to sharply focus the examination and evaluation of lessee controls on a particular aspect of operation in response to a specific event or condition. The guidance for a special inspection is developed on a case-by-case basis and will be in the form of a general inspection or concept of action.

The level and extent of effort expended on a special inspection is determined by the RO Manager based on the degree of threat or risk to the general health and safety presented by the situation or nature and source of the event resulting in the special inspection. Examples of items that might result in a special inspection include: allegations and concerns; incidents and unusual events; special follow-up inspections of corrective actions not covered by the routine inspection program; a response to requests; or a situation outside the defined written program of routine inspections necessitating a special inspection.

During the time frame July 1, 1993 through March 2, 1997, four (4) special inspections were conducted at PGDP. These involved the following issues:

Inspection Report (70-7001)	Subject	No. of Findings
94-13	Event investigation of an unplanned release of UF ₆ from the C-310 Burp Station on February 17, 1994	4
94-15	Event Investigation of an unplanned release of UF ₆ from the C-315 Surge and Waste Building on April 12, 1994	3
94-19	Evaluation of the integrated response capabilities during PGDP's 1994 Emergency Management Exercise No. 49	0
95-13	Event investigation of an unplanned release of UF ₆ from the C-337A Feed Facility to the atmosphere on December 13, 1994.	8

Since the conduct of these inspections, all 15 findings have subsequently been closed. For specifics on the Special Inspections conducted, see Attachments B-E.

4.3 DOE/ORO Directed Follow-up Inspections

4.3.1 PGDP-94-01, Unplanned UF₆ Release in Building C-337-A

In accordance with DOE Memorandum, *United States Enrichment Corporation Response to RI-70-7001/94-0001, Event Review at Paducah Gaseous Diffusion Plant*, dated September 30, 1994, the RO Manager directed the PGDP SSR's to perform a independent inspection of a DOE/HQ Investigation Report attached to the Memorandum, and to document the results of this inspection in a SSR Inspection Report. The SSR independent inspection effort was to verify the completion of

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USEC commitments made in its August 26, 1994 letter to DOE in response to a March 1994 report entitled, *PGDP-94-01 - Event Review at Paducah Gaseous Diffusion Plant* [PGDP], prepared by the Department of Energy's Office of Environment, Safety and Health, Office of Nuclear Safety. The DOE/HQ report was the result of a two week investigation it undertook with regard to a September 7, 1993, unplanned release of UF₆ at PGDP in Building C-337-A at the 5E (east) and 5W (west) common feed header. Twelve (12) concerns were identified in this subject DOE report. The SSRs tracked these items as 12 IFIs, which are identified in Attachment D.

In addition to reviewing the PGDP-94-01 report, the SSRs also reviewed other related reports involving this incident to assess the full scope of corrective actions planned and taken to resolve the DOE/HQ concerns. These reports included DOE Inspection Report 70-7001/93-001, and USEC Occurrence/Incident Report No. PAD-1993-0014. Further, the inspectors interviewed management and staff personnel, reviewed associated plant documentation, and performed selected field verifications to verify completion of the USEC stated corrective actions.

The results of this inspection effort were documented in DOE Inspection Report 70-7001/96-08. All 12 concerns were closed.

4.3.2 April 28, 1994, Enforcement Conference

In accordance with DOE RO Manual, Technical Instruction TI-3.2/01, Rev. 0, *Inspection of USEC Implementation of April 28, 1994 Enforcement Conference Commitments*, dated October 6, 1995, the Functional Area inspection teams were to support the SSRs by performing an inspection of USEC's implementation of the commitments made to DOE as a result of the April 28, 1994 enforcement conference. Thirteen (13) specific inspection areas were identified. The SSRs tracked this 13 items as IFIs, which are identified in Attachment D.

The Functional Area Team performed this inspection and documented its results in DOE Inspection Report 70-7001/95-16. Four (4) of the 13 inspection items were left open by the Team. The SSRs re-inspected the four items and documented their results in DOE Inspection Report 70-7001/96-08.

One of the four remaining commitments identified in TI-3.2/01, as Item No. 9, *Development of Performance Measures*, was found not being accomplished by the lessee since its commitment revision letter to DOE dated September 5, 1995, *United States Enrichment Corporation (USEC) - Development of Performance Measures*. In this letter, USEC identified its basis for why it intended to monitor its performance in reducing the number of events caused by procedural problems and personnel from weekly to monthly. Part of the basis for the commitment change was a chart developed by USEC that plotted a 15-week rolling average of procedure and personnel errors for both sites combined. The result was that the error rate, if plotted weekly, remained fairly constant. Therefore, plotting the data monthly would provide better trending of personnel errors at each site. USEC renewed its commitment to keep DOE informed of progress in this area through periodic briefings on the status of these indicators.

Since the lessee's September 5, 1995 letter, USEC had not provided DOE with any periodic briefings on these indicators, either in writing or during the monthly regulatory affairs meetings the lessee had with DOE. In addition, inspector review of the lessee's corporate performance indicator profiles document it prepares monthly [e.g., UEO-1020, *United States Enrichment Corporation (USEC) Performance Indicators*], identified that USEC did have the indicators, but was not alerting DOE of its findings. The inspectors also noted that DOE/ORO was not on the document's distribution list. When this issue was brought to USEC's attention in September, 1996, USEC

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informed the inspector they would again brief DOE on this material commencing with the November 1996 Regulatory Affairs Meeting with DOE. Since this item was not resolved during the DOE Site Safety Representative's September 1, 1996 through October 15, 1996 inspection period, it was cited as a deviation in DOE Inspection Report 70-7001/96-07, as Deviation 70/7001/96-07-03.

USEC response to this NOD was received too late for DOE to verify corrective actions taken, since they were not scheduled to be completed until February 27, 1997. Therefore, this item remains open and is being transferred to NRC for them to perform follow-up action on this issue in accordance with their RO inspection requirements.

4.3.3 Pre-Certification Open Item Issues Closure Plan

In accordance with DOE Memorandum from the RO Manager to the SSRs, *Gaseous Diffusion Plant Inspection Strategy*, dated August 29, 1995, the RO Manager directed the SSRs to concentrate on two main RO inspection activities during the remaining time prior to NRC Certification of the GDPs (at that time, NRC Certification of the GDPs was anticipated would occur in mid-1996 at the earliest). These activities included - (1) inspection of functional areas and related buildings that may not have been addressed in the past, and (2) the closure of open items.

The SSRs provided the RO Manager with a detailed plan to work off the open Inspection items, among other issues, in a DOE Memorandum dated March 21, 1996, *Paducah Gaseous Diffusion Plant (PGDP) Site Safety Representatives' (SSRs) Closure Plan for the Transition of Regulatory Oversight*. The SSRs, at that time, had an open inspection item backlog of 120 items. These 120 items were then translated into the open inspection item work off plan depicted in Figures 8A and 8B.

Development of this plan was instrumental in focusing attention on closing issues, instead of raising new, redundant issues. The result was a reduction of the open inspection item backlog to only 12 issues remaining open at the time of NRC transition at 12:01 a.m. on March 3, 1997. It is anticipated that this number would have been 3 or 4 had the DOE inspection reports been issued sooner or USEC could have responded earlier.

4.3.4 May 9, 1996, Management Conference

In accordance with DOE Letter, *EA-70-7003/96-0001: USEC Action Plan in Response to DOE Management Conference*, dated October 30, 1996, the PGDP SSRs were to perform a review and verify completion of fifteen (15) USEC commitments made as a result of the May 9, 1996 management conference, as they applied to PGDP activities. These commitments were formally documented in a USEC letter to DOE (James Miller/USEC to J. Dale Jackson/DOE), dated June 14, 1996. As part of the close out action of this issue, the SSRs were to document the results of this augmented inspection effort in a SSR inspection report. The SSRs tracked these items as 15 IFIs, which are identified in Attachment D.

In addition to reviewing USEC's stated commitments made its June 14, 1996 letter, the SSRs reviewed a USEC follow-on letter [USEC letter, *United States Enrichment Corporation (USEC) - Portsmouth Gaseous Diffusion Plant (PORTS) Docket No. 70-7002 - Supplemental Response to Address DOE Management Conference Concerns*, dated October 18, 1996] which was submitted to DOE to address a continuing concern USEC was having with the maintenance and adherence of the PORTS Authorization Basis. This document was evaluated for applicability to the PGDP facility.

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The SSRs also interviewed management and staff personnel, reviewed associated documentation, and performed selected field inspections. The results of USEC's fifteen (15) commitments made were documented in DOE Inspection Report 70-7001/96-08. Twelve (12) of the 15 items were closed in this report. The remaining three (3) were closed in DOE Inspection Report 70-7001/97-02.

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5.0 DOE/USEC MANAGEMENT/ENFORCEMENT CONFERENCES

Appendix B to the ROA, *Enforcement Process*, established the procedure by which DOE could take prompt and vigorous enforcement actions when dealing with USEC when it did not comply with the applicable DOE Implementation Requirements contained in Chapter 3 of the ROA. This included: Shutdown Authority, Notices of Violation, Civil Penalties, and Notices of Deviation for failure of USEC to take agreed upon actions. This procedure had been implemented into the RO Program as ROP-AP-006, Rev. 1, *Enforcement Policy Implementation*, dated May 17, 1994, in the RO Manual.

As part of the escalated enforcement process, DOE held either an Enforcement Conference or Management Conference with the lessee. These two conference types were determined to be instrumental in communicating DOE's concerns to USEC, allowing USEC an opportunity to provide its plans for improving its management controls at the GDPs, and to provide a focal point of continued communication.

5.1 Enforcement Conferences

There were two (2) enforcement conferences held with USEC that involved PGDP activities. These were held on April 28, 1994, and April 26, 1995. Both enforcement conferences have been summarized in Attachment H, enclosed with this report.

No enforcement conference was held for the first of 2 civil actions that were taken against PGDP activities. This involved the incident that occurred at PGDP on September 7, 1993, as was previously described in Sections 3.1.1 and 4.3.1 of this report. The two civil penalty actions are identified below:

- A \$20,000.00 civil penalty was imposed on June 7, 1994, for the September 7, 1993, unplanned release of UF₆ from a breach in the Building C-337-A feed piping, resulting in 15 workers receiving measurable uptakes of uranium, nine of which exceeded plant administrative limits (Level II Violation, NOV 93-10-01); and
- A \$5,000.00 civil penalty was imposed on May 15, 1995, for the failure of the lessee to maintain a passive fire watch on an out-of-service fire protection system in the cascade (Level II Violation, NOV 94-12-02). This civil penalty was mitigated as a result of USEC taking prompt corrective action in addressing the root causes of the violation, as well as, self-reporting the occurrences to DOE in event reports PAD-1994-0127 and PAD-1994-0131. These actions were discussed at the April 26, 1995 Enforcement Conference convened to discuss this issue.

SSR inspection activities related to verifying the completion of USEC commitments made as a result of the April 28, 1994 Enforcement Conference, can be found in Section 4.3.2 of this report.

In addition to the two Level II violations discussed above that led to the civil penalties imposed on USEC, there were also two other Level II violations that did not receive either a civil action or enforcement conference. These involved the Level II violations: 70-7001/95-06-02 and 70-7001/96-06-03. Both of these issues involved repetitive radiation protection incidents concerning the failure to post radiological areas to prevent employee exposure, and failure to maintain contamination controls and to properly conduct work activities in radiological areas, respectively. An enforcement conference was scheduled but was later canceled when the lessee provided sufficient discussion

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on near-term planned corrective actions.

5.2 Management Conferences

There was one (1) management conference held with USEC that involved PGDP activities. This was held on May 9, 1996. The details of this Management Conference have been summarized in Attachment H, enclosed with this report. SSR inspection activities related to verifying the completion of USEC commitments made as a result of this Management Conference, can be found in Section 4.3.4 of this report.

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6.0 DOE TRANSITIONAL SUPPORT INSPECTION ACTIVITIES

As part of the GDP Certification process, DOE is required to provide a Compliance Plan to the NRC in accordance with Section 76.35(b) of 10 CFR 76. This Section states:

A plan prepared and approved by DOE for achieving compliance with respect to any areas of noncompliance with NRC's regulations that are identified by the Corporation as of the date of application that includes:

- (1) *A description of the areas of noncompliance;*
- (2) *A plan of actions and schedules for achieving compliance; and*
- (3) *A justification for continued operation with adequate safety and safeguards.*

Another part of the GDP Certification process, required USEC to provide NRC with an assessment of its potential accidents and consequences to establish the basis for limiting conditions for operation of the plant with respect to the potential for releases of radioactive material, and its Technical Safety Requirements (TSRs), in accordance with Section 76.85 and Section 76.87, respectively, of 10 CFR 76. USEC deferred providing the safety basis for these technical submittals to the DOE. Instead, USEC provided NRC with DOE's 1985 Final Safety Analysis Report (FSAR), as amended, only updated to include the current operating configuration of the PGDP facility. USEC called this modified version of the FSAR, their Application Safety Analysis Report (SAR). Also, USEC's TSR submittal was again, a modification of their Operational Safety Requirements (OSRs) previously prepared by DOE. All three topic areas of DOE Compliance Plan, FSAR Upgrade, and TSR transitioning, as they relate to PGDP activities, are described in more detail below.

6.1 DOE Compliance Plan POA (Plan of Action) Verification Inspections

USEC had submitted five revisions to their SAR Application document to NRC, and in kind, DOE had issued four compliance plan revisions (one USEC revision occurred before DOE could make a separate submittal). The DOE Compliance Plan for PGDP was documented in DOE/ORO-2026/R4, *Plan for Achieving Compliance with NRC Regulations at the Paducah Gaseous Diffusion Plant*, dated October 11, 1996. The document contained 50 Non-Proprietary Compliance Plan Issues (CPIs), and 7 Proprietary CPIs. Since the issuance of the DOE Compliance Plan, 4 CPI's were deleted (2 Proprietary and 2 Non-Proprietary), leaving a total of 53 CPIs for transition.

In addition, the entire complement of 53 issues, contained 215 Plan of Action (POA) statements. Because the NRC Certification date slipped from the original October 1995 date to that of March 3, 1997, many of the POAs were completed. The DOE Compliance Plan POA Verification Team interfaced with the SSRs to verify closure of these items at PGDP during the period October, 1996 through February 7, 1997. The final tally of open issues and open POAs is summarized below. Additional specifics have been provided in Attachment I.

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Variable	Open		Closed		Totals
	Non-Proprietary	Proprietary	Non-Proprietary	Proprietary	
Issues	35	3	13	2	53
Actions	102	5	74	34	215

6.2 DOE Safety Analysis Report Upgrade (SARUP)/Safety Evaluation Report (SER) Verification and Validation Inspections

PGDP was designed and constructed in the early 1950's to supply enriched uranium to both the United States Government Weapons Production Program and to the Atomic Energy Program. At that time, there was no requirement that a safety analysis report be documented to identify the major safety events (major hazards, inhibitors, and sequences) and establish an envelope for safe operations. Between 1980 and 1985, DOE issued a FSAR for PGDP, that included OSRs. The FSAR was produced following the guidance provided in DOE Order 5480.1A, *Environment Safety and Health Program for DOE Operations*, and DOE Order 5481.1A, *Safety Analysis and Review System*. The FSAR analyzed the unique risks associated with the operation of the GDP, examined the impact of these hazards during accident and process upset conditions, and evaluated the risk both on- and off-site personnel.

Since 1990, DOE has established a program to update the safety basis of the PGDP FSAR. This program was known as the GDP SAR Upgrade Program or SARUP as it is commonly referred to. In response to DOE's commitment to support the GDP certification by NRC, the SARUP Program involving the Leased Space facility analysis, was accelerated and re-prioritized to provide the maximum technical input for USEC's certification application submitted to the NRC. Beginning in 1994, the SARUP Program changed its development direction to the new DOE Order 5480.23, *Nuclear Safety Analysis Reports*, as guided by DOE Standards DOE-STD-3009-94 and DOE-STD-1027-92. In early 1996, DOE established a Safety Evaluation Report (SER) Review Team to review the finalized SARUP Program product. This SER Review Team performed site inspections to verify and validate some of the technical information that was provided by the SARUP Project. All site visits were coordinated with the SSRs.

The result of the two projects was the issuance of the Upgraded SAR to DOE in January 1997, and the issuance of the SER on February 3, 1997. The latter issuance of the SER allowed DOE to fulfill its commitment to provide the SAR to USEC by February 15, 1997 so that the USEC SAR review process could begin. DOE actually fulfilled its DOE Compliance Plan, CPI No. 2, *Update the Application Safety Analysis Report*, commitment on February 14, 1997.

With regards to the SER Review Team effort, the Team identified a total of 392 essential review comments addressing areas where further evaluation was required to determine whether acceptance criteria identified in the Upgraded SAR had been met. Of the 392 essential review comments, 164 were identified as significant safety concerns, meaning the concerns reflect conditions that (1) have the potential to involve hazardous material or energy releases with significant consequences to the public, workers, or the environment, and that may otherwise be left without coverage in the SAR and/or (2) are potential technical errors that could invalidate major conclusions relevant to the safety basis. These 164 concerns were identified with an "EA" prefix to

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its item number. The remaining comments consist primarily of acceptance criteria compliance issues and were categorized with an "EB" prefix to its item number.

Proposed resolutions for these EA issues were identified in the SER document. However, the SER Review Team did not necessarily evaluate those resolutions for acceptance. There were also a number of issues that were not resolved, and these have been identified in Attachment J. The conclusion of the SER Review Team was that the SAR met the acceptance criteria for significant safety issues, contingent upon the DOE and the SAR contractor satisfactorily addressing the open items. DOE completed its review of these issues, and as stated earlier, provided the Upgraded PGDP SAR to USEC on February 14, 1997.

6.3 OSR to TSR Transition

As part of USEC's application submittal to the NRC, USEC included a modified SAR (as previously described in Section 6.2 of this report) and corresponding TSRs which are similar to the OSRs although they were in a slightly different format. In supporting the transition to NRC regulation, the DOE RO staff took steps to facilitate the review and approval of the new TSRs for USEC implementation use during the transition period between NRC's decision to certify and the date on which NRC regulation commenced.

As DOE issued these new TSRs for implementation use at PGDP, the SSRs performed verification inspections to attest that the DOE requirements in the accompanying SER and Transition Requirement (TR) documents were being complied with. A number of DOE violations resulted. These TSR violations were ganged together as multiple examples to form single violations during each of the last three SSR inspection periods. Specifics on these violations can be found in Attachment D.

The result of these inspections, even though violations were identified, was that numerous interactions occurred between DOE, USEC, and NRC to better understand the intent of the new TSRs and the safety bases that supported them.

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7.0 PENDING USEC/DOE PGDP TRANSITION ISSUES

Now that the NRC has assumed nuclear regulatory oversight for USEC activities at the GDPs, there is still a need to coordinate DOE and USEC activities at the GDPs to ensure that:

- USEC and DOE activities at the GDPs do not adversely affect the operations of the other party in terms of health and safety, environmental protection, safeguards and security, and nuclear regulatory compliance; and
- Situations with the potential to affect both DOE and USEC operations and personnel, such as emergencies and threats directed toward site activities, are managed in a coordinated manner that protects the health and safety of DOE and USEC personnel, including their respective contractors/subcontractors, and the public.

In keeping with these principles, USEC and DOE signed a *Joint Policy Statement on Shared Site Issues*, on December 16, 1996 (See DOE Letter dated December 16, 1996, on this same subject). The details of this statement were later translated into USEC-100, Rev. 0, *Joint Policy Statement on USEC and DOE Direction and Management Expectations for Shared Site Issues*, which addressed, at that time, issues that required formal mechanisms for interface and control.

Thirteen (13) issues were identified in USEC-100 under Rev. 0, that were in the working stages of resolution, and sixteen (16) additional items were identified yet to be resolved. Since then, the following 12 items have been completed:

- FSAR Upgrade (partial - DOE submitted Upgraded SAR to USEC on February 14, 1997; however, DOE budget impacts are unknown at this time)
- Plant Shared Systems and Continuity of Essential Services
- Safety Management Controls
- Control of Work Activities and Interface
- Coordination and Notification of Plant Changes
- Emergency Management Coordination
- Third Party Activities on GDP Sites
- Physical Protection Coordination
- Event Notification
- Helipad Access
- Communication of Incident Information and Media Coordination
- Radiation Protection Exposure Monitoring and Controls

USEC-100 is a living document, where issues are added and resolved as they are identified. As of March 3, 1997, eight (8) items were being worked for resolution, and eleven (11) issues remained unresolved. All 19 open issues have been identified for information purposes in Attachment K.

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8.0 DOE OPEN ITEMS BEING IDENTIFIED TO NRC

In accordance with DOE Compliance Plan Issue No. 1, *Transition from DOE Regulation to NRC Regulation*, USEC is to identify to NRC on the date that NRC assumes regulation authority for PGDP, a listing of all open USEC commitments made to DOE. The following constitutes the open inspection, compliance plan, and regulatory relief items that DOE has identified are open as of March 3, 1997. Other commitments made by USEC to DOE in LERs, correspondence, etc., will be identified to NRC by USEC.

8.1 DOE Inspection Items

There were 12 DOE inspection items that were still considered open at the conclusion of the DOE SSR inspection period ending March 2, 1997. These open items, identified in Attachment L, will be identified in DOE Inspection Report 70-7001/97-02. In addition, in order to facilitate the closeout effort at PGDP, 27 inspection items were administratively closed because the corrective action required to resolve the inspection issue raised was similar to that required to resolve an open DOE Compliance Plan item. Leaving these inspection items open would have required a redundant closure verification to be performed by NRC. The identity of these 27 issues has been provided in Attachment M.

8.2 DOE Compliance Plan Items

At the conclusion of the DOE Compliance Plan on-site verification of completed USEC Plan of Action (POA) items on February 7, 1997, there were 102 Non-Proprietary, and 5 Proprietary POAs that remained open. These 107 open POAs have been tabulated in Attachment I.

8.3 Justifications for Continued Operation (JCO) for PGDP Potential Unreviewed Safety Question (USQ) Issues

During the course of the ROA, DOE/ORO exercised enforcement discretion by allowing USEC to continue to operate, even though the facility was operating outside of the operating bounds of the FSAR or OSR/TSRs, provided USEC submitted to DOE a Safety Evaluation (SE), JCO or USQD that showed sufficient compensatory measures had been evaluated to be taken to ensure the health and safety of plant workers and the public. The SEs/JCOs in effect at the time of transition have been tabulated in Attachment N. It should be noted that some of these items have not received DOE approval, some have taken their authorization to perform a similar action by taking credit for the JCO in the DOE Compliance Plan Issue, or some took other administrative actions to prevent the use of the affected equipment. However, in all cases identified, either a DOE Compliance Plan Issue addresses the condition, or an open DOE inspection finding has captured the violation.

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9.0 LESSONS LEARNED

The DOE/ORO Regulatory Oversight Program for the GDPs was effective in demonstrating that the GDPs could continue to be operated safely as the plants transitioned their management systems, controls, and oversight programs, plans and procedures from a DOE to NRC regulatory environment. Although both the DOE and NRC regulatory oversight approaches assure the protection of the workers and the public, and promote the common defense and security, there are differences that need to be transcended before a facility can meet the conditions for an NRC Certificate of Conformance or License to operate.

Under DOE, regulatory oversight has generally been from the perspective of a knowledgeable owner-operator who placed emphasis on prescriptive requirements under a compliance-based and performance-oriented DOE Orders System. This was coupled with direct DOE involvement in day-to-day facility operations. The NRC, on the other hand, has no owner-operator responsibilities for any of the nuclear facilities it oversees. Further, NRC stresses greater formality in documenting operating practices than DOE does, primarily so that there is a written record of commitments made by the operators of these facilities to provide commensurate assurance of adequate safety and safeguards under NRC's system of regulations. This places the emphasis for safety on the operator who has the ultimate responsibility for the safety of its activities and the safeguarding of nuclear facilities and materials used in its operation. The NRC function only ensures that the operator has adequately discharged its ultimate responsibility.

The transition that was required for this GDP cultural evolution to occur required a tremendous amount of flexibility by DOE in granting USEC regulatory relief in order for USEC to initiate many of its newly developed programs and operational controls to operate under the NRC regulatory environment. While these new management controls were placed into service, DOE still had to maintain its regulatory oversight responsibility both for the facilities that transitioned to the new requirements, as well as the facilities still under the old controls. As a result of this DOE to NRC transition process, several lessons learned were identified from an inspection and enforcement (I&E) perspective which would help facilitate the future transition of other DOE facilities to NRC regulatory oversight. These lessons learned include both positive and negative observations derived from DOE/ORO's experience in the GDP certification process:

9.1 Activities Required Prior to Initiating the RO Program

1. **Emulate the NRC Organization and Methodology as Much as Possible** - it is essential that the DOE regulatory oversight organization structure itself to conduct its operations parallel to the way NRC conducts its regulatory and inspection operations. Emulating the NRC will not only assist the regulated organization in experiencing the upcoming NRC regulatory inspection environment, but it will also foster the proper climate for transitioning the organization to be more function-oriented in conducting its operations (e.g., one plant maintenance organization), as well as to allow the organization to upgrade its programs, plans, and procedures plant-wide while still operating its facilities. To accomplish this NRC posture, four actions need to occur:
 - a) **Separate the Regulatory Oversight Function Totally from the DOE Operation and Management Functions** - it is essential to establish the regulatory oversight organization totally independent of the DOE management and production functions of the facility. The RO Manager's organization needs to be totally independent of all production, cost, schedule, and budgetary concerns in order to focus its activities on transitioning the facility to the NRC way of doing business. This includes both

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the regulation and inspection functions. The DOE functions should remain with the DOE Site Manager.

Under this new DOE organizational structure, the DOE RO Manager must also have complete single-source responsibility and authority for discharging those oversight responsibilities traditionally assigned to both the DOE headquarters and field organizations. The NRC will assist DOE in this process by consulting on how to develop this new organizational structure, as well as, on how to train regulatory and inspection personnel. Contracting out for experienced ex-NRC personnel will also satisfy this function.

- b) **Create a Separate Regulatory Issues and I&E Entity Within the New RO Organizational Structure** - it is essential that the RO organization be divided into two branches similar to that performed by the NRC. One branch should provide the technical support to review all regulatory issues raised by either the site or by DOE field, regional, or headquarters personnel. This branch will also process all Authorization Basis document revision proposals, and issue the authorizing DOE Safety Evaluation Reports and transmittal documents. The other branch should be the I&E arm of the organization that verifies and validates that the regulated organization is complying with its operating commitments and DOE ROA regulations.
- c) **Issue Clear and Concise Regulations** - it is essential that the ROA be written in terms that can be clearly understood by both the regulator and the organization that is to be regulated. The ROA needs to be developed from existing DOE Orders and Standards which directly impact nuclear safety and safeguards and security. These documents need to be either referenced in the ROA requirement for strict compliance if directly coupled to that ROA requirement, or a DOE stand-alone Standard should be written to help facilitate the understanding of the criteria that made up the regulation and how it will be enforced. Under NRC's terminology, this would be a NUREG or Nuclear Regulatory Standard. As an example that might require a DOE Standard to be written would be to explain what is meant by the ROA Implementation Requirement, *[A] corrective maintenance program shall be implemented to ensure that prompt and effective maintenance is performed on malfunctioning nuclear safety systems, safeguards, and security equipment.*
- d) **Involve the Office of Chief Counsel in all Formal Lessee Communications** - it is essential to involve the Office of Chief Counsel (OCC) in all regulatory matters involving the regulated organization. The ROA is a legal document and DOE's divesting of its management and production functions to the lessee does not eliminate DOE's overall legal responsibility to require the lessee to take action sometimes the lessee may consider is contrary to its understanding of the terms and conditions of the lease or to cite the lessee with a violation that could cause financial harm to its operations through the interaction of another government agency such as OSHA or the EPA. In order to avoid any potential legal action from the lessee, OCC involvement needs to occur for all formal meetings held (e.g., enforcement conferences), as well as for the review and concurrence of all written documents transmitted to the lessee.

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2. **Maintain Up-to-Date Authorization Basis Documents** - it is essential that the authorization basis documents for which the ROA requirements are to be based upon, are accurate and maintained up-to-date with the current facility configuration and with current DOE-approved analysis methods. In the case of the GDPs, DOE stopped updating their FSARs in 1986, which necessitated a significant upgrade before NRC would certify the facilities. Similarly, if these documents have not been maintained at another DOE installation, an attempt must be made by the regulated facility to evaluate all issued safety evaluations made to the current plant configuration to identify any "as-found" conditions that may constitute an Unreviewed Safety Question requiring DOE approval to continue operating in that condition or return it to its original configuration. As a minimum, the regulated facility's Operational Safety Requirements (OSRs) or Technical Safety Requirements (TSRs) must be an accurate reflection of the facility's current operational practices until the Final Safety Analysis Report (FSAR) can be updated.

3. **Identify all Legacy Issues** - it is essential that a walkthrough of all facilities to be regulated is conducted and that all equipment and/or materials not specifically identified under the Leased Spaces be reconciled. At the GDPs, only DOE waste materials were accounted for. Uranium-contaminated equipment brought on-site for spare/piece-part replacement or for decontamination, were stored in the process buildings prior to the ROA without a Nuclear Criticality Safety Approval (NCSA) being documented. If another DOE installation has DOE equipment or materials stored in it, then these storage space should be excluded from the Lease and controlled as a DOE Space.

Similarly, DOE Orders that were not implemented or fully implemented (e.g., DOE Order 5480.22, *Technical Safety Requirements*), or if DOE waivers were received in the past for a current operating condition [e.g., a design criteria waiver was granted by DOE to the GDPs prior to the ROA involving the Criticality Accident Alarm System (CAAS) that was carried over by the regulated organization as an exception to implementing the operational requirements for the CAAS system under the ROA], then these issues too need to be reconciled early before they become a certification or licensing issue with the NRC.

4. **Determine How On-Going Pre-Lease Conditions are to be Controlled** - it is essential that the regulated organization identify to DOE all activities currently underway that will not be completed until after consummation of the Lease. At the GDPs, major modifications were underway before the ROA went into effect. Subsequent inspection of the completed modifications before they were put into service under the ROA, presented an enforcement issue because they were considered pre-existing conditions.
5. **Require Corrective Action Plans be Developed for each Identified ROA Exception** - it is essential that when the ROA is prepared, that the regulated organization must identify item(s) not in ROA compliance and present a corrective action plan, with completion dates, for each item. Under the ROA, there is a *Status of Conformance* section. In several cases, the lessee was able to make generalized statements that subsequently negated any ability by the DOE inspector to cite the lessee for a nonconforming condition in that particular ROA activity. For example, the lessee stated, *[N]ot all procedures required to support the quality assurance program have been prepared or approved*. As a result of this statement, no quality assurance (QA) violations were written against the QA Program. Ultimately, the regulated organization had to commit to the NRC in the DOE Compliance Plan, to identify its QA Program and to flow this document down into its implementing procedures to verify that all stated QA requirements had been implemented.

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6. **Baseline the Facility by Performing a Performance-Based Independent Self Assessment (ISA)** - it is essential that DOE baselines the facility prior to implementing the ROA. This ISA assessment was accomplished at the GDPs after the initiation of the ROA, which was too late to initiate any change to the ROA since, as stated earlier, it is a legal document. Accomplishing the ISA before the ROA is initiated would serve four purposes. First, the ISA will make a determination on the degree of compliance the facility's currently established programs are assuring nuclear safety and providing safeguards and security for the site. Second, the ISA will assess the current state of compliance these programs are in when compared to the Implementation Requirements of the ROA. Third, the ISA can make a judgment as to whether the functional areas defined by the ROA and the Implementation Requirements stipulated therein for each functional area, are adequate to achieve their intended goals. Finally, the fourth purpose from this assessment, would be to make a determination as to what nuclear safety upgrades are required in order to bring the facility up to current DOE requirements, as well as, to satisfy expected NRC requirements. This latter purpose will also serve as the cost baseline for any proposed DOE reimbursable Nuclear Safety Upgrades that the regulated organization may request as part of its certification cost to meet the identified NRC requirements.

9.2 Activities Required After Initiating the RO Program

1. **Provide Sufficient Administrative and Regulatory Support to the SSRs** - it is essential that the SSRs be provided with sufficient administrative, computer, and regulatory technical support up-front in order to allow them to have adequate inspection time to evaluate the lessee's state of compliance in each leased facility's process and control areas. Because of their high visibility role in representing the RO Manager on-site, the SSRs were severely taxed by information requests received from all avenues within DOE, including the RO Staff, that required significant amounts of their time to follow-up on or to coordinate the activities to acquire the information sought by these individuals. Many of these information requests went beyond the information the SSRs already provided in their morning reports which were required to be submitted daily. Further, since the SSRs were the site point of contact for all DOE inspection-related activities, they soon became overloaded just by the sheer numbers of inspections being performed, the tracking of the findings these DOE inspectors were identifying, including the corrective actions being taken by the lessee to resolve these issues, as well as, following up on the issues even though they were not their own. This workload was in addition to their own normal inspection responsibilities, which included the writing, tracking, following up on, and closing of their own issues.

The result of all these collateral responsibilities was that the work off rate of open inspection issues stalled, rendering a backlog to the extent that significant contractor support was required in the last phase of the transition to NRC regulatory oversight to status and close these issues. To minimize the excessive workload placed on these individuals, the SSRs will require during the entire interim ROA inspection period (depending on the type of DOE facility that may undergo NRC certification) the following support personnel:

a) **Three (3) Full-Time On-Site Personnel**

- One (1) Administrative Assistant on-site to screen incoming phone calls; prepare inspection report and evidence files; type or process finalized inspection reports; prepare the morning and weekly reports, including fact

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sheets; transmit document information requests; handle equipment and supply needs; and to arrange clearances, site access, meeting times, and identify site contacts for visiting DOE inspection personnel.

- At least two (2) full-time technical support personnel on-site to track and trend regulatory issues, follow-up on events, research and prepare inspection reports, respond to DOE/Regional and DOE/HQ requests, closeout open inspection issues, and to conduct special inspection activities, as required.

b) One (1) DOE Regional Office-Based Person

At least one full time technical support person off-site at the DOE Regional Office is needed to analyze LER results for determining degraded management control weaknesses or component failure trends; monitor regulatory performance indicators such as timeliness of the lessee in providing its corrective action plans to resolve identified issues, responsiveness in addressing the generic implication of the identified issues, and ability to meet stated commitment completion dates; identify related DOE issues raised to the regulated organization's corporate counterparts; and to walkthrough all inspection reports and response correspondence to ensure their timely issuance.

2. **Perform Compliance-Based Inspections** - it is essential that the regulated facility meets the requirements defined in its stated programs, plans, and procedures. Because of the amount of regulatory change the regulated organization will be experiencing, the organization can not recognize that performance-based issues, such as, increasing maintenance work request backlogs, constantly changing or shifting work priorities, and/or perceived poorly developed program management controls as a result of failing to follow procedures or inadequate procedures, are also important to be corrected in order to help mitigate the potential for a regulatory issue down the road. These are intangibles and since the regulated organization is experiencing evolutionary change, a compliance-based inspection program will have far more meaning on the lessee to bear in mind, "Say what you do, Do what you say."
3. **Escalate Repetitive ROA Violations** - it is essential that the regulated organization respond to the cause of all cited violations and deviations in its own terms, as well as to identify all remedial corrective actions taken to immediately correct the cited condition, identify all secondary corrective actions to bring the cited condition into full compliance, and to identify all long-term corrective actions to prevent recurrence of the issue in any other program or related operating facility (generic implications). Allowance of this freedom to the lessee to address and correct its own problems, will provide an adequate basis to later request an enforcement or management conference should the noncompliant condition return rendering a repeat ROA violation. This also helps to keep DOE out of managing the facility's operations.
4. **Initiate Stop Work/Show Cause Orders Early in the ROA Regulatory Process** - it is essential that if the lessee makes, causes, or creates a situation where a significant potential exists or existed to potentially threaten worker or public safety or the common defense or security, DOE needs to issue a Stop Work immediately on that activity or to issue a Show Cause Order to demonstrate the importance DOE takes in the safety of its facilities and operations. At the GDPs, it would have been more beneficial to the lessee if

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DOE had issued a show-cause order initially in the area of configuration management before increased management attention was brought to bear in resolving the discrepancy. Further, minimizing the use of these enforcement tools early in the ROA regulatory oversight process will bring greater confusion as to "why now?" (alluding to an NRC concern versus DOE concern) if applied later during the interim transition period.

5. **Evaluate the Effectiveness of Committed Corrective Actions Taken to Resolve Cited Violations and Deviations** - it is essential that DOE evaluate the effectiveness of committed corrective actions cited by the lessee to ensure that the cited regulatory issue has been resolved generically across the entire site, and at other similar installations that will be coming under NRC certification or licensing. Many similar regulatory issues were identified by DOE early during the ROA interim inspection period, but were summarily closed out if the lessee took the specific corrective actions it had committed to. The basis for this approach was because these sites are so large, each of the process buildings were treated as independent facilities. For example, identification of an OSR violation in one building was treated as being applicable to only that one facility because the regulator had not cited any other buildings. Subsequently, another similar violation occurred in another building requiring similar corrective actions.

By DOE holding the item open, and re-inspecting the "issue" at other facilities, identifying the same or related problems, this will eventually cause the regulated organization to identify an effective generic corrective action. Further, by delaying closure of the previously identified finding, not only will this help minimize the number of repeat violations or deviations cited, but it will also cause the lessee to put more resources on resolving the issue because of the growing age of the open issue and increasing regulatory visibility.

6. **Issue ROA Interpretations when Conflicts are Identified** - it is essential that when a differing professional opinion occurs between the regulating and regulated organizations, that the regulator issue an interpretation to explain the regulatory basis for the dissenting requirement. For example, at the GDPs, a recurring issue occurred involving one ROA requirement requiring the regulated organization to report all changes it intended to make to its Authorization Basis documents, and to receive DOE approval "before" the change was "implemented." This caused a lot of confusion because under NRC requirements, NRC is to only be notified if the change constitutes a potential Unreviewed Safety Question (USQ).

Further, under this ROA requirement, Was DOE to approve the modification before it was to be issued to the construction forces to implement the change?, or Could DOE be requested to approve the change before the modified equipment, function, or operation was placed into service? Although a lot of dialogue occurred involving this issue, including DOE's preparation of an interpretation on what constituted the lessee's Authorization Basis documents (the lessee thought the ROA was its Authorization Basis document), no attempt was made to revise the vagueness of the ROA requirement's wording. Should a point of contention exist far beyond a written interpretation, then the regulation should be changed so that it can be more clearly understood.

Overall, because this was a first-of-a-kind operation for DOE, in hind-sight, a number of mistakes were made. However, a number of benefits were also derived from the ROA and certification effort at the GDPs. Some of these benefits included:

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- **USEC Internal Appraisals Shifted to Performance-Based Program Assessments** - USEC Internal Appraisals/Audits in the past have been compliance-based program inspections. With the advent of NRC regulatory oversight and their use of a performance-based inspection approach to regulating its facilities, so too has USEC gone. Though this has caused an additional cultural shock to the facility, i.e., improving performance beyond just meeting the requirements, this change resulted in the end, to increase worker awareness of their regulatory responsibilities. These performance-based findings also caused management to initiate change if the established plant administrative requirements themselves were found impeding worker or plant safety, rather than just leaving the requirement in place and employing "work-around" measures, as was accomplished in the past.
- **Marked Cleanliness of the GDP Facilities** - a true indicator that measures management's attention to its facilities is the degree these facilities are kept clean. Since the implementation of the ROA, the GDP facilities have taken on greater attention to cleanliness, and reduction of contamination control zones to minimize repeat ROA violations radiation protection violations. Focused management attention in doing the job right the first time and cleaning up afterwards, helped to bring attention to detail to the GDP working environment.
- **Revised Problem Identification and Corrective Action Systems** - the previous GDP Nonconformance Reporting System was considered ineffective because of the inability of all personnel to initiate a problem report and to have the problem elevated to upper management attention, if the case warranted it. In the past, a majority of the plant issues cited were relegated to a "track and trend" fate. Since the ROA began, the site has instituted a new Problem Reporting and Corrective Action System, which ensures the root cause of significant conditions adverse to quality are corrected in a timely manner, and that the corrective actions initiated against the issue, are, and have been, effective in preventing the problems recurrence. The new system also allows all plant employees the opportunity to formally identify any plant hazards and/or procedural error they feel needs corrected.
- **Establishment of Regulatory Performance Indicators** - as a result of two DOE Enforcement Conferences and a Management Conference involving PGDP activities, USEC has employed a series of new regulatory-minded performance indicators to its previous production and cost performance indicators. These indicators have increased management awareness in being prompt when identifying or reporting nonconforming conditions to its regulator or to seek relief up-front rather than fix and then inform the regulator.
- **Incorporation of Nuclear Power Plant Experience Lessons Learned** - because of similar problems that occurred at PGDP but not at PORTS and vice versa were not communicated between the GDPs, the GDPs experienced regulatory distress which sometimes impacted production. For example, testing of both the inboard and outboard autoclave isolation valves was recognized at PORTS, and was being accomplished there. However, this requirement and practice was never relayed to PGDP, resulting in a subsequent enforcement action by DOE. The new Uranium Enrichment (UE) lessons learned program should prevent recurrence of this type problem.
- **Configuration Management is Now Better Understood** - Although elements of a configuration management were in place at the beginning of the ROA transition period, some aspects of the configuration management system involving Safety Systems structures, systems, and components (SSC) were not in place or fully implemented. These include issuance of a SSC List (SSCL), Engineering Design procedures, "As-Built/As-Verified" drawings, engineering data sheets, and physical control and traceability of SSCs. Today, system boundary drawings exist that encapsulates

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those items that are now deemed "Q" and "AQ" SSCs.

- **Program Management Controls have Become More Integrated** - PGDP has taken an integrated approach in solving its management control problems by initiating its Quality of Operations Plan (QOOP) which has prioritized those management controls that need the highest priority of integrated program development, issuance, and implementation, and bringing constant management attention to fulfill its expectations. As a result of this effort, the previously fragmented areas of regulatory issues management, records management and document control, maintenance, engineering, and many other functional areas, have now been centralized under dedicated PGDP Managers for these assigned areas.
- **Legacy Issues were Brought to the Forefront** - Pre-ROA issues that previously went unnoticed were questioned by the DOE Functional Area inspectors which ultimately brought these issues to the forefront of discussion, such as, the K-25 equipment being stored on-site, previous DOE waivers granted, and the applicability of the site's QA requirements to the Laboratory, and Packaging and Transportation.
- **DOE Site Assistance Inspections were Authorized** - In areas where significant problems were identified by DOE, DOE/ORO inspectors evaluated the areas and provided their informal comments to USEC for resolution. These areas included Corrective Action and Commitment Management, USQD Resolutions, and Deletion of Pre-ROA IRMS issues.
- **PGDP Safety Basis was Challenged Bringing Definition to Gray Areas** - during several prominent events at the site, DOE investigators questioned various operational practices that had a bearing on the design basis of the plant. These included testing of the inboard isolation valves to the autoclaves, the numbers and kinds of Process Gas Leak Detector (PGLD) alarms being received in the Area Control Rooms (ACRs), and how the material condition of the process pipe is being maintained to avoid pipe breeches, like that which occurred twice with the C-337-A feed header piping.
- **ROA Functional Area Team Inspections Provided more Meaningful Program Assessments** - because of the mix of personnel used to perform the functional area inspections, having backgrounds with DOE, LMUS, INPO, NRC, and the commercial industry, the team was able to pinpoint critical target areas requiring more specialized/focused Inspections or greater USEC attention.
- **Direct Day-to-Day Interface with NRC Resident Inspectors** - provided DOE and USEC with a conduit directly to NRC Region III and with NRC/HQ in helping to resolve regulatory matters that were a concern to all parties prior to NRC Certification of PGDP. This give-and-take process allowed all meaningful issues to be placed on the table for discussion and resolution, rather than to allow the issue to simmer awaiting some regulatory enforcement action to correct it. Items in this area include: CAAS alarm coverage, and shared site issues.

Finally, when all is said and done, the DOE I&E Program did accomplish its primary mission of assuring that the PGDP Leased Premises complied with the Nuclear Safety and Safeguards and Security requirements set forth in the ROA during the interim period that DOE exercised regulatory oversight authority over USEC. Further, as a result of the DOE I&E Program, many deficiencies were identified that had been previously unrecognized because of DOE's role of owner-operator. As a result of bringing these management control and hardware deficient items to the lessee's attention, these items were subsequently identified by USEC to the NRC in its Certification Application submittal which necessitated also placing them into the DOE

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Compliance Plan which is also required by the NRC to be submitted with the application submittal. This in effect, has brought regulatory relief for the regulated organization, which could have resulted in NRC violations, with possible civil penalty impositions, had they not been identified in the DOE Compliance Plan.

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ATTACHMENTS

- A. PGDP DOE Regulatory Oversight Summary
- B. PGDP DOE ROA Inspection Report/Directives Summary
- C. PGDP DOE ROA Inspection Report Statistics
- D. PGDP DOE Regulatory Findings History Report
- E. PGDP DOE Inspection Item Closures Based on DOE CPIs
- F. IFS Summary Report
- G. USEC Internal Appraisal Findings Status Report
- H. Status of DOE Independent Self Assessment (ISA) Findings
- I. Enforcement/Management Conference Background
- J. Pending USEC/DOE PGDP Transition Issues
- K. Open PGDP DOE Inspection Items
- L. Open PGDP DOE Compliance Plan of Action Items
- M. Open PGDP DOE FSAR/SER Items - Leased Spaces
- N. DOE-Approved JCOs to PGDP USQ Issues

FIGURES

- 1. DOE Regulatory Oversight Program - Organizational Structure
- 2. PGDP DOE Regulatory Oversight Program MAP - Milestones, Activities, and Personnel
- 3. Timeline of PGDP DOE ROA Inspections Conducted
- 4. Timeline of when PGDP DOE Inspection Reports were Issued
- 5. Cumulative Profile of DOE Inspection Findings
- 6. Differential Profile of DOE Findings Profile
- 7. Timeline of DOE Inspection Findings by Finding Type
- 8. Closure Plan of Open DOE Inspection Items
- 9. Profile of DOE Inspection Findings Issued by ROA Functional Area
- 10. Number of DOE Inspections Conducted by ROA Functional Area
- 11. Timeline of DOE Inspections Conducted by ROA Functional Area
- 12. ROA Functional Areas having Open Inspection Items as of March 3, 1997

PGDP DOE REGULATORY OVERSIGHT SUMMARY

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (July 1, 1993 through March 2, 1997)

1. DOE issued 47 Inspection Reports, and held 2 Enforcement Conferences and 1 Management Conference during the period July 1, 1993 through March 2, 1997. A total of 249 issues (221 inspection findings and 28 USEC committed corrective actions) were identified, of which, 235 items have been closed. A breakdown of the types of inspections and associated findings and closures follow (See also Attachments B - D for additional details):
 - 37 - SSR Inspection Reports (121 findings, 209 closures)
 - 6 - Functional Inspection Reports (73 findings, 36 closures)
 - 4 - Special Inspection Reports (15 findings, 0 closures)
 - 2 - DOE Enforcement Conferences (13 committed lessee corrective actions requiring DOE inspection follow-up)
 - 1 - DOE Management Conference (15 committed lessee corrective actions requiring DOE inspection follow-up)
 - 1 - DOE/HQ Investigation Report (12 findings, 0 closures)
2. There were four (4) Level II violations issued by DOE involving PGDP operations. The first Level II citation (70-7001/93-10-01) involved the exposure of fifteen individuals to radiation or contamination, of which nine individuals reached levels that exceeded plant administrative guidelines. This violation resulted in a civil penalty being levied against the lessee in the amount of \$20,000.00. The second Level II citation (70-7001/94-12-01) involved the failure of the lessee to follow Operational Safety Requirements for out-of-service fire protection systems in the cascade. A civil penalty of \$5,000.00 was issued against the lessee, but was mitigated due to the lessee's prompt corrective actions in addressing the root causes of the violation, as well as self-reporting the events to DOE. The third and fourth Level II violations (70-7001/95-06-02 and 70-7001/96-06-03) involved repetitive radiation protection incidents concerning the failure to post radiological areas to prevent employee exposure, and failure to maintain contamination controls and to properly conduct work activities in radiological areas, respectively. An enforcement conference was scheduled but was later canceled when the lessee provided sufficient discussion on near-term planned corrective actions. No civil penalty resulted. The remaining 69 violations (4 of the 77 issued violations were withdrawn) were deemed Level III violations.
3. A total of 27 ROA inspection items were closed based on the provisions of 12 DOE Compliance Plan Issues (CPIs): 1, 2, 19, 21, 24, 25, 26, 27, 29, 40, A.2, and A.4 (See Attachment M)
4. Out of 249 ROA inspection findings and/or USEC commitments evaluated, 12 findings were not able to be closed because (a) there were no counterpart DOE CPIs that could be associated with these items similar to those issues identified in Attachment M; (b) the DOE Inspection Report was issued late so there was insufficient time for the lessee to respond and to perform the adequacy and completeness verification inspection; and (c) the DOE Inspection Report has not been issued. These items will be identified to the NRC to be evaluated as part of their inspection activities. These 12 open DOE Inspection items have been enclosed as Attachment L.
5. The following constitutes the final breakdown of ROA inspection items (this includes the 40 IFIs DOE/ORO directed the SSRs and Functional Area inspectors to follow-up on):

	Total Inspection Items Evaluated	No. of Findings Withdrawn	No. of Directed Followup Items	No. of RO Followup Items	No. of Items Open	No. of Items Closed	No. of Directed Followup Closures	No. of Closures Linked to DOE CPIs
Violations (NOV)	77	4	0	73	8	65	0	12
Non-Cited Violations (NCV)	36	0	0	36	0	36	0	4
Deviations (DEV)	5	0	0	5	2	3	0	0
Unresolved Items (URI)	41	0	0	41	2	39	0	1
Inspector follow-up Items (IFI)	90	0	40	50	0	50	40	10
TOTALS	249	4	40	205	12	193	40	27

PGDP DOE REGULATORY OVERSIGHT SUMMARY

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (July 1, 1993 through March 2, 1997)

6. All DOE ISA findings have been statused as "Closed" by USEC even though many of these issues were only transferred to another problem area's corrective action plan. See Attachment F for details.
7. Nine (9) out of 62 USEC identified findings from its Internal Appraisals/Audits conducted on the ROA Implementation Requirements (as required to be conducted under ROA Section 4.2.2) remain open. All issues were found captured by current DOE Compliance Plan Issues or open DOE inspection findings.
8. There were 108 out of 215 DOE CPI Plan of Action (POA) corrective actions that were not resolved by DOE prior to the NRC transition and are therefore, being identified to NRC for their disposition. (See Attachment I)
9. The result of DOE's Safety Evaluation Review (SER) review of the PGDP Safety Analysis Report Upgrade Project's (SARUP) finalized product issued in January 1997, resulted in 392 essential review comments, 164 of which were identified as safety significant concerns (designated as "EA"). Of these 164 "EA" concerns, 31 items have not been satisfactorily been addressed and they remain open for the next annual SARUP review cycle. In addition, 4 lesser significant review comments remain open. These have been tabulated in Attachment J. DOE reviewed these comments and issued the Upgraded SAR to USEC on February 14, 1997.
8. PGDP has 24 Safety Evaluations (SEs) open that constitute potential USQ issues that required a Justifications for Continued Operation (JCOs) to be prepared. These issues are contained in Attachment N.

PGDP DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

<u>SSR Inspection Reports (SSRs)</u>	<u>Functional Inspection Reports</u>	<u>Special Inspection Reports</u>	<u>DOE/HQ Reports</u>	<u>DOE Directives</u>
93-001	94-14	94-13	PGDP-94-001	RI-70-7001/94-0001
93-002	94-16	94-15	Radiological Control	RI-70-7003/94-001
93-003	94-17	94-19	Criticality Safety	RI-70-7003/94-003
93-004	94-18	95-13	ISA	TI-3.2/01
93-005	94-20			RG-70-7003/96-001
94-01*	95-16*			RG-70-7003/96-003
94-02				EA-70-7003/96-001
94-03				
94-04				
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96-05*				
96-06*				
96-07*				
96-08*				
97-01*				
97-02*				

* Reports that have issues remaining open and will be identified to NRC for further closeout verification

PGDP DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

Inspection Report No.	Inspection Type	Inspection Topic
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93-001	SSR	Investigation of C-337-A Incident that occurred on September 7, 1993
93-002	SSR	Walkthrough Inspection of the C-331 Process Building
93-003	SSR	Review of OSR Requirements Associated with C-337-A Autoclave Operations
93-004	SSR	Investigation of the Removal of a Contaminated Item from a C-Zone in C-410
93-005	SSR	Follow-up of an NCS Incident in C-710 Involving Laboratory Uranium Sample Salvage Operations
93-45	SSR	Walkthrough Inspection of the C-310 Process Building
94-01	SSR	Monthly Inspection for January 1994 (MC&O, Ops, RP, NCS, Fire Prot, and Emerg Prep)
94-02	SSR	Monthly Inspection for February 1994 (MC&O, Ops, RP, NCS, Fire Prot, and Emerg Prep)
94-03	SSR	Monthly Inspection for March 1994 (MC&O, Ops, RP, NCS, and Fire Prot)
94-04	SSR	Monthly Inspection for April 1994 (MC&O, Ops, RP, and Fire Prot)
94-05	SSR	Monthly Inspection for May 1994 (MC&O, Ops, T&Q, RP, NCS, and Chem Safety)
94-06	SSR	Monthly Inspection for June 1994 (MC&O, Ops, QA, RP, NCS, Fire Prot, and Emerg Prep)
94-07	SSR	Monthly Inspection for July 1994 (MC&O, Ops, QA, RP, NCS, Fire Prot, Nucl Mat'l & Safe, and Security)
94-08	SSR	Monthly Inspection for August 1994 (MC&O, Ops, RP, NCS, and Fire Prot)
94-09	SSR	Monthly Inspection for September 1994 (Ops, Eng'g Reviews, T&Q, and NCS)
94-10	SSR	Monthly Inspection for October 1994 (MC&O, T&Q, Maint, NCS, Fire Prot, and Emerg Prep)
94-11	SSR	Monthly Inspection for November 1994 (Eng'g Reviews)
94-12	SSR	Monthly Inspection for December 1994 (Emerg Prep)
94-13	Special	Unplanned Release of UF ₆ from C-310 Burp Station on 02/17/94
94-14	Functional	ROA Section 4.2.2 DOE Required Appraisal Inspections for 1994 (Ops, T&Q, and Maint)

PGDP DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7001/97-02)

Inspection Report No.	Inspection Type	Inspection Topic
94-15	Special	Investigation of an Unplanned Release from C-315 Surge and Waste Building on 04/12/94
94-16	Functional	ROA Section 4.2.2 DOE Required Appraisal Inspections for 1994 (Organ Plan, MC&O, QA, and Fire Prot)
94-17	Functional	ROA Section 4.2.2 DOE Required Appraisal Inspections for 1994 (Nucl Mat'l & Safe, Pkg'g & Trans, Sampling & Anal, and Security)
94-18	Functional	ROA Section 4.2.2 DOE Required Appraisal Inspections for 1994 (Eng'g, Reviews, Emerg Prep, and Accident Anal)
94-19	Special	Evaluation of the Integrated Response Capabilities During the 1994 Emergency Management Exercise No. 49
94-20	Functional	ROA Section 4.2.2 DOE Required Appraisal Inspections for 1994 (Environ. Prot, Waste Mg'mt, RP, NCS, and Chem Safety)
95-01	SSR	Monthly Inspection for January 1995 (RP)
95-02	SSR	Monthly Inspection for February 1995 (RP and Fire Prot)
95-03	SSR	Monthly Inspection for March 1995 (MC&O and Ops)
95-04	SSR	Monthly Inspection for April 1995 (RP, Fire Prot, and ROA Audits & Appraisals)
95-05	SSR	Monthly Inspection for May 1995 (Ops)
95-06	SSR	Monthly Inspection for June 1995 (Ops and RP)
95-07	SSR	Monthly Inspection for July 1995 (Eng'g Reviews and RP)
95-08	SSR	Monthly Inspection for August 1995 (MC&O and Ops)
95-09	SSR	6-Week Inspection for September - Mid October 1995 (MC&O and Ops)
95-10	SSR	6-Week Inspection for Mid October - November 1995 (Ops, T&Q, and NCS)
95-11	SSR	NOT USED - Shifted from Monthly to 6-Week Inspection Report Periods
95-12	SSR	NOT USED - Shifted from Monthly to 6-Week Inspection Report Periods
95-13	Special	Investigation of an Unplanned Release of UF ₆ During Cold Feed Operations in Process Building C-337-A on 12/13/94
95-14	Special (Unannounced)	NOT USED - Unreviewed Safety Question Determination Inspection (Verbally Canceled After Inspection Performed Per DOE ROM)

PGDP DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

Inspection Report No.	Inspection Type	Inspection Topic
95-15	Special	NOT USED - Deletion of IRMS Issues Post-ROA (Canceled Per DOE Letter RG-70-7003/96-0003)
95-16	Functional	ROA Section 4.2.2 DOE Required Appraisal Inspections for 1995 (Organ Plan, MC&O, Ops, Eng'g Reviews, QA, RP, NCS, Fire Prot, Nucl Mat'ls & Safe, Emer Prep, Accident Anal, Security, and Chem Safety)
96-01	SSR	6-Week Inspection for December 1995 - Mid January 1996 (MC&O and Ops)
96-02	SSR	6-Week Inspection for Mid January - February 1996 (Ops, T&Q and Waste Mg'mt)
96-03	SSR	6-Week Inspection for March - Mid April 1996 (MC&O, Ops, NCS, Nucl Mat'ls & Safe and Security)
96-04	SSR	6-Week Inspection for Mid April - May 1996 (MC&O, Ops and Waste Mg'mt)
96-05	SSR	6-Week Inspection for June - Mid July 1996 (Ops and Pkg'g & Trans)
96-06	SSR	6-Week Inspection for Mid July - August 1996 (Ops and Emerg Prep)
96-07	SSR	6-Week Inspection for September - Mid October 1996 (MC&O, Ops, and Emerg Prep)
96-08	SSR	6-Week Inspection for Mid October - November 1996 (MC&O, Ops, QA, and Security)
97-01	SSR	6-Week Inspection for December 1996 - January 10, 1997 (Ops)
97-02	SSR	6-Week Inspection for January 11 - March 3, 1997 (Ops)

PGDP DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

Report No.	Inspect Start Date	Inspect Stop Date	Exit Meeting Date	Report Issue Date	Report Closed Date	Report Status	Insp Type	Purpose of Inspection	Inspection Area(s)	ROA ORs	New Items						Closures					
											V	D	N	U	I	Total	V	D	N	U	I	Total
93-001	09/07/93	09/08/93	09/08/93	10/05/93	04/18/96	Closed	SSR	Investigation of a UF ₆ Release in Building C-337-A on 09/07/93	MC&O Operations Training & Qual Quality Assurance Rad Protection	3.2 3.3 3.5 3.6 3.8	1	0	0	0	0	1	0	0	0	0	0	0
93-002	09/07/93	09/07/93	09/07/93	10/26/93 02/03/94	07/18/96	Closed	SSR	Waltru inspection of C-331 process bldg	MC&O Rad Protection	3.2 3.8	1	0	0	0	0	1	0	0	0	0	0	0
93-003	09/21/93	09/21/93	09/21/93	10/26/93	09/05/96	Closed	SSR	Review of OSR req'ts assoc with C-337-A autoclave Ops	MC&O Operations Maintenance	3.2 3.3 3.7	1	0	0	0	0	1	0	0	0	0	0	0
93-004	09/24/93	09/24/93	09/24/93	10/26/93	07/18/96	Closed	SSR	Investigation of potential event report involving removal of a contaminated item from a C-Zone in C-410	MC&O Rad Protection	3.2 3.8	1	0	0	0	0	1	0	0	0	0	0	0
93-005	10/07/93	10/07/93	10/07/93	10/26/93	10/31/94	Closed	SSR	Follow-up of an NCS incident in C-710 involving lab Uranium sample salvage Ops	MC&O NCS	3.2 3.9	1	0	0	0	0	1	0	0	0	0	0	0
93-45	10/20/93	10/20/93	10/20/93	04/22/94	07/18/96	Closed	SSR	Waltru inspection of C-310 process bldg	MC&O Operations Rad Protection	3.2 3.3 3.8	0	0	1	0	0	1	0	0	0	0	0	0
94-01	01/01/94	01/31/94	03/07/94	03/23/94	01/19/96	Closed	SSR	Monthly Inspection (January 1994)	MC&O Operations Rad Protection Nucl Crit Safety Fire Protection Emergency Prep	3.2 3.3 3.8 3.9 3.10 3.13	2	0	0	4	6	12	0	0	0	0	0	0
94-02	02/01/94	02/28/94	03/14/94	04/22/94	01/19/96	Closed	SSR	Monthly Inspection (February 1994)	MC&O Operations Rad Protection Nucl Crit Safety Fire Protection Emergency Prep	3.2 3.3 3.8 3.9 3.10 3.13	1	0	1	1	3	7	0	0	0	0	3	3

PGDP DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

Report No.	Inspect Start Date	Inspect Stop Date	Exit Meeting Date	Report Issue Date	Report Closed Date	Report Status	Insp Type	Purpose of Inspection	Inspection Area(s)	ROA ORs	New Items						Closures					
											V	D	N	U	I	Total	V	D	N	U	I	Total
94-17	08/01/94	08/12/94	08/12/94	11/30/94	11/20/96	Closed	Functional	Functional Inspection - NMC&A, Pkg'g & Trans, Sampling, and Security	NMC&A Pkg'g & Trans Sampling & Anal Security	3.12 3.14 3.15 3.18	6	0	3	1	2	12	0	0	0	0	0	0
94-18	08/23/94	09/01/94	09/01/94	12/02/94	09/05/96	Closed	Functional	Functional Inspection - Eng'g, Accident Anal, and Emerg Prep	Eng'g Reviews Emergency Prep Accident Anal	3.4 3.13 3.17	2	0	1	1	3	7	0	0	0	0	0	0
94-19	09/12/94	09/15/94	09/15/94	11/30/94	11/30/94	Closed	Special	Eval of the Integrated Response Capabilities during PGDPs 1994 Emerg Mg'mt Exercise # 49	Emergency Prep	3.13	0	0	0	0	0	0	0	0	0	0	0	0
94-20	10/17/94	10/26/94	10/25/94	03/13/95	11/20/96	Closed	Functional	Functional Inspection - Environ Protect, Waste Mg'mt, Rad Protection, NCS, and Chem Safety	MC&O Training & Qual Rad Protection Nucl Crit Safety Environ Protect Waste Mg'mt Chem Safety	3.2 3.5 3.8 3.9 3.11 3.16 3.19	2	0	5	2	0	20	0	0	0	0	0	0
95-01	01/01/95	01/31/95	02/24/95	04/03/95	07/18/96	Closed	SSR	Monthly Inspection (January 1995)	Rad Protection	3.8	0	0	0	0	1	1	0	0	0	1	0	1
95-02	02/01/95	02/28/95	03/01/95	04/28/95	12/24/96	Closed	SSR	Monthly Inspection (February 1995)	Rad Protection Fire Protection	3.8 3.10	3	0	0	0	0	3	0	0	0	0	1	1
95-03	03/01/95	03/31/95	04/12/95	05/25/95	11/20/96	Closed	SSR	Monthly Inspection (March 1995)	MC&O Operations	3.2 3.3	0	1	0	1	1	3	6	0	0	1	0	7
95-04	04/01/95	04/30/95	05/15/95	06/26/95	11/20/96	Closed	SSR	Monthly Inspection (April 1995)	Rad Protection Fire Protection Audits & Appraisals	3.8 3.10 4.2.2	0	0	3	0	0	3	0	0	0	1	1	2
95-05	05/01/95	05/31/95	06/13/95	08/29/95	08/29/95	Closed	SSR	Monthly Inspection (May 1995)	Operations	3.3	0	0	0	0	0	0	4	0	0	0	2	6
95-06	06/01/95	06/30/95	07/12/95	11/02/95	02/10/97	Closed	SSR	Monthly Inspection (June 1995)	Operations Rad Protection	3.3 3.8	3	0	0	0	0	3	3	0	3	0	1	7
95-07	07/01/95	07/31/95	08/21/95	10/26/95	09/05/96	Closed	SSR	Monthly Inspection (July 1995)	Eng'g Reviews Rad Protection	3.4 3.8	2	0	0	0	0	2	0	0	1	4	4	9

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

Report No.	Inspect Start Date	Inspect Stop Date	Exit Meeting Date	Report Issue Date	Report Closed Date	Report Status	Insp Type	Purpose of Inspection	Inspection Area(s)	ROA ORs	New Items						Closures					
											V	D	N	U	I	Total	V	D	N	U	I	Total
95-08	08/01/95	08/31/95	09/15/95	01/24/96		Open	SSR	Monthly Inspection (August 1995)	MC&O Operations	3.2 3.3	2	0	0	1	0	3	0	0	0	6	4	10
95-09	09/01/95	10/15/95	11/09/95	01/19/96	01/19/96	Closed	SSR	6 - Week Inspection (Sept - mid Oct 1995)	Operations Waste Mg'mt	3.3 3.16	0	0	0	0	0	0	0	0	1	3	1	5
95-10	10/16/95	11/30/95	12/08/95	03/12/96	12/06/96	Closed	SSR	6 - Week Inspection (mid Oct - Nov 1995)	Operations Training & Qual Nucl Crit Safety	3.3 3.5 3.9	2	0	0	0	0	2	1	1	0	2	0	4
95-11						VOID	SSR	Not Used (Shifted to 6-Week Inspections)														
95-12						VOID	SSR	Not Used (Shifted to 6-Week Inspections)														
95-13	01/09/95	01/12/95	01/12/95	07/17/95	11/20/96	Closed	Special	Unplanned release of UF ₆ from the C-337-A feed facility to the atmosphere on 12/13/94	MC&O Operations Training & Qual Qual Assurance Rad Protection Environ Protect Emergency Prep	3.2 3.3 3.5 3.6 3.8 3.11 3.13	2	0	1	0	5	8	0	0	0	0	0	0
95-14	06/06/95 08/12/96	06/15/95 08/23/96	06/15/95 08/23/96	Not to be Issued		Cancel	Special (Unannounced)	Unreviewed Safety Question Determination (USQD) Req'mts (See USEC Memo dtd 06/06/95)	Organ Plan MC&O Operations Eng'g Reviews Training & Qual Qual Assurance Accident Anal	3.1 3.2 3.3 3.4 3.5 3.6 3.17												
95-15						Cancel	Special	Not Used (Replaced by RG-70-7003/96-0001 and RG-70-7003/96-0003)														

PGDP DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

Report No.	Inspect Start Date	Inspect Stop Date	Exit Meeting Date	Report Issue Date	Report Closed Date	Report Status	Insp Type	Purpose of Inspection	Inspection Area(s)	ROA ORs	New Items						Closures								
											V	D	N	U	I	Total	V	D	N	U	I	Total			
95-16	10/10/95	10/19/95	10/19/95	01/19/96		Open	Functional	Functional Inspection - Org Plan, MC&O, QA, Ops, Eng'g Reviews, NCS, Rad Protect, Chem Safety, Acid Anal, Fire Protect, Security, Nucl Mat'l Safe, Emerg Prep	Organization Plan MC&O Operations Eng'g Reviews Qual Assurance Rad Protection Nuel Crit Safety Fire Protection Nuel Mat'l Safe Emergency Prep Accident Anal Security Chem Safety	3.1 3.2 3.3 3.4 3.6 3.8 3.9 3.10 3.12 3.13 3.17 3.18 3.19	2	0	2	0	0	0	4	7	0	0	11	5	15	38	
									Redundant Closures		0	0	0	0	0	0	0	0	0	0	4	0	4	0	2
96-01	12/01/95	01/15/96	01/23/96	03/18/96	02/10/97	Closed	SSR	6 - Week Inspection (Dec - mid Jan 1996)	MC&O Operations	3.2 3.3	2	0	0	0	0	0	2	0	0	0	3	4	7		
96-02	01/16/96	02/29/96	03/06/96	04/18/96	09/05/96	Closed	SSR	6 - Week Inspection (mid Jan - Feb 1996)	Operations Training & Qual Waste Mgt'mt	3.3 3.5 3.16	0	0	0	1	0	1	1	3	1	1	3	2	10		
96-03	03/01/96	04/15/96	04/23/96	07/18/96	02/10/97	Closed	SSR	6 - Week Inspection (Mar - mid Apr 1996)	MC&O Operations Nuel Crit Safety Nuel Mat'l Safe Security	3.2 3.3 3.9 3.12 3.18	3	0	1	0	0	0	4	5	0	2	2	4	12		
96-04	04/16/96	05/31/96	06/05/96	09/05/96		Open	SSR	6 - Week Inspection (mid Apr - May 1996)	MC&O Operations Waste Mgt'mt	3.2 3.3 3.16	5	1	0	0	0	0	6	8	0	4	1	5	18		
									Redundant Closures		0	0	0	0	0	0	0	1	0	0	0	0	1		
96-05	06/01/96	07/15/96	07/24/96	11/20/96		Open	SSR	6 - Week Inspection (Jun - mid Jul 1996)	Operations Pkg'g & Trans	3.3 3.14	2	1	1	0	0	0	4	8	0	3	0	4	16		
96-06	07/16/96	08/31/96	09/09/96	12/06/96		Open	SSR	6 - Week Inspection (mid Jul - Aug 1996)	Operations Emergency Prep	3.3 3.13	1	0	0	0	0	0	1	2	0	0	0	0	2		
96-07	09/01/96	10/15/96	10/28/96	12/24/96		Open	SSR	6 - Week Inspection (Sept - mid Oct 1996)	MC&O Operations Emergency Prep	3.2 3.3 3.13	3	1	1	0	0	0	5	2	0	1	0	0	3		

PGDP DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

Report No.	Inspect Start Date	Inspect Stop Date	Exit Meeting Date	Report Issue Date	Report Closed Date	Report Status	Insp Type	Purpose of Inspection	Inspection Area(s)	ROA ORs	New Items						Closures					
											V	D	N	U	I	Total	V	D	N	U	I	Total
96-08	10/16/96	11/30/96	12/10/96	02/10/97		Open	SSR	6 - Week Inspection (mid Oct - Nov 1996)	MC&O Operations Qual Assurance Security	3.2 3.3 3.6 3.18	1	0	0	0	0	1	5	0	2	0	25	35
97-01	12/01/96	01/10/97	01/14/97	02/10/97		Open	SSR	6 - Week Inspection (Dec - Jan 10, 1997)	Operations	3.3	1	0	0	0	0	1	7	0	0	1	0	8
97-02	01/11/96	03/03/97	03/05/97	03/24/97		Open	SSR	6 - Week Inspection (Jan 11 - Mar 3, 1997)	Operations	3.3	0	0	0	2	0	2	6	1	3	0	3	13
									Redundant Closures		0	0	0	0	0	0	0	0	1	0	0	-1
RI-70-7001/ 94-0001 [PGDP-94-01]	11/03/96	11/14/96	12/10/96	09/30/94 (Date DOE Memo issued to perform inspect)	02/10/97	Closed	SSR Directed Followup (96-08)	DOE Investigation of the 09/07/93 Unplanned Release of UF ₆ at PGDP in Bldg C-337-A	N/A		0	0	0	0	2	12	0	0	0	0	0	0
TI-3.2 /01	10/10/95 10/20/96	10/19/95 10/29/96	10/19/95 12/10/96	10/06/95 (Date DOE-ROM Issued TI-3.2/01)	02/10/97	Closed	Special Directed Followup (95-16) (96-08) (97-02)	Regulatory Oversight Enforcement Conf due to Indication of a Breakdown in Management Controls	MC&O Rad Protection	3.2 3.8	0	0	0	0	0	13	0	0	0	0	0	0
EA-70-7003/ 96-001	12/04/96	12/09/96	12/10/96	10/30/96	03/24/97	Closed	SSR Directed Followup (96-08) (97-02)	Regulatory Oversight Management Conf Due to Failure of USEC to Improve its Ops Mgmt Controls & to Improve Specific Programs Addressed by these Controls	MC&O Operations Engineering	3.2 3.3 3.4	0	0	0	0	15	15	0	0	0	0	0	0

PGDP DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

Report No.	Inspect Start Date	Inspect Stop Date	Exit Meeting Date	Report Issue Date	Report Closed Date	Report Status	Insp Type	Purpose of Inspection	Inspection Area(s)	ROA ORs	New Items					Closures						
											V	D	N	U	I	Total	V	D	N	U	I	Total
RI-70-7003/94-001	01/12/94	01/12/94	-----	01/12/94	01/26/96	Cancel (RG-70-7003/96-0001)	Special (95-15)	Request for USEC to Provide a Listing of all Items that were on IRMS prior to 07/01/93 (Replaced by RG-70-7003/96-0001 and RG-70-7003/96-0003)	MC&O	3.2	0	0	0	0	0	0	0	0	0	0	0	0
RI-70-7003/94-003	03/03/94	03/03/94	-----	04/12/94		Open	Special	Request for USEC to Provide UFG False Alarm Data Being Compiled at PORTS and PGDP so that DOE can Evaluate the Safety Significance of these Failures	MC&O	3.2	0	0	0	0	0	0	0	0	0	0	0	0
RG-70-7003/96-0001	07/11/95	07/12/95	-----	01/26/96	07/16/96	Closed (RG-70-7003/96-0003)	N/A	Response to an Employee Concern that IRMS Issues had been Improperly Deleted at the Time of USEC Transition	MC&O	3.2	0	0	0	0	0	0	0	0	0	0	0	0
RG-70-7003/96-0003	07/16/95	07/16/95	-----	07/16/96	08/05/96 DOE Ltr Canceled Follow-up	Cancel	SSR (96-04)	Response to an Employee Concern that IRMS Issues had been Improperly Deleted at the Time of USEC Transition	MC&O	3.2	0	0	0	0	0	0	0	0	0	0	0	0
EA-70-7001/97-0002	02/18/97	02/21/97	-----	02/21/97	03/24/97	Closed	SSR (97-02)	DOE Confirmatory Action Letter in relation to a violation of the NCS double contingency controls for C-400 UFG cylinder washing operations on 02/18/97	Nucl Crit Safety	3.9	0	0	0	0	0	0	0	0	0	0	0	0

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

Report No.	Inspect Start Date	Inspect Stop Date	Exit Meeting Date	Report Issue Date	Report Closed Date	Report Status	Insp Type	Purpose of Inspection	Inspection Area(s)	ROA ORs	New Items						Closures					
											V	D	N	U	I	Total	V	D	N	U	I	Total
STATISTICAL SUMMARY									Number of Inspection Findings Evaluated		77	5	36	41	90	249	69	3	36	39	90	237
									Number of Withdrawals		4	0	0	0	0	4	4	0	0	0	0	4
									Number of Directed Followup Items		0	0	0	0	40	40	0	0	0	0	40	40
									Total Number of DOE RO Inspection Findings Issued		77	5	36	41	50	209	69	3	36	39	50	197
									No. of RO Inspection Items Requiring Follow-up		205						193					
									Number of RO Inspection Items Remaining Open		8	2	0	2	0	12						

No. of SSR Inspections Conducted	37
No. of Functional Area Inspections Conducted	6
No. of Special Inspections Conducted	4
Total Number of Inspections Conducted	47

PGDP DOE ROA Inspection Report Statistics

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

SSR Inspection Period Report No.	Inspect Start Date	Inspect Stop Date	Inspections Conducted During Inspection Period	Inspection Reports/ DOE Directives Issued During Inspection Period	New Items					Total	Accum	Closures					Total	Accum	No. Open Items at Start	Net Open Items at End
					V	D	N	U	I			V	D	N	U	I				
-----	07/01/93	07/31/93								0	0						0	0	0	0
-----	08/01/93	08/31/93								0	0						0	0	0	0
-----	09/01/93	09/30/93	93-001, 93-002, 93-003, 93-004							0	0						0	0	0	0
-----	10/01/93	10/31/93	93-005	93-001, 93-002, 93-003, 93-004, 93-005	5	0	0	0	0	5	5	0	0	0	0	0	0	0	0	5
-----	11/01/93	11/30/93								0	5						0	0	5	5
-----	12/01/93	12/31/93								0	5						0	0	5	5
94-01	01/01/94	01/31/94	94-01							0	5						0	0	5	5
94-02	02/01/94	02/28/94	94-02							0	5						0	0	5	5
94-03	03/01/94	03/31/94	94-03, 94-13, PGDP-94-01	94-01	2	0	0	4	6	12	17	0	0	0	0	0	0	0	5	17
94-04	04/01/94	04/30/94	94-04	93-45, 94-02, 94-03	2	0	5	3	5	15	32	0	0	0	0	5	5	5	17	27
94-05	05/01/94	05/31/94	94-05, 94-14, 94-15	94-13	1	1	0	1	1	4	36	0	0	0	0	0	0	5	27	31
94-06	06/01/94	06/30/94	94-06	94-04	0	0	1	0	0	1	37	0	0	2	0	1	3	8	31	29
94-07	07/01/94	07/31/94	94-07, 94-16	94-05, 94-15	3	0	2	7	2	14	51	0	0	0	0	0	0	8	29	43
94-08	08/01/94	08/31/94	94-08, 94-17	94-06, 94-14	11	0	3	4	4	22	73	1	0	0	0	2	3	11	43	62
94-09	09/01/94	09/30/94	94-09, 94-18, 94-19	PGDP-94-01, 94-07	1	0	1	1	15	18	91	0	0	2	3	3	8	19	62	72
94-10	10/01/94	10/31/94	94-10, 94-20	94-08, 94-16	6	0	6	7	5	24	115	1	0	0	1	0	2	21	72	94
94-11	11/01/94	11/30/94	94-11	94-17, 94-19	6	0	3	1	2	12	127	0	0	0	0	0	0	21	94	106
94-12	12/01/94	12/31/94	94-12	94-09, 94-18	3	0	1	3	4	11	138	0	0	0	0	0	0	21	106	117
95-01	01/01/95	01/31/95	95-01, 95-13							0	138						0	21	117	117
95-02	02/01/95	02/28/95	95-02	94-10	0	0	0	1	0	1	139	0	0	0	0	0	0	21	117	118

PGDP DOE ROA Inspection Report Statistics

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

SSR Inspection Period Report No.	Inspect Start Date	Inspect Stop Date	Inspections Conducted During Inspection Period	Inspection Reports/ DOE Directives Issued During Inspection Period	New Items							Closures							No. Open Items at Start	Net Open Items at End
					V	D	N	U	I	Total	Accum	V	D	N	U	I	Total	Accum		
95-03	03/01/95	03/31/95	95-03	94-11, 94-20	2	0	5	4	11	22	161	1	0	1	3	0	5	26	118	135
95-04	04/01/95	04/30/95	95-04	94-12, 95-01, 95-02	4	0	0	0	1	5	166	0	0	0	2	1	3	29	135	137
95-05	05/01/95	05/31/95	95-05	95-03	0	1	0	1	1	3	169	6	0	0	1	0	7	36	137	133
95-06	06/01/95	06/30/95	95-06, 95-14	95-04	0	0	3	0	0	3	172	0	0	0	1	1	2	38	133	134
95-07	07/01/95	07/31/95	95-07	95-13	2	0	1	0	5	8	180	0	0	0	0	0	0	38	134	142
95-08	08/01/95	08/31/95	95-08	95-05	0	0	0	0	0	0	180	4	0	0	0	2	6	44	142	136
95-09	09/01/95	10/15/95	95-09	TI-3.2/01, 95-07	2	0	0	0	13	15	195	0	0	1	4	4	9	53	136	142
95-10	10/16/95	11/30/95	95-10, 95-16	95-06	3	0	0	0	0	3	198	3	0	3	0	1	7	60	142	138
96-01	12/01/95	01/15/96	96-01							0	198						0	60	138	138
96-02	01/16/96	02/29/96	96-02	95-08, 95-09, 95-16	4	0	2	1	0	7	205	7	0	12	12	20	51	111	138	94
96-03	03/01/96	04/15/96	96-03	95-10, 96-01	4	0	0	0	0	4	209	1	1	0	5	4	11	122	94	87
96-04	04/16/96	05/31/96	96-04	96-02	0	0	0	1	0	1	210	3	1	1	3	2	10	132	87	78
96-05	06/01/96	07/15/96	96-05							0	210						0	132	78	78
96-06	07/16/96	08/31/96	96-06	96-03	3	0	1	0	0	4	214	5	0	2	2	3	12	144	78	70
96-07	09/01/96	10/15/96	96-07	96-04	5	1	0	0	0	6	220	7	0	4	1	5	17	161	70	59
96-08	10/16/96	11/30/96	96-08	EA-96-01, 96-05	2	1	1	0	15	19	239	8	0	3	0	5	16	177	59	62
97-01	12/01/96	01/10/97	97-01	96-06, 96-07	4	1	1	0	0	6	245	4	0	1	0	0	5	182	62	63
97-02	01/11/97	03/03/97	97-02	96-08, 97-01	2	0	0	0	0	2	247	12	0	2	1	28	43	225	63	22
	03/04/97	03/31/97		97-02	0	0	0	2	0	2	249	6	1	2	0	3	12	237	22	12
TOTALS					77	5	36	41	90	249	249	69	3	36	39	90	237	237		
REMAINING ITEMS					8	2	0	2	0	12										

PGDP DOE Regulatory Findings History Report

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
SSR Inspection Report EA-70-7001/93-001 - Investigation of C-337-A Incident that occurred on September 7, 1993												
1	93-10-01 (93-21-01) [93-001]	Failure to implement engineering and admin controls and to properly use personnel protective equipment to control internal radiation exposures of employees	NOV (II)	3.2.2.1 3.3.2.7 3.5.2.3 3.5.2.5 3.6.2.3 3.8.2.7 3.8.2.9 3.8.2.13	Review of Event Report PAD-93-004 involving UF ₆ release in C-337-A in which 9 personnel exceeded admin limits on Uranium intakes	10/05/93 02/10/94 06/07/94	12/31/94	96-02	Closed	96-02	04/18/96	Original report was issued on 10/05/93. This report was superseded by a 02/20/94 report which had an 8-part NOV (subdivided below) after DOE conducted a walkdown of the incident's conditions. On 06/07/94, a \$20,000.00 civil penalty was imposed by DOE. This issue was prematurely linked to the closure of 94-15-01 and admin closed in 96-02 report. (Actual No. for this issue is 93-21-01. IFS and the IR show this issue as 93-10-01).
	93-10-01 Violation Elements	NOTE: Since 94-15-01 was closed prior to the issuance of IR 96-02, no actual formal closure of these items has occurred. In a DOE-ROM Memorandum to the PGDP SSRs on 09/30/94, the SSRs were requested to perform a followup inspection to close DOE issues raised in a DOE/HQ ES&H Report (PGDP-94-01, issued in March 1994) that was sent to the lessee for resolution via RI-70-7001/94-0001, dated May 16, 1994. SSR inspection followup of this PGDP-94-01 report will also resolve most of the 93-001 issues because the nature of the issues raised in the two reports, are similar. For completeness, a breakout of the eight 70-7001/93-001 items and their cross-connection to the PGDP-94-01 report have been tabulated below.										
	Viol 1A	Personnel that responded to two separate UF ₆ detector alarms did not wear proper protective equipment. As a result, fifteen plant mgrs, supervisors, and technicians received an internal rad exposure. Nine individuals had U-compound uptakes in excess of plt guidelines	NOV (II)	3.8.2.9	Review of admin controls and personal protective equipment utilized by emergency response personnel in investigating an event in order to control the intake of radiation sources	02/10/94	12/31/94	96-02 96-08	Closed	96-02 96-08	04/18/96 02/10/97	See PGDP-94-01-09 for corrective actions taken to resolve this issue
	Viol 1.B	Personnel that responded to the second UF ₆ detector alarm and tasted HF, donned air purifying respirators versus SCBAs as req'd by the RP Prog	NOV (II)	3.8.2.7	Eval the adequacy of the RP Program to govern the selection & use of respirators to reduce int exposures	02/10/94	03/11/94	96-02 96-08	Closed	96-02 96-08	04/18/96 02/10/97	See PGDP-94-01-07 and -09 for corrective actions taken to resolve this issue
	Viol 1.C	Plt personnel did not establish contam control boundaries once UF ₆ leakage was identified	NOV (II)	3.8.2.13	Eval of contam controls to control contam at its source	02/10/94	03/11/94	96-02 96-08	Closed	96-02 96-08	04/18/96 02/10/97	See PGDP-94-01-10 for corrective actions taken to resolve this issue

PGDP DOE Regulatory Findings History Report

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
	Viol 2	No procedure had been developed to respond to UF ₆ detector alarms	NOV (II)	3.2.2.1	Review of C-337-A alarm response procedures	02/10/94	10/01/94	96-02 96-08	Closed	96-02 96-08	04/18/96 02/10/97	See PGDP-94-01-08 for corrective actions taken to resolve this issue
	Viol 3	No USQD was performed following isolation of the UF ₆ leak prior to restarting the C-337-A autoclaves on 09/07/93	NOV (II)	3.3.2.7	Eval of restart req'ts following an event involving an "as-found" condition	02/10/94	03/11/94	96-02 96-08	Closed	96-02 96-08	04/18/96 02/10/97	See PGDP-94-01-12 for corrective actions taken to resolve this issue
	Viol 4.A	Plt support personnel, such as HP Techs, had received no specialized tm'g on the hazards of rad and non-rad mat'ls beyond GET	NOV (II)	3.5.2.3	Eval of plt tm'g req'ts in responding to UF ₆ detector alarms	02/10/94	10/31/94	96-02 96-08	Closed	96-02 96-08	04/18/96 02/10/97	See PGDP-94-01-10 for corrective actions taken to resolve this issue
	Viol 4.B	HP Techs that responded to the 09/07/93 event had not undergone a formal site tm'g or qual process	NOV (II)	3.5.2.5	Eval of the HP performance-based tm'g program	02/10/94	10/31/94	96-02 96-08	Closed	96-02 96-08	04/18/96 02/10/97	See PGDP-94-01-10 for corrective actions taken to resolve this issue
	Viol 5	The pattern of UF ₆ detector safety system false alarms had been documented but neither controlled nor corrected	NOV (II)	3.6.2.3	Eval of the QA Program to detect and prevent quality problems	02/10/94	06/07/94	96-02 96-08	Closed	96-02 96-08	04/18/96 02/10/97	See PGDP-94-01-03 for corrective actions taken to resolve this issue
SSR Inspection Report EA-70-7001/93-002 - Walkthrough Inspection of the C-331 Process Building												
2	93-20-02 (93-20-01) [93-002]	Failure to use RWP for entry to contaminated area in C-331 at column F-31	NOV (III)	3.8.2.18 3.8.2.19	Walkthru inspection of C-331 process bldg	10/26/93	06/30/94	96-03	Closed	96-03	07/18/96	Issue was linked to the closure of 95-06-03 and admin closed in 96-03 report. Issues from 93-004 were combined with 93-002 on 3/3/94. (Actual No. for this issue is 93-20-01. IFS shows this issue as 93-20-02).
SSR Inspection Report EA-70-7001/93-003 - Review of OSR Requirements Associated with C-337-A Autoclave Operations												
3	93-27-03 (93-27-01) [93-003]	Failure to follow Autoclave Opening Prevention Test procedure	NOV (III)	3.2.2.1 3.3.2.2	Review of MSR #PU8248 and associated functional testing of C-337-A autoclave opening prevention system	09/21/93	11/24/93	96-04	Closed	96-04	09/05/96	(Actual No. for this issue is 93-27-01. IFS shows this issue as 93-27-03).
SSR Inspection Report EA-70-7001/93-004 - Investigation of the Removal of a Contaminated Item from a C-Zone in C-410												

PGDP DOE Regulatory Findings History Report

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
4	93-29-04 (93-29-01) [93-004]	Contamination Control Boundary	NOV (III)	3.8.2.19	Review of RWP controls involving monitoring, entrance and exit req'ts, and respir protection equip usage	09/24/93	11/05/93	96-03	Closed	DOE Ltr 96-03	02/03/94 07/18/96	WITHDRAWN - Violation withdrawn in DOE Ltr 02/03/94, and added to Insp Rept 93-002. Issue was admin closed in 96-03 report. (Actual No. for this issue is 93-29-01. IFS shows this issue as 93-29-04).
SSR Inspection Report EA-70-7001/93-005 - Followup of an NCS Incident in C-710 Involving Laboratory Uranium Sample Salvage Operations												
5	93-38-05 (93-38-01) [93-005]	Failure to follow nuclear criticality safety procedures.	NOV (III)	3.9.2.6	Followup eval of occurrence report PAD-1993-0018 involving NCS violation in the handling of laboratory Uranium liquid salvage in C-710	10/07/93	12/14/93 04/30/94	94-08	Closed	94-08	10/31/94	(Actual No. for this issue is 93-38-01. IFS shows this issue as 93-38-05).
SSR Inspection Report 70-7001/93-45 - Walkthrough Inspection of the C-310 Process Building												
6	93-45-01 [93-45]	Failure to follow RWP Procedures	NCV (NA)	3.2.2.1 3.8.2.19	Walkthru inspection of C-310 process bldg	04/22/94	08/08/94	96-03	Closed	96-03	07/18/96	Issue was linked to the closure of 95-06-03 and admin closed in 96-03 report.
SSR Inspection Report 70-7001/94-01 - Monthly Inspection for January 1994 (MC&O, Ops, RP, NCS, Fire Prot, and Emerg Prep)												
7	94-01-01	Complete the surveillance for "Events/Occurrences Follow-up" for root cause determination and other items necessary for a Nonconformance report.	IFI (NA)	3.2.2.3	Review of NCR-PAD-94-003 involving a UF ₆ release (wisp)	03/23/94	03/24/94	94-02 94-03	Closed	94-03	04/22/94	
8	94-01-02	Radiation Controls - Housekeeping and Posting	IFI (NA)	3.8.2.11 3.8.2.12	Eval of Rad Protection Controls in C-333	03/23/94	04/22/94	94-03	Closed	94-03	04/22/94	
9	94-01-03	Equipment inspection - "B" Booster coolant condensers	URI (NA)	3.6.2.8	Walkthru inspection of C-333 process bldg	03/23/94	09/22/94	94-07	Closed	94-07	09/22/94	
10	94-01-04	Radiation work permit	IFI (NA)	3.8.2.18	Review of C-710 RWPs	03/23/94	06/26/95	95-05	Closed	95-05	08/29/95	
11	94-01-05	Radiological controls	IFI (NA)	3.8.2.11 3.8.2.12	Eval of Rad Protection Controls in C-310	03/23/94	04/22/94	94-02	Closed	94-02	04/22/94	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
12	94-01-06	Failure to exercise positive control over radioactive sources.	NOV (III)	3.8.2.16	Review of C-310 & C-335 source control activities	03/23/94	09/30/94 01/09/95	95-05	Closed	95-05	08/29/95	
13	94-01-07	Rupture Disc rating on high speed P&E pumps	URI (NA)	3.3.2.1	Verif of C-333 OSR operating parameters	03/23/94	06/24/94	94-02 94-05 94-07	Closed	94-07	09/22/94	
14	94-01-08	Rupture disc setting exceeds OSR rating (Is below the LSSS)	URI (NA)	3.3.2.1	Review of C-315 OSR Ops involving R-114 System	03/23/94	04/05/95	94-02 95-09	Closed	95-09	01/19/96	
15	94-01-09	Contaminated equipment control	IFI (NA)	3.8.2.11 3.8.2.12	Eval of Rad Protection Controls in C-335	03/23/94	04/22/94	94-02	Closed	94-02	04/22/94	Elevated to NCV 94-02-04
16	94-01-10	Failure to perform required 1 year review of Emergency Preparedness Procedures	NOV (III)	3.13.2.3	Eval of a C-300 tabletop exercise concerning tornado hazards	03/23/94	07/15/94 08/31/94	94-06	Closed	94-06	08/31/94	
17	94-01-11	Radioactive material storage area	IFI (NA)	3.8.2.11 3.8.2.12	Eval of Rad Protection Controls in C-710	03/23/94	04/22/94	94-02	Closed	94-02	04/22/94	Elevated to NCV 94-02-04
18	94-01-12	Criticality safety - Fissile Material Storage	URI (NA)	3.9.3.2 3.9.3.5 3.9.3.6	Eval of C-337 NCS activities & controls	03/23/94	09/22/94	94-05 94-07	Closed	94-07	09/22/94	Elevated to NOV 94-07-01
SSR Inspection Report 70-7001/94-02 - Monthly Inspection for February 1994 (MC&O, Ops, RP, NCS, Fire Prot, and Emerg Prep)												
19	94-02-01	Clarification of coverage of "B" to C-315 Booster Pumps by OSR, rupture disks and relief valve ratings, and P&E low speed booster pump modifications.	URI (NA)	3.3.2.1	Review of C-315 OSR Ops involving R-114 coolant condenser rupture discs	04/22/94	07/31/95	94-03 94-05 95-09	Closed	95-09	01/19/96	
20	94-02-02	Failure to post personnel access door and provide monitoring equipment.	NCV (NA)	3.8.2.10	Review of lessee provisions involving contam control in C-333	04/22/94	04/22/94	94-03 94-07	Closed	94-07	09/22/94	
21	94-02-03	Failure to follow radiation protection procedures, multiple (4) cases.	NOV (III)	3.8.2.18	Review of lessee provisions involving contam control in C-315, -335, & -337	04/22/94	05/19/94 07/31/94	95-05	Closed	95-05	08/29/95	

PGDP DOE Regulatory Findings History Report

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No	[Rept #]	Issue	CAT	ROA	Section	Activity	Date	Action	Update	Report	Status	Report	Date	Comments
22	94-02-04		Failure to properly label and store radioactive material.	NCV	3.8.2.11		Review of RMSA controls in C-337-A	04/22/94	03/31/94	94-03	94-04	Closed	94-05	06/02/94	Rollled up IFIs 94-01-09 and -11 into this item.
23	94-02-05		Proper treatment of Unit 2 Cell 2 Stage 7 area with respect to fissile waste under "mock" high assay operations.	IFI	3.9.2.5		Review of NCS controls of fissile waste in C-335	04/22/94	02/01/95	95-07		Closed	95-07	10/26/95	
24	94-02-06		Applicability of Fissile Control Area criteria to column DD-23 area under "mock" high assay operations.	IFI	3.9.2.5		Review of NCS controls of fissile waste in C-331	04/22/94	09/22/94	94-05	94-06	Closed	94-07	09/22/94	Elevated to NOV 94-07-01
25	94-02-07		Proper storage of materials in a temporary Fissile Control Area	IFI	3.9.2.5		Review of NCS controls of fissile waste in C-400	04/22/94	04/22/94	94-07		Closed	94-07	09/22/94	
26	94-03-01		Justification for failure to have formal procedure for conditioning PCS Freezer-Sublimers in OOO Equipment.	URI	3.3.2.3		Review of Ops checklist involving PCS F/S in OOO equip	04/22/94	03/13/95	94-11		Closed	94-11	03/13/95	
27	94-03-02		Actions taken in response to acceptable hi-hi weight trip test of unit 1, cell 9 freezer/sublimers.	URI	3.3.2.1		Review of quarterly F/S HI-HI weight trip test	04/22/94	01/05/95	95-08		Closed	95-08	01/24/96	
28	94-03-03		Failure to implement contamination control measures	NCV	3.8.2.11		Review of lessee provisions involving contam control in C-337A	04/22/94	07/01/94	94-07		Closed	94-07	09/22/94	
29	94-03-04		Failure to follow RWP procedures.	NOV	3.8.2.18		Eval of Rad protection work in C-331, 333, 337, & C-720	04/22/94	07/31/94	95-05		Closed	95-05	08/29/95	
30	94-03-05		Failure to properly store contaminated material in RMSA.	NCV	3.8.2.11		Independent inspection of RMSA in C-335	04/22/94	06/02/94	94-04		Closed	94-04	06/02/94	
31	94-03-06		NCSA and posting for area near column Ma-21 on cell floor.	IFI	3.9.2.5		Eval of FCA controls in C-333	04/22/94	09/22/94	94-07		Closed	94-07	09/22/94	Elevated to NOV 94-07-01

SSR Inspection Report 70-7001/94-03 - Monthly Inspection for March 1994 (M&O, Ops, RF, NCS, and Fire Prot)

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
32	94-03-07	Four fire extinguishers with tags indicating the monthly inspection was overdue.	IFI (NA)	3.10.2.16	Eval of fire protection controls in C-310, 337-A, & C-720	04/22/94	06/02/94	94-04	Closed	94-04	06/02/94	Elevated to NCV 94-04-01
SSR Inspection Report 70-7001/94-04 - Monthly Inspection for April 1994 (MC&O, Ops, RP, and Fire Prot)												
33	94-04-01	Inadequate implementation of fire protection measures.	NCV (NA)	3.10.2.16	Review of portable fire extinguishers and combustible storage cabinets	06/02/94	07/31/95	95-09	Closed	95-09	01/19/96	Rollled up IFI 94-03-07 into this item.
SSR Inspection Report 70-7001/94-05 - Monthly Inspection for May 1994 (MC&O, Ops, T&O, RP, NCS, and Chem Safety)												
34	94-05-01	Adequacy of Safety Evaluation regarding UF ₆ detection capabilities.	URI (NA)	3.3.2.7	Followup of an apparent UF ₆ release in C-333	07/25/94		95-07	Closed	95-07	10/26/95	
35	94-05-02	Identification of systems requiring triennial relief valve replacement per the OSRs.	URI (NA)	3.3.2.1	Review of overpressurization protection of C-331 cell coolant condensers	07/25/94	08/08/95	95-09	Closed	95-09	01/19/96	
36	95-05-03	Broken calibration stickers on Jomar JHH-10 radiation monitoring instrument.	IFI (NA)	3.3.2.2	Review of equip status controls in C-310	07/25/94	08/31/94	94-06	Closed	94-06	08/31/94	
37	94-05-04	Review of management controls applied to UF ₆ detection safety system components.	URI (NA)	3.3.2.3	Independent inspection of C-337 Ops activities	07/25/94	08/08/95	94-06 95-08	Closed	95-08	01/24/96	Elevated to NOV 95-08-01
38	94-05-05	Review procedural requirements for UF ₆ detector false alarms and assess LCO for out of service detectors.	IFI (NA)	3.3.2.3	Review of UF ₆ detector false actuation log	07/25/94	08/31/94	94-06	Closed	94-06	08/31/94	Elevated to NOV 94-06-01
39	94-05-06	Out of date respiratory protection training	NCV (NA)	3.5.2.6	Review of respir protection tm'g for workers in C-331, 333, 337, 400, and C-720	07/25/94	01/31/95	94-09 95-05 96-05	Closed	96-05	11/20/96	NOV 94-09-02 contains the CAP that was used to close this issue. In addition, this item has been admin linked to the closure of DOE CPI No. 24, "Sys Approach to Trm'g," and was admin closed in 96-05

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
40	94-05-07	Improper storage of 15-gallon HEPA vacuum in the C-333 Process Building.	NCV (NA)	3.9.2.3	Review of USEC Event Report PAD-1994-0050 involving C-335 HAUP walkdown results	07/25/94	08/12/94	94-11	Closed	94-11	03/13/95	
41	94-05-08	Improper storage and labeling of HEPA vacuum cleaners.	NOV (III)	3.9.2.3	Review of C-335 HEPA vacuum cleaner servicing area FCA controls	07/25/94	01/09/95	94-11	Closed	94-11	03/13/95	
42	94-05-09	Clarification of Site Event Categorization Criteria for NCS incidents.	URI (NA)	3.2.2.3 3.9.2.1	Review of NCS incident criteria to the site's event reporting criteria	07/25/94	02/21/95	95-03	Closed	95-03	05/25/95	
43	94-05-10	Adequacy of preventative measures and training in relation to lessee identified NCS violations.	URI (NA)	3.6.2.3 3.9.2.5	Review of NCR-PAD-94-173 involving the breach of NCS labeling req'ts	07/25/94	10/30/94	94-11	Closed	94-11	03/13/95	
44	94-05-11	Adequacy of the monthly chlorine detector maintenance and testing.	URI (NA)	3.19.2.1	Observation of IM monthly chlorine leak detector checks	07/25/94	04/26/95	95-07	Closed	95-07	10/26/95	
SSR Inspection Report 70-7001/94-06 - Monthly Inspection for June 1994 (MC&O, Ops, QA, RP, NCS, Fire Prot, and Emerg Prep)												
45	94-06-01	Improper operator actions in response to UF ₆ detector alarms.	NOV (III)	3.2.2.1	Review of adherence to UF ₆ alarm response & maintenance procedures for > atmos ops	08/31/94	12/31/94 01/09/95	95-03	Closed	95-03	05/25/95	Rolled up IFI 94-05-05 into this item.
46	94-06-02	Failure to follow RWP requirements.	NOV (III)	3.8.2.18	Review of NCR-PAD-94-316 involving skin contam of 3 CO workers	08/31/94	10/31/94 01/09/95	95-03	Closed	95-03	05/25/95	
47	94-06-03	Maintenance of breathing equipment located on cell floor.	IFI (NA)	3.8.2.9	Observation of out-of-cal MSA fresh air breathing equip carts for use in C-333 & C-400	08/31/94		95-10 96-02	Closed	96-02	04/18/96	
48	94-06-04	Implementation of ORR Team recommendations for above atmospheric pressure operation.	URI (NA)	3.3.2.6	Review of ORR report dated 12/10/93 for > atmos Ops.	08/31/94	01/04/95	95-07	Closed	95-07	10/26/95	
49	94-06-05	Failure to inspect high efficiency filter systems at required intervals.	NOV (III)	3.6.2.8	Review of annual HEPA filter inspection & testing Ops	08/31/94	11/30/94 01/09/95	95-03	Closed	95-03	05/25/95	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
50	94-06-06	Adequacy of overpressure in fire extinguishers located in high ambient heat areas.	IFI (NA)	3.10.2.16	Observation of fire extinguisher stations in C-335	08/31/94	03/27/95	95-09	Closed	95-09	01/19/96	
51	94-06-07	Failure to perform passive fire watches as required by OSRs.	NCV (NA)	3.3.2.1	Independent inspection on notification of a C-333 fire suppression system that was out-of-spec	08/31/94	01/09/95	94-12 95-03 95-06	Closed	95-06	11/02/95	
SSR Inspection Report 70-7001/94-07 - Monthly Inspection for July 1994 (MC&O, Ops, QA, RF, NCS, Fire Prot, Nucl Mat'l, & Safe, and Security)												
52	94-07-01	Failure to follow nuclear criticality waste handling and storage procedures.	NOV (III)	3.2.2.1 3.9.2.6	Review of previously identified fissile material storage items	09/22/94	02/15/95	95-10	Closed	95-10	03/12/96	Rolled up URI 94-10-12 and IFIs 94-02-06 and 94-03-06 into this item.
53	94-07-02	Procedure CN-54, Rev O, stamped "Working Copy" with an expiration date of 7/24/94 was used for the annual pressure decay test. Portions of the procedure were not followed by the operator.	URI (NA)	3.2.2.1	Observation of annual performance of CN-54 pressure decay test of C-333-A feed station	09/22/94	11/02/94	94-08	Closed	94-08	10/31/94	Elevated to NOV 94-08-01
54	94-07-03	Management and worker acceptance of contamination control practices.	IFI (NA)	3.8.2.18	Review of Contam Control Ops in C-333-A, C-315, & C-400	09/22/94		95-16	Closed	95-16	01/19/96	
55	94-07-04	Failure to record room temperature on a daily basis.	NCV (NA)	3.2.2.1	Eval of fissile mat'l Ops in C-335 & C-337	09/22/94	01/09/95	95-06	Closed	95-06	11/02/95	
56	94-07-05	Declining attention to detail and lack of ownership in handling fissile material.	IFI (NA)	3.9.2.5	Eval of a temp FSA in C-333 to verify compliance with NCSA WM-03	09/22/94	02/06/95	95-08	Closed	95-08	01/24/96	
57	94-07-06	Adequacy of measures to protect classified information	IFI (NA)	3.18.2.2	Eval of C-335 data sheets for cell treatments	09/22/94	03/30/95	96-04	Closed	96-04	09/05/96	
DOE/HQ ES&H Report - PGDP-94-01, Event Review at Paducah Gaseous Diffusion Plant (SSR to Perform Followup Inspection per DOE Memorandum dated 09/30/94)												

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
58	PGDP-94-01-01 (RL-70-7001/ 94-0001) [PGDP-94-01]	Degradation of feed header piping which could result in unexpected failures	IFI (NA)	N/A	Eval of the condition of the feed piping in Bldg C-337-A with respect to inspections, analyses, and history	04/18/94	Revise OSRs prior to use of relocated piping	96-08	Closed	96-08	02/10/97	This item has been admin linked to the closure of DOE CPI No. 1, "Trans from DOE Reg to NRC Reg," DOE CPI No. 21, "Pit Changes and Config Mgmt," and DOE CPI No. 40, "Chem Safety Mech Integrity Prog." Further, DOE final issuance of the C-337-A TSR for feed positions 3, 4, and 5 will complete the RTS actions req'd to fully resolve this issue. Since these are separate DOE actions, this item was admin closed in 96-08.
59	PGDP-94-01-02 (RL-70-7001/ 94-0001) [PGDP-94-01]	Continued steam leaks may result in a common mode failure of UF ₆ piping	IFI (NA)	N/A	Eval of the steam tracing along the feed piping and the pattern of steam leaks from its copper joints	04/18/94	05/20/94	96-08	Closed	96-08	02/10/97	This item has been admin linked to the closure of DOE CPI No. 21, "Pit Changes and Config Mgmt," and was admin closed in 96-08
60	PGDP-94-01-03 (RL-70-7001/ 94-0001) [PGDP-94-01]	Failure to reduce the number of invalid UF ₆ alarms has caused the operators to lose confidence in the detection systems	IFI (NA)	N/A	Eval of the UF ₆ release detection system, how the detectors operate, and the history of alarms from these detectors prior to the C-337-A event	04/18/94	12/31/94	96-08	Closed	96-08	02/10/97	
61	PGDP-94-01-04 (RL-70-7001/ 94-0001) [PGDP-94-01]	HF measurement instruments may not be adequate for the concentrations expected during emergencies	IFI (NA)	N/A	Eval of how the HF detectors are used to detect the presence of HF following a suspected UF ₆ release	04/18/94	07/27/94	96-08	Closed	96-08	02/10/97	
62	PGDP-94-01-05 (RL-70-7001/ 94-0001) [PGDP-94-01]	PGDP does not have a real-time means of determining radionuclide concentrations in the event of a UF ₆ release	IFI (NA)	N/A	Eval of the use of continuous air samplers during the UF ₆ event and the length of time needed to determine conc of U-234	04/18/94	08/31/94	96-08	Closed	96-08	02/10/97	
63	PGDP-94-01-06 (RL-70-7001/ 94-0001) [PGDP-94-01]	Communications in Bldg C-337-A were inadequate to support effective mitigation and Emerg Mgmt during the 9/7/93 release	IFI (NA)	N/A	Eval of the PA and respirator commun systems that were used during the event, including personnel understanding of such communications	04/18/94	05/01/94	96-08	Closed	96-08	02/10/97	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
64	PGDP-94-01-07 (RI-70-7001/ 94-0001) [PGDP-94-01]	Failure of the plt staff to diagnose and respond to the event as a UF ₆ release delayed subsequent corrective actions	IFI (NA)	N/A	Eval of the role event recognition had in personnel response	04/18/94	09/02/94	96-08	Closed	96-08	02/10/97	
65	PGDP-94-01-08 (RI-70-7001/ 94-0001) [PGDP-94-01]	Procedures in use in C-337-A did not identify all actions required to be taken by the operators in the event of a UF ₆ release	IFI (NA)	N/A	Eval of procedure completeness in responding to UF ₆ releases	04/18/94	02/10/94	96-08	Closed	96-08	02/10/97	
66	PGDP-94-01-09 (RI-70-7001/ 94-0001) [PGDP-94-01]	Procedural requirements that could have assisted in the response to the UF ₆ release were not always complied with	IFI (NA)	N/A	Eval of personnel compliance with established procedures	04/18/94	06/03/94	96-08	Closed	96-08	02/10/97	
67	PGDP-94-01-10 (RI-70-7001/ 94-0001) [PGDP-94-01]	Plant operators did not receive appropriate training on response to a UF ₆ release	IFI (NA)	N/A	Eval of qualified operator training practices in responding to a UF ₆ release	04/18/94	12/31/94	96-08	Closed	96-08	02/10/97	This item has been admin linked to the closure of DOE CPI No. 19, "Mgmt Controls," and DOE CPI No. 24, "Sys Approach to Trn'g," and was admin closed in 96-08
68	PGDP-94-01-11 (RI-70-7001/ 94-0001) [PGDP-94-01]	Emergency procedures do not provide adequate guidance for declaring emergency action levels	IFI (NA)	N/A	Eval of the features of the emergency plan that apply to a UF ₆ release event	04/18/94	08/03/94	96-08	Closed	96-08	02/10/97	
69	PGDP-94-01-12 (RI-70-7001/ 94-0001) [PGDP-94-01]	Normal operations were resumed in C-337-A without a comprehensive mgmt review of the event's impact to determine the acceptability of the plant's overall readiness for restart	IFI (NA)	N/A	Eval of the post-event recovery and restart decision-making process	04/18/94	10/31/94	96-08	Closed	96-08	02/10/97	
SSR Inspection Report 70-7001/94-08 - Monthly Inspection for August 1994 (MC&O, Ops, RP, NCS, and Fire Prot)												
70	94-08-01	Failure to follow procedures regarding in-hand use of procedures.	NCV (NA)	3.2.2.1	Observation of operator performance of annual autoclave pressure decay test	10/31/94	11/29/94	94-10 94-12 95-06	Closed	95-06	11/02/95	Rolled up URI 94-07-02 into this issue

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
71	94-08-02	Alarm response procedure for the fluorine facility.	URI (NA)	3.19.3.1	Followup of Event Report PAD-1994-0084 involving fluorine release in the C-410-D fluorine storage area	10/31/94	09/20/94	94-09 94-11	Closed	94-11	03/13/95	
72	94-08-03	Lessee oversight of work performed by the subcontractor to assure conformance with ROA Section 3.4, Engineering Reviews.	URI (NA)	3.4.2.1	Review of NCR-PAD-94-527 involving an incorrect pip'g conn between the fluorine facility and C-310	10/31/94	01/31/95	96-01	Closed	96-01	03/18/96	
73	94-08-04	Accuracy of recorded data.	IFI (NA)	3.2.2.1	Review of drum monitoring station logs in C-333	10/31/94	01/04/95	95-08	Closed	95-08	01/24/96	
74	94-08-05	Review of maintenance records for UF ₆ handling cranes	URI (NA)	3.3.2.2	Review of UF ₆ crane records in C-315, C-333, & C-337-A	10/31/94	01/20/95	94-09 95-05 96-03	Closed	96-03	07/18/96	
75	94-08-06	Continued use of autoclaves during an active "HALT" condition.	URI (NA)	3.6.2.3	Observation of C-333-A feed station operations	10/31/94	09/07/94	95-10	Closed	95-10	03/12/96	
76	94-08-07	Lack of adequate NCS controls governing fissile material handling operations.	NCV (NA)	3.9.2.2 3.9.2.6	Followup of NCR-PAD-94-486, -487, & -488 involving fissile ops in C-720, C-720-C, & C-728	10/31/94	10/01/95	96-02	Closed	96-02	04/18/96	
77	94-08-08	Writing temporary NCSA and extending expiration dates.	IFI (NA)	3.9.2.6	Observation of C-400 Cleaning Building ops IAW NCS controls	10/31/94	11/17/94	95-02	Closed	95-02	04/28/95	
78	94-08-09	Use of storage areas and NCSA identification of storage areas and contents.	IFI (NA)	3.9.2.5	Review of NCSA 3973-16 involving temp storage of enriched waste in the C-400 bldg	10/31/94	11/17/94	95-08	Closed	95-08	01/24/96	
SSR Inspection Report 70-7001/94-09 - Monthly Inspection for September 1994 (Ops, Eng'g Reviews, T&O, and NCS)												
79	94-09-01	Safety documentation (engineering reviews, PSE, and JCO) to support removal of lateral restraints on expansion joints.	URI (NA)	3.3.2.7	Review of NCR-PAD-94-618 involving design discrepancy in the supports of several seismically upgraded expansion joints in C-333 & C-337	12/07/94	01/06/95	94-10 95-01	Closed	95-01	04/03/95	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
80	94-09-02	Failure to conduct training as required	NOV (III)	3.5.2.6	Review of rad worker training records to ensure personnel quals were current	12/07/94	02/01/95	95-05 96-05	Closed	96-05	11/20/96	The CAP to this NOV also closed NCV 94-05-06, NOV 94-14-10, and NOV 94-14-11. In addition, this item was linked to the closure of DOE CPI No. 24, "Sys Approach to Trn'g," and was admin closed in 96-05
81	94-09-03	Accurate assessment of employee comprehension of site specific radiation safety information in GERT.	IFI (NA)	3.5.2.5	Assessment of employee's knowledge of the GERT portion of the continuing training module	12/07/94	12/21/94	95-05	Closed	95-05	08/29/95	
82	94-09-04	Completion of NCS verbatim compliance self-assessments.	URI (NA)	3.9.2.8	Eval of plant self assessments in relation to NCS self assessments	12/07/94	07/10/95	94-10 94-12 95-02 96-01	Closed	96-01	03/18/96	
SSR Inspection Report 70-7001/94-10 - Monthly Inspection for October 1994 (MC&O, T&O, Maint, NCS, Fire Prot, and Emerg Prep)												
83	94-10-01	Need for USQD for storage of oil on the cell floor near Unit 1 cell 2.	URI (NA)	3.3.2.7	Routine walkthru inspection of C-333 Process Building	02/13/95	01/20/95	95-10	Closed	95-10	03/12/96	
SSR Inspection Report 70-7001/94-11 - Monthly Inspection for November 1994 (Eng'g Reviews)												
84	94-11-01	Relocation of terminal strips in buffer cabinet adjacent to the F/S cabinet resulting in loss of UF6 detection capability.	URI (NA)	3.4.2.1	Review of Freezer/Sublimator Retrofit Project in C-333	03/13/95		95-07	Closed	95-07	10/26/95	
85	94-11-02	Completion of operability assessment for X-11 and X-11A expansion joints	URI (NA)	3.3.2.7	Review of a lessee identified "as found" condition regarding X-11 and X-11A expansion joints in the process bldgs	03/13/95	12/21/94	94-12	Closed	94-12	04/10/95	
SSR Inspection Report 70-7001/94-12 - Monthly Inspection for December 1994 (Emerg Prep)												

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
86	94-12-01	Failure to maintain passive fire watches as required by the OSRs	NOV (II)	3.3.2.1 3.6.2.3	Followup on 2 event reports (PAD-1994-0127 & PAD-1994-0131) involving failure to maintain a passive fire watch on an OOS FP sys in the cascade	04/10/95	08/01/95	96-03	Closed	96-03	07/18/96	On May 15, 1995, DOE imposed a \$5,000.00 civil penalty, which was mitigated as a result of USEC prompt corrective action taken in addressing the root causes of the violation, as well as USEC self-reporting the events to DOE.
Special Inspection Report 70-7001/94-13 - Unplanned Release of UF ₆ from C-310 Burp Station on 02/17/94												
87	94-13-01	Action taken by lessee on LER PGDPOPERD-1994-0001	IFI (NA)	3.2.2.3	Review of LER PAD-1994-0015 involving leak of 1 - 1.5 pounds of UF ₆ at the C-310 Burp Station	05/06/94	04/06/95	95-06	Closed	95-06	11/02/95	
88	94-13-02	Failure to follow procedures, 7 examples	NOV (III)	3.2.2.1	Review of procedures applicable to the operation of the C-310 Burp Station	05/06/94	01/09/95	95-04 96-02	Closed	96-02	04/18/96	
89	94-13-03	Use of TMIS to keep managers informed of employees training status	URI (NA)	3.5.2.2	Review of operator tm'g records for C-310 Burp Station ops	05/06/94	12/31/95 01/29/96	97-01	Closed	97-01	02/10/97	
90	94-13-04	Failure to perform required notifications of an event	NOD (NA)	3.2.2.1 3.2.2.4	Eval of USEC letter to DOE dated 11/01/93 committing USEC to enter all asterisked events into the DOE ORPS	05/06/94	01/09/95	96-02	Closed	96-02	04/18/96	
Matrix Inspection Report 70-7001/94-14 - ROA Section 4.2.2 DOE Required Appraisal Inspections for 1994 (Ops, T&O, and Maint)												
91	94-14-01	Failure to conduct safety system surveillance as required by OSRs	NCV (NA)	3.3.2.2	Review of testing and replacement of autoclave cylinder relief valves	08/31/94	10/24/95	96-04	Closed	96-04	09/05/96	
92	94-14-02	Failure to test safety-related equipment in a manner to ensure it operates and meets design objectives.	NOV (III)	3.3.2.3	Observation of a simulated safety system test of the UF ₆ Leak Detection System IAW CN-46g	08/31/94	09/30/94	95-05	Closed	95-05	08/29/95	
93	94-14-03	Failure of management to fully implement a program of monitoring and plant tours.	NOV (III)	3.3.2.4	Observation of general plant conditions and housekeeping in all process buildings	08/31/94	01/09/95	95-03	Closed	95-03	05/25/95	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
94	94-14-04	Failure to ensure the accurate and effective exchange of information between shift personnel during shift turnover.	NCV (NA)	3.3.2.5	Observation of plant conditions and shift turnover activities in the ACRs	08/31/94	09/30/95	95-16	Closed	95-16	01/19/96	
95	94-14-05	Operability of UF6 detectors under conditions in excess of design ratings.	URI (NA)	3.3.2.7	Eval of "as found" conditions in the feed areas	08/31/94		95-16	Closed	95-16	01/19/96	
96	94-14-06	Determination of the impact of loss of the HEPA filter plenum exhaust fan on operability of the high-voltage UF6 detection system.	URI (NA)	3.3.2.7	Eval of "as found" conditions in the withdrawal areas	08/31/94		96-01	Closed	96-01	03/18/96	
97	94-14-07	Implementation of improvements to the MT&E calibration program.	IFI (NA)	3.7.2.3	Eval of plant instruments requiring calibration under a formal M&TE program	08/31/94	02/03/95	95-16	Closed	95-16	01/19/96	
98	94-14-08	Verification of the quality of UF6 MD cylinder blends.	URI (NA)	3.7.2.3	Observation of C-310 ACR activities	08/31/94	06/12/95	95-08	Closed	95-08	01/24/96	
99	94-14-09	Inconsistent understanding of which systems, structures and components were considered to be safety-related	IFI (NA)	3.7.2.4	Review of maintenance program to address safety system components, systems, & structures	08/31/94	08/08/95	95-16 96-04	Closed	96-04	09/05/96	This issue was admin linked to the closure of DOE CPI No. 21, "Plt Changes and CM" and admin closed in 96-04
100	94-14-10	Failure of line managers to define training needs and assure completion of training and demonstration of proficiency	NOV (III)	3.5.2.1	Eval of how mg'mt identifies its tm'g needs to the tm'g dept	08/31/94	12/31/94	95-05 96-05	Closed	96-05	11/20/96	NOV 94-09-02 contains the CAP that closed this item. In addition, this item was linked to the closure of DOE CPI No. 24, "Sys Approach to Tm'g," and was admin closed in 96-05
101	94-14-11	Failure of plant personnel to complete required training	NOV (III)	3.5.2.6	Eval of tm'g records to support current plant personnel qualifications	08/31/94	01/17/95	95-05 96-05	Closed	96-05	11/20/96	NOV 94-09-02 contains the CAP that closed this item. In addition, this item was linked to the closure of DOE CPI No. 24, "Sys Approach to Tm'g," and was admin closed in 96-05

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No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
102	94-14-12	Failure to follow procedures (multiple examples)	NOV (III)	3.2.2.1	Eval of the document control req'mts for the OSRs, operator aids, and adherence to procedure req'mts	08/31/94	12/31/97	95-16 97-01	Closed	97-01	02/10/97	This issue was admin linked to the closure of DOE CPI No. 27, "Procedures Program," and admin closed in 97-01
103	94-14-13	Failure to maintain records of safety system tests.	NOV (III)	3.2.2.5	Eval of the filing adequacy of safety system tests performed in C-337-A	08/31/94	01/09/95	95-06	Closed	95-06	11/02/95	
104	94-14-14	Failure to take prompt corrective action to address identified weaknesses	NOV (III)	3.6.2.3	Observation of ACR activities associated with alarm response	08/31/94	12/31/96	97-02	Closed	97-02	03/24/97	
105	94-14-15	Failure perform safety-related work using approved procedure	NOV (III)	3.6.2.5	Eval of safety-related work performance activities	08/31/94	07/31/95	95-16 97-01	Closed	97-01	02/10/97	This issue was admin linked to the closure of DOE CPI No. 27, "Procedures Program" and admin closed in 97-01
Special Inspection Report 70-7001/94-15 - Investigation of an Unplanned Release from C-315 Surge and Waste Building on 04/12/94												
106	94-15-01	Failure to follow procedures important to safety in response to a UF ₆ release.	NOV (III)	3.2.2.1	Eval of procedures to be used in response to alarms and conditions in C-315	07/25/94	12/31/94	94-12 95-06	Closed	95-06	11/02/95	
107	94-15-02	Use of unevaluated and unapproved containment device in lieu of respiratory protection	NOV (III)	3.8.2.9	Review of lessee's eval of airborne levels following a UF ₆ release incident that occurred on 4/12/94	07/25/94	02/24/95	96-02	Closed	96-02	04/18/96	Issue was evaluated with 93-10-01 and closed in 96-02 report.
108	94-15-03	Review of PIP action plan to confirm aspects of the HEPA testing Implementation plan and determine whether the HEPA filter testing for bldg C-315 was outside the required frequency	URI (NA)	3.2.2.1	Eval of the adequacy of ventilation exhaust hoods above the withdrawal stations	07/25/94	01/04/95	96-02	Closed	96-02	04/18/96	
Matrix Inspection Report 70-7001/94-16 - ROA Section 4.2.2 DOE Required Appraisal Inspections for 1994 (Organ Plan, MC&O, QA, and Fire Prot)												
109	94-16-01	Definition of the roles and responsibilities for safe operation in management and supervisory position descriptions	IFI (NA)	3.1.2.1	Review of plant organization charts, position descriptions, and roles & resp doc'mts	10/07/94	09/01/95	95-02 96-03	Closed	96-03	07/18/96	This issue was admin linked to the closure of CPI No. 19, "Mg'mt Controls," POA #2, and admin closed in 96-03

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(Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
110	94-16-02	Failure to review procedures at required interval(s).	NCV (NA)	3.2.2.1	Review of procedural controls to issue and maintain site procedures	10/07/94	12/31/96	95-16 97-02	Closed	95-16 97-02	01/19/96 03/24/97	Premature Closure - Issue was prematurely closed in 95-16. Issue was re-evaluated and determined that the stated corrective actions take credit, in part, for the Procedures Upgrade effort. As a result, this item has been admin linked to the closure of DOE CPI No. 27, "Procedures Program," and admin closed in 97-02.
111	94-16-03	Failure to maintain the independent safety review process.	NOV (III)	3.2.2.2	Review of the procedural controls established to perform independent safety reviews	10/07/94	01/09/95	95-03	Closed	95-03	05/25/95	
112	94-16-04	Failure to include commitments into the IRMS.	NCV (NA)	3.2.2.4	Eval of the site's commitment mg'mt system	10/07/94	11/11/94	94-11 95-16	Closed	95-16	01/19/96	
113	94-16-05	Failure to develop and implement standard methods and requirements for creating, collecting, maintaining, and disposing of records related to nuclear safety and safeguard and security	NCV (NA)	3.2.2.5	Eval of mg'mt controls associated with records mg'mt	10/07/94	01/31/96	95-16 96-03	Closed	96-03	07/18/96	Issue was admin linked to the closure of CPI No. 26, "Records Mg'mt & Doc Controls," POA No.1, and admin closed in 96-03
114	94-16-06	Absence of procedures to fully implement the QA Program	IFI (NA)	3.6.2.1	Eval of the site's written policies & procedures that constitutes a QA Program to implement the UE QPP	10/07/94		95-16 96-03	Closed	96-03	07/18/96	Issue was admin linked to the closure of CPI No. 19, "Mg'mt Controls," POA No.1; CPI No. 21, "Plt Changes and CM," POA No. 1; CPI No. 27, "Procedures Program," POA No. 9; and CPI No. 29, "QA Implem," and admin closed in 96-03
115	94-16-07	Failure to adequately implement procedures governing nonconformance reporting, control of nonconformances and corrective actions.	NOV (III)	3.6.2.3	Eval of the site's nonconformance and corrective action program	10/07/94	01/09/95	95-06	Closed	95-06	11/02/95	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
116	94-16-08	Review lessee compliance with ROA Requirement 3.6.2.9 since the management assessment process was only recently initiated.	URI (NA)	3.6.2.9	Eval of the mgmt self assessment process	10/07/94		95-16	Closed	95-16	01/19/96	
117	94-16-09	Failure to inspect, test, and maintain the fixed fire suppression systems.	NOV (III)	3.10.2.3	Eval of PGDPs fixed fire suppression inspection, testing, and maintenance activities as they relate to the ORO Manual	10/07/94	8/15/95	95-16	Closed	95-16	01/19/96	
118	94-16-10	Failure to institute fire watches as specified in permits or to conduct fire watches at intervals not to exceed 1-hour.	NOV (III)	3.2.2.1 3.3.2.1	Eval of the ops controls associated with the site's fire water delivery systems	10/07/94	12/31/94	95-01 95-06 96-05	Closed	96-05	11/20/96	
119	94-16-11	Inspections of lessee activities for compliance with ROA Requirement 3.10.2.12.	URI (NA)	3.10.2.12	ROA 3.10.2.12 was <u>not</u> evaluated involving on-site fire protect support to identify fire hazards when plant configuration changes are made	10/07/94	06/28/95	95-08 95-16	Closed	95-08 95-16	01/24/96 01/19/96	
120	94-16-12	Inspection of lessee activities for compliance with ROA Requirement 3.10.2.13.	URI (NA)	3.10.2.13	ROA 3.10.2.13 was <u>not</u> evaluated involving fire protect review of design documents	10/07/94	06/28/95	95-08 95-16	Closed	95-08 95-16	01/24/96 01/19/96	
121	94-16-13	Failure to follow written permit controlling welding.	NCV (NA)	3.10.2.14	Eval of field compliance with established hot work permits	10/07/94	01/09/95 11/11/95	95-07	Closed	95-07	10/26/95	
122	94-16-14	Failure to have procedures for response to an apparent spill or loss of control of radioactive material.	NOV (III)	3.10.2.15	Observation of site corrective actions taken to respond to a potential contaminant drum overpack that fell off of a transport truck bed	10/07/94	03/15/95	96-03	Closed	DOE Ltr 96-03	04/13/95 07/18/96	WITHDRAWN - Violation withdrawn by DOE in Ltr dated 04/13/95 based on USEC response
123	94-16-15	Failure to have provisions to adequately assess the actual or potential consequences of an emergency (accountability of personnel).	NOV (III)	3.13.2.9	Eval of how accountability is accomplished for visitors/site personnel not assigned a permanent work duty station	10/07/94	01/09/95	95-03	Closed	95-03	05/25/95	
Matrix Inspection Report 70-7001/94-17 - ROA Section 4.2.2 DOE Required Appraisal Inspections for 1994 (Nuc'l Mat'l & Safe. Pkg'g & Trans., Sampling & Anal., and Security)												

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
124	94-17-01	Improper review and distribution of Nuclear Material Safeguards procedures.	NCV (NA)	3.2.2.1	Review of MC&A Plan KY/D-3899 and the NMC&A Procedures Manual	11/30/94	12/31/95	95-16	Closed	95-16	01/19/96	
125	94-17-02	Failure to track, account for, and report SNM above threshold limits	NOV (III)	3.12.2.2	Review of SNM reporting and accounting practices for uranium transfers, receipts, and adjustments	11/30/94	11/30/94	96-04	Closed	96-04	09/05/96	
126	94-17-03	Evaluation and adjustment of Material Balance Inventory.	IFI (NA)	3.12.2.2	Eval of PGDPs nuclear Material Balance Reports (MBR) with NMMSS reported transactions	11/30/94	01/13/95	95-07	Closed	95-07	10/26/95	
127	94-17-04	Results of repair and recalibration of accountability scales and the effects on previous Uranium accountability reports.	URI (NA)	3.12.2.2	Observation of the cylinder scale performance tests in C-310 and C-360	11/30/94	01/17/95	96-02	Closed	96-02	04/18/96	
128	94-17-05	Measurement and measurement control procedures.	IFI (NA)	3.12.2.3	Review of NMC&A measurement and measurement control procedures to implement MC&A Plan req'ts	11/30/94	12/31/95	96-01	Closed	96-01	03/18/96	
129	94-17-06	Determination of the elemental concentration of uranium in UF6 using secondary standards not traceable to the national measurement base.	NOV (III)	3.12.2.3	Review of records and procedures assoc with the calibration of equip used in all SNM accountability measurement processes	11/30/94	03/15/95 09/30/95	95-16	Closed	95-16	01/19/96	
130	94-17-07	Failure to conduct systematic performance testing of the SNM protection program	NCV (NA)	3.12.2.8	Request of the lessee to conduct a performance test of the PICAS database to determine if the system can generate a book inventory within 3 hrs as req'd by the MC&A Plan	11/30/94	09/12/94 01/11/95	96-05	Closed	96-05	11/20/96	This item was admin linked to the closure of DOE CPI No. 24, "Sys Approach to Trn'g," DOE CPI No. 27, "Procedures Prog," and DOE CPI No. A.4, "Mat'ls Control & Account Manuals and Procedures," and was admin closed in 96-05
131	94-17-08	Failure to perform sampling and analysis activities using a program describing the quality measures set forth in the site QAP	NOV (III)	3.15.2.1	Review and eval of PGDPs radiological environmental analytical procedures	11/30/94	06/30/96	96-05	Closed	96-05	11/20/96	This item was admin linked to the closure of DOE CPI No. 27, "Procedures Prog," and was admin closed in 96-05

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
132	94-17-09	Failure to use properly calibrated equipment to measure nuclear materials.	NOV (III)	3.15.2.2	Eval of the controls established to calibrate analytical equip used to measure nuclear mat'l	11/30/94	06/14/95 06/30/95	96-05	Closed	96-05	11/20/96	This item was admin linked to the closure of DOE CPI No. A.2, "Measurement Systems," and was admin closed in 96-05
133	94-17-10	Inadequate implementation of the security program.	NOV (III)	3.18.2.1d	Eval of mg't controls established to effectively implement the PGDP Security Program	11/30/94	01/01/96	95-16	Closed	95-16	01/19/96	
134	94-17-11	Improper implementation of measures to protect classified information and materials from loss or unauthorized disclosure.	NOV (III)	3.18.2.2a	Eval of the mg't controls established to implement the PGDP Classified Information Security Program	11/30/94	08/31/95	95-16	Closed	95-16	01/19/96	
135	94-17-12	Failure to maintain an unclassified computer security program providing the level of protection mandated by DOE Order 1360.2B.	NCV (NA)	3.18.2.3f	Eval of the mg't controls established to implement the PGDP Unclassified Computer Security Program	11/30/94	05/04/95	95-16	Closed	95-16	01/19/96	
Matrix Inspection Report 70-7001/94-18 - ROA Section 4.2.2 DOE Required Appraisal Inspections for 1994 (Eng'g Reviews, Emerg Prep, and Accident Anal)												
136	94-18-01	Failure to implement a procedure system to control changes to the plant design and equipment.	NOV (III)	3.4.2.1	Eval of design procedures to control the design change process	12/02/94	06/30/96	95-16 96-04	Closed	95-16 96-04	01/19/96 09/05/96	<u>Premature Closure</u> - Issue was prematurely closed in 95-16. Issue was re-evaluated, IFI 94-18-02 was factored in, then linked to the closure of DOE CPI No. 21, "Plt Changes and CM," and admin closed in 96-04
137	94-18-02	Progress on development and Implementation of the configuration control program	IFI (NA)	3.4.2.1	Eval of PGDP progress made in establishing a config control process for safety systems (See ROA exception 3.4.4)	12/02/94	06/30/95	95-03 95-16 96-04	Closed	96-04	09/05/96	This issue was linked to the closure of NCV 94-18-01 and admin closed in 96-04
138	94-18-03	Adequacy of the corrective action process in relation to self assessment	IFI (NA)	3.3.2.4 3.4.2.1	Eval of USEC internal self assessments conducted in the area of Eng'g Reviews IAW Sect 4.2.2 of the ROA	12/02/94	06/30/95	95-16 96-04	Closed	96-04	09/05/96	This item was linked to NOV 95-04-03 and admin closed in 96-04
139	94-18-04	Inconsistent application of seismic criteria.	URI (NA)	3.17.2.3	Eval of plant seismic criteria	12/02/94		95-16	Closed	95-16	01/19/96	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
140	94-18-05	Failure to have adequate equipment to support emergency response.	NOV	3.13.2.7	Eval of emerg response equipment req'd to be made available by the PGDP Emerg Plan	12/02/94	02/28/95	95-16	Closed	95-16	01/19/96	
141	94-18-06	Failure to develop predetermined actions (i.e., recommended protective action guidelines).	NCV (NA)	3.13.2.9	Eval of the provisions established to be taken in response to postulated emergency conditions	12/02/94	06/01/95	95-16	Closed	95-16	01/19/96	
142	94-18-07	Installation and completion of training on the ALOHA program.	IFI (NA)	3.13.2.9	Eval of PGDPs atmospheric dispersion and exposure pathway consequence assessment computer modeling programs	12/02/94	01/19/95	95-04	Closed	95-04	06/26/95	
Special Inspection Report 70-7001/94-19 - Evaluation of the Integrated Response Capabilities During the 1994 Emergency Management Exercise No. 49												
		No New Issues Identified										
Matrix Inspection Report 70-7001/94-20 - ROA Section 4.2.2 DOE Required Appraisal Inspections for 1994 (Environ., Prot., Waste Mgmt., RP, NCS, and Chem Safety)												
143	94-20-01	Failure of the ambient air sampling program to comply with the EMP	NCV (NA)	3.11.2.1	Eval of ambient air samplers to monitor the most exposed members of the public	03/13/95	08/01/95	96-04	Closed	96-04	09/05/96	
144	94-20-02	Verification of the 1994 meteorological data 90% recovery requirement.	IFI (NA)	3.11.2.2	Eval of the reliability of MET data acquisition, accuracy & readout	03/13/95	03/30/95	96-01	Closed	96-01	03/18/96	
145	94-20-03	Radioactive waste container labeling practices.	IFI (NA)	3.16.2.1	Eval of lessee labeling req'ts for radioactive wastes generated	03/13/95	08/15/95	95-07	Closed	95-07	10/26/95	
146	94-20-04	Perform inspection to determine compliance of lessee's program with ROA Implementation Reqmt 3.16.2.4	URI (NA)	3.16.2.4	ROA 3.16.2.4 was <u>not</u> evaluated involving off-site shipments of LLW and mixed wastes	03/13/95	08/22/95	96-02	Closed	96-02	04/18/96	
147	94-20-05	Failure to implement established management responsibilities for radiation protection.	NCV (NA)	3.8.2.2	Review of radiation protection responsibilities assigned to facility mgrs by procedure	03/13/95	04/17/95	95-16	Closed	95-16	01/19/96	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
148	94-20-06	HP technician training.	IFI (NA)	3.8.2.5	Eval of progress made in resolving ROA exception 3.8.4 involving inconsistencies between UE-SPP and HP procedures	03/13/95	09/15/95	96-01	Closed	96-01	03/18/96	
149	94-20-07	Failure to use 24-hour urine samples and the resulting cumulative activity for calculating worker's intakes.	NCV (NA)	3.8.2.8	Eval of the bioassay program that had been established to assess worker intakes	03/13/95	04/17/95	95-16	Closed	95-16	01/19/96	
150	94-20-08	Inconsistent labeling of drums containing radioactive waste.	IFI (NA)	3.8.2.11 3.9.2.5	Eval of drum labeling practices (rad, NCS, etc.) in C-400	03/13/95	06/12/95	95-07	Closed	95-07	10/26/95	
151	94-20-09	Failure to establish barriers for "Radiation Areas" used for cylinder storage.	NOV (III)	3.8.2.11	Eval of physical barrier controls to control access to cylinder storage areas outside C-333-A and C-400	03/13/95	07/31/95	95-16	Closed	95-16	01/19/96	
152	94-20-10	Failure to perform required radiation surveys in building C-400 cylinder wash, spray booth, and compressor pit areas.	NOV (III)	3.8.2.14	Review of radiation surveys taken involving routinely occupied areas in C-400	03/13/95	04/12/95	96-03	Closed	DOE Ltr 96-03	05/10/95 07/18/96	WITHDRAWN - Violation withdrawn in DOE Ltr dated 5/10/95 based on USEC response
153	94-20-11	Development and updating of Technical Services Division procedures affecting HP activities.	IFI (NA)	3.8.2.20	Review of C-710 gamma and alpha spectroscopy system procedural controls in analyzing samples	03/13/95	05/31/95	95-08	Closed	95-08	01/24/96	
154	94-20-12	NIST traceability of the calibration of the gamma spectroscopy sources.	URI (NA)	3.8.2.20	Eval of the use of NIST traceable sources for calibrating the C-710 alpha & gamma spectroscopy systems	03/13/95	04/06/95	95-08	Closed	95-08	01/24/96	
155	94-20-13	Maintenance and use of battery operated survey instruments for egress monitoring.	IFI (NA)	3.8.2.20	Eval of the operability of radiation instrum'ts used in the field for conducting area/equip surveys and for personnel exit surveys	03/13/95	09/15/95	96-01	Closed	96-01	03/18/96	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
156	94-20-14	Tear down and chemical cleaning of vacuum pumps without an approved NCSA.	NCV (NA)	3.9.2.3	Eval of NCS controls established for C-400 activities being conducted	03/13/95	10/01/95	95-16	Closed	95-16	01/19/96	
157	94-20-15	Justification for having unsealed, covered manholes in fissile storage areas	IFI (NA)	3.9.2.3	General walkthru observation of NCS controls established in C-335	03/13/95	06/09/95	95-08 96-05	Closed	96-05	11/20/96	
158	94-20-16	Development of 109 NCS packages in support of 5 wt. percent enriched uranium operations.	IFI (NA)	3.9.2.3	Review of NCS efforts to upgrade the site to handle 5 w/o enriched uranium operations	03/13/95	06/09/95	95-16	Closed	95-16	01/19/96	
159	94-20-17	Failure to have procedural controls to inventory and handle the legacy components from K-25/K-27.	NCV (NA)	3.9.2.6	Eval of NCS controls assoc with the receipt, movement, storage, and transfer of potential fissile-bearing equip	03/13/95	09/01/95	95-16	Closed	95-16	01/19/96	Elevated to NOV 95-16-04
160	94-20-18	Timeliness of the resolutions of the outstanding NCS deviations.	IFI (NA)	3.9.2.8	Comparison of inspector identified walkthru inspection deficiencies to previous NCS surv findings	03/13/95		95-16	Closed	95-16	01/19/96	
161	94-20-19	Inconsistency in use of respirators for flourine and CLF ₃	IFI (NA)	3.19.2.1	Eval of the use of respirators during removal & installation of cylinder pigtails for Cl, F, and UF ₆ when these chemicals were in use	03/13/95	06/09/95	96-02	Closed	96-02	04/18/96	
162	94-20-20	Procedures upgrade project (PUP) progress.	IFI (NA)	3.2.2.1 3.5.2.1	Eval of PGDP procedures upgrade effort	03/13/95		95-16	Closed	95-16	01/19/96	
SSR Inspection Report 70-7001/95-01 - Monthly Inspection for January 1995 (RP)												
163	95-01-01	Inclusion of radiation exposure/dose level info on the Gen. RWP's governing the cylinder yards	IFI (NA)	3.8.2.18	Eval of 12/94 req't that entry into UF ₆ cylinder yards would be governed by RWP	04/03/95		95-16 96-03	Closed	96-03	07/18/96	Issue was linked to the closure of 95-06-03 and admin closed in 96-03 report.
SSR Inspection Report 70-7001/95-02 - Monthly Inspection for February 1995 (RP and Fire Prot)												

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
164	95-02-01	Failure to capacity test high pressure fire water pumps	NOV (III)	3.10.2.3	Eval of NCR-PAD-95-289 involving the lessee's failure to conduct performance tests on its HPFW pumps IAW OSR	04/28/95	11/01/95	96-07	Closed	96-07	12/24/96	This item was admin linked to the closure of DOE CPI No. 1, "Transition from DOE Reg to NRC Reg," and was admin closed in 96-07
165	95-02-02	Failure to survey a vehicle leaving a radiological area	NOV (III)	3.8.2.13	Eval of the events that led to NCR-PAD-1995-142 involving the discovery of a rad contam manlift in the non-rad C-750 garage	04/28/95	05/26/95	96-04	Closed	96-04	09/05/96	
166	95-02-03	Failure to properly implement the welding/burning/hot work permit program	NOV (III)	3.10.2.18	Eval of fire protection controls as a result of 3 fires occurring in the process bldgs over 5 months requiring plant emerg squad response	04/28/95	09/25/95	96-04	Closed	96-04	09/05/96	
SSR Inspection Report 70-7001/95-03 - Monthly Inspection for March 1995 (MC&O and Ops)												
167	95-03-01	Use of required reading to train plant personnel	IFI (NA)	3.2.2.4	Eval of PR-PAD-95-475 involving a negative trend being identified during surv of the plant's req'd reading program	05/25/95		96-05	Closed	96-05	11/20/96	This item provides the CAP necessary to close IFI 95-13-04
168	95-03-02	Completion of actions on "as found" conditions of relief valves.	URI (NA)	3.3.2.7	Eval of a lessee identified "as found" condition regarding the use of fragmenting-type rupture discs upstream of relief vlvs on the R-114 coolant relief sys	05/25/95	06/26/95	95-04	Closed	95-04	06/26/95	Elevated to NCV 95-04-01, and -02
169	95-03-03	Failure to meet commitments concerning establishment of a management review committee.	NOD (NA)	3.2.2.4	Followup on a lessee commitment made to DOE to establish a mg'mt review committee to conduct multi-disc safety reviews of proposed mods to its facilities	05/25/95	10/01/95	95-10	Closed	95-10	03/12/96	
SSR Inspection Report 70-7001/95-04 - Monthly Inspection for April 1995 (RP, Fire Prot, and ROA Audits & Appraisals)												
170	95-04-01	Failure to observe required work conditions as specified in Procedure MAP-WC-001	NCV (NA)	3.7.2.1	Eval of 8 work pkgs involving UF ₆ condenser coolant relief vlv removal	06/26/95	08/10/95	96-05	Closed	96-05	11/20/96	

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No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
171	95-04-02	Delayed notification of DOE concerning a potential USQ and preparation of safety documentation and changes to safety systems.	NCV (NA)	3.3.2.7	Review of PSE 95-034 involving a potential USQ with an "as found" condition regarding 49 coolant relief systems in the plt that had a frag-type rupture disc installed	06/26/95		96-04	Closed	96-04	09/05/96	
172	95-04-03	Inadequate program for detecting and preventing quality problems	NCV (NA)	3.6.2.3	Eval of USEC's self-assessment activities accomplished since initiation of the Lease through CY 1994	06/26/95	06/30/96	96-04	Closed	96-04	09/05/96	
SSR Inspection Report 70-7001/95-05 - Monthly Inspection for May 1995 (Ops)												
		No New Issues Identified										
SSR Inspection Report 70-7001/95-06 - Monthly Inspection for June 1995 (Ops and RP)												
173	95-06-01	Failure to implement LCO within 1-hour of declaring the PGLD systems inoperable	NOV (III)	3.3.2.1	Review of event report PAD-1995-0032 involving a potential problem with a reset push-button on the C-333 PGLDs	11/02/95	01/05/96	96-04	Closed	96-04	09/05/96	
174	95-06-02	Failure to properly post the radiological area to prevent employee exposure	NOV (II)	3.8.2.10	Eval of lessee's activities regarding an employee's TLD reading > DOE annual WB dose limits	11/02/95	06/30/96	96-08	Closed	96-08	02/10/97	
175	95-06-03	Failure to maintain contamination controls and to properly conduct work activities in radiological areas	NOV (II)	3.8.2.18	Review of PR-PAD-95-1934 which identified a 6/23/95 skin contam incident	11/02/95	02/09/96 07/31/96	96-03 96-08	Closed	96-08	02/10/97	Rolled up 93-20-02 [93-002] and 95-01-01
SSR Inspection Report 70-7001/95-07 - Monthly Inspection for July 1995 (Eng'g Reviews and RP)												
176	95-07-01	Failure to ensure that procedures adequately tested the autoclave containment valves for operability and adherence to design objectives	NOV (III)	3.3.2.3	Eval of PR-PAD-1995-2291 involving failure of the lessee to leak test UF ₆ autoclave redundant containment vlvs LAW annual OSR specs	10/26/95	08/31/95	96-04	Closed	96-04	09/05/96	This issue was admin linked to the closure of DOE CPI No. 1, "Trans from DOE Reg to NRC Reg" and admin closed in 96-04

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No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
177	95-07-02	Failure to conform to conditions required by the LCO specified in the OSRs	NOV (III)	3.3.2.1	Eval of lessee actions to comply with OSR LCO reqm'ts when a failed autoclave comp is identified	10/26/95	01/05/96	96-04	Closed	96-04	09/05/96	
SSR Inspection Report 70-7001/95-08 - Monthly Inspection for August 1995 (MC&O and Ops)												
178	95-08-01	Failure to develop, use and maintain documentation to prescribe processes, specify requirements, and establish designs for the UF6 release detection system	NOV (III)	3.6.2.4	Eval of mgmt controls applied to UF ₆ detectors and equip to set the voltages of the detectors	01/24/96	04/18/96	97-02	Closed	97-02	03/24/97	Rolled up URI 94-05-04 into this item.
179	95-08-02	Failure to implement procedures to assure the safety and protection of personnel performing cleaning activities in a compartment known to contain energized power sources	NOV (III)	3.2.2.1	Review of the events leading up to an employee receiving an elect shock while performing EM cleaning activities in the C-537 Switch House Bldg (See also PR-PAD-95-3207)	01/24/96	05/31/96	97-01	Closed	97-01	02/10/97	
180	95-08-03	Conduct of safety analysis for continuing operation of the feed autoclaves after recognition of an instrument loop error	URI (NA)	3.3.2.7	Eval lessee actions taken to resolve two "as found" conditions involving a potential to exceed an autoclave HPI safety sys LSSS and identification of instru loop errors on 4 "Defense in Depth" systems	01/24/96	06/30/97	96-03	Closed	96-03	07/18/96	Issue was admin linked to the closure of DOE CPI No. 2, "Update to Appl SAR," and admin closed in 96-03
SSR Inspection Report 70-7001/95-09 - 6-Week Inspection for September - Mid October 1995 (MC&O and Ops)												
		No New Issues Identified										
SSR Inspection Report 70-7001/95-10 - 6-Week Inspection for Mid October - November 1995 (Ops, T&Q, and NCS)												
181	95-10-01	Use of C-310 crane although rejected by QE inspection personnel	NOV (III)	3.3.2.1	Review of C-310 crane handling operations IAW the OSR	03/12/96	11/28/95	96-06	Closed	96-06	12/06/96	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Dte Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
182	95-10-02	Five drums of fissile mat'l were found in an unapproved criticality storage area in C-333	NOV (III)	3.3.2.1	Eval of NCS storage controls in C-333	03/12/96	06/07/96	96-07	Closed	96-07	12/24/96	
NOT USED (SSR Inspection Report 70-7001/95-11) - Shifted from Monthly to 6-Week Inspection Report Periods												
		Not Used										
NOT USED (SSR Inspection Report 70-7001/95-12) - Shifted from Monthly to 6-Week Inspection Report Periods												
		Not Used										
Special Inspection Report 70-7001/95-13 - Investigation of an Unplanned Release of UF ₆ During Cold Feed Operations in Process Building C-337-A on 12/13/94												
183	95-13-01	Failure to observe operating bounds for safety systems and components as established by OSRs	NOV (III)	3.3.2.1	Eval of OSR KY/D-4151, Sect. 6.6 involving cold feeding ops	07/17/95	05/30/96	95-16 96-05	Closed	96-05	11/20/96	
184	95-13-02	Lack of specificity in the definition of indicators to be continuously monitored during cold feeding operations.	IFI (NA)	3.2.2.1	Eval of CN-45, which is the governing procedure for cold feeding ops, for tech adequacy	07/17/95		96-05	Closed	96-05	11/20/96	
185	95-13-03	Implementation of a change in Authorization Basis without adequate USQD	NOV (III)	3.3.2.6	Review of USQD performed involving CN-45 Cold Feed ops	07/17/95	05/30/96	95-16 96-05	Closed	96-05	11/20/96	NOD 96-05-01 resulted from this issue for failure to meet written commitments made in revising the USQD process and to train personnel
186	95-13-04	Adequacy of UF ₆ cold feed performance based training	IFI (NA)	3.5.2.5	Review of tm'g associated with CN-45 procedure changes	07/17/95		96-05	Closed	96-05	11/20/96	IFI 95-03-01 provides the CAP that was used to close this issue
187	95-13-05	QA/QC activities in relation to non-safety related systems	IFI (NA)	3.6.2.4	Review of maintenance doc'mt records for the UF ₆ feed piping mod assoc with 5W autoclave in the C-337-A Process Bldg	07/17/95		96-04	Closed	96-04	09/05/96	
188	95-13-06	Failure to incorporate procedure changes into the body of the procedure.	NCV (NA)	3.2.2.1	Eval of CN-45 procedure revision history	07/17/95	12/31/96	95-16	Closed	95-16	01/19/96	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
189	95-13-07	Incomplete implementation of emergency facilities and equipment adequate to support emergency response.	IFI (NA)	3.13.2.7	Review of emerg response notification req'mts	07/17/95		95-16	Closed	95-16	01/19/96	
190	95-13-08	Media release approval process	IFI (NA)	3.13.2.13	Review of Emerg Public Information Activities	07/17/95		96-05	Closed	96-05	11/20/96	
NOT USED (Special Inspection Report 70-7001/95-14) - Unreviewed Safety Question Determination Inspection (Verbally Cancelled After Inspection Performed Per DOE ROM)												
		Not Used										
NOT USED (Special Inspection Report 70-7001/95-15) - Deletion of IRMS Issues Post-ROA (Cancelled Per DOE Letter RG-70-7003/96-0003)												
		Not Used										
Technical Instruction TI-3.2/01 dated 10/06/95 - DOE ROM Instructions on Verifying USEC Commitments Made at April 28, 1994 DOE Enforcement Conference (Matrix Inspectors to Perform)												
191	Com'mt-01 [TI-3.2/01]	Crew Briefings - Div/Dep Div Mgrs will meet with all plant employees to stress procedure adherence	IFI (NA)	3.2.2.1	Eval of regulatory performance involving adherence to procedures (at least 10 violations cited)	10/06/95	Qtrly thru 1994	95-16	Closed	95-16	01/19/96	
192	Com'mt-02 [TI-3.2/01]	Drill Program - At least one drill will be conducted somewhere in an ops space each day of the normal work week and scheduled monthly	IFI (NA)	3.2.2.1	Eval of regulatory performance involving adherence to procedures (at least 10 violations cited)	10/06/95	Drill each workday beginning 12/93	95-16	Closed	95-16	01/19/96	
193	Com'mt-03 [TI-3.2/01]	Plt Mg'mt Communications - Various bulletins, memoranda, and advisories will be issued to communicate mg'mts expectations for the safety of workers and the public	IFI (NA)	3.2.2.1	Eval of regulatory performance involving adherence to procedures (at least 10 violations cited)	10/06/95	04/25/94	95-16	Closed	95-16	01/19/96	
194	Com'mt-04 [TI-3.2/01]	Sweep Teams - 5 man sweep teams will conduct unannounced peer review of procedure use through CY 94	IFI (NA)	3.2.2.1	Eval of regulatory performance involving adherence to procedures (at least 10 violations cited)	10/06/95	12/31/94	95-16 96-08	Closed	96-08	02/10/97	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
	4A	Supervisor Training - 2-1/2 weeks of first line supv tm'g for all first line supervisors	IFI (NA)	3.2.2.1	Replacement for Sweep Teams	12/28/94	12/28/94	95-16	Closed	95-16	01/19/96	
	4B	Procedures Upgrade Project - Lessons learned from the sweep teams have been integrated into the NSU Project involving Procedure Upgrades which will be continued	IFI (NA)	3.2.2.1	Replacement for Sweep Teams	12/28/94	12/28/94	95-16	Closed	95-16	01/19/96	
	4C	Mg'mt Emphasis - Procedure adherence will be continually emphasized by mg'mt in both their periodic monitoring and in any meetings or briefings that are held	IFI (NA)	3.2.2.1	Replacement for Sweep Teams	12/28/94	12/28/94	95-16 96-08	Closed	96-08	02/10/97	
	4D	GDP QOOP - A GDP Quality of Operations Plan (QOOP) will be developed and implemented to improve operations across the board, including both the quality of the procedures themselves and the adherence of the workers to those procedures	IFI (NA)	3.2.2.1	Replacement for Sweep Teams	12/28/94	12/28/94	95-16	Closed	95-16	01/19/96	
	4E	Coaches - Experienced coaches are being hired on an interim basis to work with key line mgrs to help improve overall performance that will include consistent procedural compliance	IFI (NA)	3.2.2.1	Replacement for Sweep Teams	12/28/94	12/28/94	95-16	Closed	95-16	01/19/96	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
195	Com'mt-05 [TI-3.2/01]	Increased Control of UF6 Ops - 2 independent ops checks will be performed for all disconnect/movement of cylinders. Interlocks will perform function in C-310 burp stations and withdrawal positions	IFI (NA)	3.2.2.1	Eval of regulatory performance involving adherence to procedures (at least 10 violations cited)	10/06/95	04/28/94	95-16	Closed	95-16	01/19/96	
196	Com'mt-06 [TI-3.2/01]	Procedures Upgrade - \$14.5M will allocated to accelerate schedule to complete upgrade of 1700 procedures	IFI (NA)	3.2.2.1	Eval of regulatory performance involving adherence to procedures (at least 10 violations cited)	10/06/95	06/01/96	95-16 96-08	Closed	96-08	02/10/97	This issue was admin linked to the closure of DOE CPI No. 27, "Procedures Program," and admin closed in 96-08.
197	Com'mt-07 [TI-3.2/01]	Formal USEC Policies - USEC will issue policies on the formality and discipline of ops, employee discipline, and regulatory interactions	IFI (NA)	3.2.2.1	Eval of regulatory performance involving adherence to procedures (at least 10 violations cited)	10/06/95	07/01/94	95-16	Closed	95-16	01/19/96	
198	Com'mt-08 [TI-3.2/01]	Culture Change Initiative - Adoption of a safety culture of formality and discipline in ops and in adhering to procedures	IFI (NA)	3.2.2.1	Eval of regulatory performance involving adherence to procedures (at least 10 violations cited)	10/06/95	10/06/95	95-16	Closed	95-16	01/19/96	
199	Com'mt-09 [TI-3.2/01]	Performance Measures - USEC will monitor the efficacy of corrective actions taken with respect to the commitments made in its EA response	IFI (NA)	3.2.2.1	Eval of regulatory performance involving adherence to procedures (at least 10 violations cited)	10/06/95	05/01/94	95-16 96-08	Closed	96-08	02/10/97	This item was cited as Deviation 96-07-03 when the commitment was found not being maintained
200	Com'mt-10 [TI-3.2/01]	Mg'mt Control Enhancements - A USEC employee will assigned at each site to be primary DOE reg interface, and Reg Assurance Program will be separate from production.	IFI (NA)	3.2.2.1	Eval of regulatory performance involving adherence to procedures (at least 10 violations cited)	10/06/95	10/01/94	95-16	Closed	95-16	01/19/96	
201	Com'mt-11 [TI-3.2/01]	Clarify Reporting Req'mts - Ltr issued to remind personnel of their responsibilities to notify USEC and DOE of GDP events	IFI (NA)	3.2.2.3	Eval of the accuracy, categorization, and timeliness of reporting plant events to DOE	10/06/95	04/01/94	95-16	Closed	95-16	01/19/96	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
202	Com'mt-12 [TI-3.2/01]	USEC Interpretation of the Categorization and Reporting Criteria - Personnel have been informed to err on the side of caution when uncertain which category applies to a given event (go to next higher level)	IFI (NA)	3.2.2.3	Eval of the accuracy, categorization, and timeliness of reporting plant events to DOE	10/06/95	04/01/94	95-16 96-08	Closed	96-08	02/10/97	This issue was admin linked to the closure of DOE CPI No. 25, "Event Investigation & Reporting Program," and admin closed in 96-08
203	Com'mt-13 [TI-3.2/01]	Lessons Learned Discussions with the PSSs - Discussions were held with PSSs to make them aware of mis-categorization problems	IFI (NA)	3.2.2.3	Eval of the accuracy, categorization, and timeliness of reporting plant events to DOE	10/06/95	04/01/94	95-16	Closed	95-16	01/19/96	
Matrix Inspection Report 70-7001/95-16 - ROA Section 4.2.2: DOE Required Appraisal Inspections for 1995 (Organ Plan, MC&O, Ops, Eng'g Reviews, QA, RP, NCS, Fire Prot, Nucl Mat'ls & Safe, Emer Prep, Accident Anal, Security, and Chem Safety)												
204	95-16-01	Failure to take effective corrective action for PR-CO-95-1036	NOV (III)	3.6.2.3	Review of the Quality Improvement and Nonconformance Control Program	01/19/96	06/30/96	96-06	Closed	96-06	12/06/96	This issue was admin linked to the closure of DOE CPI No. 19, "Mg'mt Controls," and admin closed in 96-06
205	95-16-02	Inadequate fissile material storage design control	NCV (NA)	3.9.2.3	Walkdown of NCSA 3971-18 involving the operation & maint of the C-331 Instrument Shop	01/19/96	04/15/96 06/30/96	96-08	Closed	96-08	02/10/97	This issue was admin linked to the closure of DOE CPI No. 21, "Plt Changes and Config Mg'mt," and admin closed in 96-08.
206	95-16-03	Inadequate fissile material labeling and area postings	NCV (NA)	3.9.2.5	Walkthru inspection of C-400 and C-331 NCSA FSA posting & mat'ls labeling req'mts	01/19/96	07/31/96	96-08	Closed	96-08	02/10/97	
207	95-16-04	Storage of equipment containing uranium with isotopic enrichments in excess of 2.0 wt. %, without an approved NCSA.	NOV (III)	3.9.2.6	Inspection followup to lessee corrective actions taken to resolve NCV 70-7001/94-20-17 involving failure to account for and control fissile bearing stored & spare part components in the process bldgs	01/19/96	07/01/96 10/15/96	97-02	Open			Rolled up NCV 94-20-17. This item will remain open for NRC followup inspection because the accounting of mat'l stored in the process bldgs has not been completed. The lessee has not established when this action will be completed; however, it will not be completed until well after when NRC assumes Reg Oversight of PGDP on 03/03/97.

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
SSR Inspection Report 70-7001/96-01 - 6-Week Inspection for December 1995 - Mid January 1996 (MC&O and Ops)												
208	96-01-01	Failure to observe operating bounds established by OSRs	NOV (III)	3.3.2.1	Review of Event Report PAD-95-0140 involving the lessee continuing to feed although a steam leak had been detected on the O-ring seal at the head-to-shell locking ring of the autoclave	03/18/96	06/01/96	96-08	Closed	96-08	02/10/97	Elevated to NOV 96-07-04
209	96-01-02	Failure to follow procedures	NOV (III)	3.2.2.1	Review of PR-CO-95-5469 involving the inadvertent removal/ replacement of a valve during repairs to the No. 1 cond in C-310-A.	03/18/96	06/01/96	96-08	Closed	96-08	02/10/97	Elevated to NOV 96-07-04
SSR Inspection Report 70-7001/96-02 - 6-Week Inspection for Mid January - February 1996 (Ops, T&O and Waste Mg'mt)												
210	96-02-01	Use of a GSA as a long term storage area rather than a staging area	URI	3.16.2.1	Review of GSA located adjacent to C-741 MEB	04/18/96		96-04	Closed	96-04	09/05/96	Elevated to NOV 96-04-01
SSR Inspection Report 70-7001/96-03 - 6-Week Inspection for March - Mid April 1996 (MC&O, Ops, NCS, Nucl Mat'ls & Safe and Security)												
211	96-03-01	Failure to maintain the PGDP Commitment Tracking Program IAW UE2-MC-CI1031	NCV	3.2.2.4	Eval of the plant's commitment tracking sys (BPS) involving 87 SCAQ issues	07/18/96		96-07	Closed	96-07	12/24/96	
212	96-03-02	Failure of the Lessee to implement FSAR Accid Anal req'd actions assoc with responding to a seismic event into its appl plt procedures	NOV (III)	3.3.2.1	Eval of the plant's seismic detection system	07/18/96	08/05/96	96-08	Closed	96-08	02/10/97	This issue was admin linked to the closure of DOE CPI No. 27, "Procedures Program," and admin closed in 96-08
213	96-03-03	Failure to monitor JCO, SWO, & LTO established actions and to comply with MBWA documentation req'mts	NOV (III)	3.3.2.4	Eval of mg'mt assessments of plt ops & personnel performance via issued JCOs, SWOs, ITOs, MBWAs issued/conducted	07/18/96	06/30/96	97-01	Closed	97-01	02/10/97	This issue was admin linked to the closure of DOE CPI No. 19, "Mg'mt Controls," and admin closed in 97-01

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
214	96-03-04	Failure to perform liquid sampling of cylinders IAW the MC&A Plan	NOV (III)	3.12.2.2	Eval of problem reports that identified deficiencies assoc with the collection of liquid samples in C-360, maint of the continuous samplers in C-310, and account of nucl mat'l inventory differences	07/18/96	09/28/96	97-01	Closed	97-01	02/10/97	
SSR Inspection Report 70-7001/96-04 - 6-Week Inspection for Mid April - May 1996 (MC&O, Ops and Waste Mgmt)												
215	96-04-01	Failure to meet the admin req'ts of CP2-EW-WM1037 involving GSA activities	NOV (III)	3.16.2.5	Review of GSA Inspection Checklists from 1/96 to 4/96	09/05/96	07/28/96	97-01	Closed	97-01	02/10/97	Rollup of URI 96-02-01
216	96-04-02	Failure to meet OSR LCO Actions when installed equipment becomes inoperable	NOV (III)	3.3.2.1	Review of event reports PAD-96-0015, -0016, and -0018 involving loss of CAAS audibility, operating a F/S in other than cold STBY, and breaching a UF ₆ instru line under pressure	09/05/96	12/04/96	97-02	Closed	97-02	03/24/97	
217	96-04-03	Use of unapproved autoclave procedures and implementing a JCO without DOE's approval	NOV (III)	3.2.2.1	Review of autoclave instru cal and special test procedures, as well as determining the status of JCO 95-10	09/05/96	05/13/96	97-01	Closed	97-01	02/10/97	This issue was admin linked to the closure of DOE CPI No. 19, "Mgmt Controls," and CPI No. 27, "Procedures Program," and admin closed in 97-01
218	96-04-04	Failure to obtain DOE approval prior to modifying OSR controls assoc with MgF traps	NOV (III)	3.3.2.6	Review of AI and MgF trap activities assoc with inadvertent ops above 2.0 wt % ²³⁵ U on 5/15-5/16/96	09/05/96	11/29/96	97-02	Closed	DOE Ltr 97-02	03/24/97	WITHDRAWN - Violation withdrawn in DOE Ltr dated 12/18/96 based on USEC response
219	96-04-05	Failure to verbally notify DOE within four hours of discovering a UE2-MC-RE1030, Cat II event	NOV (III)	3.2.2.3	Eval of waste mgmt controls established for storage of contaminated cascade equip from off-site	09/05/96	12/15/96	97-02	Closed	97-02	03/24/97	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
220	96-04-06	Failure to notify DOE when previously committed CA completion dates were revised	NOD (NA)	3.3.2.1	Review of PAD-95-0119 involving storage of U-contam off-site equip in the process bldgs and NCSA GEN-20 which was issued to address the storage of this equipment	09/05/96	12/22/96	97-02	Open			This item will remain open for NRC followup inspection because new procedure, UE2-OP-RA1032, contained a provision that allowed the lessee to just notify DOE in writing of a commitment change to the FSAR/OSR or written commitments made without DOE approval as req'd by the ROA. Since this was identified in 97-02, a response will not occur until after NRC assumes Reg Oversight of PGDP on 03/03/97.
DOE Letter to USEC Dated October 30, 1996 - DOE ROM Informed USEC that SSRs Would be Performing an Augmented Inspection to Verify USEC Commitments Made at the May 9, 1996 DOE Management Conference (Results to be Reported in SSR Inspection Report)												
221	Com'mt- 2.1.1 [EA-70-7003 /96-01]	Regulatory Commitments - A procedure to flow-down regulatory commitments to policies & procedures has been approved. A special process has been developed to handle Cert Appl. commitments	IFI (NA)	3.2.2.1	In spite of CAs taken since the 1994 Enforce Conf, procedure-related NOV's continue to be cited at PORTS & PGDP	10/06/95	06/07/96	96-08	Closed	96-08	02/10/97	
222	Com'mt- 2.1.2 [EA-70-7003 /96-01]	Procedure Upgrades - USEC will complete its upgrade of procedures IAW the schedule shown in the Compliance Plan	IFI (NA)	3.2.2.1	In spite of CAs taken since the 1994 Enforce Conf, procedure-related NOV's continue to be cited at PORTS & PGDP	10/06/95	NSU Project Item	96-08	Closed	96-08	02/10/97	This issue was linked to DOE CPI No. 27, "Procedures Prog," and admin closed in 96-08
223	Com'mt- 2.1.3 [EA-70-7003 /96-01]	Organ Roles & Resp - Sect 6.1 of the Cert Appl involving organizational roles & responsibilities will be flowed-down IAW Compliance Plan	IFI (NA)	3.2.2.1	In spite of CAs taken since the 1994 Enforce Conf, procedure-related NOV's continue to be cited at PORTS & PGDP	10/06/95	DOE Complianc e Plan Item	96-08	Closed	96-08	02/10/97	This issue was linked to DOE CPI No. 19, "Mgmt Controls," Plan of Action No. 2, and admin closed in 96-08
224	Com'mt- 2.1.4 [EA-70-7003 /96-01]	Procedure Quality & Adherence Improvements - USEC is to complete four (4) near-term corrective actions to improve procedure quality & adherence	IFI (NA)	3.2.2.1	In spite of CAs taken since the 1994 Enforce Conf, procedure-related NOV's continue to be cited at PORTS & PGDP	10/06/95	12/31/96	96-08 97-02	Closed	97-02	03/24/97	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
225	Com'mt- 2.1.5 [EA-70-7003 /96-01]	QOOP Initiative Revision - QOOP initiative on Conduct of Operations will be revised	IFI (NA)	3.2.2.1	In spite of CAs taken since the 1994 Enforce Conf, procedure- related NOV's continue to be cited at PORTS & PGDP	10/06/95	07/15/96	96-08	Closed	96-08	02/10/97	
226	Com'mt- 2.2.1 [EA-70-7003 /96-01]	Consolidation of CA Process - CA process will be revised to provide clear direction, accountability & resp, and establish clear procedure interfaces	IFI (NA)	3.6.2.3	Quality problem trends at PORTS and PGDP indicate the UE corrective action process has not been effective in preventing problem recurrence	10/06/95	08/31/96	96-08	Closed	96-08	02/10/97	
227	Com'mt- 2.2.2 [EA-70-7003 /96-01]	Root Cause & CAP Trn'g - Select Mgrs and individuals will be trained on root cause & CAP development	IFI (NA)	3.6.2.3	Quality problem trends at PORTS and PGDP indicate the UE corrective action process has not been effective in preventing problem recurrence	10/06/95	09/30/96	96-08	Closed	96-08	02/10/97	
228	Com'mt- 2.2.3 [EA-70-7003 /96-01]	CA Performance Indicators - CA performance indicators will be developed and provided to Mg'mt starting August 1996	IFI (NA)	3.6.2.3	Quality problem trends at PORTS and PGDP indicate the UE corrective action process has not been effective in preventing problem recurrence	10/06/95	08/01/96	96-08	Closed	96-08	02/10/97	
229	Com'mt- 2.2.4 [EA-70-7003 /96-01]	SCAQ CAP Reviews - Open SCAQs will be reviewed by the MAAT against new SCAQ criteria and revised, if necessary	IFI (NA)	3.6.2.3	Quality problem trends at PORTS and PGDP indicate the UE corrective action process has not been effective in preventing problem recurrence	10/06/95	09/30/96	96-08	Closed	96-08	02/10/97	
230	Com'mt- 2.2.5 [EA-70-7003 /96-01]	Monthly Completed CAP Surveillances - Monthly surveillances will be conducted over 6 mos to monitor effectiveness of CAs taken	IFI (NA)	3.6.2.3	Quality problem trends at PORTS and PGDP indicate the UE corrective action process has not been effective in preventing problem recurrence	10/06/95	01/01/97	96-08 97-02	Closed	97-02	03/24/97	
231	Com'mt- 2.2.6 [EA-70-7003 /96-01]	CA Audits - Previously planned CA Program audits will be conducted in October 1996 to monitor improvements in the CA process	IFI (NA)	3.6.2.3	Quality problem trends at PORTS and PGDP indicate the UE corrective action process has not been effective in preventing problem recurrence	10/06/95	10/31/96	96-08	Closed	96-08	02/10/97	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
232	Com'mt- 2.3.1 [EA-70-7003 /96-01]	As-Found Procedure Infrastructure Evaluation - A review of existing procedures assoc with identifying and dispositioning as-found conditions will be conducted	IFI (NA)	3.3.2.6	Since Sept 1995, a significant number of "as-found" conditions have been identified in PORTS & PGDP PRs that have not been reviewed for their potential as USQs	10/06/95	09/30/96	96-08	Closed	96-08	02/10/97	
233	Com'mt- 2.3.2 [EA-70-7003 /96-01]	As-Found Procedure Rev's & Training - Identified changes to as-found procedures will be revised and appropriate personnel will be trained	IFI (NA)	3.3.2.6	Since Sept 1995, a significant number of "as-found" conditions have been identified in PORTS & PGDP PRs that have not been reviewed for their potential as USQs	10/06/95	09/30/96	96-08	Closed	96-08	02/10/97	
234	Com'mt- 2.3.3 [EA-70-7003 /96-01]	Disposition of As-Found Conditions During SAR Preparation - As-found conditions identified during the Cert Appl SAR preparation process will be dispositioned as USEC previously described to DOE in its response to DOE's June 5, 1996 Order to Take Action at PORTS	IFI (NA)	3.3.2.6	Since Sept 1995, a significant number of "as-found" conditions have been identified in PORTS & PGDP PRs that have not been reviewed for their potential as USQs	10/06/95	As scheduled in PR-SH- 95-3112	96-08 97-02	Closed	97-02	03/24/97	
235	Com'mt- 2.3.4 [EA-70-7003 /96-01]	As-Found Condition Performance Indicators - As- found performance indicators will be developed and reported to mg'mt by July 31, 1996	IFI (NA)	3.3.2.6	Since Sept 1995, a significant number of "as-found" conditions have been identified in PORTS & PGDP PRs that have not been reviewed for their potential as USQs	10/06/95	07/31/96	96-08	Closed	96-08	02/10/97	
SSR Inspection Report 70-7001/96-05 - 6-Week Inspection for June - Mid July 1996 (Ops and Pkg'g & Trans)												
236	96-05-01	Revision of CP4-SH-NS1102 and associated tm'g were completed after the USEC identified commitment dates w/o notifying DOE of change	NOD (NA)	3.2.2.4	Review of corrective actions committed to resolve NOV 95- 13-03 involving changing the auth basis w/o performing a USQD	11/20/96	08/16/96	97-02	Closed	97-02	03/24/97	See NOV 95-13-03 for details on modifying the Cold Feed ops process w/o performing a USQD

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
237	96-05-02	Failure to observe the operating bounds for safety systems and components established by the OSRs	NOV (III)	3.3.2.1	Review of three event reports: PAD-1996-0029, -0031, -0032 involving the failure to establish a cont fire watch in C-310 IAW LCO, failure to establish a passive fire watch in C-337 IAW LCO, and failure to apply an FMSC tag to a C-310 waste drum, respectively	11/20/96	06/29/96	97-02	Closed	97-02	03/24/97	
238	96-05-03	Three shipments of radioactive mat'l were not appropriately packaged, labeled, and placarded	NCV (NA)	3.14.2.1	Review of NRC Cert of Compl (CoC) No. 6553 and DOE CoC USA/6553/AF relative to radioactive mat'l shipments using the PGDP Tiger Overpack	11/20/96		97-02	Closed	97-02	03/24/97	
239	96-05-04	PGDP had not developed, approved, and issued a procedure to address 10 CFR 21 mat'l defect req'mts	NOV (III)	3.2.2.1	Verification that the req'mts of 10 CFR 71.31 involving the shipments of rad mat'ls were implemented	11/20/96	04/01/97	97-02	Open			This item will remain open for NRC followup inspection because the lessee identified its flowdown of the NRC CoC and PTQAP could not be completed until 03/02/97. This is just before NRC assumes Reg Oversight of PGDP on 03/03/97, and therefore, cannot be verified by DOE as completed.
SSR Inspection Report 70-7001/96-06 - 6-Week Inspection for Mid July - August 1996 (Ops and Emerg Prep)												
240	96-06-01	Failure to perform pressure decay test on C-333-A autoclaves after vacuum relief vlv replacements as req'd by OSR KY/D-4151 (Event Report PAD-1996-0039 resulted)	NOV (III)	3.3.2.1	Review of PR-EN-96-4333 involving failure to conduct pressure decay tests following vacuum relief vlv replacement on autoclaves in C-333-A	12/06/96		97-02	Open			This item will remain open for NRC followup inspection because the lessee identified commitment to develop and issue an engineering procedure to provide guidance on defining post-maintenance testing will not be completed until March 10, 1997. This is well after when NRC assumes Reg Oversight of PGDP on 03/03/97, and therefore, cannot be verified by DOE as completed.
SSR Inspection Report 70-7001/96-07 - 6-Week Inspection for September - Mid October 1996 (MC&O, Ops, and Emerg Prep)												

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
241	96-07-01	Six (6) examples were cited where the lessee failed to adequately maintain LCO actions or to fully complete them, as required.	NOV (III)	3.3.2.1	Review of event rpts PAD-1996-0042, -0043, -0044, and -0048 involving the failure to establish a fire watch for an inop C-337-A trench UF6 detector, conducting autoclave ops with an inattentive fire watch, and two OSR infractions where the LCO 1 hr req'mt to establish a passive fire watch was exceeded, respectively	12/24/96		97-02	Open			This item will remain open for NRC followup inspection because the CAs identified by the lessee to resolve this issue will not be completed until 03/28/97. This is well after when NRC assumes Reg Oversight of PGDP on 03/03/97, and therefore, cannot be verified by DOE as completed.
242	96-07-02	Failure to ensure DOE-directed lessee procedure additions to the auth basis were not changed w/o DOE approval	NCV (NA)	3.3.2.6	Verif that lessee maintained DOE ltr commitments involving auth basis req'mts (RG-70-7001/96-0007 and RG-70-7001/96-0008)	12/24/96		97-02	Closed	97-02	03/24/97	
243	96-07-03	Two (2) examples were cited where the lessee failed to meet and/or maintain stated commitments	NOD (NA)	3.2.2.4	Review of regulatory commitment maint from two diff reg commit mechanisms: (1) response to an NOV, and (2) stated CAs in a 1994 Enf Conf letter	12/24/96		97-02	Open			See also TI-3.2/01, commitment 09 for item (3). This item will remain open for NRC followup inspection because the CAs identified by the lessee to resolve this issue will not be completed until 02/27/97. This is just before when NRC assumes Reg Oversight of PGDP on 03/03/97, and therefore, cannot be verified by DOE as completed.
244	96-07-04	Failure to observe OSR operating req'mts to purge process piping to a UF6 negative before breaching the system	NOV (III)	3.3.2.1	Review of Event Rpt PAD-1996-0040 involving the lessee cutting into C-335 process pipe containing UF6 w/o ensuring a UF6 negative was established before cutting the pipe	12/24/96		97-02	Open			Rolled up NOV 96-01-01 and Nov 96-01-02 into this issue This item will remain open for NRC followup inspection because the CAs identified by the lessee to resolve this issue will not be completed until 04/15/97. This is well after when NRC assumes Reg Oversight of PGDP on 03/03/97, and therefore, cannot be verified by DOE as completed.

PGDP DOE Regulatory Findings History Report

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
245	96-07-05	Failure to comply with OSR CAAS operating req'mts with fissile mat'l >1 w/o 235U	NOV (III)	3.3.2.1	Review of Event Rpt PAD-1996-0046 involving operating a portion of Unit 6 in C-333 with mat'l >1 w/o 235U w/o an operable CAAS	12/24/96		97-02	Open			This item will remain open for NRC followup inspection because the CAs identified by the lessee to resolve this issue will not be completed until 06/15/97. This is well after when NRC assumes Reg Oversight of PGDP on 03/03/97, and therefore, cannot be verified by DOE as completed.
SSR Inspection Report 70-7001/96-08 - 6-Week Inspection for Mid October - November 1996 (MC&O, Ops, QA, and Security)												
246	96-08-01	Five (5) examples were identified where the lessee failed to follow or establish admin controls whenever an OSR provision could not be complied with	NOV (III)	3.3.2.1	Followup on Event Rpts: PAD-1996-0056, -0059, -0061, and -0065 involving conducting invalid fire sprinkler tests in C-337, placement of oil absorbent pads in BCS waste, failure of operator to verify clarity before heating a toll normal UF6 cylinder, and Fire Svs performing maint on antifreeze loops w/o establishing a passive fire watch, respectively. Also, a review was conducted of return-to-service activities associated with the 1E Autoclave in Bldg C-337-A after a steam CV replacement IAW C-EN-821-96-082.	02/10/97		97-02	Open			This item will remain open for NRC followup inspection because the 96-08 DOE Inspection Report was not issued 02/10/97. The lessee's response to the violation contained in this document will not be received by DOE until approx 03/10/97, which is well after when NRC assumes Reg Oversight of PGDP on 03/03/97.
SSR Inspection Report 70-7001/97-01 - 6-Week Inspection for December 1996 - January 10, 1997 (Ops)												
247	97-01-01	Two (2) examples were cited where the lessee had failed to follow or establish admin controls required by the OSRs when its normal operating provisions could no longer be complied with.	NOV (III)	3.3.2.1	Followup on Event Rpts: PAD-1996-0068 and -0069 involving failure of the lessee to reduce Bldg C-333 operating pressure below atmospheric when a UF6 detector head failed to fire during testing, and failure of the lessee to monitor C-310 line recorders and temps when a loss of CAAS coverage occurred.	02/10/97		97-02	Open			This item will remain open for NRC followup inspection because the 97-01 DOE Inspection Report was not issued 02/10/97. The lessee's response to the violation contained in this document will not be received by DOE until approx 03/10/97, which is well after when NRC assumes Reg Oversight of PGDP on 03/03/97.

PGDP DOE Regulatory Findings History Report

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7001/97-02)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
SSR Inspection Report 70-7001/97-02 - 6-Week Inspection for January 11 - March 3, 1997 (Ops)												
248	97-02-01	Three (3) examples were cited where the lessee had failed to follow or establish admin controls required by the OSRs/TSRs when its normal operating provisions could no longer be complied with.	URI	3.3.2.1	Inspector walkdown of a C-337 cascade TSR TR, identified an inoperable CAAS area where potentially fissile material was being stored, and the CAAS was found not returned to an operable state within the TSR required 30 days; the lessee identified it fed 45 cylinders into the cascade not covered by TSR Sect. 2.2, App. A; and the lessee identified it failed to implement LCO actions for cells operating above atmos. with an inop PGLD in C-333.	03/24/97						
249	97-02-02	Failure of the lessee to incorporate sufficient NCS double contingency safety factors into its C-400 cylinder spray wash operations to prevent conditions which could result in an inadvertent criticality	URI	3.9.2.3	Review of a lessee self-identified item where 22 cylinders were discovered to have been washed at the C-400 cylinder wash stand without a historical U assay content check being performed prior to the cleaning. A gas over solid sample was performed.	03/24/97						

INSPECTION FOLLOWUP SYSTEM - ITEMS SUMMARY REPORT
PADUCAH GASEOUS DIFFUSION PLANT
AS OF 04/10/97

ATTACHMENT E

REPORT NUMBER	ITEM NUMBER	SUBJECT	ISSUED	STATUS SCHEDULE FOLLOWUP	CATEGORY	SEVERITY LEVEL	ROA RQMT	BUILDING
70-7001/93-10	01	Failure to implement engineering and admin controls and to properly use personal protective equipment to control internal radiation exposures of employees.	10/05/93	CLOSED	VIOLATION	II	3.8.2.9	C-337-A FEED STATION
70-7001/93-20	02	Failure to use RWP for entry to contaminated area in C-331 at column F-31.	10/26/93	CLOSED	VIOLATION	III	3.8.2.18	C-331 PROCESS BUILDING
70-7001/93-27	03	Failure to follow Autoclave Opening Prevention Test procedure.	09/21/93	CLOSED	VIOLATION	III	3.3.2.2	C-337-A FEED STATION
70-7001/93-29	04	Failure to adhere to RWP sign in and sign out requirements.	09/24/93	WITHDR	VIOLATION	III	3.8.2.19	C-410 FEED & PLANT
70-7001/93-38	05	Failure to follow nuclear criticality safety procedures.	10/07/93	CLOSED	VIOLATION	III	3.9.2.6	C-710 TECHNICAL SERVICES
70-7001/93-45	01	Failure to follow RWP procedures.	04/22/94	CLOSED	NON-CITED VIOLATION	NA	3.2.2.1	C-310 PRODUCT BUILDING
70-7001/94-01	01	Disposition of NCR-PAD-94-003, C-337 UF6 Release	03/23/94	CLOSED	INSPECTION FOLLOWUP	NA	3.2	C-337 PROCESS BUILDING
70-7001/94-01	02	Radiation Controls - Housekeeping and Posting	03/23/94	CLOSED	INSPECTION FOLLOWUP	NA	3.8	C-333 PROCESS BUILDING
70-7001/94-01	03	Equipment inspection - "B" Booster coolant condensers	03/23/94	CLOSED	UNRESOLVED ITEM	NA	3.6	C-333 PROCESS BUILDING
70-7001/94-01	04	Radiation work permit	03/23/94	CLOSED	INSPECTION FOLLOWUP	NA	3.8	C-720 MAINTENACE BUILDING
70-7001/94-01	05	Radiological controls	03/23/94	CLOSED	INSPECTION FOLLOWUP	NA	3.8	C-310 PRODUCT BUILDING

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PADUCAH GASEOUS DIFFUSION PLANT
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REPORT NUMBER	ITEM NUMBER	SUBJECT	ISSUED	STATUS SCHEDULE FOLLOWUP	CATEGORY	SEVERITY LEVEL	ROA RQMT	BUILDING
70-7001/94-01	06	Failure to exercise positive control over radioactive sources.	03/23/94	CLOSED	VIOLATION	III	3.8.2.16	C-310 PRODUCT BUILDING
70-7001/94-01	07	Rupture Disc rating on high speed P&E pumps	03/23/94	CLOSED	UNRESOLVED ITEM	NA	3.3	C-333 PROCESS BUILDING
70-7001/94-01	08	Rupture disc setting exceeds OSR rating (Is below the LSSS)	03/23/94	CLOSED	UNRESOLVED ITEM	NA	3.3	C-315 SURGE AND WASTE
70-7001/94-01	09	Contaminated equipment control	03/23/94	CLOSED	INSPECTION FOLLOWUP	NA	3.8	C-335 PROCESS BUILDING
70-7001/94-01	10	Failure to perform required 1 year review of Emergency Preparedness Procedures	03/23/94	CLOSED	VIOLATION	III	3.13.2.3	C-300 CENTRAL CONTROL
70-7001/94-01	11	Radioactive material storage area	03/23/94	CLOSED	INSPECTION FOLLOWUP	NA	3.8	C-310 PRODUCT BUILDING
70-7001/94-01	12	Criticality safety - Fissile Material Storage	03/23/94	CLOSED	UNRESOLVED ITEM	NA	3.9	C-337 PROCESS BUILDING
70-7001/94-02	01	Clarification of coverage of "B" to C-315 Booster Pumps by OSR, rupture disks and relief valve ratings, and P&E low speed booster pump modifications.	04/22/94	CLOSED	UNRESOLVED ITEM	NA	3.3	C-315 SURGE & WASTE
70-7001/94-02	02	Failure to post personnel access door and provide monitoring equipment.	04/22/94	CLOSED	NON-CITED VIOLATION	NA	3.8.2.10	C-333 PROCESS BUILDING
70-7001/94-02	03	Failure to follow radiation protection procedures, multiple (4) cases.	04/22/94	CLOSED	VIOLATION	III	3.8.2.18	NOT APPLICABLE
70-7001/94-02	04	Failure to properly label and store Radioactive Material.	04/22/94	CLOSED	NON-CITED VIOLATION	NA	3.8.2.11	MULTIPLE BUILDINGS

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REPORT NUMBER	ITEM NUMBER	SUBJECT	ISSUED	STATUS SCHEDULE FOLLOWUP	CATEGORY	SEVERITY LEVEL	ROA RQMT	BUILDING
70-7001/94-02	05	Proper treatment of Unit 2 Cell 2 Stage 7 area with respect to fissile waste under "mock" high assay operations.	04/22/94	CLOSED	INSPECTION FOLLOWUP	NA	3.8	
70-7001/94-02	06	Applicability of Fissile Control Area criteria to column DD-23 area under "mock" high assay operations.	04/22/94	CLOSED	INSPECTION FOLLOWUP	NA	3.9	C-331 PROCESS BUILDING
70-7001/94-02	07	Proper storage of materials in a temporary Fissile Control Area	04/22/94	CLOSED	INSPECTION FOLLOWUP	NA	3.9	C-335 PROCESS BUILDING
70-7001/94-03	01	Justification for failure to have formal procedure for Conditioning PICS Freezer-Sublimers in 000 Equipment.	04/22/94	CLOSED	UNRESOLVED ITEM	NA	3.3	C-333 PROCESS BUILDING
70-7001/94-03	02	Actions taken in response to unacceptable hi-hj weight trip test of unit 1, cell 9 freezer/sublimers.	04/22/94	CLOSED	UNRESOLVED ITEM	NA	3.3	C-337 PROCESS BUILDING
70-7001/94-03	03	Failure to implement contamination control measures	04/22/94	CLOSED	NON-CITED VIOLATION	NA	3.8.2.11	C-335 PROCESS BUILDING
70-7001/94-03	04	Failure to follow RWP procedures.	04/22/94	CLOSED	VIOLATION	III	3.8.2.18	MULTIPLE BUILDINGS
70-7001/94-03	05	Failure to properly store contaminated material in RMSA.	04/22/94	CLOSED	NON-CITED VIOLATION	NA	3.8.2.11	C-335 PROCESS BUILDING
70-7001/94-03	06	NCSA and posting for area near column Ma-21 on cell floor.	04/22/94	CLOSED	INSPECTION FOLLOWUP	NA	3.9	C-333 PROCESS BUILDING
70-7001/94-03	07	Four fire extinguishers with tags indicating the monthly inspection was overdue.	04/22/94	CLOSED	INSPECTION FOLLOWUP	NA	3.10	C-337-A FEED STATION

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REPORT NUMBER	ITEM NUMBER	SUBJECT	ISSUED	STATUS SCHEDULE FOLLOWUP	CATEGORY	SEVERITY LEVEL	ROA RQMT	BUILDING
70-7001/94-04	01	Inadequate implementation of fire protection measures.	06/02/94	CLOSED	NON-CITED VIOLATION	NA	3.10.2.9	MULTIPLE BUILDINGS
70-7001/94-05	01	Adequacy of Safety Evaluation regarding UF6 detection capabilities.	07/25/94	CLOSED	UNRESOLVED ITEM	NA	3.3	C-333 PROCESS BUILDING
70-7001/94-05	02	Identification of systems requiring triennial relief valve replacement per the OSRs.	07/25/94	CLOSED	UNRESOLVED ITEM	NA		C-331 PROCESS BUILDING
70-7001/94-05	03	Broken calibration stickers on Jomar JHH-10 radiation monitoring instrument.	07/25/94	CLOSED	INSPECTION FOLLOWUP	NA	3.8	C-310-A PRODUCT WITHDRAWAL
70-7001/94-05	04	Review of management controls applied to UF6 detection safety system components.	07/25/94	CLOSED	UNRESOLVED ITEM	NA		C-337 PROCESS BUILDING
70-7001/94-05	05	Review procedural requirements for UF6 detector false alarms and assess LCO for out of service detectors.	07/25/94	CLOSED	INSPECTION FOLLOWUP	NA		C-300 CENTRAL CONTROL
70-7001/94-05	06	Out of date respiratory protection training.	07/25/94	CLOSED	NON-CITED VIOLATION	NA	3.5.2.6	NOT APPLICABLE
70-7001/94-05	07	Improper storage of 15-gallon HEPA vacuum in the C-333 Process Building.	07/25/94	CLOSED	NON-CITED VIOLATION	NA	3.9.2.3	C-335 PROCESS BUILDING
70-7001/94-05	08	Improper storage and labeling of HEPA vacuum cleaners.	07/25/94	CLOSED	VIOLATION	III	3.9.2.3	C-335 PROCESS BUILDING
70-7001/94-05	09	Clarification of Site Event Categorization Criteria for NCS incidents.	07/25/94	CLOSED	UNRESOLVED ITEM	NA	3.9	NOT APPLICABLE
70-7001/94-05	10	Adequacy of preventative measures and training in relation to lessee identified NCS violations.	07/25/94	CLOSED	UNRESOLVED ITEM	NA		C-310 PRODUCT BUILDING

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REPORT NUMBER	ITEM NUMBER	SUBJECT	ISSUED	STATUS SCHEDULE FOLLOWUP	CATEGORY	SEVERITY LEVEL	ROA RQMT	BUILDING
70-7001/94-05	11	Adequacy of the monthly chlorine detector maintenance and testing.	07/25/94	CLOSED	UNRESOLVED ITEM	NA	3.19	C-300 CENTRAL CONTROL
70-7001/94-06	01	Improper operator actions in response to UF6 detector alarms.	08/31/94	CLOSED	VIOLATION	III	3.2.2.1	NOT APPLICABLE
70-7001/94-06	02	Failure to follow RWP requirements.	08/31/94	CLOSED	VIOLATION	III	3.8.2.18	C-400 CLEANING BUILDING
70-7001/94-06	03	Maintenance of breathing equipment located on cell floor.	08/31/94	CLOSED	INSPECTION FOLLOWUP	NA		C-333 PROCESS BUILDING
70-7001/94-06	04	Implementation of ORR Team recommendations for above atmospheric pressure operation.	08/31/94	CLOSED	UNRESOLVED ITEM	NA	3.3	C-333 PROCESS BUILDING
70-7001/94-06	05	Failure to inspect high efficiency filter systems at required intervals.	08/31/94	CLOSED	VIOLATION	III	3.6.2.8	MULTIPLE BUILDINGS
70-7001/94-06	06	Adequacy of overpressure in fire extinguishers located in high ambient heat areas.	08/31/94	CLOSED	INSPECTION FOLLOWUP	NA	3.10	C-335 PROCESS BUILDING
70-7001/94-06	07	Failure to perform passive fire watches as required by OSRs.	08/31/94	CLOSED	NON-CITED VIOLATION	NA	3.3.2.1	C-333 PROCESS BUILDING
70-7001/94-07	01	Failure to follow nuclear criticality waste handling and storage procedures.	09/22/94	CLOSED	VIOLATION	III	3.9.2.6	MULTIPLE BUILDINGS
70-7001/94-07	02	Procedure CN-54, Rev 0, stamped "Working Copy" with an expiration date of 7/24/94 was used for the annual pressure decay test. Portions of the procedure were not followed by the operator.	09/22/94	CLOSED	UNRESOLVED ITEM	NA	3.2	C-337-A A FEED STATION

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REPORT NUMBER	ITEM NUMBER	SUBJECT	ISSUED	STATUS SCHEDULE FOLLOWUP	CATEGORY	SEVERITY LEVEL	ROA RQMT	BUILDING
70-7001/94-07	03	Management and worker acceptance of contamination control practices.	09/22/94	CLOSED	INSPECTION FOLLOWUP	NA	3.8	MULTIPLE BUILDINGS
70-7001/94-07	04	Failure to record room temperature on a daily basis.	09/22/94	CLOSED	NON-CITED VIOLATION	NA	3.2.2.1	MULTIPLE BUILDINGS
70-7001/94-07	05	Declining attention to detail and lack of ownership in handling fissile material.	09/22/94	CLOSED	INSPECTION FOLLOWUP	NA	3.9	NOT APPLICABLE
70-7001/94-07	06	Adequacy of measures to protect classified information.	09/22/94	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE
70-7001/94-08	01	Failure to follow procedures regarding in-hand use of procedures.	10/31/94	CLOSED	NON-CITED VIOLATION	NA	3.2.2.1	C-333-A FEED STATION
70-7001/94-08	02	Alarm response procedure for the fluorine facility.	10/31/94	CLOSED	UNRESOLVED ITEM	NA		C-337-A A FEED STATION
70-7001/94-08	03	Lessee oversight of work performed by the subcontractor to assure conformance with ROA Section 3.4, Engineering Reviews.	10/31/94	CLOSED	UNRESOLVED ITEM	NA		NOT APPLICABLE
70-7001/94-08	04	Accuracy of recorded data.	10/31/94	CLOSED	INSPECTION FOLLOWUP	NA		C-333 PROCESS BUILDING
70-7001/94-08	05	Review of maintenance records for UF6 handling cranes.	10/31/94	CLOSED	UNRESOLVED ITEM	NA		C-333-A FEED STATION
70-7001/94-08	06	Continued use of autoclaves during an active "HALT" condition.	10/31/94	CLOSED	UNRESOLVED ITEM	NA		C-333-A FEED STATION
70-7001/94-08	07	Lack of adequate NCS controls governing fissile material handling operations.	10/31/94	CLOSED	NON-CITED VIOLATION	III	3.9.2.2	C-720 MAINTENANCE BUILDING

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70-7001/94-08	08	Writing temporary NCSA and extending expiration dates.	10/31/94	CLOSED	INSPECTION FOLLOWUP	NA		C-400 CLEANING BUILDING
70-7001/94-08	09	Use of storage areas and NCSA identification of storage areas and contents.	10/31/94	CLOSED	INSPECTION FOLLOWUP	NA		C-400 CLEANING BUILDING
70-7001/94-09	01	Safety documentation (engineering reviews, PSE, and JCO) to support removal of lateral restraints on expansion joints.	12/07/94	CLOSED	UNRESOLVED ITEM	NA		MULTIPLE BUILDINGS
70-7001/94-09	02	Failure to conduct training as required.	12/07/94	CLOSED	VIOLATION	III	3.5.2.6	NOT APPLICABLE
70-7001/94-09	03	Accurate assessment of employee comprehension of site specific radiation safety information in GERT.	12/07/94	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE
70-7001/94-09	04	Completion of NCS verbatim compliance self-assessments.	12/07/94	CLOSED	UNRESOLVED ITEM	NA		C-331 PROCESS BUILDING
70-7001/94-10	01	Need for USQD for storage of oil on the cell floor near Unit 1 cell 2.	02/13/95	CLOSED	UNRESOLVED ITEM	NA		C-333 PROCESS BUILDING
70-7001/94-11	01	Relocation of terminal strips in buffer cabinet adjacent to the F/S cabinet resulting in loss of UF6 detection capability.	03/13/95	CLOSED	UNRESOLVED ITEM	NA		C-333 PROCESS BUILDING
70-7001/94-11	02	Completion of operability assessment for X-11 and X-11A expansion joints	03/13/95	CLOSED	UNRESOLVED ITEM	NA		
70-7001/94-12	01	Failure to maintain passive fire watches as required by the OSRs.	04/10/95	CLOSED	VIOLATION	II	3.3.2.1	NOT APPLICABLE
70-7001/94-13	01	Action taken by lessee on LER PGDPOPERD-1994-0001	05/06/94	CLOSED	INSPECTION FOLLOWUP	NA	3.2	C-310 PRODUCT BUILDING

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70-7001/94-13	02	Failure to follow procedures, 7 examples.	05/06/94	CLOSED	VIOLATION	III	3.2.2.1	C-310 PRODUCT BUILDING
70-7001/94-13	03	Use of TMIS to keep managers informed of employee training status.	05/06/94	CLOSED	UNRESOLVED ITEM	NA	3.5	NOT APPLICABLE
70-7001/94-13	04	Failure to perform required notifications of an event.	05/06/94	CLOSED	DEVIATION	NA	3.2.2.1	NOT APPLICABLE
70-7001/94-14	01	Failure to conduct safety system surveillance as required by OSRs.	08/31/94	CLOSED	NON-CITED VIOLATION	NA	3.3.2.2	C-337-A A FEED STATION
70-7001/94-14	02	Failure to test safety-related equipment in a manner to ensure it operates and meets design objectives.	08/31/94	CLOSED	VIOLATION	III	3.3.2.3	NOT APPLICABLE
70-7001/94-14	03	Failure of management to fully implement a program of monitoring and plant tours.	08/31/94	CLOSED	VIOLATION	III	3.3.2.4	MULTIPLE BUILDINGS
70-7001/94-14	04	Failure to ensure the accurate and effective exchange of information between shift personnel during shift turnover.	08/31/94	CLOSED	NON-CITED VIOLATION	NA	3.3.2.5	MULTIPLE BUILDINGS
70-7001/94-14	05	Operability of UF6 detectors under conditions in excess of design ratings.	08/31/94	CLOSED	UNRESOLVED ITEM	NA	3.3	
70-7001/94-14	06	Determination of the impact of loss of the HEPA filter plenum exhaust fan on operability of the high-voltage UF6 detection system.	08/31/94	CLOSED	UNRESOLVED ITEM	NA		C-315 SURGE & WASTE
70-7001/94-14	07	Implementation of improvements to the MT&E calibration program.	08/31/94	CLOSED	INSPECTION FOLLOWUP	NA	3.3	NOT APPLICABLE

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70-7001/94-14	08	Verification of the quality of UF6 MD cylinder blends.	08/31/94	CLOSED	UNRESOLVED ITEM	NA	3.3	NOT APPLICABLE
70-7001/94-14	09	Inconsistent understanding of which systems, structures and components were considered to be safety-related.	08/31/94	CLOSED	INSPECTION FOLLOWUP	NA	3.7	NOT APPLICABLE
70-7001/94-14	10	Failure of line managers to define training needs and assure completion of training and demonstration of proficiency.	08/31/94	CLOSED	VIOLATION	III	3.5.2.1	NOT APPLICABLE
70-7001/94-14	11	Failure of plant personnel to complete required training.	08/31/94	CLOSED	VIOLATION	III	3.5.2.6	NOT APPLICABLE
70-7001/94-14	12	Failure to follow procedures (multiple examples).	08/31/94	CLOSED	VIOLATION	III	3.2.2.1	NOT APPLICABLE
70-7001/94-14	13	Failure to maintain records of safety system tests.	08/31/94	CLOSED	VIOLATION	III	3.2.2.5	NOT APPLICABLE
70-7001/94-14	14	Failure to take prompt corrective action to address identified weaknesses.	08/31/94	CLOSED	VIOLATION	III	3.6.2.3	C-337-A A FEED STATION
70-7001/94-14	15	Failure perform safety-related work using approved procedures.	08/31/94	CLOSED	VIOLATION	III	3.6.2.5	C-333-A FEED STATION
70-7001/94-15	01	Failure to follow procedures important to safety in response to a UF6 release.	07/25/94	CLOSED	VIOLATION	III	3.2.2.1	C-315 SURGE & WASTE
70-7001/94-15	02	Use of unevaluated and unapproved containment device in lieu of respiratory protection.	07/25/94	CLOSED	VIOLATION	III	3.8.2.9	C-315 SURGE & WASTE
70-7001/94-15	03	Review of PIP Action Plan to confirm aspects of the HEPA testing implementation plan and determine	07/25/94	CLOSED	UNRESOLVED ITEM	NA		C-315 SURGE & WASTE

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		whether the HEPA filter testing for building C-315 was outside the required annual frequency specified in P-ESH-95 and as committed to in the PIP Action Plan No. 48-91-1085.						
70-7001/94-16	01	Definition of the roles and responsibilities for safe operation in management and supervisory position descriptions.	10/07/94	CLOSED	INSPECTION FOLLOWUP	NA	3.1	NOT APPLICABLE
70-7001/94-16	02	Failure to review procedures at required interval(s).	10/07/94	CLOSED	NON-CITED VIOLATION	NA	3.2.2.1	NOT APPLICABLE
70-7001/94-16	03	Failure to maintain the independent safety review process.	10/07/94	CLOSED	VIOLATION	III	3.2.2.2	NOT APPLICABLE
70-7001/94-16	04	Failure to include commitments into the IRMS.	10/07/94	CLOSED	NON-CITED VIOLATION	NA	3.2.2.4	NOT APPLICABLE
70-7001/94-16	05	Failure to develop and implement standard methods and requirements for creating, collecting, maintaining, and disposing of records related to nuclear safety and safeguards and security.	10/07/94	CLOSED	NON-CITED VIOLATION	NA	3.2.2.5	NOT APPLICABLE
70-7001/94-16	06	Absence of procedures to fully implement the QA Program.	10/07/94	CLOSED	INSPECTION FOLLOWUP	NA	3.6	NOT APPLICABLE
70-7001/94-16	07	Failure to adequately implement procedures governing nonconformance reporting, control of nonconformances and corrective actions.	10/07/94	CLOSED	VIOLATION	III	3.6.2.3	NOT APPLICABLE
70-7001/94-16	08	Review lessee compliance with ROA Requirement 3.6.2.9 since the management assessment process was only recently initiated.	10/07/94	CLOSED	UNRESOLVED ITEM	NA	3.6	NOT APPLICABLE

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70-7001/94-16	09	Failure to inspect, test, and maintain the fixed fire suppression systems.	10/07/94	CLOSED	VIOLATION	III	3.10.2.3	NOT APPLICABLE
70-7001/94-16	10	Failure to institute fire watches as specified in permits or to conduct fire watches at intervals not to exceed 1-hour.	10/07/94	CLOSED	VIOLATION	III	3.2.2.1	NOT APPLICABLE
70-7001/94-16	11	Inspections of lessee activities for compliance with ROA Requirement 3.10.2.12	10/07/94	CLOSED	UNRESOLVED ITEM	NA	3.10	NOT APPLICABLE
70-7001/94-16	12	Inspection of lessee activities for compliance with ROA Requirement 3.10.2.13	10/07/94	CLOSED	UNRESOLVED ITEM	NA	3.10	NOT APPLICABLE
70-7001/94-16	13	Failure to follow written permit controlling welding.	10/07/94	CLOSED	NON-CITED VIOLATION	NA	3.10.2.18	C-337 PROCESS BUILDING
70-7001/94-16	14	Failure to have procedures for response to an apparent spill or loss of control of radioactive material.	10/07/94	WITHDR	VIOLATION	III	3.8.2.5	NOT APPLICABLE
70-7001/94-16	15	Failure to have provisions to adequately assess the actual or potential consequences of an emergency (accountability of personnel).	10/07/94	CLOSED	VIOLATION	III	3.13.2.9	NOT APPLICABLE
70-7001/94-17	01	Improper review and distribution of Nuclear Material Safeguards procedures.	11/30/94	CLOSED	NON-CITED VIOLATION	NA	3.2.2.1	NOT APPLICABLE
70-7001/94-17	02	Failure to track, account for, and report SNM above threshold limits.	11/30/94	CLOSED	VIOLATION	III	3.12.2.2	NOT APPLICABLE
70-7001/94-17	03	Evaluation and adjustment of Material Balance Inventory.	11/30/94	CLOSED	INSPECTION FOLLOWUP	NA	3.12.2.2	NOT APPLICABLE

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70-7001/94-17	04	Results of repair and recalibration of accountability scales and the effects on previous uranium accountability reports.	11/30/94	CLOSED	UNRESOLVED ITEM	NA	3.12.2.2	NOT APPLICABLE
70-7001/94-17	05	Measurement and measurement control procedures.	11/30/94	CLOSED	INSPECTION FOLLOWUP	NA	3.12.2.3	NOT APPLICABLE
70-7001/94-17	06	Determination of the elemental concentration of uranium in UF ₆ using secondary standards not traceable to the national measurement base.	11/30/94	CLOSED	VIOLATION	III	3.12.2.3	NOT APPLICABLE
70-7001/94-17	07	Failure to conduct systematic performance testing of the SNM protection program.	11/30/94	CLOSED	NON-CITED VIOLATION	NA	3.12.2.8	NOT APPLICABLE
70-7001/94-17	08	Failure to perform sampling and analysis activities using a program describing the quality measures set forth in the site QAP.	11/30/94	CLOSED	VIOLATION	III	3.15.2.1	NOT APPLICABLE
70-7001/94-17	09	Failure to use properly calibrated equipment to measure nuclear materials.	11/30/94	CLOSED	VIOLATION	III	3.15.2.2	NOT APPLICABLE
70-7001/94-17	10	Inadequate implementation of the security program.	11/30/94	CLOSED	VIOLATION	III	3.18.2.1d	NOT APPLICABLE
70-7001/94-17	11	Improper implementation of measures to protect classified information and materials from loss or unauthorized disclosure.	11/30/94	CLOSED	VIOLATION	III	3.18.2.2a	NOT APPLICABLE
70-7001/94-17	12	Failure to maintain an unclassified computer security program providing the level of protection mandated by DOE Order 1360.2B.	11/30/94	CLOSED	NON-CITED VIOLATION	NA	3.18.2.3f	NOT APPLICABLE
70-7001/94-18	01	Failure to implement a procedure system to control changes to the plant design and equipment.	12/02/94	CLOSED	VIOLATION	III	3.4.2.1	NOT APPLICABLE

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70-7001/94-18	02	Progress on development and implementation of the configuration control program.	12/02/94	CLOSED	INSPECTION FOLLOWUP	III	3.4.2.1	NOT APPLICABLE
70-7001/94-18	03	Adequacy of the corrective action process in relation to self-assessments.	12/02/94	CLOSED	INSPECTION FOLLOWUP	NA	3.3.2.4	NOT APPLICABLE
70-7001/94-18	04	Inconsistent application of seismic criteria.	12/02/94	CLOSED	UNRESOLVED ITEM	NA	3.17.2.3	MULTIPLE BUILDINGS
70-7001/94-18	05	Failure to have adequate equipment to support emergency response.	12/02/94	CLOSED	VIOLATION	NA	3.13.2.7	NOT APPLICABLE
70-7001/94-18	06	Failure to develop predetermined actions (i.e., recommended protective action guidelines).	12/02/94	CLOSED	NON-CITED VIOLATION	NA	3.13.2.9	NOT APPLICABLE
70-7001/94-18	07	Installation and completion of training on the ALOHA program.	12/02/94	CLOSED	INSPECTION FOLLOWUP	NA	3.13.2.9	NOT APPLICABLE
70-7001/94-20	01	Failure of the ambient air sampling program to comply with the EMP.	03/13/95	CLOSED	NON-CITED VIOLATION	NA	3.11.2.1	NOT APPLICABLE
70-7001/94-20	02	Verification of the 1994 meteorological data 90% recovery requirement.	03/13/95	CLOSED	INSPECTION FOLLOWUP	NA	3.11.2.2	NOT APPLICABLE
70-7001/94-20	03	Radioactive waste container labeling practices.	03/13/95	CLOSED	INSPECTION FOLLOWUP	NA	3.16.2.1	NOT APPLICABLE
70-7001/94-20	04	Perform inspection to determine compliance of lessee's program with ROA Implementation Requirement 3.16.2.4.	03/13/95	CLOSED	UNRESOLVED ITEM	NA		NOT APPLICABLE
70-7001/94-20	05	Failure to implement established management responsibilities for radiation protection.	03/13/95	CLOSED	NON-CITED VIOLATION	NA	3.8.2.2	NOT APPLICABLE

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70-7001/94-20	06	HP technician training.	03/13/95	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE
70-7001/94-20	07	Failure to use 24-hour urine samples and the resulting cumulative activity for calculating worker's intakes.	03/13/95	CLOSED	NON-CITED VIOLATION	NA	3.8.2.8	NOT APPLICABLE
70-7001/94-20	08	Inconsistent labeling of drums containing radioactive waste.	03/13/95	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE
70-7001/94-20	09	Failure to establish barriers for "Radiation Areas" used for cylinder storage.	03/13/95	CLOSED	VIOLATION	III	3.8.2.11	NOT APPLICABLE
70-7001/94-20	10	Failure to perform required radiation surveys in building C-400 cylinder wash, spray booth, and compressor pit areas.	03/13/95	WITHDR	VIOLATION	III	3.8.2.14	NOT APPLICABLE
70-7001/94-20	11	Development and updating of Technical Services Division procedures affecting HP activities.	03/13/95	CLOSED	INSPECTION FOLLOWUP	NA	3.8.2.20	NOT APPLICABLE
70-7001/94-20	12	NIST traceability of the calibration of the gamma spectroscopy sources.	03/13/95	CLOSED	UNRESOLVED ITEM	NA	3.8.2.20	NOT APPLICABLE
70-7001/94-20	13	Maintenance and use of battery operated survey instruments for egress monitoring.	03/13/95	CLOSED	INSPECTION FOLLOWUP	NA	3.8.2.20	NOT APPLICABLE
70-7001/94-20	14	Teardown and chemical cleaning of vacuum pumps without an approved NCSA.	03/13/95	CLOSED	NON-CITED VIOLATION	NA	3.9.2.3	
70-7001/94-20	15	Justification for having unsealed, covered manholes in fissile storage areas	03/13/95	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE
70-7001/94-20	16	Development of 109 NCS packages in support of 5 wt. percent enriched uranium operations.	03/13/95	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE

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70-7001/94-20	17	Failure to have procedural controls to inventory and handle the legacy components from K-25/K-27.	03/13/95	CLOSED	NON-CITED VIOLATION	NA	3.9.2.6	NOT APPLICABLE
70-7001/94-20	18	Timeliness of the resolutions of the outstanding NCS deviations.	03/13/95	CLOSED	INSPECTION FOLLOWUP	NA	3.9.2.8	NOT APPLICABLE
70-7001/94-20	19	Inconsistency in use of respirators for fluorine and ClF3.	03/13/95	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE
70-7001/94-20	20	Procedures upgrade project (PUP) progress.	03/13/95	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE
70-7001/95-01	01	Inclusion of radiation exposure/dose level information on the General RWP's governing the cylinder yards.	04/03/95	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE
70-7001/95-02	01	Failure to capacity test high pressure fire water pumps.	04/28/95	CLOSED	VIOLATION	III	3.10.2.3	NOT APPLICABLE
70-7001/95-02	02	Failure to survey a vehicle leaving a radiological area.	04/28/95	CLOSED	VIOLATION	III	3.8.2.13	NOT APPLICABLE
70-7001/95-02	03	Failure to properly implement the welding/burning/hot work permit program.	04/28/95	CLOSED	VIOLATION	III	3.19.2.18	NOT APPLICABLE
70-7001/95-03	01	Use of required reading to train plant personnel.	05/25/95	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE
70-7001/95-03	02	Completion of actions on "as found" conditions of relief valves.	05/25/95	CLOSED	UNRESOLVED ITEM	NA		NOT APPLICABLE
70-7001/95-03	03	Failure to meet commitments concerning establishment of a management review committee.	05/25/95	CLOSED	DEVIATION	NA		NOT APPLICABLE

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70-7001/95-04	01	Failure to observe required work conditions as specified in procedure MAP-WC-001.	06/26/95	CLOSED	NON-CITED VIOLATION	NA	3.7.2.1	MULTIPLE BUILDINGS
70-7001/95-04	02	Delayed notification of DOE concerning a potential USQ and preparation of safety documentation and changes to safety systems.	06/26/95	CLOSED	NON-CITED VIOLATION	NA	3.3.2.7	NOT APPLICABLE
70-7001/95-04	03	Inadequate program for detecting and preventing quality problems.	06/26/95	CLOSED	NON-CITED VIOLATION	NA	3.6.2.3	NOT APPLICABLE
70-7001/95-06	01	Failure to implement LCO within 1-hour of declaring the PGLD systems inoperable.	11/02/95	CLOSED	VIOLATION	III	3.3.2.1	MULTIPLE BUILDINGS
70-7001/95-06	02	Failure to properly post the radiological area to prevent employee exposure.	11/02/95	CLOSED	VIOLATION	II	3.8.2.10	
70-7001/95-06	03	Failure to maintain contamination controls and to properly conduct work activities in radiological areas.	11/02/95	CLOSED	VIOLATION	II	3.8.2.18	
70-7001/95-07	01	Failure to ensure that procedures adequately tested the autoclave containment valves for operability and adherence to design objectives.	10/26/95	CLOSED	VIOLATION	III	3.3.2.3	
70-7001/95-07	02	Failure to conform to conditions required by the LCO specified in the OSRs.	10/26/95	CLOSED	VIOLATION	III	3.3.2.1	
70-7001/95-08	01	Failure to develop, use and maintain documentation to prescribe processes, specify requirements, and establish designs for the UF6 release detection system.	01/24/96	CLOSED	VIOLATION	III	3.6.2.4	NOT APPLICABLE
70-7001/95-08	02	Failure to implement procedures to assure the safety and protection of personnel performing	01/24/96	CLOSED	VIOLATION	III	3.2.2.1	NOT APPLICABLE

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		cleaning activities in a compartment known to contain energized power sources.						
70-7001/95-08	03	Conduct of safety analysis for continuing operation of the feed autoclaves after recognition of an instrument loop error.	01/24/96	CLOSED	UNRESOLVED ITEM	NA		NOT APPLICABLE
70-7001/95-10	01	Failure to operate within operating bounds of OSRs.	03/12/96	CLOSED	VIOLATION	III	3.3.2.1	
70-7001/95-10	02	Failure to comply with operating bounds of the OSRs.	03/12/96	CLOSED	VIOLATION	III	3.3.2.1	
70-7001/95-13	01	Failure to observe operating bounds for safety systems and components as established by OSRs.	07/17/95	CLOSED	VIOLATION	III	3.3.2.1	NOT APPLICABLE
70-7001/95-13	02	Lack of specificity in the definition of indicators to be continuously monitored during cold feeding operations.	07/17/95	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE
70-7001/95-13	03	Implementation of a change in Authorization Basis without adequate USQD.	07/17/95	CLOSED	VIOLATION	III	3.3.2.6	NOT APPLICABLE
70-7001/95-13	04	Adequacy of UF6 cold feed performance based training.	07/17/95	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE
70-7001/95-13	05	QA/QC activities in relation to non-safety related systems.	07/17/95	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE
70-7001/95-13	06	Failure to incorporate procedure changes into the body of the procedure.	07/17/95	CLOSED	NON-CITED VIOLATION	NA	3.2.2.1	NOT APPLICABLE
70-7001/95-13	07	Incomplete implementation of emergency facilities and equipment adequate to support emergency response.	07/17/95	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE

INSPECTION FOLLOWUP SYSTEM - ITEMS SUMMARY REPORT
PADUCAH GASEOUS DIFFUSION PLANT
AS OF 04/10/97

ATTACHMENT E

REPORT NUMBER	ITEM NUMBER	SUBJECT	ISSUED	STATUS SCHEDULE FOLLOWUP	CATEGORY	SEVERITY LEVEL	ROA RQMT	BUILDING
70-7001/95-13	08	Media release approval process.	07/17/95	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE
70-7001/95-16	01	Failure to take effective corrective action for PR-CO-95-1036.	01/19/96	CLOSED	VIOLATION	III	3.6.2.3	
70-7001/95-16	02	Inadequate fissile material storage design control.	01/19/96	CLOSED	NON-CITED VIOLATION	NA	3.9.2.3	NOT APPLICABLE
70-7001/95-16	03	Inadequate fissile material labeling and area postings.	01/19/96	CLOSED	NON-CITED VIOLATION	NA	3.9.2.5	NOT APPLICABLE
70-7001/95-16	04	Storage of equipment containing uranium with isotopic enrichments in excess of 2.0 wt.%, without an approved NCSA.	01/19/96	OPEN 12/18/95	VIOLATION	III	3.3.2.1	
70-7001/96-01	01	Failure to observe operating bounds established by OSRs.	03/18/96	CLOSED	VIOLATION	III	3.3.2.1	NOT APPLICABLE
70-7001/96-01	02	Failure to follow procedures.	03/18/96	CLOSED	VIOLATION	III	3.2.2.1	NOT APPLICABLE
70-7001/96-02	01	Review of GSA waste container inspection sheets to establish proper use of area.	04/18/96	CLOSED	UNRESOLVED ITEM	NA		
70-7001/96-03	01	Failure to maintain commitment tracking in accordance with procedure UE2-MC-C11031.	07/18/96	CLOSED	NON-CITED VIOLATION	III	3.2.2.4	NOT APPLICABLE
70-7001/96-03	02	Failure to follow procedures.	07/18/96	CLOSED	VIOLATION	III	3.2.2.1	NOT APPLICABLE
70-7001/96-03	03	Failure to assess plant operations and personnel performance.	07/18/96	CLOSED	VIOLATION	III	3.3.2.4	NOT APPLICABLE

INSPECTION FOLLOWUP SYSTEM - ITEMS SUMMARY REPORT
PADUCAH GASEOUS DIFFUSION PLANT
AS OF 04/10/97

ATTACHMENT E

REPORT NUMBER	ITEM NUMBER	SUBJECT	ISSUED	STATUS SCHEDULE FOLLOWUP	CATEGORY	SEVERITY LEVEL	ROA RQMT	BUILDING
70-7001/96-03	04	Failure to account for nuclear material in accordance with the MC&A plan.	07/18/96	CLOSED	VIOLATION	III	3.12.2.2	
70-7001/96-04	01	Failure to maintain an operating record-keeping system for waste generation and disposal.	09/05/96	CLOSED	VIOLATION	III	3.16.2.5	
70-7001/96-04	02	Failure to observe operating bounds for safety systems and components as established by OSRs.	09/05/96	CLOSED	VIOLATION	III	3.3.2.1	
70-7001/96-04	03	Failure to follow procedures.	09/05/96	CLOSED	VIOLATION	III	3.2.2.1	
70-7001/96-04	04	Failure to ensure that a change to the Authorization Basis received DOE review and approval prior to implementation.	09/05/96	WITHDR	VIOLATION	III	3.3.2.6	
70-7001/96-04	05	Failure to report occurrence to DOE within the required 4-hour time frame.	09/05/96	CLOSED	VIOLATION	III	3.2.2.3	
70-7001/96-04	06	Failure to meet regulatory commitments to the Department of Energy (4 examples).	09/05/96	OPEN / /	DEVIATION	III		
70-7001/96-05	01	Late issuance of procedure CP4-SH-NS1102.	11/20/96	CLOSED	DEVIATION	NA		NOT APPLICABLE
70-7001/96-05	02	Failure to observe operating bounds as established by OSRs.	11/20/96	CLOSED	VIOLATION	III	3.3.2.1	NOT APPLICABLE
70-7001/96-05	03	Improper packaging, labeling and placarding of radioactive material shipments.	11/20/96	CLOSED	NON-CITED VIOLATION	NA	3.14.2.1	NOT APPLICABLE
70-7001/96-05	04	Failure to develop and follow procedures.	11/20/96	OPEN / /	VIOLATION	III	3.2.2.1	NOT APPLICABLE

INSPECTION FOLLOWUP SYSTEM - ITEMS SUMMARY REPORT
PADUCAH GASEOUS DIFFUSION PLANT
AS OF 04/10/97

ATTACHMENT E

REPORT NUMBER	ITEM NUMBER	SUBJECT	ISSUED	STATUS SCHEDULE FOLLOWUP	CATEGORY	SEVERITY LEVEL	ROA RQMT	BUILDING
70-7001/96-06	01.	Failure to observe operating bounds of the OSRs.	12/06/96	OPEN / /	VIOLATION	III	3.3.2.1	
70-7001/96-07	01	Failure to adhere to OSRs (6 examples).	12/24/96	OPEN / /	VIOLATION	III	3.3.2.1	NOT APPLICABLE
70-7001/96-07	02	Failure to ensure that change to authorization basis is not implemented without prior DOE approval.	12/24/96	CLOSED	NON-CITED VIOLATION	NA	3.3.2.6	
70-7001/96-07	03	Failure to meet commitments in 2/23/96 and 5/16/94 letters.	12/24/97	OPEN / /	DEVIATION	NA		NOT APPLICABLE
70-7001/96-07	04	Failure to observe OSRs.	12/24/96	OPEN / /	VIOLATION	III	3.3.2.1	NOT APPLICABLE
70-7001/96-07	05	Failure to observe OSRs.	12/24/96	OPEN / /	VIOLATION	III	3.3.2.1	NOT APPLICABLE
70-7001/96-08	01	Failure to adhere to OSRs - 5 examples.	/ /	OPEN / /	VIOLATION	III	3.3.2.1	
70-7001/97-01	01	Failure to adhere to OSRs.	02/10/97	OPEN / /	VIOLATION	III	3.3.2.1	
70-7001/97-02	01	Implementation of LCO's	/ /	OPEN / /	UNRESOLVED ITEM	NA	3.3.2.1	
70-7001/97-02	02	Breakdown of double contingency principle implementation.	/ /	OPEN / /	UNRESOLVED ITEM	NA	3.9.2.3	NOT APPLICABLE

STATUS OF DOE ISA FINDINGS

USEC RESOLUTION STATUS TO DOE'S INDEPENDENT SELF ASSESSMENT (ISA)
(DOE ISA was conducted at Paducah during the Period November 30 through December 17, 1993)

ISA Concern No.	Issue Description	Equiv. ROA Requirement	Status	USEC Corrective Action Taken	SSR Evaluation
PD 1.1	Site job descriptions are not current for all managers and supervisors below the division manager level in that they do not reflect all of the latest changes in organizational structure and they do not uniformly include the safety element responsibilities assigned to the position.	3.1.2.1	Closed	A UE procedure defining authority, responsibility and accountability has been written. When approved and issued this procedure will ensure position descriptions, roles and responsibilities are documented. (10/31/94)* Site job descriptions for managers and supervisors were completed on 10/25/94.	This issue was identified as IFI 70-7001/94-16-01 and closed in DOE SSR IR 70-7001/96-03. The issue was linked to the closure of CPI No. 19, "Mg'mt Controls" POA No. 2.
PD 2.1	DOE oversight audits of the Paducah Gaseous Diffusion Plant have become excessively burdensome to the Paducah Martin Marietta Utility Services (MMUS) organization, and have the potential of limiting the resources that MMUS management can allocate to nuclear safety assurance and to site safeguards and security.	No applicable ROA IR	Closed	No action will be taken by MMUS or USEC to address this issue.	
PD 2.2	The records management system for creating, collecting, maintaining, and disposing of records relating to nuclear safety and to safeguards and security at the Paducah Gaseous Diffusion Plant does not meet current DOE Requirements nor those expected to be imposed by the NRC when it assumes oversight responsibilities.	3.2.2.5	Closed	A records management upgrade program has been defined and submitted for funding and will be implemented. This issue is address in UC94A0079/UC94I0982.	This issue was identified as NCV70-7001/94-16-05 and closed in DOE SSR IR 70-7001/96-03. The issue was linked to the closure of CPI No. 26, "Records Mg'mt and Doc. Ctrl", POA No. 1
PD 3.1	Some operational safety requirements are vague or undefined, and some are not included in the definition of the safe envelope of operation.	3.3.2.1	Closed	Revise OSR in question and incorporate improvements in TSR submit revised OSR and TSR to NRC for approval as part of application for certification. (04/15/95)* OSR revision s were completed 05/01/95.	This issue was linked to the closure of CPI No. 1, "Transition from DOE regulation to NRC regulation.

STATUS OF DOE ISA FINDINGS

USEC RESOLUTION STATUS TO DOE'S INDEPENDENT SELF ASSESSMENT (ISA)
(DOE ISA was conducted at Paducah during the Period November 30 through December 17, 1993)

ISA Concern No.	Issue Description	Equiv. ROA Requirement	Status	USEC Corrective Action Taken	SSR Evaluation
PD 3.2	The use of non-direct reading instruments increases the chance for error in recording important operating parameters.	3.3.2.4	Closed	A statement will be added to CM-1 to clarify methods to be used for making conversions (04/04/94)* Revision was completed on 07/20/94.	
PD 4.1	A unified, comprehensive configuration management system is not in place at the gaseous diffusion plants to assure control of all needed nuclear-safety-related items.	3.4.2.1	Closed	A corrective action plan will not be written for this issue since an action to complete implementation of a formal configuration management program exists under Finding TS.3-2 (UC90I0779) of the Tiger Team Assessment.	This issue was identified as NOV 70-7001/94-18-01 and closed in DOE SSR IR 70-7001/96-04 by relating the closure to DOE CPI Issue No. 21, "Plant Changes and CM. A commitment was made in the application for certification in response to 10 CFR 76.68 to use a plant configuration control program to control changes and maintain the plant's configuration.
PD 4.2	Some aspects of the configuration management system associated with procedures, engineering data sheets, segregated storage, physical control, and traceability of safety systems/safety system components have not been fully implemented.	3.4.2.1	Closed	A corrective action plan will not be written for this issue since an action to complete implementation of a formal configuration management program exists under Finding TS.3-2 (UC90I0779) of the Tiger Team Assessment.	This issue was identified as IFI 70-7001/94-18-02 which was linked to the closure of NOV 70-7001/94-18-01 in DOE SSR IR 70-7001/96-04

STATUS OF DOE ISA FINDINGS

USEC RESOLUTION STATUS TO DOE'S INDEPENDENT SELF ASSESSMENT (ISA)
(DOE ISA was conducted at Paducah during the Period November 30 through December 17, 1993)

ISA Concern No.	Issue Description	Equiv. ROA Requirement	Status	USEC Corrective Action Taken	SSR Evaluation
PD 4.3	An assessment of the present safety system/safety system component storage area, with respect to accidents involving corrosive material hazards or vehicular hazards, has not been performed.	3.6.2.7	Closed	This issue is an asset protection issue with no nuclear safety significance. Due to the low PEG score and low probability of this type of event, no action will be taken on this issue.	This issue was identified as a failure to meet material control requirements of NQA-1 in Internal Audit No. KP-PC-95-R111, Item F-2. It also was IFI 70-7001/94-16-06 and closed in DOE SSR IR 70-7001/96-03 by relating the closure to DOE CPI Issue No. 19, "Mg'mt Controls," and Issue No. 29, "QAP Implementation," and administratively closed. The requirement for a quality assurance program includes the control of purchased parts from receipt inspection, storage, and withdraw from storage for installation. Section 2.9, "Control Of Items" of Vol. 4, Quality Assurance Appendix.
PD 4.4	There is no written requirement that revised engineering service orders be reviewed and approved by the Safety Analysis Section.	3.4.2.1	Closed	A requirement that revised Engineering Service Orders (ESO) be reviewed and approved by the Safety Analysis Section will be included in revisions to procedures UE2-EN-GE1001 and UE2-EN-GE1003. (07/01/94)* Action completed on 06/02/94	This issue was identified as NOV 70-7001/94-18-01 and linked to DOE CPI Issue No. 21 "Plt Changes and CM" and administratively closed in DOE SSR IR 70-7001/96-03. Internal Audit Report No. KP-EG-95-R105 identified design control noncompliance and PR-PAD-95-968, 969, and 970 were issued.

STATUS OF DOE ISA FINDINGS

USEC RESOLUTION STATUS TO DOE'S INDEPENDENT SELF ASSESSMENT (ISA)
(DOE ISA was conducted at Paducah during the Period November 30 through December 17, 1993)

ISA Concern No.	Issue Description	Equiv. ROA Requirement	Status	USEC Corrective Action Taken	SSR Evaluation
PD 4.5	Document control systems have not been implemented for engineering data sheets and safety system/safety system component lists.	3.4.2.1	Closed	A listing of all plant safety system components has been compiled through the CM program manager in the form of a data base. Actions to complete this issue, 1) Modify database elements for consistency with the PORTS database re SSCs, (05/15/94)* 2) Complete corrections of database, (08/15/94)* 3) Issue component listing as a controlled document. (09/15/94)* Action 1 was completed on 05/17/94, Action 2 on 08/15/94, and Action 3 on 09/15/94.	This issue was identified as NCV 70-7001/94-16-05 and linked to DOE CPI Issue No. 26 "Records Mg'mt and Doc. Ctrl." and administratively closed in DOE SSR IR 70-7001/96-03
PD 4.6	Document receipt files, confirming that document holders have incorporated revisions to the Final Safety Analysis Report, operational safety requirements, and Nuclear Criticality Safety Approvals, have not been kept current.	3.2.2.5	Closed	The document receipt files will be kept current in accordance with PGDP document control procedure, P-GP-86, for all controlled distribution changes from this date forward.	This issue was identified as NCV70-7001/94-16-05 and closed in DOE SSR IR 70-7001/96-03. The issue was linked to DOE CPI No. 26 "Records Mg'mt & Doc. Ctrl."
PD 4.7	Qualifications requirements for those performing unreviewed safety question determination screens have not been established.	3.5.2.5	Closed	USEC does not concur. The S&H Div. Does not feel that nay additional actions are necessary beyond what training is currently provided in accordance with P-ENG-4.	This issue was identified as IFI 70-7001/94-16-07 as a failure of line mgrs to identified training req'mts for personnel. This issue was linked to DOE CPI No. 24, "Systems Approach to Training," and closed in DOE SSR IR 70-7001/96-03. An expansion of the Nuclear Safety Upgrade Project included the addition of Systems approach to training for nuclear criticality safety engineers and specialists.

STATUS OF DOE ISA FINDINGS

USEC RESOLUTION STATUS TO DOE'S INDEPENDENT SELF ASSESSMENT (ISA)
(DOE ISA was conducted at Paducah during the Period November 30 through December 17, 1993)

ISA Concern No.	Issue Description	Equiv. ROA Requirement	Status	USEC Corrective Action Taken	SSR Evaluation
PD 6.1	The plan for independent assessments at the Paducah Gaseous Diffusion Plant does not include all elements of the Quality Assurance Plan and is not fully responsive to the plant requirements that assessment planning provide for adequate scope and flexibility.	3.6.2.9	Closed	The FY '95 schedule of independent assessments will contain the necessary assessments, both audits and surveillances necessary to address the req'ts of the ROA, UE-QPP and procedure UE3-MC-01001 "Adm of Audits. (09/30/94)*" This action was completed on 09/30/94.	This issue was identified as IFI 70-7001/94-16-06 as inability to implement QAP requirement of assessments. The issue was linked to DOE CPI No. 29, "QAP Implementation" and administratively closed in DOE SSR IR 70-7001/96-03.
PD 7.1	Line management does not ensure that items scheduled for calibration or maintenance receive the required preventive maintenance.	3.7.2.3	Closed	SPP-P-GP-14 is being revised to initiate a mechanism to assure new equipment is considered for PM. A list to Div. Mgrs of past due items is now sent.	The deficiencies of the Maintenance Program were documented in the DOE Compliance Plan as CPI No. 22, "Maintenance Program" addresses the MT&E and PM elements.
PD 8.1	Some elements of the Regulatory Oversight Agreement for radiation protection, such as contamination control, posting, and training, have not been effectively implemented at the Paducah Gaseous Diffusion Plant.	3.8.2.1	Closed	These area of non effective implementation will subjected to a procedures upgrade effort worked jointly between the HP units of each Plant. (04/15/94)* HP procedures were revised on 04/05/94.	This issue was comprehensively addressed in NOV 70-7001/95-06-03 and summarily closed in DOE SSR IR 70-7001/96-08. Additionally DOE CPI No. 9, "Radiation Protection Procedures" relates to actions required to support the elements of NOV 70-7001/95-06-03.
PD 9.1	Several of the nuclear criticality procedures already in place contain ambiguities and do not include all necessary requirements.	3.9.2.1	Closed	Procedures NS-NCS-1 and CP2-SH-NS1031 will be modified to implement ROA IRs 3.9.2.3, 3.9.2.9 and 3.9.1. (07/01/94)* Procedures revised on 06/25/94.	This issue was identified in Internal Audit No. KP-SB-94A081 as finding F-01 and closed in IRMS item UC-9410730. This issue was identified as IFI 70-7001/94-16-01 and closed in DOE SSR IR 70-7001/96-03 by relating the closure to DOE CPI No. 19 "Mg'mt. Controls."

STATUS OF DOE ISA FINDINGS

USEC RESOLUTION STATUS TO DOE'S INDEPENDENT SELF ASSESSMENT (ISA)
(DOE ISA was conducted at Paducah during the Period November 30 through December 17, 1993)

ISA Concern No.	Issue Description	Equiv. ROA Requirement	Status	USEC Corrective Action Taken	SSR Evaluation
PD 9.2	The annual Independent Health and Safety Audit Team does not always consist of members whose technical disciplines cover all of the technical fields required for performing a nuclear criticality safety review.		Closed	P-ESH-20, Rev. 1, Chg.. C states in Para. 5.11 that the MS&C Div. is responsible for insuring that an annual audit of the NCS Program is performed. This is a management oversight audit and does not require NCS expertise to assess the adequacy of the NCS Program. No further action is required in regard to this issue.	This issue is identified with DOE CPI No. 20, "Safety Committees". The PORC committee assumed responsibilities previously performed by the PGDP Health and Safety Review Committee.
PD 9.3	The consequences of the maximum credible fission yield in the event of a criticality accident should be re-evaluated in the Final Safety Analysis Report upgrade.	3.9.2.1	Closed	Deficiencies of analysis in the existing FSAR are being addressed by the Gaseous Diffusion Plant safety Analysis Report upgrade. No action is planned at this time.	
PD 10.1	A physical fitness program is not available nor is there a procedure for maintaining the physical fitness of the personnel who are part of the Fire Protection Shift Operations, as required by National Fire Protection Association 1500, Chapter 8, 1991 issue.	No ROA IR	Closed	NRPA 1500 is not a required standard in the ROA. No action is recommended or required at this time.	
PD 10.2	Selected recommendations important to the nuclear safety of the Paducah Gaseous Diffusion Plant that were developed by the Factory Mutual Corporation appraisal conducted from October 30 to November 4, from November 6 through 10, and from December 4 through 8, 1989, have not been closed.	Not an ROA IR	Closed	After the transition to USEC all outstanding recommendations except one were canceled since not required by the ROA. No further action required.	
PD 10.3	Neither United States Enrichment Corporation nor Martin Marietta Utility Services management has established a system for periodic review of exemptions to fire protection requirements.	3.10.2.12	Closed	Review of existing exemptions is not required by the ROA, nor was it previously required by DOE orders. No action is recommended or planned at this time.	This issue was identified as URI 70-7001/94-16-11 and closed in DOE SSR IR 70-7001/96-01. DOE CPI No. 17 includes provision to reflect all current facility conditions, i.e., changes to bldgs, hazards, and systems, in pre-fire plan updates.

STATUS OF DOE ISA FINDINGS

USEC RESOLUTION STATUS TO DOE'S INDEPENDENT SELF ASSESSMENT (ISA)
(DOE ISA was conducted at Paducah during the Period November 30 through December 17, 1993)

ISA Concern No.	Issue Description	Equiv. ROA Requirement	Status	USEC Corrective Action Taken	SSR Evaluation
PD 10.4	Martin Marietta Utility Services has no procedure for periodically testing the fire alarm receiving equipment in Building C-200.	3.10.2.3	Closed	Fire Services Dept. Will define the procedural change. P-ESH-163 will be modified to address periodical testing of fire alarm equipment in C-200. (08/31/94)* Procedure revised on 09/22/94.	This issue was identified as NOV 70-7001/94-16-09 and closed in DOE SSR IR 70-7001/95-16 by extension of procedure control to FPS. DOE CPI No. 16, "Fire Protection Procedures & HWP Program" requires FP procedure upgrade.
PD 12.1	The Paducah Gaseous Diffusion Plant vulnerability assessment does not consider the toxicological effects (which could be substantially greater than the radiological effects) of materials released by radiological sabotage events in the ranking of risks and priorities.	3.12.2.1	Closed	The ROA between DOE and USEC does not require the consideration of toxicological effects in vulnerability assessments. This issue will be addressed through a baseline assessment at PORTS.	
PD 13.1	The capability of all elements of the emergency response system to handle emergencies has not been demonstrated during previous emergency drills.	3.13.2.15	Closed	The Joint Information Center (JIC) at Paducah Community College has not been routinely activated in the Emergency Response. The JIC will be activated by pager/telephone call out. (09/15/94)* Action completed on 09/27/94.	The DOE CPI No. 33, "Training for Emergency Response Organization" incorporates provisions for table top drills, function drills, and exercises. Training is based on drills and exercises and deficiencies are addressed with additional training.
PD 14.1	The Paducah Gaseous Diffusion Plant management has not assigned overall responsibility and authority for packaging and transporting nuclear materials, and as cited in the ISA report, has not assured compliance with applicable regulations, the Regulatory Oversight Agreement, and plant procedures.	3.14.2.5	Closed	A Packaging and Transportation Specialist will be hired (05/31/94)* and the role and responsibilities for packaging and transporting nuclear materials will be defined. (10/31/94)* P&T Specialist hired on 05/31/94, roles & responsibilities issued on 10/31/94.	This issue was identified in IFI 70-7001/94-16-01 and closed in DOE SSR IR 70-7001/96-03 by relating the closure to DOE CPI No. 19, "Mg'mt Controls"

STATUS OF DOE ISA FINDINGS

USEC RESOLUTION STATUS TO DOE'S INDEPENDENT SELF ASSESSMENT (ISA)
(DOE ISA was conducted at Paducah during the Period November 30 through December 17, 1993)

ISA Concern No.	Issue Description	Equiv. ROA Requirement	Status	USEC Corrective Action Taken	SSR Evaluation
PD 14.2	The Paducah Gaseous Diffusion Plant training program for railroad inspection personnel and "DOT HAZMAT employees" does not meet the safety training requirements of 49 CFR 217.11 and 49 CFR 172.700, respectively, in that initial and periodic training of railroad personnel has not been established, and not all DOT-required training and certifications are complete.		Closed	49 CFR Part 209 APP A excludes all industrial track from Federal Railroad Administration compliance. PGDP does not plan to implement any 49 CFR requirements.	
PD 14.3	The Paducah Gaseous Diffusion Plant (PGDP) quality assurance program for packaging and transporting nuclear materials does not meet the requirements of the Regulatory Oversight Agreement; nor are all current operations in compliance with the PGDP site Quality Assurance Plan.	3.6.2.1	Closed	The PGDP quality assurance program for packaging and transportation of nuclear materials meets all requirements of the ROA, as identified in section 3.14.3. These q/a req'ts are specified in procedures. The guiding procedure is CP2-SH-NS1036, "Shipment, Receipt, and Handling of UF ₆ Cylinders and /or Paducah Tiger Overpack shipments while they are at PORTS. Non-fissile radioactive materials packaging are shipped in Type A packaging which are specified in the DOE document WHC-EP-0588 or strong-tight packaging as required by the DOT. No action is needed.	A separate quality assurance program complying with 10 CFR 76.60(g) was committed to in the DOE CPI. The Federal Reg. cited requires P&T QAP to meet 10 CFR 71. Action submitted under separate cover from Application SAR.
PD 14.4	Martin Marietta Utility Services had not registered with DOT as a hazardous materials shipper and carrier, and not all training has been completed and documented as required by the Hazardous Materials Transportation Regulations, 49 CFR.	3.14.2.8	Closed	MMUS registered with the DOT on 12/10/93. Training and Qualification has records of completion of training required by 49 CFR. No further action required.	

STATUS OF DOE ISA FINDINGS

USEC RESOLUTION STATUS TO DOE'S INDEPENDENT SELF ASSESSMENT (ISA)
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ISA Concern No.	Issue Description	Equiv. ROA Requirement	Status	USEC Corrective Action Taken	SSR Evaluation
PD 14.5	The Paducah Gaseous Diffusion Plant railroad is not in compliance with the requirements of the Federal Railroad Administration Regulations, 49 CFR 210 through 240.		VOID (Issue did not appear in final report)	Regulatory oversight of the GDPs is covered by DOE under the ROA. 10 CFR 71 does not apply to PGDP. No action is needed.	
PD 14.6	Some of the Paducah Gaseous Diffusion Plant operations for transporting nuclear materials are not always administratively controlled by procedures; nor are all operating procedures being subjected to the 3-year review, as required by Martin Marietta Utility Services policy. These deficiencies indicate that compliance with the Regulatory Oversight Agreement is not assured.	3.2.2.1	Closed	Cascade Operations is aware that several operating procedures have not been subjected to the 3-year review cycle. These procedures are being revised and reformatted on a priority basis, as allowed in SPP-P-GP-1, Section 2.0 and Section 6.1.1. (10/31/94)* Procedures CM-19 and CM-26 will be revised and reformatted. The marked-up copy of CM-21 will be replaced. (05/31/94)* Procedures were revised on 12/30/94, and CM-21 replaced by a clean copy on 05/31/94.	This issue was identified as NCV 70-7001/94-16-02 and closed in DOE SSR IR 70-7001/96-03 by linking the closure to DOE CPI No. 19, "Mg'mt Controls."
PD 15.1	Modifying existing Paducah Gaseous Diffusion Plant procedures to assure verbatim compliance with Implementation Requirement 3.15.2.6 of the Regulatory Oversight Agreement between DOE and the United States Enrichment Corporation could drastically affect the control and operation of the cascade as well as generate costly delays in the handling of all environmental samples.	3.15.2.6	Closed	PGDP will continue to analyze samples as in the past. Proposed ROA changes will be made to USEC in regard to the handling of all environmental samples. Action completed on 04/28/94.	
PD 16.1	A potential conflict of interest exists due to the requirement in the Regulatory Oversight Agreement for the United States Enrichment Corporation to audit DOE waste storage and disposal facilities.	3.16.2.6	Closed	A conflict of interest should not exist because the audit would be based on technical criteria that is clear. No further action is required.	

STATUS OF DOE ISA FINDINGS

USEC RESOLUTION STATUS TO DOE'S INDEPENDENT SELF ASSESSMENT (ISA)
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ISA Concern No.	Issue Description	Equiv. ROA Requirement	Status	USEC Corrective Action Taken	SSR Evaluation
PD 17.1	Martin Marietta Utility Services has not developed realistic schedules nor forecast resource requirements that integrate the NRC Certification Application Project and the Final Safety Analysis Report upgrade program and, therefore, has not demonstrated that the NRC certification application deadline will be met.		Closed	Challenging schedules have been developed, reviewed, and approved by USEC and MMUS management and consultants who are serving as subject matter experts. Periodic reviews are scheduled through the certification period to ensure deadlines are met.	
PD 18.1	The Paducah Gaseous Diffusion Plant Security Services Department does not have an effective program to overview plant operations for compliance with security requirements.	3.18.2.1	Closed	An assessment program has been established and assessments have been conducted commencing 1/1/94. A procedure to formalize program is under development. The procedure will be issued to formalize the program. (10/15/94)* Assessment program formalized on 07/18/94.	DOE SSR IR 70-7001/95-16 closed this issue by observance of the test. USEC developed a formal testing program for performance testing the security program, Testing plan CP4-SS-SP1155, Protective Force Performance Tests, dtd 9/95
PD 18.2	The Paducah Gaseous Diffusion Plant Operations Security Coordinator, by virtue of his position on the Operations Security (OPSEC) Steering Committee, is over viewing and approving his own OPSEC program activities.	3.1.2.1	Closed	The PGDP Operations Security Plan, KY/H-218 was revised in December, '93. The OPSEC coordinator is no longer a member of the OPSEC steering committee.	This issue was identified as IFI 70-7001/94-16-01 and closed in DOE SSR IR 70-7001/96-03. The issue was linked to the closure of CPI No. 19, "Mg'mt Controls" POA No. 2.

(*) - Represents internal USEC Memorandum (dated 05/31/94) commitments made to complete the ISA actions. Although these dates were not formally committed to DOE, USEC/MMUS intended to work towards completing the items as if they were commitments.

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PGDP INTERNAL APPRAISALS/AUDITS CONDUCTED AND RESULTS

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ROA RO	ROA IRs Evaluated	PGDP Appraisal No.	Appraisal Subject/ Appraisal Summary	Date Issued	Find No.	Finding Subject	Find Status	Comments
USEC Internal Appraisal/Audits Conducted in FY 1994								
3.1	3.1.2.1 3.1.2.2	3.1	<u>ORGANIZATION ROLES & RESPONSIBILITIES</u> The appraisal determined that both ROA Implementation Requirements were not being fully complied with .	2/14/94	F-01	Documentation of assignments, authorities, and duties is inaccurate with current position descriptions and plant procedure responsibilities.	Closed	Appraisal developed from Internal Audit No. KP-SB-94-A081, Finding No. F-01, against ROA IR 3.2.2.1 (IRMS Item No. UC-94I0730)
					F-02	Stop work authority is unclear in the responsibility delineated in the procedure	Closed	Appraisal developed from Internal Audit No. KP-SB-94-A081, Finding No. F-02, against ROA IR 3.2.2.2 (IRMS Item No. UC-94A0060)
3.2	3.2.2.1 3.2.2.5	3.2	<u>MANAGEMENT CONTROLS & OVERSIGHT</u> Nuclear safety, safeguards & security functions are not conducted in a controlled manner	3/30/94	F-01	Procedures are not written and reviewed in accordance with written requirements	Open	Appraisal developed from Internal Audit No. KP-SB-A083, (IRMS item no. UC-94I1014) Finding F-01 against ROA IR 3.2.2.1
					F-02	Plant emergency procedures are not conducted in accordance with plant requirements	Closed	The appraisal is based on Internal Audit No. KP-SB-A082, (IRMS item no. UC-94I1016) Finding F-01 against ROA IR 3.2.2.1
					F-01	PGDP H&S Review Committee does not do all its duties	Closed	The appraisal is based on Internal Audit No. KP-SB-A082, (IRMS item no. UC94I0974) Finding F-01 against Implementation Requirement 3.2.2.2
					F-01	Record management system is incomplete	Closed	Appraisal developed from Internal Audit No. KP-SB-A084, (IRMS item no. UC-94I0922) Finding F-01 against Implementation Requirement 3.2.2.5
3.3	3.3.2.1	KY/Q 206 Part 5	<u>OPERATIONS</u> The purpose of 3.3 is to ensure safe plant operations through the use of hazard analyses and safety reviews. In general PGDP is accomplishing this goal; however several identified deficiencies prevent PGDP from being in full compliance.	8/10/94	F-01	OSRs are not fully implemented	Closed	Appraisal developed from Internal Audit KP-SB-94 -A095. (IRMS item no. UC-94I1304)
					F-02	Management assessment of plant operations thru monitoring and plant tours is not performed	Closed	IRMS item no. UC-94I1305

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ROA RO	ROA IRs Evaluated	PGDP Appraisal No.	Appraisal Subject/ Appraisal Summary	Date Issued	Find No.	Finding Subject	Find Status	Comments
3.4	3.4.2.1-3 & 3.6.2.3	3.4	<u>ENGINEERING REVIEWS</u> PGDP Is not in compliance with implementation requirements 3.4.2.1. thru 3.4.2.3	12/22/93	None	A formal system does not exist for supplier evaluation and critical safety component use. (Issued to be cited in the report for ROA/OR Appraisal 3.6)	Issue to be placed in ROA 3.6	Appraisal developed from Internal Audit KP-SB-A077. In. Audit issue F-06 states "Satellite engineering groups are operating without adequate procedural controls."
3.5	3.5.2.1 3.5.2.2 3.5.2.3 3.5.2.4 3.5.2.5	3.5	<u>TRAINING AND QUALIFICATION</u> Audit determined adequate practices and programs are in place to support the ROA provisions, but PGDP is not in full compliance with ROA subject to correction of the performance based training deficiencies.	5/2/94	None	No findings identified	N/A	Appraisal developed from Internal Audit No. KP-SB-A087, (IRMS item no. UC94I0983), Plant training program requires upgrading per consensus of internal audit
3.6	3.6.2.1 through 3.6.2.9	KY/Q 206 Part 10	<u>QUALITY ASSURANCE</u> The QA program for PGDP (UE QPP, UEO-221,) is not complete thru implementation of operating - procedures.	10/31/94	None	Finding previously cited in Report 3.4 not present in 3.6 Appraisal.	N/A	The appraisal is based on Internal Audit No. KP-SB-94-A098. The appraisal determined that adequate practices are in place to assure an effective QAP at PGDP.
3.7	3.7.2.1 through 3.7.2.4	3.7	<u>MAINTENANCE</u> No findings base on evaluation presently complies with 3.7.2.1, 3.7.2.2, & 3.7.2.3. PGDP presently complies with 3.7.2.4, however, Finding F-01 & F-02 need to be resolved to prevent potential conditions adverse to quality.	5/24/94	F-01	Configuration Control program for safety systems is not place.	Closed	The appraisal is based on Internal Audit KP-SB-94-092, NCR-PAD- 94-183, Finding F-01 against Implementation Requirement 3.7.2.4
					F-02	Maintenance work control program is not insuring activities affecting quality are planned, controlled, and completed in accordance with documented instructions, procedures and dwgs.	Closed	The appraisal is based on Internal Audit No. KP-SB-94-092, UC-94-A0096, Finding F-02 against Implementation Requirement 3.7.2.4
3.8	3.8.2.1 through 3.8.2.23	3.8	<u>RADIATION PROTECTION PROGRAM/SYSTEMS/DESIGNS/PERMITS</u> Several identified deficiencies prevent the site from being in full compliance. No evidence safe operations of plant has been compromised	7/27/94	F-01	Site does not monitor breathing airborne radioactive material levels	Closed	The appraisal is based on Internal Audit No. KP-SB-94-A093, Finding F-01 against Implementation Requirement 3.8.2.14, (IRMS item no. UC-94I1386)
					F-02	Written personnel survey instructions posted on monitors are not controlled	Closed	Finding F-02 against Implementation Requirement 3.2.2.1, (IRMS item no. UC-94I1387)

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ROA RO	ROA IRs Evaluated	PGDP Appraisal No.	Appraisal Subject/ Appraisal Summary	Date Issued	Find No.	Finding Subject	Find Status	Comments
					F-03	Personnel Evaluation Criteria System (PECS) has been changed and alteration negates administration of HP Tech training effectiveness	Closed	Finding F-03 against Implementation Requirement 3.5.8.2, (IRMS item no. UC-9411388)
3.9	3.9.2.1 through 3.9.2.12	3.9	<u>NUCLEAR CRITICALITY SAFETY</u> Nuclear criticality safety is still evolving at PGDP. Significant progress in upgrading older NCSAs has been achieved.	10/22/93	F-01	CAAS test records and as-builts do not comply with P-ESH-84 and ANSI/ANS 8.3 1986.	Closed	Appraisal developed from Internal Audit No. KP-SB-94-A099, (IRMS item UC-93A-0065), Implementation Requirement 3.9.2.11, No Findings were contained in the Internal Audit Report.
					F-02	No documented evidence of surveillances of maintenance record on QA Surveillance List.	Closed	
					F-03	Annual surveillance for configuration control is not being conducted.	Closed	
					F-05	Completed test reports of CAAS periodic tests are not submitted to system owner.	Closed	
					F-06	Radiation Chemistry Lab personnel are not capable of interpreting Lab measurements.	Closed	Finding F-06 against Implementation Requirement 3.9.2.4, NCS training program
3.10	3.10.2.1 through 3.10.2.19	3.10	<u>FIRE PROTECTION</u> Operational area 3.1 requirements have been implemented. Evaluation of procedures, training and operational practices resulted in 2 findings.	3/4/94	F-01	Portable fire extinguishers in plant vehicles do not receive monthly inspections	Closed	Appraisal developed from Internal Audit No. KP-SB-A086, (IRMS item UC-94I0935), Finding F-01 against Implementation Requirement 3.10.2.16.
					F-02	Fire protection records, i.e., permits, inspections are not filled out in accordance with PGDP management requirements.	Closed	Implementation Requirement 3.2.2.5, (IRMS item UC-94I0937)
3.11	3.11.2.1 through 3.11.2.4	KY/Q 206 Part 7	<u>ENVIRONMENTAL PROTECTION PROGRAM</u> PGDP Environmental Protection Program in compliance with Implementation Requirement 3.11.2.4	9/30/94	None	No findings identified	N/A	Appraisal developed from Internal Audit No. KP-SB-94-A097.

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3.12	3.12.2.1 through 3.12.2.9	KY/Q 206 Part 1	<u>NUCLEAR MATERIAL SAFEGUARDS</u> Program is well defined, documented, structured, implemented and meets current requirements.	4/29/94	None	No findings identified	N/A	Appraisal developed from Internal Audit No. KP-SB-94-A091.
3.13	3.13.2.1 through 3.13.2.15	3.13	<u>EMERGENCY PREPAREDNESS</u> The audit determined that adequate practices and programs are in place to support the provision of the ROA.	4/22/94	None	No findings identified	N/A	Appraisal developed from Internal Audit No. KP-SB-94-A090
3.14	3.14.2.1 through 3.14.2.8	KY/Q 206 Part 9	<u>PACKAGING & TRANSPORTATION NUCLEAR MATERIALS</u> Program in compliance with Implementation Requirement 3.14. No weaknesses were found.	11/22/94	None	No findings identified	N/A	Appraisal developed from Internal Audit No. KP-SB-94-A100
3.15	3.15.2.1 through 3.15.2.6	KY/Q 206 Part 6	<u>SAMPLING & ANALYSIS</u> Program was found to be adequate and effective.	9/23/94	None	No findings identified	N/A	Appraisal developed from Internal Audit No. KP-SB-94-A096. Environmental Monitoring Program (EMP) is in need of extensive review /revision with clarification of responsibilities for MMUS and MMES.
3.16	3.16.2.1 through 3.16.2.6	KY/Q 206 Part 4	<u>WASTE MANAGEMENT PROGRAM</u> Administrative controls, personnel training, waste handling, and monitoring controls and practices are in place and effectively implemented.	8/3/94	None	No findings identified	N/A	Appraisal developed from Internal Audit No. KP-SB-94-A094
3.17	3.17.2.1 through 3.17.2.4	3.17	<u>ACCIDENT ANALYSIS</u> Program is effective in assessing hazards and identification of limits and controls to provide safe operations. The USQD program is very effective and widely accepted by line management. USQD program is successfully implemented.	11/23/94	F-01	Contrary to P-ENG-04, Rev. 1, Nuclear Safety Department is not approving drawings, data sheets, and inspection plans.	Closed	Finding F-01 against Implementation Requirement 3.17.2.2
					F-03	No assessment exists for impact of an external fire on PGDP.	Closed	Finding F-03 against Implementation Requirement 3.17.2.3
					F-04	Health and Safety Review Committee (H&SRC) lifetime records are not being stored in an acceptable manner.	Closed	Finding F-04 against Implementation Requirement 3.6.2.4

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ROA RO	ROA IRs Evaluated	PGDP Appraisal No.	Appraisal Subject/ Appraisal Summary	Date Issued	Find No.	Finding Subject	Find Status	Comments
					F-05	Business practices of H&SRC are not in conformance with plant requirements	Closed	Findings F-05 against Implementation Requirement 3.2.2.1
					F-06	Facility safety manager maintains a listing of personnel trained, qualified and authorized to perform PSEs or USQDs and approve Safety analysis designs.	Closed	Finding F-06 against Implementation Requirement 3.6.2.4
					F-07	Unapproved lesson plan used to train personnel to perform PSEs.	Closed	Finding F-07 against Implementation Requirement 3.6.2.2
3.18	3.18.2.1a-1g 3.18.2.2a-2j 3.18.2.3a-3g	3.18	<u>SECURITY</u> Only two findings were found in the appraisal and they do not reflect on the security program or present problems which might compromise safe operations.	12/22/94	F-01	PGDP does not perform tests to ensure that safeguards and security measures implemented meet established readability, operability and performance requirements	Closed	Finding F-01 against Implementation Requirement 3.18.2.1f
					F-02	Access control is not adequately proceduralized for subcontractors who have access to the site for more than 90 days.	Closed	Finding F-02 against Implementation Requirement 3.18.2.2e
3.19	3.19.2.1 & 3.19.2.2	3.19	<u>CHEMICAL SAFETY</u> The appraisal noted that only a portion of the program is effectively implemented.	11/22/94	F-1	An effective program has not been implemented to ensure that the levels of air contaminants within the plant are less than established standards of OSHA	Closed	Finding F-1 against Implementation Requirement 3.19.2.1 IRMS item UC-94A0015
					F-2	Programs that ensure proper storage of chemicals and hazardous materials have not been implemented, i.e., as related to personnel training and compiling inventory lists.	Closed	Finding F-2 against Implementation Requirement 3.19.2.2
					F-3	A designated smoking area is within 35 ft. buffer required for flammable storage area.	Closed	Finding F-3 against Implementation Requirement 3.19.2.2

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USEC Internal Appraisal/Audits Conducted in FY 1995								
3.2	3.2.2.1 & 3.2.2.5	KP-TO-95-R110 KY/QA 209 Part 15	<u>DOCUMENT CONTROL</u> The records management and document control program is not in compliance with ROA, NQA-1, & UEO-221.	9/26/95	F-1	As documented, PGDP is not in compliance with the ROA requirements for document control and records management.	Closed	PGDP will remain noncompliant at the completion of the project as currently planned
3.3	3.3.2.1	KY/Q 209 Part 9	<u>OPERATIONS</u> Administrative controls are in place for managerial control and oversight system. Implementation requirements 3.3.2.1 and 3.3.2.5 are in place however field observations do not suggest program is effective.	5/31/95	F-01	No integrated work control system to effectively plan, schedule, control test, accept work performed.	Closed	PR-PAD-95-0862
	3.3.2.1				F-02	Management expectations are not clearly communicated on the conduct of operations.	Closed	PR-PAD-95-0863
	3.3.2.2				F-03	Cascade operators attentiveness, knowledge and formality are inconsistent with management expectations.	Closed	PR-PAD-95-0864
	3.3.2.4				F-04	Management By Walking Around program is not effective in correcting problems or preventing recurrences	Closed	PR-PAD-95-0865
	3.3.2.3				F-05	Operational status of equipment is not well defined.	Closed	PR-PAD-95-0867
3.4 & 3.17	3.4.2.1 3.4.2.2 3.3.2.6 3.9.2.3 3.17.2.4	KP-EG-95-R105 KY/Q - 209 Part 10	<u>DESIGN CONTROL</u> This audit used criteria utilized by the Nuclear Regulatory Commission to evaluate an organization's design control methods. Using these criteria PGDP's design control program was judged to not be considered ready for NRC scrutiny.	6/20/95	F-01	The rigor of implementation of design control is not currently sufficient to ensure consistent control of drawings, calculations and analyses and design interfaces.	Closed	Three problem reports were issued, PR-PAD-95-968, 969, and 970 as a result of the audit.
3.5	3.5.2.1 through 3.5.2.7	KP-TR-95-R106 KY/Q 209 Part 11	<u>TRAINING & QUALIFICATION</u> Training module development is consistent with stated procedures. Inconsistencies have occurred in tracking training module changes and define reference documents. Test question construction is a concern.	6/26/95	F-01	The site is not conducting documented post-training/qualification evaluations of employee performance to evaluate and revise approved training programs	Open	PR-QA-95-0745, Identified as finding F-02 in the audit report KP-TR-95-R106

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ROA RO	ROA IRs Evaluated	PGDP Appraisal No.	Appraisal Subject/ Appraisal Summary	Date Issued	Find No.	Finding Subject	Find Status	Comments
					F-02	Document control of training material is weak from the perspective of identifying the current approved copy of the training material.	Closed	PR-QA-95-0746, Identified as finding F-03 in the audit report KP-TR-95-R106
					F-03	Training Development and Administrative Guides (TDAG) are not written to a consistent level of detail that captures all training program requirements to facilitate effective program development and qualification tracking.	Open	PR-QA-95-1836, Identified as finding S-1 in the audit report KP-TR-95-R106
					F-04	Certification of qualification for personnel working under specific qualification guidelines have not been completed to demonstrate that qualification training has been met.	Open	PR-QA-95-1837, The problem reports have been combined into PR-QA-95-1181 which evaluated to be a significant condition adverse to quality (SCAQ) which is open .
3.4 3.6	3.4.2.1 & 3.6.2.7	KP-PC-95-R111 KY/QA 209 Part 16	<u>PROCUREMENT AND MATERIAL CONTROL</u> Procurement and material control programs fail to comply with UE QPP.	9/14/95	F-1	Procurement procedures and practices fail to meet NQA-1	Partial	PR-PAD-95-3565
					F-2	Material control procedures fail to meet NQA-1	Open	PR-PAD-95-3563
3.7	3.7.2.1 through 3.7.2.4	KP-GP-95-R109 KY/Q 209 Part 13	<u>MAINTENANCE</u> The verification of the effectiveness of the maintenance program and preventive maintenance activities are deficient in administration controls.	8/31/95	F-7	Equipment important to support the Security Program is not defined for the purposes of preventive and corrective maintenance.	Closed	Finding F-7 against Implementation Requirement 3.7.2.1 and 3.7.2.2, An additional 6 findings relative to maintenance program implementation reported.
3.8	3.8.2.1 through 3.8.2.20	KP- RP-95-R107 KY/Q 209 Part 12	<u>RADIATION PROTECTION</u> The Radiation Protection program is not effectively implemented at the working level	7/25/95	None	No findings identified	N/A	In view of the previous problem report, no new findings were submitted.
3.9	3.9.2.1 - 3.9.2.12	KP-NS-95-R113 KY/Q 209 Part 19	<u>NUCLEAR CRITICALITY SAFETY</u> Program is in compliance with section 3.9 of the ROA and implementation of approved NCSA.	11/13/95	None	No findings identified	N/A	

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3.10	3.10.2.1 through 3.10.2.19	KY/Q 209 Part 3	<u>FIRE PROTECTION</u> MMUS has implemented the fire protection requirements defined in Operational Requirement 3.10. Evaluation of procedures, training, and operational practices resulted in 3 areas of noncompliance. All three areas were previously identified as projects in the Nuclear Safety Upgrade Program.	1/31/95	None	No findings identified	N/A	Noncompliances concern reliability of fire pumps in C-361, additional manual fire suppression equipment and reliability of plant fire alarm system.
3.11	3.11.2.1 3.11.2.2 3.11.2.3 3.11.2.4	KY/Q 209 Part 7	<u>ENVIRONMENTAL PROTECTION</u> The program for monitoring effluences released to the environment is functioning effectively. Evaluation indicates that PGDP emissions do not exceed any DOE or EPA requirements. The adequacy of the EMP with regard to protection of the health and safety of the general public from radioactive effluences is considered adequate.	3/28/95	None	No findings identified	N/A	
3.12	3.12.2.1 through 3.12.2.9	KP-SS-95-R108 KY/Q 209 Part 14	<u>NUCLEAR MATERIALS AND SAFEGUARDS</u> Program is considered to be incomplete and inconsistent in the implementation of policies and procedures.	8/21/95	F-1	Control, maintenance, and performance testing of mass measurement equipment is not in accordance with the requirements of KY/D 3899.	Closed	PR-QA-95-2229
					F-2	Nuclear materials control and accountability training program is not effective.	Closed	PR-QA-95-2230
					F-3	Tracking system for accounting for nuclear material is not in all cases able to account for material transferred internally.	Closed	PR-QA-95-2231
					F-4	subject matter classified		

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3.13	3.13.2.1 3.13.2.2 3.13.2.3 3.13.2.4 3.13.2.5 3.13.2.6	KY/Q 209 Part 4	<u>EMERGENCY PREPAREDNESS</u> Audit identified 4 areas not in compliance with Implementation requirements 3.13.2.2, 3.13.2.3, 3.13.2.9 and 3.13.2.14. The report identified no other findings and concludes that control systems are working.	2/28/95	None	No findings identified	N/A	Noncompliance with implementation of Hazards assessment, revision of the Emergency Plan Assessment of actual or potential consequences of an emergency and training of emergency squad personnel. Findings were previously reported in KP-SB-94-A090 Rev. 1 4/21/94 and are being tracked in PGDP BPS.
3.14	3.14.2.1 - 3.14.2.8	KP-NS-95-R112 KY/Q 209 Part 17	<u>PACKAGING AND TRANSPORTATION NUCLEAR MATERIAL</u> The audit disclosed some procedural deficiencies which did not constitute a noncompliance with the Implementation Requirement. The program is in compliance with Operational Requirement 3.14 and continues to improve although weaknesses are evident which need to be strengthened to be NRC ready.	10/13/95	F-1	Document to allow receipt authorization per 10 CFR 76.83.d.4 is required.	Closed	PR-QA-95-3253
					F-2	Tiger Overpack recertification has a discrepancy.	Closed	PR-QA-95-3360
					F-3	Bail lock fasteners on Tiger Overpack are in poor condition and non functional.	Closed	PR-QA-95-3254
					F-4	Fork lift truck was observed lifting materials in excess of the stated capacity.	Closed	PR-QA-95-3255
					F-5	Paducah Tiger Overpack Ball-Lock pins on rail shipment were damaged and non functional.	Closed	PR-QA-95-3567
3.15	3.15.2.1 3.15.2.2 3.15.2.3 3.15.2.4 3.15.2.5 3.15.2.6	KY/Q 209 Part 6	<u>SAMPLING & ANALYSIS</u> Control systems are in place to achieve an effective Sampling and Analysis Program. PGDP is in compliance with #.15 of the ROA.	4/28/95	None	No findings identified	N/A	
3.16	3.16.2.1 through 3.16.2.6	KY/Q 209 Part 8	<u>WASTE MANAGEMENT</u> PGDP Waste Management has continued to make changes to enhance compliance with the lease agreement. No noncompliances were identified within the scope of this appraisal and PGDP is in compliance with Operational Requirement 3.16	3/24/95	None	No findings identified	N/A	Appraisal developed from Audit KP-SB-94-A095

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3.18	3.18.2.1a-f 3.18.2.2a-j 3.18.2.3a-g	KY/Q 209 Part 5	<u>SECURITY</u> Seven of the implementation requirements of the Operational requirement 3.18 are not in compliance, 3.18.2.1d, 3.18.2.1e, 3.18.2.1f, 3.18.2.2h, 3.18.2.3d, 3.18.2.3e, and 3.18.2.3f. Deficient areas are in BPS and being tracked.	2/28/95	None	No findings identified	N/A	
3.19	3.19.2.1 3.19.2.2	KY/Q 209 Part 1	<u>CHEMICAL SAFETY</u> Issues identified in FY '94 Internal Assessment Program have been addressed with action plans. All actions are complete except one which will be completed in December, '94. All other issues related to Chemical Safety in the BPS are closed.	11/30/94	None	No findings identified	N/A	
USEC Internal Appraisal/Audits Conducted in FY 1996								
3.6 & 3.1	3.6.2.1 - 3.6.2.5 & 3.6.2.8 - 3.6.2.9 &3.1.2.1- 3.1.2.2	KP-US-95-R114	<u>QUALITY ASSURANCE</u> The quality assurance program is not implemented due to the lack of flow down of the UEO-221 requirements.	11/13/95	F-1	Quality assurance requirements have not been flowed down and made the program incomplete and the implementation ineffective.	Open	PR-QA-95-4068, The failure of the quality assurance program to be implemented was a lack of management involvement.
3.2	3.2.2.1 &3.2.2.5	KY/Q 210 Part 6	<u>RECORDS MANAGEMENT & DOCUMENT CONTROL/MANAGEMENT CONTROL & OVERSIGHT</u> Lack of awareness of understanding of program requirements, and practices employed are adequate to meet NQA-1.	4/2/96	F-1	Records management program is not complying with the procedure requirements. Functional organizations are not in compliance with the requirements of UE2-TO-RM1030	Closed	Three problem reports were generated to address the areas of concern. (PR-QA-96- 0787, 0867, 0868)
3.3	3.2.2.2 &3.2.2.3 3.3.2.1 - 3.3.2.5	KY / Q 210 Part 10	<u>OPERATIONS</u> Operations organization has completed many corrective actions. No new findings for ROA noncompliance were disclosed in the appraisal.	6/28/96	None	No findings identified	N/A	Finding F-04 from the KP-CO-95-R104 appraisal report continues to remain open.

USEC INTERNAL APPRAISAL FINDINGS STATUS REPORT

PGDP INTERNAL APPRAISALS/AUDITS CONDUCTED AND RESULTS

(Internal Appraisals Conducted and Reports Issued From July 1, 1993 Up Through March 2, 1997)

ROA RO	ROA IRs Evaluated	PGDP Appraisal No.	Appraisal Subject/ Appraisal Summary	Date Issued	Find No.	Finding Subject	Find Status	Comments
3.4 3.3 3.17	3.3.2.6, 3.4.2.1, 3.4.2.2, 3.4.2.3, 3.17.2.1 - 3.17.2.4	KP-TO-96-R123 KY / Q 210 Part 8	<u>DESIGN CONTROL</u> The programmatic concerns which resulted in the noncompliance with the ROA in the last audit have been corrected. The audit addressed Operations, Engineering reviews, and Accident Analyses. Adequate program procedure and administrative controls have been developed and implemented and training has been conducted.	5/15/96	None	No findings identified	N/A	
3.5	3.5.2.1 - 3.5.2.7	KP-TR-96-R124 KY / Q 210 Part 4	<u>TRAINING & QUALIFICATIONS</u> PGDP is in noncompliance with ROA implementation requirements 3.5.2.1, 3.5.2.2, and 3.5.2.5. Little progress has been made since the last audit..	2/22/96	None	No findings identified	N/A	No new findings were developed on the ROA compliance as a result of this audit. Three additional problem reports were issued for ineffective corrective actions.
3.6 3.1	3.6.2.1 - 3.6.2.9	KP-QA-96-R129	<u>QUALITY ASSURANCE</u> This audit was performed by PPRC with the use of an outside consultant. Procedure adherence, understanding, adequacy are continuing problems for the quality assurance program.	1/13/96	None	No findings identified	N/A	No findings of actions in noncompliance with the ROA were noted although 6 recommendations were submitted for improved program effectiveness.
3.7	3.7.2.1 through 3.7.2.4	KP-GP-96-R127 KY/Q 210 Part 12	<u>MAINTENANCE</u> Maintenance program is meeting the intent of compliance with the ROA. PM and CM functions and implementation of the work control process have address the programmatic concerns of the previous audit.	9/12/96	None	No findings identified	N/A	The assessment of the specified ROA implementation requirements resulted in the conclusion that the PGDP is in compliance with the ROA.
3.8	3.8.2.1 - 3.8.2.29	KP-RP-96-R126 KY/Q 210 Part 11	<u>RADIATION PROTECTION</u> PGDP needs further work to be ready for regulation by the NRC. Radiation hazards are very low at PGDP. Weaknesses exist in program implementation and full compliance with Implementation requirement 3.8 has not been achieved.	7/31/96	F-1	A formal structured auditable ALARA program with established milestones to ensure exposures are maintained at ALARA levels.	Closed	ALARA committee has stopped operating since 1995. Finding F-1 against Implementation Requirement 3.8.2.6.
					F-2	Radiation area have not been prominently marked to preclude inadvertent entry.	Closed	No clear delineation of areas outside of bldgs. As to what is USEC leased or DOE retained property. Finding F-2 against Implementation Requirement 3.8.2.11

USEC INTERNAL APPRAISAL FINDINGS STATUS REPORT

PGDP INTERNAL APPRAISALS/AUDITS CONDUCTED AND RESULTS (Internal Appraisals Conducted and Reports Issued From July 1, 1993 Up Through March 2, 1997)

ROA RO	ROA IRs Evaluated	PGDP Appraisal No.	Appraisal Subject/ Appraisal Summary	Date Issued	Find No.	Finding Subject	Find Status	Comments
3.9	3.9.2.1 - 3.9.2.12	KP-NS-96-R130 KY/Q/ 210 Part 15	<u>NUCLEAR CRITICALITY</u> Organization procedures and controls are in place to comply with the ROA. Continued efforts are necessary in order to ensure compliance with implementation requirements are met	10/8/96	F-1	CAAS shall comply with ANSI 8.3 1986	Open	The CAAS system is deficient in compliance do to: a. Alarming response 0.5 sec. b. Sound level must be above bkgd noise c. Seismic response.
3.10	3.10.2.1 - 3.10.2.19	KY/Q 210 Part 2	<u>FIRE PROTECTION</u> No new instances of noncompliance with the ROA. Fire protection program is well established and mature and adequate with respect to its management, controlling procedures, tests, and drills. Deficiencies in the physical condition of the plant fire suppression and emergency service equipment are continuing to develop.	1/16/96	None	No findings identified	N/A	
3.11	3.11.2.1	KY/Q 210 Part 17	<u>ENVIRONMENTAL PROTECTION</u> The audit noted PGDP's program needs further work. The program does not address ALARA issues and gaseous and liquid effluent to be maintained in accordance with ALARA. Management systems and controls were verified as being in place and effectively implemented to ensure compliance.	4/10/96	None	No Findings in this area		
	3.11.2.2				F-1	A program shall provide for obtaining and maintain representative meteorological data	Open	Program does not have control of the obtaining of meteorological data through use of procedures
	3.11.2.3				F-3	Sampling and analysis activities must be performed to provide defensible data	Closed	Products samples obtained from C-310 have had the data biased by the sampler and poor sample handling practices.
	3.11.2.4				F-2	The environmental Protection program must satisfy the requirement to have a capability to establish the radiation dose to the public.	Open	The dose radiation is to be performed annually by assessing airborne radionuclide releases required by NESHAP (EPA). PGDP only has data for 1992. Data from subsequent years has not been available because of sampling equipment and codes.
3.12	3.12.2.1 - 3.12.2.9	KP-NS-96-R120 KY/Q 210 Part 5	<u>NUCLEAR MATERIAL SAFEGUARDS</u> Conclusion of this appraisal is that of the previous appraisal that the necessary procedures and controls are in place to comply with the ROA Operation Requirements. No new findings of noncompliance were included in the appraisal.	3/15/96	None	No findings identified	N/A	

USEC INTERNAL APPRAISAL FINDINGS STATUS REPORT

PGDP INTERNAL APPRAISALS/AUDITS CONDUCTED AND RESULTS

(Internal Appraisals Conducted and Reports Issued From July 1, 1993 Up Through March 2, 1997)

ROA RO	ROA IRs Evaluated	PGDP Appraisal No.	Appraisal Subject/ Appraisal Summary	Date Issued	Find No.	Finding Subject	Find Status	Comments
3.13	3.13.2.1 - 3.13.2.15	KY/Q 210 Part 3	<u>EMERGENCY PREPAREDNESS</u> The appraisal did not reveal any new deficiencies which would result in any findings contrary to the intent of the requirements of the ROA.	1/11/96	None	No findings identified	N/A	
3.14			<u>PACKAGING AND TRANSPORTATION</u>	11/19/96	None	No findings identified	N/A	Internal appraisals were not performed against the ROA for this Operational requirement by permission of DOE, internal audit report furnished to USEC and MMUS
3.15	3.15.2.1 - 3.15.2.6	KY/Q 210 Part 13	<u>SAMPLING AND ANALYSIS</u> No new findings from the previous appraisal relating to ROA implementation or sampling and analysis procedures and QA requirements were found. The various sampling and analysis programs show evidence of being adequately planned and specified and implemented through appropriate procedures.	9/6/96	None	No findings identified	N/A	
3.16	3.16.2.1 - 3.16.2.6	KP-WM-96-R124 KY/Q 210 Part 9	<u>WASTE MANAGEMENT</u> No new issues of noncompliance with the ROA were discovered during this appraisal. Waste accountability, waste generator knowledge and performance, personnel environmental safeguards and necessary procedure and controls are in place.	6/11/96				Attention to detail in completion of GSA and SAA inspection sheets is needed.
3.17	3.17.2.1 3.17.2.2 3.17.2.3 3.17.2.4	Refer to KY/Q 210 Part 8 DESIGN CONTROL	<u>ACCIDENT ANALYSIS</u> (See Appraisal KY/Q 210 Part 8 Design Control)	see ROA OR 3.4		Findings included in Design Control Appraisal on ROA OR3.4	N/A	Accident analysis was included in the appraisal of Design Control, ROA 3.4
3.18			<u>SECURITY</u>	12/3/96	None	No findings identified	N/A	Internal appraisals were not performed against the ROA for this Operational requirement by permission of DOE, internal audit report furnished to USEC and MMUS

USEC INTERNAL APPRAISAL FINDINGS STATUS REPORT

PGDP INTERNAL APPRAISALS/AUDITS CONDUCTED AND RESULTS

(Internal Appraisals Conducted and Reports Issued From July 1, 1993 Up Through March 2, 1997)

ROA RO	ROA IRs Evaluated	PGDP Appraisal No.	Appraisal Subject/ Appraisal Summary	Date Issued	Find No.	Finding Subject	Find Status	Comments
3.19	3.19.2.1 & 3.19.2.2	KP-CS-96-R116 KY/Q 210 Part 1	<u>CHEMICAL SAFETY</u> The Chemical safety and hazards communication program are effective. PGDP is not in compliance with Implementation Requirement 3.19.2.2	12/12/95	F - 1	Several flammable/combustible liquid storage cabinet discrepancies were identified.	Open	Condition and use of flammable/combustible liquid storage cabinets does not comply with 29 CFR 1910. PR-QA-95-4388. 6 additional PRs. were generated as a result of this appraisal.

ENFORCEMENT/MANAGEMENT CONFERENCE BACKGROUND

ROA Enforcement and Management Conferences Conducted as a Result of Degraded PGDP Activities
(July 1, 1993 through March 2, 1997)

ENFORCEMENT CONFERENCES

1) 1994 ENFORCEMENT CONFERENCE (EA-70-7001/94-006)

PURPOSE: *A number of violations had been identified at PGDP that were indicative of a breakdown in USEC Management Controls. DOE's position at this conference was that USECs lack of direct management control over its Contractor [Lockheed Martin Utility Services, Inc. (LMUS)] was a major factor contributing to certain of the programmatic breakdowns observed by DOE.*

TOPICAL AREAS DISCUSSED ON APRIL 28, 1994:

- Repetitive failure to follow radiation protection & operations procedures.
- Repetitive failure to appropriately categorize and to report occurrences to DOE in a timely manner.

RESULT OF CONFERENCE:

- USEC made specific commitments in 13 topical areas in a letter to DOE dated May 16, 1994.
 - One commitment was formally submitted to DOE as an example, but then subsequently dropped (Performance Indicators). This resulted in a Notice of Deviation being issued to USEC as 70-7001/96-07-03.
 - Two long-term commitments were subsequently relaxed to "as required" (Sweep Teams and Crew Briefings), and one commitment had all but stopped once the OSR/TSR Transitions began (Drills).

USEC COMMITMENTS MADE BY TOPICAL AREA (See DOE:ROA TI 3.2/01 for Details):

- Crew Briefings
- Drill Program
- Plant Management Communications
- Sweep Teams
- Increased Control of Operations with Potential for UF₆ Release

ENFORCEMENT/MANAGEMENT CONFERENCE BACKGROUND

ROA Enforcement and Management Conferences Conducted as a Result of Degraded PGDP Activities
(July 1, 1993 through March 2, 1997)

- Procedures Upgrade
- Formal USEC Policies
- Culture Change Initiative
- Performance Measures
- Improvement of Management Controls
- Clarification of Reporting Requirements
- Issue USEC Interpretation of Categorization and Reporting Criteria
- Lessons Learned Discussion for the PSSs

DOE TO NRC TRANSITION STATUS:

No NRC action required. All lessee commitments were verified as completed and closed in DOE Inspection Reports 70-7001/95-16 and 70-7001/96-08.

2) 1995 ENFORCEMENT CONFERENCE (70-7001/94-12)

PURPOSE: *A number of violations had occurred at PGDP and PORTS that was indicative of continued weakness in the area of procedure adherence. DOE's position at this conference was that USEC's previous identification and implementation of corrective actions to address the root cause of these issues had been inadequate to prevent their recurrence.*

TOPICAL AREAS DISCUSSED ON APRIL 26, 1995:

- Procedure adherence violations had been Identified at PGDP involving fire protection activities.
- Use of a straddle carrier to move a liquid UF₆ cylinder at PORTS.

RESULT OF CONFERENCE (PGDP):

- DOE issued a Notice of Violation (70-7001/94-12-01) on May 15, 1995 and imposed a \$5,000.00 civil penalty which was mitigated as a result of the lessee taking prompt corrective action in addressing the root causes of the violation, as well as self-reporting the events to DOE

ENFORCEMENT/MANAGEMENT CONFERENCE BACKGROUND

ROA Enforcement and Management Conferences Conducted as a Result of Degraded PGDP Activities
(July 1, 1993 through March 2, 1997)

- USEC responded to the NOV on June 14, 1995 and admitted to the NOV as stated. Seven (7) corrective actions were committed.

USEC COMMITMENTS MADE:

- Disciplinary action was taken involving those Fire Services Department (FSD) personnel involved in the reported events. This action was to be completed on December 29, 1994.
- FSD procedure on "Fire Protection Impairments" (CP2-SS-FS1032) was upgraded on December 30, 1994 to clarify the responsibilities of plant personnel using Fire Monitoring log sheets.
- FSD procedure CP4-SS-FS6117, "Fire Protection Impairment Permit," replaced FS-FPE-117 on February 28, 1995 to define the responsibilities and actions for FSD personnel regarding Fire Protection Impairment Permits.
- CASOPS personnel completed training on the new Fire Protection Impairment procedure on March 10, 1995.
- FSD procedure FS-ADM-007, "Protocols," was upgraded with CP4-SS-FS1107, "Protocols," on March 20, 1995 to address the plant administrative requirements involving control of instructional aids.
- CASOPS personnel were trained on the new Protocols procedure to ensure only current and approved operator aids (protocols) are utilized in the performance of their duties on March 23, 1995. Responsible FSD personnel completed their training on March 27, 1995.
- FSD procedure CP4-SS-FS6117 was to be revised by August 1, 1995 to require FSD to deliver all Fire Monitoring log sheets to the Building Supervisor prior to isolating a system.

DOE TO NRC TRANSITION STATUS:

No NRC action required. All lessee commitments were verified as completed and closed in DOE Inspection Report 70-7001/96-03.

ENFORCEMENT/MANAGEMENT CONFERENCE BACKGROUND

ROA Enforcement and Management Conferences Conducted as a Result of Degraded PGDP Activities
(July 1, 1993 through March 2, 1997)

MANAGEMENT CONFERENCES

1) 1996 MANAGEMENT CONFERENCE (70-7003/96-001)

PURPOSE: *To discuss USEC apparent failures to improve both its operational management controls at the GDPs and meet its commitments to improve specific programs within its management controls.*

TOPICAL AREAS DISCUSSED ON MAY 9, 1996:

- USEC assessment and status of its management controls established to assure safe operation of the GDPs.
- USEC description of specific improvements made to strengthen its management controls associated with procedural controls, corrective action recurrence controls, and preservation of the GDP Authorization Basis documents.

RESULT OF CONFERENCE:

- USEC made 5 commitments in the area of procedural controls, 6 in the area of corrective actions, and 4 in the area of Authorization Basis document maintenance in a letter to DOE dated June 14, 1996.

USEC COMMITMENTS MADE BY TOPICAL AREA:

a) **PROCEDURE ADEQUACY AND USE**

- (1) A procedural process for identifying regulatory commitments and to ensure they are appropriately incorporated into policies and procedures was to be established and implemented by June 7, 1996.
- (2) Continued procedures upgrades are to be completed as defined in the Procedures Upgrade Program (PUP) consistent with the schedule identified in the DOE Compliance Plan.
- (3) Organizational roles and responsibilities are to be flowed-down to committed position descriptions as described in the DOE Compliance Plan.

ENFORCEMENT/MANAGEMENT CONFERENCE BACKGROUND

ROA Enforcement and Management Conferences Conducted as a Result of Degraded PGDP Activities (July 1, 1993 through March 2, 1997)

- (4) Near-term improvement initiatives were to be completed by December 31, 1996:
 - Train hourly operations and maintenance personnel on procedure use and adherence.
 - Train managers and others involved in the procedure process on procedure use, development, and control.
 - Reevaluate procedures during TSR flow-down for the proper use category.
 - Review the technical adequacy of all procedures past their periodic review dates.
- (5) USEC was to revise its QOOP (Quality of Operations Plan) initiative on Conduct of Operations by July 15, 1996.

b) CORRECTIVE ACTIONS

- (1) Where feasible, all procedures that constitute the corrective action process were to be revised and consolidated by August 31, 1996.
- (2) Select managers and other key individuals were to be trained in root cause analysis and corrective action plan (CAP) development by September 30, 1996.
- (3) Corrective action performance indicators were to be developed and provided to management starting August 1996.
- (4) The MAAT (PGDP) and CARB (PORTS) were to perform a review of all open SCAQ (Significant Conditions Adverse to Quality) CAPs by September 30, 1996. SCAQ CAPs were to be revised, as necessary, by the functional managers responsible for the CAPs by September 30, 1996.
- (5) Monthly surveillances of selected CAPs were to be conducted to monitor improvements in effectiveness beginning August 1996 and ending no earlier than January 1997.
- (6) Previously planned audits of the corrective action process were to be conducted to monitor the effectiveness of corrective action process improvements by October 1996.

c) MAINTENANCE OF AND ADHERENCE TO AUTHORIZATION BASIS

- (1) The procedural infrastructure in identifying and dispositioning "as-found" conditions were to be reviewed to develop appropriate changes by September 30, 1996.

ENFORCEMENT/MANAGEMENT CONFERENCE BACKGROUND

ROA Enforcement and Management Conferences Conducted as a Result of Degraded PGDP Activities (July 1, 1993 through March 2, 1997)

- (2) Procedures were to be revised and personnel responsible for dispositioning and reviewing as-found items were to be trained by September 30, 1996.
- (3) The as-found conditions identified through the SAR (Safety Analysis Report) preparations were to be dispositioned as described in USECs response to the DOE Order to Take Action at PORTS and the existing schedule identified in PGDPs Problem Report issued to document its NRC SAR to DOE FSAR differences.
- (4) Specific indicators to monitor compliance and performance trends associated with as found conditions were to be developed by July 31, 1996.

DOE TO NRC TRANSITION STATUS:

No NRC action required. All lessee commitments were verified as completed and closed in DOE Inspection Reports 70-7001/96-08 and 70-7001/97-02.

OPEN PGDP DOE COMPLIANCE PLAN OF ACTION ITEMS

DOE Compliance Plan (Rev. 4) Plan of Actions (POA) that Remain Open and Require NRC Closure
(Based on DOE CPI Verifications Completed as of February 7, 1997)

Compliance Plan Subject	Issue No.	Status	Total POAs	No. Closed	Specific Corrective Actions Remaining Open
Transition from DOE Regulation to NRC Regulation	1	Open	3	0	C01.01, C01.02, C01.03
Update the Application Safety Analysis Report	2	Open	11	1	C02.02, C02.03a, C02.03b, C02.03c, C02.04, C02.05a, C02.05b, C02.05c, C02.05d, C02.06
Autoclave Upgrades	3	Open	12	4	*C03.02, *C03.03, C03.04, C03.05, *C03.06, C03.07, C03.08, *C03.10a
C-360 Crane Upgrades	4	Closed	2	2	
Nuclear Criticality Safety Approval Documents	5	Open	4	3	C05.04
Nuclear Criticality Safety Approval Implementation	6	Open	1	0	*C06.01
Criticality Accident Alarm Coverage	7	Closed	1	1	
Exceptions for Criticality Accident Alarm System	8	Open	2	1	C08.02
Radiation Protection Procedures	9	Closed	2	2	
Posting of Radioactive Materials	10	Open	3	1	C01.01, C01.03
Radioactive Calibration Source Accuracy	11	Closed	2	2	
NVLAP Certification	12	Closed	1	1	
Fire Alarm System Reliability	13	Closed	1	1	
Fire Protection Water System Reliability	14	Open	2	1	C14.02
Fire Protection Equipment	15	Closed	1	1	
Fire Protection Procedures and Hot Work Permit Program	16	Open	3	2	C16.03
Fire Protection Pre-Fire Plans	17	Open	2	1	C17.02
Packaging and Transportation	18	Closed	1	1	
Management Controls	19	Open	3	0	C19.01, C19.02a, C19.02b
Safety Committees	20	Open	1	0	C20.01

OPEN PGDP DOE COMPLIANCE PLAN OF ACTION ITEMS

DOE Compliance Plan (Rev. 4) Plan of Actions (POA) that Remain Open and Require NRC Closure
(Based on DOE CPI Verifications Completed as of February 7, 1997)

Compliance Plan Subject	Issue No.	Status	Total POAs	No. Closed	Specific Corrective Actions Remaining Open
Plant Changes and Configuration Management	21	Open	16	7	C21.01b, C21.01c, C21.01d, C21.01e, C21.02c, C21.04c, C21.05a, C21.05b, C21.06
Maintenance Program	22	Open	19	6	C22.01, C22.03b, C22.03c, C22.04b, C22.04c, C22.05b, C22.05c, C22.06, C22.07b, C22.07c, C22.08b, C22.08c, C22.09
Operations Program	23	Open	3	0	C23.01, C23.02, C23.03
Systems Approach to Training	24	Open	5	1	C24.01, C24.03, C24.04, C24.05
Event Investigations and Reporting Program	25	Open	3	1	C25.01b, C25.01c
Records Management and Document Control Program	26	Open	16	9	C26.01a.4, C26.01b, C26.01c, C26.01d.2, C26.02a.4, C26.02a.5, C26.02b
Procedures Program	27	Open	11	4	C27.08, *C27.09b, C27.09c, C27.09d, C27.10, C27.11, C27.12
Q List	28	Deleted			
Quality Assurance Program Implementation	29	Open	4	2	C29.02b, C29.02c
Public Warning Sirens and Controls	30	Open	2	1	C30.01b
Public Address System	31	Open	1	0	C31.01
Emergency Plan Support Documents	32	Closed	1	1	
Training for Emergency Response Organization	33	Closed	1	1	
Quality Control Program for Low-Level Waste Disposal	34	Closed	1	1	
Depleted Uranium Management Plan	35	Open	4	3	C35.04
Seismic Capability of Buildings C-331 and C-335	36	Open	7	3	C36.01d, C36.02, *C36.03, C36.04
Environmental Trending Procedures	37	Open	1	0	C37.01
High-Volume Ambient Air Samplers	38	Open	2	1	C38.02
Decommissioning Funding Program	39	Open	1	0	C39.01
Chemical Safety Mechanical Integrity Program	40	Open	1	0	C40.01

OPEN PGDP DOE COMPLIANCE PLAN OF ACTION ITEMS

DOE Compliance Plan (Rev. 4) Plan of Actions (POA) that Remain Open and Require NRC Closure
(Based on DOE CPI Verifications Completed as of February 7, 1997)

Compliance Plan Subject	Issue No.	Status	Total POAs	No. Closed	Specific Corrective Actions Remaining Open
HEPA Filter Systems Testing	41	Open	3	1	C41.02a, C41.02b
Administrative Controls on Overtime	42	Open	4	1	C42.01a, C42.02a, C42.02b
DOE Chemical Safety and Third-Party Use of Hazardous Chemicals	43	Open	1	0	C43.01
Operational/Safety System Trip Redundancy	44	Open	1	0	C44.01
Codes and Standards	45	Closed	1	1	
Criticality Accident Alarm System - Horn Audibility	46	Open	1	0	C46.01
10 CFR 21 Implementing Procedures	47	Deleted			
Cascade Cell Trip Function Requirements	48	Closed	4	4	
UF ₆ Leak Detector Sensitivity Testing	49	Open	3	1	C49.01b, C49.01c
Criticality Accident Alarms for Nearby Buildings	50	Open	1	0	C50.01
Materials Control and Accountability Manuals and Procedures	A.1	Open	29	28	CA1.19
Measurement Systems	A.2	Open	4	1	*CA2.02, *CA2.03, CA2.04
Receipts Based on Measured Values	A.3	Closed	1	1	
Inventory Program for Uranium Holdup	A.4	Closed	3	3	
NMC&A Independent Assessments	A.5	Deleted			
Inventory of Depleted UF ₆	A.6	Deleted			
DOE Materials Stored in Leased Space	A.7	Open	2	1	*CA7.01
TOTALS			215	108	* Items identified as complete by the lessee, but found incomplete by the DOE Compliance Plan Inspection Team

OPEN PGDP DOE FSAR/SER ITEMS - LEASED SPACES

DOE Safety Evaluation Report (SER) Findings that are Open
[Issues that Require Resolution Prior to the next Annual DOE Safety Analysis Report (SAR) Update]

FSAR Chapter	DOE Comment No.	Description	Corrective Action Required	Resolution Dated	Status
3	C-3-EA-1	Potential for EG's to be exceeded	Commit to revise SAR	ASAP	
3	C-3-EA-3	Lack of chemical EG'S	Commit to revise SAR	ASAP	
3	C-3-EA-11	Key reference documents, e.g., PSOs, are not issued	Commit to revise SAR	ASAP	
3	C-3-EA-12	Dispersion models not empirically validated	Commit to revise SAR	ASAP	
3	C-3-EA-13	Inadequate justification of EBE for natural phenomena	Commit to revise SAR	ASAP	
3	C-3-EA-36 C-3-EA-54	Large fire event analysis discrepancies	Commit to revise SAR	ASAP	
3	C-3-EA-45 C-3-EA-51 C-3-EA-52	Cylinder or pigtail failure outside autoclave exceeds EG'S	Commit to revise SAR	ASAP	
3	C-3-EA-59	Hazardous chemical releases exceed ERPG-2 guidelines	Commit to revise SAR	ASAP	
3	C-3-EA-65	EG's could be exceeded during earthquake event	Commit to revise SAR	ASAP	
3	C-3-EA-67 C-3-EA-72	Controls for criticality accidents not identified	Commit to revise SAR	ASAP	
4	C-4-EA-17	Logic for reset switch is not adequate	Complete compliance Plan Issue 3 corrective actions	Per Compliance Plan	
6	C-6-EA-1	Criticality analysis is not complete	Commit to revise SAR	ASAP	
6	C-6-EA-13	Criticality-related TSRs are not identified	Commit to revise SAR	ASAP	
6	C-6-EA-14	Three operations do not meet double contingency	Commit to revise SAR	ASAP	
10	C-10-EA-1 C-10-EA-2 C-10-EA-3 C-10-EA-7 C-10-EA-33	Inadequate description of key features for initial testing program	Commit to revise SAR	ASAP	

OPEN PGDP DOE FSAR/SER ITEMS - LEASED SPACES

DOE Safety Evaluation Report (SER) Findings that are Open
[Issues that Require Resolution Prior to the next Annual DOE Safety Analysis Report (SAR) Update]

FSAR Chapter	DOE Comment No.	Description	Corrective Action Required	Resolution Dated	Status
10	C-10-EA-1 C-10-EA-2 C-10-EA-3 C-10-EA-13 C-10-EA-21 C-10-EA-34 C-10-EA-36	Inadequate description of key features for in-service surveillance program	Commit to revise SAR	ASAP	
10	C-10-EA-1 through C-10-EA-38	Inadequate description of key features for planned, preventive, and corrective maintenance programs	Commit to revise SAR	ASAP	
11	C-11-EA-18	Specific DOE exemption from permitted evacuation times should be referenced	Commit to revise SAR	ASAP	
12	C-12-EB-4	Feedback methodology not described for the procedures program	Commit to revise SAR	ASAP	
14	C-14-EB-3	Categorization of SCCs into Q, AQ, or NS QA categories not described	Commit to revise SAR	ASAP	
15	C-15-EB-22	No description of population evacuation times and routes	Commit to revise SAR	ASAP	
All	-----	Unresolved EB comments (5480.23 compliance issues)	Review comments and revise SAR as required	ASAP	

PENDING USEC/DOE PGDP TRANSITION ISSUES

DOE/USEC Shared Site Issues Requiring Formal Mechanisms for Interface and Control (Issues Remaining Unresolved)

Transition Topic	USEC/DOE Agreement	Planned Actions	Completion Status
Transition from OSRs to TSRs	<p>USEC/LMUS is converting OSRs into TSRs and will implement them in a phased manner prior to NRC assuming regulatory oversight at PGDP. DOE will evaluate and approve the TSR transition requests as they are received. Transition Requirements (TRS) may be added to modify the TSRs to keep the TSRs in compliance with the previous provisions of the OSRS. TRS are interim requirements and will be deleted after NRC assumes regulatory oversight at PGDP. The DOE SSRs will continue to provide DOE regulatory oversight of the OSRs/TSRs to USEC until March 3, 1997.</p> <p>For DOE Operations, DOE is required to revise/upgrade its existing OSRs or create TSRs to be consistent with 10 CFR 830.320. Procedures will have to be revised accordingly.</p>	<p>The following TSR issuances are contingent upon USEC resolving DOE review comments, and submitting packages of adequate detail and justification.</p> <ul style="list-style-type: none"> • Feed Facilities (C-333A and C-337A) • Cascade Operations (C-331, C-333, C-335, C-337) • Product and Tails Withdrawal (C-310, C-310A, C-315) • Sampling and Transfer (C-360) 	<p>The following actions have been completed:</p> <ul style="list-style-type: none"> • 08/21/96 (Rec'd), 09/04/96 (App'vd), 09/05/96 (Implemented) • 09/19/96 (Rec'd), 10/11/96 (R0), 10/22/96 (R1), 12/02/96 (R2 - App'vd), 01/17/97 (Implemented) • On Hold • 10/25/96 (Rec'd), 12/20/96 (App'vd)
FSAR Upgrade	<p>DOE will provide a detailed review of the new PGDP Safety Analysis Report (SAR) being prepared to replace the previously issued 1985 Final Safety Analysis Report (FSAR), as amended. DOE will review the new SAR to ensure it complies with DOE requirements for both the leased and non-leased portions of the facility. The review will be documented in a DOE Safety Evaluation Report (SER).</p> <p>DOE budgetary requirements remain open.</p>	<ul style="list-style-type: none"> • SAR • SER • SAR Submittal to USEC 	<ul style="list-style-type: none"> • LMES submitted upgraded SAR to DOE on 01/14/97. • SER issued on 02/03/97 as DOE/OR/02-1561/V1. Open Lease items can be found in Attachment M. • SAR submitted to USEC on 02/14/97.

PENDING USEC/DOE PGDP TRANSITION ISSUES

DOE/USEC Shared Site Issues Requiring Formal Mechanisms for Interface and Control (Issues Remaining Unresolved)

Transition Topic	USEC/DOE Agreement	Planned Actions	Completion Status
Usage of Common Areas	<p>The Lease Agreement between USEC and DOE establishes the leased and non-leased areas. Section 3.1 of the Agreement defines the lease of real property for each plant. Included with the leased areas are areas where both USEC and DOE activities are performed, and are known as "common areas."</p> <p>The Lease Agreement establishes that USEC's occupation and use shall include the use of easements, rights of way, appurtenances, utility lines, corridors, common walls, pipes, parking areas, service roads, railway lines, loading facilities, sidewalks, and avenues of ingress, egress, and access points. Similarly, DOE has access to the leased premises and the common areas. Additional clarification was necessary to ensure that there is no confusion regarding the appropriate regulation of work activities performed in the common areas.</p>	USEC and DOE are to negotiate the methodology for documenting the agreement reached.	Methodology to be identified by 03/03/97.
IAEA Agreement	DOE and USEC will cooperate with the NRC in the development, review, and revision of Subsidiary Agreements and Facility Attachments for DOE and USEC activities at Paducah which are applicable to the safeguards requirements of the International Atomic Energy Agency (IAEA).	DOE Headquarters is handling this matter. Ongoing meetings and discussions concerning IAEA are being held. DOE/ORO Security and Safeguards personnel are monitoring these meetings.	Ongoing
UCNI	DOE is developing guidelines with consultation and technical support from USEC for the identification of Unclassified Controlled Nuclear Information (UCNI) at Paducah. The guidelines developed from these meetings will be provided to the NRC.	DOE Headquarters is handling this matter. A policy is being formulated in the ongoing meetings and discussions. DOE/ORO Security and Safeguards personnel are monitoring these meetings.	Ongoing

PENDING USEC/DOE PGDP TRANSITION ISSUES

DOE/USEC Shared Site Issues Requiring Formal Mechanisms for Interface and Control (Issues Remaining Unresolved)

Transition Topic	USEC/DOE Agreement	Planned Actions	Completion Status
Liaison Activities with NRC	<p>Part of this activity was created as a result of the concurrent SAR evaluations being performed by both DOE and NRC. DOE of the LMES prepared Upgrade SAR (to DOE's 1985 FSAR, as amended), and NRC of the USEC submitted Application SAR. Communication must be established to ensure DOE's and NRC's conclusions regarding the adequacy of the final combined PGDP SAR are comparable.</p> <p>Additionally, the NRC Resident Inspectors and NRC Headquarters personnel responsible for the GDPs will need a contact point and resource regarding the DOE Regulatory Oversight activities which have taken place over the past three years.</p>	<p>SAR activities</p> <p>Contact resources</p>	<p>Completed 12/31/96</p> <p>Ongoing</p>
DOE Budget Liabilities	As the scopes and schedules for the interface topics are finalized, DOE budget liabilities will be identified. DOE cost reports are routinely reported to DOE upper management.	<p>Provide periodic cost validation reports to upper DOE Management:</p> <ul style="list-style-type: none"> • Monthly Progress Reports • Quarterly Summary Reports 	<p>Examples of the identified periodic cost reports, include:</p> <ul style="list-style-type: none"> • EF/M-20, <i>Cost Validation Progress Report</i>, dated 01/09/97 (e.g., Monthly Report). • EF/S-20, <i>Validation of Nuclear Safety Upgrade Costs Summary</i>, dated 01/15/97 (e.g., Quarterly Report).

PENDING USEC/DOE PGDP TRANSITION ISSUES

DOE/USEC Shared Site Issues Requiring Formal Mechanisms for Interface and Control (Issues Remaining Unresolved)

Transition Topic	USEC/DOE Agreement	Planned Actions	Completion Status
Storage of DOE Material in Leased Spaces	DOE and USEC have established an agreement to accommodate the storage of DOE materials in the cascade buildings at Paducah. The original plan was to leave the material in the leased spaces as provided in the Lease Agreement. Due to NRC concern over inventory and characterization issues, NRC has directed DOE that the material cannot be stored in the leased spaces. DOE/USEC established an agreement that defined the responsibilities and controls necessary to allow the material to remain in place, but in formerly leased areas and under DOE control.	<p>Formalize DOE/USEC Agreement via the following actions:</p> <ul style="list-style-type: none"> • Formalize DOE/USEC agreement. • Revise Exhibit A of the Lease Agreement • Issue implementing procedures. • Demarcate new DOE areas within the leased spaces. • Identify areas as DOE Material Storage Areas (DMSA). 	<p>The DOE/USEC agreement for the storage of DOE materials in formerly leased areas was signed on May 28, 1996.</p> <p>The change package to Exhibit A of the lease has been approved by DOE and USEC.</p> <p>LMUS issued UE2-EW-WM1030 on 11/30/96.</p> <p>LMUS demarcated the location and boundaries of DOE storage areas and returned the areas to DOE on 12/30/96.</p> <p>LMES is to issue a DOE Stored Material procedure by 03/01/97.</p> <p>LMUS is to complete DMSA activities as defined in the Lease Change Package by 03/03/97.</p>
Unresolved GDP Administrative Control Issues	<p>Negotiations are continuing between DOE and USEC involving the following issues:</p> <ul style="list-style-type: none"> • Safety Analysis Report Ownership and Maintenance • Configuration Management Ownership and Maintenance • DOE-Owned Privacy Records Storage, Control, and Access • Quality Assurance Plan Interface Requirements • Problem Reporting System Interface Requirements • Commitment Tracking/Corrective Action Interface Requirements • Dual Standards Exception Requests • Scheduling of Joint Activities for Emergency Management • USQD Program Endorsement and Requirements • Records Retention and Shared Reports • Document Control Interface Requirements 	All items are currently under review	<p>Submittal of the plan for completion of the Dual Standards issue was submitted to DOE on 01/31/97.</p> <p>All other items under review.</p>

OPEN PGDP DOE INSPECTION ITEMS

ROA Inspection Items that Remain Open and Cannot be Linked to Compliance Plan Issues
(Inspection Reports Issued Up to and Including 70-7001/97-02)

ROA Inspection Item	Type	Inspection Report(s) that Discusses the Item	ROA Inspection Item Subject	Reason Item Remains Open
95-16-04	NOV	95-16, 97-02	Failure of the lessee to account for and control fissile-bearing stored and spare part components in the process buildings. The finding identified that some of the stored components (most was received from K-25) had a uranium assay content as high as 56 wt. %. No NCSA had been issued prior to the storage of this equipment in violation of OSR KY/D-3973 requirements.	One of seventeen corrective actions identified by the lessee still remains open requiring verification. This lessee action involved establishing an inventory for UF ₆ process equipment that was received from off-site that potentially contained fissile material, as well as, to provide a means to maintain this inventory current. Inspector review of the Equipment Control Coordinator's listing of off-site equipment stored at PGDP was found to be incomplete, in that, many of the equipment pieces identified had no building location coordinates associated with the item, uranium assay content, etc. The identified deficiencies were brought to the attention of PGDP management at the DOE Inspection Report No. 70-7001/96-08 Exit Meeting held December 10, 1996. No further lessee action has been taken to resolve this issue.
96-04-06	NOD	96-04, 97-02	Failure of the lessee to notify DOE when committed corrective action completion dates are missed or to request an extension before the dates are missed.	A new Nuclear Regulatory Affairs (NRA) procedure, UE2-OP-RA1032, Rev. 0, USEC <i>Nuclear Regulatory Commitment Management System</i> , dated August 16, 1996 contains a global provision that changes to regulatory-based commitments only requires written notification to the regulator before the change can be implemented. This is contrary to Article IV, Section 5.C of the ROA which requires DOE approval prior to implementation of the change.
96-05-04	NOV	96-05, 97-02	Failure of the lessee to comply with the requirements of 10 CFR 71.131, in that plant procedures required to implement 10 CFR Part 21 were not approved and issued prior to initiating shipments of radioactive materials using the Paducah Tiger Overpacks in accordance with NRC CoC 6553/DOE CoC USA/6553/AF.	Four out of ten committed corrective actions identified have not been completed. These include: <ul style="list-style-type: none"> • Procedure UE2-RA-RR1035 was not revised to include the NRC CoC as a required licensing document to be flowed down into plant procedures; • The NRC CoC and PTQAP documents will not be flowed down into plant procedures until 3/2/97; • Requirements for retraining P&T personnel on new or revised DOT and NRC Transportation regulations having job assignments requiring a knowledge thereof will not be completed until April 1, 1997; • SS&Q is required to conduct a follow up surveillance of the adequacy of the PTQAP flowdown into site procedures by 3/31/97.
96-06-01	NOV	96-06, 97-02	Failure of the lessee to perform a post-maintenance pressure decay test on Autoclave 4 South in Building C-333A following a modification to the autoclave pressure boundary.	One out of seven committed corrective actions has not been completed. This involved development and issuance of an engineering procedure to provide guidance on defining post-maintenance testing. This action is scheduled to be completed March 10, 1997.
96-07-01	NOV	96-07, 97-02	Failure of the lessee to follow OSR administrative controls or LCOs when equipment required to be operable was found inoperable, or to fully complete LCO actions when required. Six examples were cited.	Lessee corrective actions will not be completed until 3/28/97. No corrective action verifications were performed on the lessee's response.

OPEN PGDP DOE INSPECTION ITEMS

ROA Inspection Items that Remain Open and Cannot be Linked to Compliance Plan Issues
(Inspection Reports Issued Up to and Including 70-7001/97-02)

ROA Inspection Item	Type	Inspection Report(s) that Discusses the Item	ROA Inspection Item Subject	Reason Item Remains Open
96-07-03	NOD	96-07, 97-02	Failure of the lessee to notify DOE of changes it had made to committed corrective actions stated in its letter responses to violations 70-7001/95-08-02 and 70-7001/96-01-02, and in its May 16, 1994 letter response to the April 28, 1994, DOE Enforcement Conference.	Lessee corrective actions will not be completed until 2/27/97. No corrective action verifications were performed on the lessee's response.
96-07-04	NOV	96-07, 97-02	Failure of the lessee to ensure that a Building C-335 process cell (Unit 2, Cell 7) had a UF ₆ negative pressure before it authorized cutting into the system's process pipe to perform maintenance activities which is contrary to OSR requirements.	Lessee corrective actions will not be completed until 4/15/97. No corrective action verifications were performed on the lessee's response.
96-07-05	NOV	96-07, 97-02	Failure of the lessee to correct a cascade gradient condition which produced a UF ₆ back pressure, allowing an enrichment excursion to occur above 1 wt % U-235 in a portion of the C-333 Process Building not monitored by a Criticality Accident Alarm System (CAAS).	Lessee corrective actions will not be completed until 6/15/97. No corrective action verifications were performed on the lessee's response.
96-08-01	NOV	96-08, 97-02	Failure of the lessee to follow or establish OSR administrative controls when operability requirements could not be complied with. Five (5) examples were cited.	DOE Report 70-7001/96-08 was not issued until 2/10/97. The lessee has not had sufficient time to respond to the cited findings. No corrective action verifications have been performed.
97-01-01	NOV	97-01, 97-02	Failure of the lessee to take or implement compensatory actions whenever an OSR requirement could not be met. Two examples were cited.	DOE Report 70-7001/97-01 was not issued until 2/10/97. The lessee has not had sufficient time to respond to the cited findings. No corrective action verifications have been performed.
97-02-01	URI	97-02	Failure of the lessee to follow or establish admin controls required by the OSRs/TSRs when its normal operating provisions could no longer be complied with.	DOE Report 70-7001/97-02 will be issued after NRC assumes regulatory oversight of PGDP. No corrective action verifications have been performed.
97-02-02	URI	97-02	Failure of the lessee to incorporate sufficient NCS double contingency safety factors into its C-400 cylinder spray wash operations to prevent conditions which could result in an inadvertent criticality	DOE Report 70-7001/97-02 will be issued after NRC assumes regulatory oversight of PGDP. No corrective action verifications have been performed.

PGDP DOE INSPECTION ITEM CLOSURES BASED ON DOE CPIs

ROA Inspection Items that were Closed Via Linkage to Compliance Plan Issues (CPI)
(Inspection Reports Issued Up to and Including 70-7001/97-02)

DOE Inspection Item	Type	Related DOE CPI	Closure Report	ROA Inspection Item Subject	CPI Linkage Basis
PGDP-94-01-01	IFI	1, 21, 40	96-08	A failure of the feed header 5 piping in Building C-337-A due to a corrosion-induced breach of the process gas piping resulted in an unplanned release of Uranium Hexafluoride (UF ₆) on September 7, 1993. This pipe breach ultimately exposed fifteen individuals to radiation or contamination, nine to levels in excess of plant administrative guidelines. An inspector concern was raised as to whether other feed piping in the C-337-A pipe chase may also have been similarly degraded.	<p>A piping replacement modification work order was approved and completed on August 30, 1996 to replace all feed header piping in all five positions in Building C-337-A. In addition, the feed header piping at positions 3, 4, and 5 was re-routed around the piping trench where the corrosion problems had historically occurred.</p> <p>The piping modification was accomplished through a Maintenance Service Request (MSR). No formal design documentation was provided because process pipe is not considered a safety system. Further verification of this deficiency was transferred to DOE CPI No. 21, "Plant Changes and Configuration Management," since this issue is intended to define the design requirements for important-to-safety [Augmented Quality (AQ)] systems. Further, because the feed header piping at positions 3, 4, and 5 had been re-configured, DOE approval is required prior to operating the autoclaves at these positions. A feed facility Technical Safety Requirement (TSR) has been authorized and further evaluation of the TSR (and supporting DOE Safety Evaluation Report) was transferred to DOE CPI No. 1, "Transition from DOE Regulation to NRC Regulation."</p>
PGDP-94-01-02	IFI	21	96-08	Steam leaks from steam tracing along the feed header piping in Building C-337-A may have had an affect on the failure of the feed piping at position 5 which resulted in an unplanned release of UF ₆ on September 7, 1993.	<p>Steam leak repairs were identified and made at all Building C-337-A autoclave positions. The level of repair and testing documentation was found to be extremely limited since steam piping is not considered a safety system. However, steam piping is considered important-to-safety. Further resolution of this issue as to the level of Quality Assurance (QA) detail for "AQ" systems was transferred to DOE CPI No. 21, "Plant Changes and Configuration Management."</p>
PGDP-94-01-10	IFI	19, 24	96-08	The DOE Inspection Team investigating the Building C-337-A unplanned release of UF ₆ on September 7, 1993, identified several deficiencies with the lessee's training program established to prepare PGDP personnel on how to respond to a UF ₆ release. The Team concluded that these deficiencies contributed to the initial inappropriate response by the operators to this event.	<p>The facility enacted a series of corrective actions to enhance its training program in preparing its operators and support personnel on how to respond to UF₆ releases. These included development and issuance of hazard specific training, performance based training involving vaporizer operations, establishment of a cascade mini-drill program, and development of performance evaluation checklists and training modules.</p> <p>The latter corrective action involving the development of a job task analysis (JTA) matrix for plant personnel was found still ongoing because of the continuing reorganization of the facility. Verification of the types and content of these JTAs was transferred to two DOE CPIs. DOE CPI No. 19, "Management Controls," will perform a flowdown of organization requirements and responsibilities [as defined in the lessee's application submittal to the Nuclear Regulatory Commission (NRC)] to job position descriptions, and DOE CPI No. 24, "Systems Approach to Training," will complete the JTAs and develop the subsequent training program.</p>

PGDP DOE INSPECTION ITEM CLOSURES BASED ON DOE CPIs

ROA Inspection Items that were Closed Via Linkage to Compliance Plan Issues (CPI)
(Inspection Reports Issued Up to and Including 70-7001/97-02)

DOE Inspection Item	Type	Related DOE CPI	Closure Report	ROA Inspection Item Subject	CPI Linkage Basis
94-09-02	NOV	24	96-05	<p>Failure of lessee to:</p> <ul style="list-style-type: none"> • Document and perform GET, GERT, Radiological Worker II, and respiratory training for plant personnel; • Conduct required periodic Rad Worker II retraining; • Define employee training needs and assure completion of training; and • Disallow personnel with lapsed training to have unescorted access. <p>(This item also rolled up the training issues from NCV 94-05-06, and NOVs 94-14-10 and 94-14-11 and administratively closed these items)</p>	Corrective actions identified by the lessee to resolve this violation involving development of new TDAGs, to proceduralize the Plant Compliance Training Matrix and incorporate TDAG information, and to utilize a new training database information system, were found to have not been integrated with PGDP Training Department procedures. Since these corrective actions are similar in nature to the Plan of Action (POA) items prescribed to resolve DOE CPI No. 24, "Systems Approach to Training," further follow-up on this issue was transferred to this CPI to avoid redundant inspection and reporting.
94-14-09	IFI	21	96-04	Failure of the lessee to provide its maintenance and operations personnel with a structures, systems, and components list (SSCL) so that they could distinguish safety, non-safety related components, and components important-to-safety in order to prepare procedures to support the maintenance and operations functions.	The site is still in the process of defining this SSCL as it relates to "Q" (Quality) and "AQ" SSCs. This identification process is being established through the action of DOE CPI No. 21, "Plant Changes and Configuration Management."
94-14-12	NOV	27	97-01	Failure of the lessee to follow procedures associated with the handling of controlled documents. Seventeen examples were cited to illustrate the extent and depth of the noncompliance.	One of the corrective actions identified by the lessee that was needed to be completed in order to resolve this issue, was the completion of the Procedures Upgrade Project (PUP). Since the PUP is inter-connected to the completion of DOE CPI No. 27, "Procedures Program," further follow-up on this committed corrective action was administratively transferred to this CPI to avoid redundant inspection and reporting.
94-14-15	NOV	27	97-01	Failure of the lessee to perform safety-related work in accordance with approved procedures, or performed work utilizing superceded procedures. Five examples were cited to illustrate the extent and depth of the noncompliance.	During closeout of this inspection item, the inspector noted that the committed procedure to be developed and issued to resolve this issue, CP4-CO-CN2045a, <i>Operation of the C-333-A and C-337-A Vaporizer Facilities</i> , was classified as a "General Intent" procedure versus an "In-Hand." To resolve this misclassification of procedures, the lessee verbally committed to reclassify this procedure, which it did. During the follow-up inspection, the inspector noted that a Problem Report PR-QA-95-3859 had been identified involving a similar procedure use mis-classification, indicating that the problem was recurring. Further review of PR-QA-95-3859 by the inspector, identified that the PR was only a focused deficiency, and did not look at correcting the broader, more generic issue. Since the lessee subsequently closed the deficiency, to avoid continued recurrence of this problem, this item was administratively linked to the closure of DOE CPI No. 27, "Procedures Program."

PGDP DOE INSPECTION ITEM CLOSURES BASED ON DOE CPIs

ROA Inspection Items that were Closed Via Linkage to Compliance Plan Issues (CPI)
(Inspection Reports Issued Up to and Including 70-7001/97-02)

DOE Inspection Item	Type	Related DOE CPI	Closure Report	ROA Inspection Item Subject	CPI Linkage Basis
94-16-01	IFI	19	96-03	Failure of lessee to delineate roles, responsibilities, authority, and accountability to plant personnel responsible for the safe operation of the GDP in the form of plant operations procedural requirements and through management and supervisory position descriptions.	A plant-wide reorganization has occurred to support NRC Certification which will require slowdown of management responsibilities to their position descriptions. This same action is required to be completed under DOE CPI No. 19, "Management Controls," as POA #2.
94-16-02	NCV	27	97-02	Failure of the lessee to follow its procedure process control to appropriately identify in the left margin of each procedure, a symbol that reflects the incorporation of a specific OSR, FSAR, or NCSA requirement or commitment. In addition, the inspection identified that on-average, at least 50% of all procedures are not completing their periodic procedure review cycles on time.	As part of the lessee's stated corrective action in resolving this issue, the lessee identified that all OSR and FSAR requirements will be incorporated into plant procedures through the Nuclear Safety Upgrade Program. The periodic procedure review deficiency will also be similarly resolved through this action. Since the Nuclear Safety Upgrade Project involving Procedure Upgrades (PUP) is inter-connected to the completion of DOE CPI No. 27, "Procedures Program," further follow-up on this committed corrective action was administratively transferred to this CPI to avoid redundant inspection and reporting.
94-16-05	NCV	26	96-03	Failure of lessee to establish standard methods for the creation, collection, storage, control, maintenance, retention, and disposition of plant records related to plant safety and safeguards and security.	A Records Management and Document Control Program has been established but designation of what records are to be controlled as "Q" or "AQ" has not been defined. A similar action has been established under DOE CPI No. 26, "Records Management and Document Control," as POA #1.
94-16-06	IFI	19, 21, 27, 29	96-03	Failure of lessee to establish a formal USEC QA Policy and implementing procedures to support many elements of the PGDP QA Program as defined in UEO-221, <i>Quality Program Plan for Uranium Enrichment (UE-QPP)</i> . Specific deficient areas cited included: QA-related training, design control, and procurement.	The PGDP QA Program (QAP) was revised (UE-QPP has been canceled) under the NRC Certificate which will require several specific DOE CPIs to slowdown identified QA process management control requirements into plant procedures. DOE CPI No. 19, "Management Controls," will slowdown the new QAP to plant implementing policies and procedures; DOE CPI No. 21, "Plant Changes and Configuration Management," extends the QAP slowdown to include plant training; DOE CPI No. 27, "Plant Procedures Program," requires the issuance of operational policy statements and to implement new or upgraded procedures to fully implement the QAP by a defined date; and DOE CPI No. 29, "QA Program Implementation," specifies a series of POAs to develop and implement the QAP.

PGDP DOE INSPECTION ITEM CLOSURES BASED ON DOE CPIs

ROA Inspection Items that were Closed Via Linkage to Compliance Plan Issues (CPI)
(Inspection Reports Issued Up to and Including 70-7001/97-02)

DOE Inspection Item	Type	Related DOE CPI	Closure Report	ROA Inspection Item Subject	CPI Linkage Basis
94-17-07	NCV	24, 27, A.4	96-05	Failure of the lessee's Special Nuclear Material (SNM) Protection Program's, <i>Materials Control and Accountability (MC&A) Plan</i> , to provide for confirmatory and administrative checks for nuclear inventory control. Specific deficient areas cited included: authorized user checks, inventory difference trending, material transfer checks, and internal reviews.	A new Nuclear MC&A (NMC&A) Plan has been established to expand the performance testing verification process. However, the NMC&A Plan has not been implemented. DOE CPI No. A.2, "Materials Control and Accountability Manuals and Procedures," has been issued to require the lessee to develop, approve, and issue all NMC&A core procedures. Also, DOE CPI No. 27, "Procedures Program," specifies the further development of written procedures and documents to support the program, and DOE CPI No. 24, "Systems Approach to Training," specifies the development of job classifications and related training requirements for those job classifications.
94-17-08	NOV	27	96-05	Failure of the lessee's Measurements Control Program to describe its quality performance measures, including control of nonconforming conditions and control of standards, necessary for its various sampling and analysis activities to comply with the site's QA Program. In addition, the lessee was cited for not ensuring its procedures were consistent with the administrative requirements of other plant procedures.	The plant revised the specific cited procedure discrepancies in the violation and committed to place the independent Technical Services Division's (TSD) procedures on the plant's computer tracking system for procedures. The latter action was needed to allow TSD the ability to electronically link its procedures to the plant documents it referenced in its own procedures to ensure consistency and compatibility of the two organization's requirements. The adequacy of ProNet electronic procedure tracking database was not verified since the site is now employing a new procedure tracking technology called PIMS (Procedure Information Management System). This system will not be finalized until the conclusion of the Procedures Upgrade effort. Further, the lessee stated that TSD's procedures had a low priority for having its procedures upgraded. Eventually, all of TSD's other administrative procedures would be upgraded as deficiencies were identified or as resources became available in accordance with the priorities established by the Procedures Upgrade Program. DOE CPI No. 27, "Procedures Program," is now the controlling element for ensuring TSD's procedures are upgraded.
94-17-09	NOV	A.2	96-05	Failure of the lessee to use measuring and test equipment (M&TE) that was calibrated with traceable standards in the performance of its NMC&A measurements. Additionally, the M&TE used by TSD to calibrate its instruments were not found included in the site's preventative maintenance program.	Although the lessee revised its programmatic controls to include equipment used to measure nuclear material in its NMC&A Plan, which was subsequently approved by DOE, an internal surveillance conducted by the PGDP QA organization discovered that all aspects of the plant calibration program, in general, were not being followed. DOE CPI No. A.2, "Measurement Systems," was subsequently issued to require the use of standards issued and certified by the National Institute of Standards and Technology (NIST) or traceable to NIST.
94-18-01	NOV	21	96-04	Failure of the lessee to establish a procedure system to control changes to the plant's design and equipment.	Although the lessee committed to develop and implement a configuration management procedure to provide programmatic controls over its plant change process, and to implement level III and IV procedures to slowdown engineering requirements, the lessee stated that its corrective actions would be implemented in accordance with the scheduled established in DOE CPI No. 21, "Plant Changes and Configuration Management."

PGDP DOE INSPECTION ITEM CLOSURES BASED ON DOE CPIs

ROA Inspection Items that were Closed Via Linkage to Compliance Plan Issues (CPI)
(Inspection Reports Issued Up to and Including 70-7001/97-02)

DOE Inspection Item	Type	Related DOE CPI	Closure Report	ROA Inspection Item Subject	CPI Linkage Basis
95-02-01	NOV	1	96-07	Failure of the lessee to conduct performance tests on the high pressure fire water pumps (HPFWP), which are required to be accomplished on a semiannual basis in accordance with the OSRs.	Specific committed administrative and procedural corrective actions were verified completed by DOE. One item, involving establishment of testing and inspection requirements for the Fire Protection System to satisfy the OSRs, were found to be in conflict with proposed TSR requirements. Since resolution of these differences between the OSRs and TSRs was being handled by DOE/ORO, further SSR inspection activity in this area would result in a redundant DOE inspection effort. Therefore, final closure of this item was transferred to DOE CPI No. 1, "Transition from DOE Regulation to NRC Regulation."
95-07-01	NOV	1	96-04	Failure of the lessee to provide for testing of the inner autoclave containment valves independent of the outer containment valves to ensure they were operable and met design objectives.	Five corrective actions were taken by the lessee to resolve this issue. All corrective actions were verified completed, with the exception of the action for the lessee to transition from OSR to TSRs. DOE CPI No. 1, "Transition from DOE Regulation to NRC Regulation," provides for a similar transition to occur within 120 days after the NRC issues a CoC (Certificate of Conformance) to the lessee.
95-08-03	URI	2	96-03	Failure of the lessee to analyze the operational transient conditions involving full recycle, slow drawdown, and immediate shutdown of the cascade by a formal safety analysis.	The SAR Upgrade Project will document the safety basis of these and other accident conditions (e.g., airplane impact on the GDP) in accordance with DOE CPI No. 2, "Update to the Application Safety Analysis Report."
95-16-01	NOV	19	96-06	Failure of the lessee to follow procedures concerning the performance of supervisory reviews and audits of control room activities in Building C-337, and to assess identified nonconforming conditions for similar applicability to Building C-333 area control room activities.	<p>Among six identified corrective actions committed, the lessee stated that it would conduct an independent follow-up assessment to verify the effectiveness of the corrective actions it had taken and to identify areas requiring additional improvement. DOE verified all corrective actions were completed as stated.</p> <p>However, as a result of the independent audit, 23 problem reports were generated to document the ineffectiveness of PGDP's operations program as it related to poor operational practices and procedural noncompliances. The audit disclosed multiple areas in need of improved management controls. Because program enhancements have been formalized in the lessee's Application to the NRC for a CoC, further follow-up action on this item was transferred to DOE CPI No. 19, "Management Controls."</p>
95-16-02	NCV	21	96-08	Failure of the lessee to observe plant modification controls for the installation of a fissile material storage rack adjacent to the Building C-331 Instrument Shop.	Although the lessee complied with its stated commitments to remove the instrument rack and to retrain the responsible plant personnel on the requirements for initiating plant modifications, the inspector noted that the PGDP Configuration Management Program was still not fully operational and would not be until early 1997. Because additional design requirements may be required at some later date, further follow-up action on this item was transferred to DOE CPI No. 21, "Plant Changes and Configuration Management."

PGDP DOE INSPECTION ITEM CLOSURES BASED ON DOE CPIs

ROA Inspection Items that were Closed Via Linkage to Compliance Plan Issues (CPI)
(Inspection Reports Issued Up to and Including 70-7001/97-02)

DOE Inspection Item	Type	Related DOE CPI	Closure Report	ROA Inspection Item Subject	CPI Linkage Basis
96-03-02	NOV	27	96-08	Failure of lessee personnel to characterize, control, and use procedures to conduct plant activities and conditions which are considered "safety-related."	The lessee made several commitments, which were subsequently verified as complete by DOE, to correct the specific identified procedural deficiencies cited in the violation and to revise the criteria utilized to categorize procedures based upon their safety significance. The lessee further stated all procedures were being reviewed for technical adequacy and overdue periodic reviews would be completed in accordance with the schedule provided in DOE CPI No. 27, "Procedures Program."
96-03-03	NOV	19	97-01	Failure of the lessee's managerial controls to provide for the performance of management assessments of plant operations and personnel performance involving JCOs (Justification for Continued Operation), SWOs (Stop Work Orders), LTOs (Long Term Orders), and MBWA (Management By Walking Around) programs and activities.	<p>The lessee committed to performing three corrective actions to resolve this NOV. All three corrective actions were verified completed by DOE. However, one of the actions only required that the lessee perform an evaluation of the adequacy of its administrative controls and management systems to ensure procedural requirements have been implemented and to determine if inadequate flowdown, assumptions, understanding or failure to follow a defined process were contributors to the problem. The results of the evaluation identified a SCAQ (Significant Condition Adverse to Quality) existed because of 26 implementation issues being identified as a result of the ineffective implementation of procedural requirements.</p> <p>The associated corrective action plan for the SCAQ (PR-PM-96-4251) required three additional corrective actions that would not be completed until late 1997. Because the corrective actions identified the need for additional improvements in the site's management control systems, the follow-up action on this item was transferred to DOE CPI No. 19, "Management Controls."</p>
96-04-03	NOV	19, 27	97-01	Failure of the lessee to use "approved" procedures to perform instrument calibration and testing activities, and to perform special tests on autoclave systems and operations important to nuclear safety and safeguards. In addition, the lessee was found performing operations in accordance with a JCO that was not approved by DOE.	Specific corrective actions identified by the lessee were verified completed as stated by the lessee. However, the DOE inspector closing this issue noted that the lessee was experiencing some difficulty in assuring stated requirements were being flowed down into procedures. As such, the inspector transferred final closure verification of this item to the closure actions associated with DOE CPI No. 19, "Management Controls," and DOE CPI No. 27, "Procedures Program."
TI-3.2/ Commit #6	IFI	27	96-08	As part of the April 28, 1994 DOE Enforcement Conference, the lessee committed to allocate \$14.5M to accelerate the schedule to complete the upgrade of nearly 1700 procedures.	Originally the Procedures Upgrade Program was scheduled to be completed in June 1996. Since then, the schedule for this effort has slipped until late 1997. To complete the verification of this action, this item's closure was transferred to DOE CPI No. 27, "Procedures Program."

PGDP DOE INSPECTION ITEM CLOSURES BASED ON DOE CPIs

ROA Inspection Items that were Closed Via Linkage to Compliance Plan Issues (CPI)

(Inspection Reports Issued Up to and Including 70-7001/97-02)

DOE Inspection Item	Type	Related DOE CPI	Closure Report	ROA Inspection Item Subject	CPI Linkage Basis
TI-3.2/ Commit #12	IFI	25	96-08	As part of the April 28, 1994 DOE Enforcement Conference, the lessee committed to revising its reporting criteria for proper event categorization and notification of DOE.	Committed corrective actions to be implemented by the lessee in 1994 were verified completed by DOE. However, since then, the lessee had relaxed and/or deleted specific commitments made as a result of its intent to comply with the provisions of its Application submittal made to the NRC. As a result of these changes, closure in meeting ROA requirements could not be achieved. Therefore, final closure verification of this item was transferred to DOE CPI No. 25, "Event Investigation & Reporting Program."
EA-96-01/ Commit 2.1.2	IFI	27	96-08	As part of the May 9, 1996 DOE Management Conference, the lessee committed to complete its upgrade of site procedures in accordance with the schedule contained in the DOE Compliance Plan.	Since the completion of the Procedures Upgrade Program is currently not scheduled to conclude until late 1997, the closure verification for this action was transferred to DOE CPI No. 27, "Procedures Program."
EA-96-01/ Commit 2.1.3	IFI	19	96-08	As part of the May 9, 1996 DOE Management Conference, the lessee committed to flow down the organizational roles and responsibilities provided in Section 6.1 of its Application to the NRC for a CoC to committed position descriptions the lessee intends to maintain. Further, the lessee committed to review and revise these position descriptions, if necessary, at the conclusion of the procedures upgrade effort as specified in the DOE Compliance Plan.	The lessee's commitment to flowdown the organizational roles and responsibilities defined in Section 6.1 of its Application to the NRC is contained in DOE CPI No. 19, "Management Controls," as POA No. 2.

OPEN JCOs AND SEs THAT HAVE MODIFIED PLANT OPERATIONAL PRACTICES

PGDP Potential USQ List and Associated JCOs (JCOs and SEs Open as of February 28, 1997)

Safety Evaluation Number	Potential USQ Condition Description	Identifying Problem Report / Event Report Number	JCO Number	DOE Approval Date	Comments
SE 96-120	CAAS Inaudibility in Process Buildings	PAD-1996-0018 PR-PS-96-1868	JCO 96-05 (DOE CPI No. 46)	06/28/96	The SE JCO took credit for the compensatory measures associated with the JCO provided by DOE Compliance Plan Issue (CPI) No. 46, "Criticality Accident Alarm System - Horn Audibility"
SE 96-131	CAAS In Nearby Buildings	PAD-1996-0030 PR-SH-95-1751 PR-EN-96-2487	JCO 96-07 (DOE CPI No. 50)	08/16/96 (02/10/97)	Original JCO was approved by DOE on August 16, 1996. USEC later submitted a revision but it was rejected by DOE on February 10, 1997. The SE JCO took credit for the compensatory measures associated with the JCO provided by DOE CPI No. 50, "Criticality Accident Alarms for Nearby Buildings."
SE 96-147	CAAS in C-710	PAD-1996-0025 PR-EN-96-2881	JCO 96-06 (DOE CPI No. 8)	06/28/96	The SE JCO took credit for the compensatory measures associated with the JCO provided by DOE CPI No. 8, "Exceptions for Criticality Accident Alarm System."
SE 95-185 PSE 95-142	C-331/C-335 Seismic Capabilities	PAD-1995-0112	JCO 96-04 (DOE CPI No. 36)	(04/03/96)	DOE commented on the submittal on 04/03/96. No further response was received from USEC. Status is indeterminate. The SE JCO took credit for the compensatory measures associated with the JCO provided by DOE CPI No. 36, "Seismic Capability of Buildings C-331 and C-335."
SE 96-185	C-360 "See and Flee"	PAD-1996-0057 PR-EN-96-5783			Change made to "See and Flee" policy on Feb. 4, 1997, to allow limited operator actions. No longer a USQ.
SE 97-011	Cylinder Liquid Level above Valve	PR-EN-97-0387			Administrative controls added as LTO 333A-97-005
SE 96-018	Addition of Water Through Autoclave Vent	PAD-1996-0005	JCO 96-01	01/22/96	OSR change was approved 03/07/96. BPS indicated ESO Z92880 was completed on 04/11/96. For DOE inspection details, see 70-7001/96-02, Section 4.b.

OPEN JCOs AND SEs THAT HAVE MODIFIED PLANT OPERATIONAL PRACTICES

PGDP Potential USQ List and Associated JCOs (JCOs and SEs Open as of February 28, 1997)

Safety Evaluation Number	Potential USQ Condition Description	Identifying Problem Report / Event Report Number	JCO Number	DOE Approval Date	Comments
SE 96-189	Cylinders with greater than 40 pound heel weight	PAD-1996-0064			NCSA 3974-05 was issued to justify heel weights. No indication of a FSAR change being identified or submitted
SE 96-208	C-360 Autoclave Valve Closure Time	PAD-1996-0055			C-360 autoclaves are to remain shutdown until the modifications are completed. Work being done under ESO Z97710.
SE 96-028	Normetex Pump Controller Switch	PAD-1996-0009	JCO 96-03	01/31/96	ESO completed. For DOE inspection details, see 70-7001/96-02, Section 4.a.
SE 95-034	Fragmenting Rupture Discs on Cell Coolant Systems	PAD-1995-0016	BIO 3/24/95 JCO 4/18/95		JCO was not submitted to DOE for approval. Relief valves were removed to eliminate the immediate safety problem. Plant is operating in this condition without DOE approval. For DOE inspection details, see 70-7001/95-03, Section 4.a, and 70-7001/95-04, Section 2.c.
SE 95-087 SE 95-122	PGLD Reset Pushbutton	PAD-1995-0032 PR-CO-95-1133	JCO 5/31/95		JCO was not submitted to DOE for approval. Modifications were completed on Units 2-5 in C-333 and C-310 and C-315. Others need to be modified via ESO Z91460. For inspection details, see 70-7001/95-06, Section 3.
SE 95-208	C-310-A No. 3 Condenser PGLD	PAD-1995-0120 PAD-1995-0125 PR-CO-95-4821			The UF ₆ detector was installed in accordance with ESO Z94830. For inspection details, see 70-7001/95-10, Section 3.a.
SE-96-223	C-310/C-315 Operator Response to UF ₆ Release	PR-EN-97-0576	JCO 97-01	02/06/97	This issue was not considered a USQ under the NRC Application SAR, but is applicable only under DOE FSAR.
SE 95-176 (Not a USQ)	Higher Assay Equipment from K-25 and Portsmouth at PGDP	PAD-1995-0119	JCO 95-10		JCO was not submitted to DOE for approval. NCSA GEN 20, and plant procedure CP2-GP-GP-1031 have been issued on this subject. For inspection details, see 70-7001/94-20, Section 6.f, and 70-7001/95-16, Section 8.f.

OPEN JCOs AND SEs THAT HAVE MODIFIED PLANT OPERATIONAL PRACTICES

PGDP Potential USQ List and Associated JCOs (JCOs and SEs Open as of February 28, 1997)

Safety Evaluation Number	Potential USQ Condition Description	Identifying Problem Report / Event Report Number	JCO Number	DOE Approval Date	Comments
SE 95-184 (Not a USQ)	Cylinder Spacing in the C-310 Cool Down Yard	PAD-1995-0088 PR-SH-95-3806	JCO 95-09		JCO was not submitted to DOE for approval. OSR change to correct discrepancy was approved by DOE on 02/16/96.
SE 95-160 (Not a USQ)	Autoclave Opening Prevention System Setting	PAD-1995-0075 PR-TO-95-3156 PR-TO-95-3179	JCO 8/24/95		JCO was not submitted to DOE for approval. OSR change was approved by DOE on 11/03/95.
SE 95-162 (Not a USQ)	Feed Autoclave Defense-in-Depth Systems Calibration	PAD-1995-0075 PR-TO-95-3156 PR-TO-95-3179	JCO 8/24/95		JCO was not submitted to DOE for approval. The transmitters were re-calibrated for lower actuation during function test conducted 08/30/95.
SE 95-155	Possible Exceedence of Feed Autoclave LSSS	PAD-1995-0075 PR-TO-95-3156 PR-TO-95-3179	JCO 8/21/95		JCO was not submitted to DOE for approval. The transmitters were re-calibrated for lower actuation during function test conducted 08/30/95.
SE 95-133 (Not a USQ) SE 95-134	Autoclave Pressure Decay Test Autoclave Containment Valve Testing	PAD-1995-0056 PR-TO-95-2291	JCO 7/24/95 (DOE CPI No. 3)		JCO was not submitted to DOE for approval. For DOE inspection details, see 70-7001/95-07, Section 3. The SE JCO took credit for the compensatory measures associated with the JCO provided by DOE Compliance Plan Issue (CPI) No. 3, "Autoclave Upgrades."
PSE 96-023 (Not a USQ)	Product Withdrawal Valves Functional Requirements	PAD-1996-0004 PR-CO-96-0215	JCO 96-02		JCO was never issued. The draft JCO indicated the OSR requires the valve to be opened to evacuate the pigtail on a UF ₆ release.
PSE 94-092 (not a USQ)	Design discrepancy on X-11 seismic expansion joints	NCR-PAD-94-0618			USEC took no regulatory action on this issue. For DOE inspection details, see <ul style="list-style-type: none"> • 70-7001/94-09, Section 4. • 70-7001/94-10, Section 2.b. • 70-7001/94-11, Section 4.b. • 70-7001/94-12, Section 2.c. • 70-7001/95-01, Section 2.a.

DOE Regulatory Oversight Program

Functional Matrix Organization Structure

Figure 1

PGDP REGULATORY OVERSIGHT PROGRAM - MAP (Milestones, Activities, and Personnel)

Figure 2

TIMELINE OF DOE ROA INSPECTIONS CONDUCTED

(Inspection Types Conducted During SSR Inspection Period)

Figure 3

Special
 Functional
 SSR
 DOE/HQ
 Walkthroughs

TIMELINE OF DOE INSPECTION REPORTS ISSUED

(Inspection Reports Issued During SSR Inspection Period)

Figure 4

DOE/HQ
 Special
 Functional
 SSR

CUMULATIVE PROFILE OF DOE INSPECTION FINDINGS ISSUED

(Inspection Findings Issued During SSR Inspection Period)

Figure 5A

— Net Open - - - Cumulative Open · Cumulative Closed

Figure 5B

□ Net Open ▨ Cumulative Open ■ Cumulative Closed

DIFFERENTIAL PROFILE OF DOE INSPECTION FINDINGS ISSUED

(Inspection Findings Issued During SSR Inspection Period)

Figure 6A

— Net Open ▨ No. Open □ No. Closed

Figure 6B

▨ No. Open ■ No. Closed

TIMELINE OF DOE INSPECTION FINDINGS BY FINDING TYPE

(Inspection Findings Issued During SSR Inspection Period)

Figure 7

Inspector Followup Items Unresolved Items Non-Cited Violations Deviations Violations

Figure 8A

—●— Planned [Total Open Items Beginning 12/1/95 - Projected SSR Inspection Effort (Closures - New Items)]
 - - - - - Realized [Total Open Items at Beginning of Each SSR Inspection Period - Issued Report Identified Items (Closures - New Items)]

SSR Inspection Report Period No.	SSR Inspection Report Dates	Reports Issued	Issued Open Items at Start of Period	Planned (Beginning 12/1/95)			Realized (Actual)			Issued Accum Open	Issued Accum Closed
				Open	Closed	Net Change	New	Closed	Net Change		
96-01	12/01/95 - 01/15/96		138*	2	7	133	0	0	138	198	60
96-02	01/16/96 - 02/29/96	95-08, 95-09, 95-16	138	7	51	89	7	51	94	205	111
96-03	03/01/96 - 04/15/96	95-10, 96-01	94	2	9	82	4	11	87	209	122
96-04	04/16/96 - 05/31/96	96-02	87	0	13	69	1	10	78	210	132
96-05	06/01/96 - 07/15/96		78	0	18	51	0	0	78	210	132
96-06	07/16/96 - 08/31/96	96-03	78	0	16	35	4	12	70	214	144
96-07	09/01/96 - 10/15/96	96-04	70	0	13	22	6	17	59	220	161
96-08	10/16/96 - 11/30/96	EA-96-01, 96-05	59	0	10	12	19	16	62	239	177
97-01	12/01/96 - 01/10/97	96-06, 96-07	62	0	8	4	6	5	63	245	182
97-02	01/11/97 - 03/03/97	96-08, 97-01	63	0	2	2	2	43	22	247	225
	03/04/97 - 03/31/97	97-02	22	0	0	2	2	12	14	249	237

* Number includes 12 Items requiring CA verification from PGDP-94-01 (DOE/HQ ES&H Investigation of C-337-A 09/07/93 Event), and 13 Items from TI-3.2/01 (1994 Enforcement Conference).

+ There has been 27 inspection items that have had their closure administratively linked to the closure of DOE Compliance Plan Items (CPI). Therefore, closure of the related DOE CPI's will also close these items.

CLOSURE PLAN FOR WORKOFF OF OPEN DOE INSPECTION ITEMS

(Overall Inspection Finding Growth and SSR Workoff Plan)

Figure 8B

Actual

Planned

DOE INSPECTION FINDINGS ISSUED BY ROA FUNCTIONAL AREA

(DOE Finding Types Identified Per ROA Functional Area)

Figure 9

Inspector Followup Items
 Unresolved Items
 Non-Cited Violations
 Deviations
 Violations

NUMBER OF DOE INSPECTIONS CONDUCTED BY ROA FUNCTIONAL AREA **(DOE ROA Inspection Types Conducted Per ROA Functional Area)**

Figure 10

Special
 Functional
 SSR

TIMELINE OF DOE INSPECTIONS CONDUCTED BY ROA FUNCTIONAL AREA **(Based Upon DOE Inspection Report Data Issued Each SSR Inspection Period)**

Figure 11

ROA FUNCTIONAL AREAs HAVING OPEN DOE INSPECTION FINDINGS

(DOE Finding Types Identified Per ROA Functional Area)

Figure 12

Inspector Followup Items
 Unresolved Items
 Non-Cited Violations
 Deviations
 Violations

**US Department of Energy (DOE)
Oak Ridge Operations (ORO)**

**REGULATORY OVERSIGHT AGREEMENT (ROA)
Inspection-Related Activities
Portsmouth Gaseous Diffusion Plant (PORTS)**

DOE TO NRC REGULATORY OVERSIGHT TRANSITION

DOE/ORO/PORTS INSPECTION SUMMARY

**DOE Site Safety Representative (SSR) Report
July 1, 1993 Through March 2, 1997**

PORTSMOUTH GASEOUS DIFFUSION PLANT (PORTS)

DOE to NRC Regulatory Oversight Transition Summary *DOE/ORO/PORTS Inspection-Related Activities*

June 6, 1997

Prepared by
DOE/ORO/PORTS Site Safety Representative

Prepared for
U.S. Department of Energy
Oak Ridge Operations
Oak Ridge, Tennessee 37830

DOE to NRC Regulatory Oversight Transition Summary

DOE/ORO/PORTS Inspection-Related Activities

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DOE to NRC Regulatory Oversight Transition Summary

DOE/ORO/PORTS Inspection-Related Activities

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- B. PORTS DOE ROA Inspection Report/Directives Summary
- C. PORTS DOE ROA Inspection Report Statistics
- D. PORTS DOE Regulatory Findings History Report
- E. IFS Summary Report
- F. Status of DOE Independent Self Assessment (ISA) Findings
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- H. Enforcement/Management Conference Background
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- J. Open PORTS DOE FSAR/SER Items - Leased Spaces
- K. Pending USEC/DOE PORTS Transition Issues
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- 1. DOE Regulatory Oversight Program - Organizational Structure
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DOE to NRC Regulatory Oversight Transition Summary

DOE/ORO/PORTS Inspection-Related Activities

LIST OF ACRONYMS AND CODES

ACR	Area Control Room
AEA	Atomic Energy Act of 1954
AHJ	Authority Having Jurisdiction
ALARA	As Low As Reasonably Achievable
ANS	American Nuclear Society
ANSI	American National Standards Institute
AQ List	Augmented Quality (items) List
ASME	American Society of Mechanical Engineers
BPS	Business Prioritization System
CAAS	Criticality Accident Alarm System
CASOPS	Cascade Operations
CCZ	Contamination Control Zone
CFR	Code of Federal Regulations
CM	Configuration Management
CUP	Chemical, Utilities, and Power
CY	Calendar Year
DMSA	DOE Material Storage Area
DOE	U.S. Department of Energy
DOELAP	DOE Laboratory Accreditation Program
DOE/ORO	DOE Oak Ridge Operations Office
DOE/HQ	DOE Headquarters (Washington, D.C.)
DOT	U.S. Department of Transportation
EF	Enrichment Facility
EG	Engineering Guidelines
EOC	Emergency Operations Center
EPA	U.S. Environmental Protection Agency
E&WM	Environmental and Waste Management
ES&H	Environmental, Safety and Health
ESO	Engineering Service Order
FCA	Fissile Control Area
FSAR	Final Safety Analysis Report
FSD	Fire Services Department
FY	Fiscal Year
GDP	Gaseous Diffusion Plant
GET	General Employee Training
gpm	Gallons Per Minute
GPS	General Plant Support
HAZMAT	Hazardous Materials
HAZOP	Hazards and Operability Studies
HAZWOPER	Hazardous Waste Operations and Emergency Response
HEPA	High-Efficiency Particulate Air
HEU	Highly Enriched Uranium
HP	Health Physics
HPFWS	High Pressure Fire Water System
H.R.	House of Representatives

DOE to NRC Regulatory Oversight Transition Summary

DOE/ORO/PORTS Inspection-Related Activities

HQ	Headquarters
IAC	Immediate Action Change
IAEA	International Atomic Energy Agency
IFI	Inspection Followup Item
IFS	Inspection Followup System
ISRC	Independent Safety Review Committee
INPO	Institute of Nuclear Power Operations
IRMS	Integrated Resources Management System
ISA	Independent Safety Assessment
JCO	Justification for Continued Operation
JPIC	Joint Public Information Center
LCO	Limiting Condition for Operation
LLW	Low Level Waste
LMES	Lockheed Martin Energy Systems
LMUS	Lockheed Martin Utility Services
MAP	Master Assessment Plan or Milestones, Activities, and Personnel
M&TE	Measuring & Test Equipment
MC&O	Management Controls and Oversight
MBA	Material Balance Area
MBWA	Management By Walking Around
MC&A	Material Control & Accountability
MMUS	Martin Marietta Utility Services
MS&C	Management Systems and Compliance
MSDS	Material Safety Data Sheet
MSR	Maintenance Service Request
NBL	New Brunswick Laboratory
NCS	Nuclear Criticality Safety
NCSA	Nuclear Criticality Safety Approval
NCSE	Nuclear Criticality Safety Evaluation
NCV	Non-Cited Violation
NDA	Non-Destructive Assay
NE	Nuclear Energy
NFPA	National Fire Protection Association
NIST	National Institute of Standards and Technology
NM	Nuclear Material
NMC&A	Nuclear Material Control & Accountability
NMMSS	Nuclear Materials Management and Safeguards System
NOD	Notice of Deviation
NOV	Notice of Violation
NQA	Nuclear Quality Assurance
NQA-1	ASME National Consensus Quality Assurance Standard for Nuclear Facilities
NRC	Nuclear Regulatory Commission
NSU	Nuclear Safety Upgrades
NUREG	Nuclear Regulatory Guide
NVLAP	National Voluntary Laboratory Accreditation Program
N/A	Not Applicable

DOE to NRC Regulatory Oversight Transition Summary

DOE/ORO/PORTS Inspection-Related Activities

O&M	Operations and Management
OCC	Office of Chief Counsel
OPSEC	Operations Security
ORE	Operational Readiness Evaluation
ORO	Oak Ridge Operations Office (of DOE)
ORR	Operational Readiness Review
OSHA	Occupational Safety and Health Administration
OSR	Operational Safety Requirement
PA	Public Address
P&T	Packaging and Transportation
PBT	Performance Based Training
PGDP	Paducah Gaseous Diffusion Plant
PIMS	Procedures Information Management System
PM	Preventive Maintenance
POA	Plan of Action
PORC	Plant Operations Review Committee
PORTS	Portsmouth Gaseous Diffusion Plant
PR	Problem Report
PRB	Procedures Review Board
PRONET	Procedures Network
PSM	Process Safety Management
PSE	Preliminary Safety Evaluation
psi	Pounds Per Square Inch
PSR	Project Safety Review
PSS	Plant Shift Superintendent
Q List	Quality (items) List
QA	Quality Assurance
QAP	Quality Assurance Program
QC	Quality Control
QPP	Quality Program Plan
QUEST	Quality Uranium Enrichment System for Tomorrow
RCRA	Resource Conservation and Recovery Act
RD	Request for Disposal
RMDC	Records Management and Document Control
RO	Regulatory Oversight
RO Manual	Regulatory Oversight Inspection and Enforcement Manual
ROA	Regulatory Oversight Agreement
RO Manager	Regulatory Oversight Manager
RP	Radiation Protection
RWP	Radiation Work Permit
SAR	Safety Analysis Report
SARUP	SAR Upgrade
SAT	Systematic Approach to Training
SER	Safety Evaluation Report
SME	Subject Matter Expert
SNM	Special Nuclear Material
SPP	Standard Practice Procedure
SSC	Structures, Systems, and Components or Safety System Component

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SSR	Site Safety Representative
TBD	To Be Determined
TDAG	Training Department Administrative Guide
TLD	Thermoluminescence dosimeter
TQL	Threshold Quality Level
TSA	Technical Safety Appraisal
TSCA	Toxic Substances Control Act
TSD	Treatment, Storage, and/or Disposal or Technical Services Division
TSR	Technical Safety Requirement
UCNI	Unclassified Controlled Nuclear Information
U-235	Uranium Isotope 235
UE	Uranium Enrichment
UF ₄	Uranium Tetrafluoride
UF ₆	Uranium Hexafluoride
UL	Underwriters Laboratory
UMH	Uranium Material Handler
UO ₂ F ₂	Uranium Oxyfluoride
USEC	United States Enrichment Corporation
URI	Unresolved Item
USQ	Unreviewed Safety Question
USQD	Unreviewed Safety Question Determination
wt. %	Weight Percent

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EXECUTIVE SUMMARY

The President signed H.R. 776, the *Energy Policy Act of 1992* (the Act), into law (Public Law 102-486) on October 24, 1992. The Act amended the *Atomic Energy Act of 1954* (AEA), to establish a new government corporation, the United States Enrichment Corporation (USEC) for the purpose of managing and operating the uranium enrichment facilities at Paducah, Kentucky [Paducah Gaseous Diffusion Plant (PGDP)] and Piketon, Ohio [Portsmouth Gaseous Diffusion Plant (PORTS)]. These facilities were previously owned and operated by the United States Department of Energy (DOE). Therefore, to transfer responsibility for the two gaseous diffusion plants (GDP) from DOE to USEC, Congress mandated in Section 1403 of the Act, that USEC lease the GDPs from DOE. This leasing arrangement between these two entities (one government agency and the other a government corporation) occurred on July 1, 1993 with the issuance of the, *Lease Agreement Between the United States Department of Energy and the United States Enrichment Corporation* (the Lease).

In addition to this GDP leasing mandate, the Congress, under Section 1701 of the AEA, as amended, commissioned the United States Nuclear Regulatory Commission (NRC) to promulgate standards that would apply to the two operating gaseous diffusion plants to protect the public health and safety from radiological hazards, and to provide for the common defense and security. These standards were issued by NRC as Part 76, *Certification of Gaseous Diffusion Plants*, to Title 10, *Code of Federal Regulations*, Chapter I, (10 CFR 76) on September 9, 1994 and became effective on October 24, 1994. This document was to be utilized by the NRC to certify and regulate the GDPs as a private enterprise. Until NRC assumed regulatory oversight for the GDPs, USEC assumed responsibility for the plants under DOE requirements and oversight for nuclear safety and safeguards and security.

DOE's nuclear safety and safeguards and security programs that were to be utilized to perform this regulatory oversight function until NRC assumed this responsibility, were derived from the DOE Orders System. The finalized critical set of nuclear safety and safeguards and security requirements and the bases for DOE regulatory oversight that were considered essential for the continued safe and secure operations of the GDPs were incorporated into the Lease as Exhibit D, *Regulatory Oversight Agreement between United States Department of Energy and United States Enrichment Corporation* (the ROA). The finalized structure of this document was patterned after NRC's NUREG-1324, *Proposed Method for Regulating Major Materials Licensees*, published in February 1992.

During the 44 months since the DOE Regulatory Oversight (RO) program was established, a DOE RO Manager was designated; RO tasks and responsibilities were assigned; a functional organizational structure was put into place (Figure 1) and staffed with matrixed DOE personnel and contractor support "specialists" that made up the core RO staff; Site Safety Representatives (SSR) were chosen, qualified, certified, and placed at both GDPs; a Regulatory Oversight Inspection and Enforcement Manual (RO Manual) was issued; and a total of 46 DOE RO inspections were performed at the PORTS facility during this period by the DOE Oak Ridge Operations (DOE/ORO) Office and 3 safety assessments were performed by DOE Headquarters (DOE/HQ) personnel. A total of 254 inspection issues were identified to the lessee, of which 126 issues were cited as violations of ROA requirements or deviations from commitments made to the DOE. Out of these 254 issues, all but 12 have been closed. These will be transferred to the NRC for follow-up inspection under their RO inspection program.

In addition to its direct RO inspection responsibilities, the DOE RO Manager's office also performed collateral inspection activities. These included performing:

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- Operational Readiness Evaluation (ORE) inspections at the facilities to help them, in part, transition from Operational Safety Requirements (OSRs) to Technical Safety Requirements (TSRs);
- On-site verification and validation inspections to attest to the assumptions and statements made in the upgraded Safety Analysis Report (SARUP) commissioned by DOE/ORO to be developed and delivered to USEC for their use in justifying the operating safety basis for the facility and to support DOE's independent Safety Evaluation Report (SER) which will be issued along with the SARUP;
- On-site inspections to verify the closure of at least 50% of the corrective actions committed to by the lessee that were to be accomplished prior to certification by the NRC as detailed in the DOE Compliance Plan submitted to the NRC in support of the USEC's application submittal to the NRC; and
- Regulatory reviews of USEC submitted event reports, Justifications for Continued Operations (JCO), and a host of other documents requiring the DOE RO Manager's attention and dispositioning.

These latter efforts, resulted, in cases, requesting the SSRs to perform limited site assessment inspections of these regulatory issues to determine if a larger, more safety significant, underlying issue existed. All on-site DOE/ORO inspection, verification, and validation activities, including DOE/HQ assessment activities were coordinated through the SSRs.

In addition to the regulatory issue reviews and site inspections identified above, the RO organization also facilitated the certification process, by working closely with USEC and the NRC to effect the certification effort. The RO staff assisted NRC personnel by familiarizing them on the operation of the gaseous diffusion technologies and programs, and worked with the resident inspectors to amplify on issues DOE had currently cited or was about to cite against the lessee's GDP operations. The NRC resident inspectors in turn, communicated and shared information freely with DOE, observing DOE protocol not to publicly disclose DOE inspection findings prior to release of the DOE Inspection Report. This spirit of cooperation, communication, and information exchange was in keeping with the Agreement into between DOE and NRC on August 11, 1994, entitled, *Agreement Establishing Guidance for NRC Inspection Activities at the Paducah and Portsmouth Gaseous Diffusion Plants Between Department of Energy Regulatory Oversight Manager and Nuclear Regulatory Commission*.

The activities described above have been captured on Figure 2, *DOE Regulatory Oversight Program MAP - Milestones, Activities, and Personnel*, attached to this document. The Figure depicts the major regulatory milestones in transitioning from DOE regulatory oversight to NRC regulatory oversight of the GDPs; interagency activities that have occurred between USEC, NRC, and DOE in the certification process; the DOE RO Inspection and Enforcement Program; regulatory and technical issue discussions; the training and certification of RO organization personnel; and the staffing levels that were maintained at PORTS during the ROA interim oversight period. Additionally, Attachment A was provided to address quantitatively, some of the critical items depicted in Figure 2.

The result of all these inspection and enforcement efforts has been the determination that PORTS is being operated with an acceptable nuclear safety program and with effective safeguards and security. There are still several nuclear safety upgrades in progress to support the remaining open DOE Compliance Plan, DOE inspection item, and SER corrective actions. There are also open regulatory issues associated with the TSR implementations, and regulatory-ordered and approved compensatory measures taken to resolve issues that have exceeded OSR bounding requirements (e.g., movement of liquid UF₆ cylinders with mobile equipment

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before 5-day OSR-required cooldown period was completed). Configuration management and the effectiveness of the site's corrective action process to evaluate issues generically to prevent the recurrence of problems also pose a problem at the facility, but in all cases, adequate compensatory management controls have been established to ensure adequate safety exists at PORTS.

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1.0 INTRODUCTION

On July 1, 1993, the US Department of Energy (DOE) signed a Lease Agreement with the newly created United States Enrichment Corporation (USEC) in compliance with the Energy Policy Act of 1992, which became law on October 24, 1992. The purpose of this leasing agreement was to transfer the operation and maintenance of the GDPs from DOE to USEC in order to privatize the current uranium enrichment process in the United States.

Simultaneous with the signing of the DOE/USEC Lease Agreement, USEC signed a contract with the newly established Martin Marietta Utility Services (MMUS) to operate both the PGDP and PORTS GDPs. Most of the operations personnel at both sites were then transferred to MMUS. The remaining personnel transferred to the newly created Martin Marietta Energy Systems (MMES) to handle the cylinder yards and other Non-Leased portions of the facilities. Both companies have now been renamed after the merger of Lockheed with Martin Marietta to Lockheed Martin Utility Services (LMUS) and Lockheed Martin Energy Systems (LMES), respectively.

The Energy Policy Act of 1992 also stipulated that after certain conditions were satisfied, regulatory oversight of the GDPs would transfer from DOE to NRC. This transference occurred at 12:01 a.m., on March 3, 1997. As a result, the DOE/ORO office requested that a transference document be compiled that would represent the DOE regulatory history of PORTS during the ROA interim period, and to serve as a baseline on the current status of the nuclear safety and safeguards and security programs at the time of the DOE regulatory oversight transfer to NRC.

1.1 Purpose

The primary purpose of this document was to document the DOE regulatory oversight inspection and enforcement (I&E) history of PORTS as it pertained to the regulatory framework of DOE's authority contained in the Regulatory Oversight Agreement, Exhibit D to the Lease Agreement between DOE and USEC dated July 1, 1993 (Vol. II, Appendix B). An additional purpose was to provide a formal mechanism by which DOE/ORO could communicate PORTS's I&E history to the NRC as a means of regulatory information transfer as agreed upon in the, *Joint Statement of Understanding Between the Nuclear Regulatory Commission and the Department of Energy on Implementing Energy Policy Act provisions on the Regulation of Gaseous Diffusion Uranium Enrichment Plants (Joint Statement)*, 59 Federal Register 4729, dated February 1, 1994 (Vol. II, Appendix C).

1.2 Scope

The scope of this document encompasses those inspection activities that occurred at the PORTS facility during the period July 1, 1993 through March 2, 1997. The term "inspection" as applied by DOE means the examination, review, or evaluation of any program or activity of USEC with respect to:

- The effectiveness of the program or activity in ensuring that the health and safety of the public and plant personnel are adequately protected;

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- The safe operation of the facility; and
- Compliance with any applicable DOE nuclear safety and safeguards and security requirements as defined in the Regulatory Oversight Agreement (ROA).

This report also provides a description of the Regulatory Oversight Program; its functional matrix organizational makeup; the elements of the program that provided assurance that the Leased Premises continued to comply with the Operational Requirements set forth in Chapter 3 of the ROA; a discussion on DOE's transitional support for the NRC Certification effort and on pending USEC/DOE transitional issues at PORTS; and an appraisal of the RO Program from a lessons learned perspective.

1.3 Approach

The format structure for this document was taken directly from Section 4.2, *Program for Oversight of USEC*, of the ROA. Data was compiled from all areas evaluated and enclosed as Attachments to this document. The data was then evaluated and translated into a series of figures to reflect the regulatory history of the facility. These figures are also attached to this report. Specific sections were then added to the report to address what the attached material represented. Finally, all attached material was then evaluated as a whole to render a ROA "lessons learned" regulatory performance profile, which can be used to further enhance the regulatory oversight process of other DOE facilities that may undergo privatization or regulatory oversight transference to another government agency.

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2.0 DOE PROGRAM FOR OVERSIGHT OF PORTS

The DOE Program for the regulatory oversight of PORTS is defined in Section 4.2, *Program for Oversight of USEC*, of Appendix A, *Safety Basis and Framework for DOE Oversight of the Gaseous Diffusion Plants*, to the ROA. Further definition of the RO Program can be found under Article IV, *DOE Oversight/Enforcement Authority*, and Appendix B, *Enforcement Process*, to the ROA.

2.1 Regulatory Oversight Mission

The fundamental mission of the DOE regulatory oversight function was to ensure that planned and existing operations at PORTS were conducted in a safe manner and in accordance with the plant operating requirements of Section 3, *Operational Requirements*, to the ROA.

2.2 RO Organizational Structure

The organizational structure established by DOE to transition its role from GDP manager to regulator necessitated a change in the structure of the GDP oversight program. The DOE RO Manager was established as the DOE manager for nuclear safety and safeguards and security oversight of the leased spaces at the GDPs (Vol. II, Appendix A). The DOE PORTS Site Manager would continue to serve both as manager and regulator over the non-leased spaces. The RO Manager, in turn, was responsible for discharging those nuclear safety oversight responsibilities traditionally assigned to both the DOE Headquarters and field organizations. Assistance from these organizations to serve in a matrixed capacity as DOE Project Managers, or to perform independent RO inspections, etc., were provided on an as-needed basis, and coordinated through the DOE RO Manager.

To accomplish the necessary scheduling and managing of DOE reviews and appraisals to verify GDP conformance with the Implementation Requirements in Section 3 of the ROA, the RO Manager established a functional matrix organization as illustrated in Figure 1. This organizational structure was not formalized and was staffed to the extent possible, with DOE personnel matrixed to the RO staff that were familiar with the ROA subject matter (programs) and the GDP facilities. This DOE RO staff was further augmented by a cadre of multi-disciplined contractor "specialists" that had NRC, INPO, or nuclear power operating experience that could move about the organization easily to serve in a variety of functions, roles, positions, and to act as lead inspectors/reviewers, as needed. This fluid organizational structure provided a very streamlined, cost-effective mix of personnel which helped to minimize the need to over staff to fulfill all RO obligations and/or contingencies. In turn, these same personnel could be transferred to new projects as they evolved, such as the DOE Compliance Plan Project. Again, this resulted in reducing the overall operating costs for startup and operation of these collateral efforts.

A discussion of the principal managers and staff for the GDP RO Program follows.

2.2.1 Assistant Manager for Enrichment Facilities (EF-20)

The Assistant Manager for Enrichment Facilities provided oversight of the DOE enforcement program and provided policy, programmatic, and implementation direction to the RO Manager. Further, all

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enforcement actions initiated by the RO Manager were reviewed in an advisory capacity.

2.2.2 *Manager, Gaseous Diffusion Plants Management (NE-40)*

The Gaseous Diffusion Plants Management Manager provided concurrence in the DOE/NRC plan for transition of the regulatory oversight function of the GDPs; regulatory policies and guidance developed by the RO Manager; modifications to Exhibit D to the Lease Agreement between DOE and USEC; and restart as a result of the exercise of shutdown authority by the RO Manager.

2.2.3 *Regulatory Oversight (RO) Manager (EF-20)*

The RO Manager served as the primary enforcement officer for DOE over the leased spaces at the GDPs. With respect to enforcement actions, the RO Manager independently considered the recommendations of the RO staff and coordinated enforcement actions with the appropriate DOE Headquarters (DOE/HQ) office and obtained any necessary legal reviews. The RO Manager also approved and issued all escalated enforcement actions, including Orders, Notices of Proposed Imposition of Civil Penalties, Civil Penalties, and Severity Level I, II, and III violations issued without civil penalties pursuant to the ROA.

2.2.4 *Regulatory Oversight Staff*

The RO staff was composed of a group of multi-disciplined individuals that could be utilized on a number of technical tasks involving the performance of reviews of proposed enforcement actions submitted by the Site Safety Representatives (SSR) and other DOE inspectors to ensure technical adequacy and conformance with established RO policy, guidance, and precedents. The RO staff also performed reviews of all inspection and enforcement findings; ensured representatives of the DOE/HQ technical staff had an opportunity to comment on the enforcement findings and proposed recommended action; participated in enforcement conferences as directed by the RO Manager; participated in scheduled conference calls with the SSRs; provided support to the SSRs by evaluating Justifications for Continued Operation (JCO) for potential Unreviewed Safety Question (USQ) conditions or for conditions discovered that placed the facility outside the operating bounds of the Operational Safety Requirements (OSRs); conducted periodic, scheduled DOE appraisals of the ROA (Functional Area Inspections); performed Operational Readiness Evaluations (ORE) for major modifications to the OSRs (such as resumption of HEU refuel operations); and performed reviews of event reports and other USEC-submitted documentation for RO Manager action, concurrence, and/or approval.

In addition, the RO Staff was used to provide unique project assistance, when needed, to support the NRC Certification effort of PORTS. For example, the OSR to Technical Safety Requirement (TSR) transition effort, DOE Compliance Plan Project, and the Safety Analysis Report Upgrade Project.

The RO staff had a contingent of administrative support personnel to track and trend regulatory performance history, track administrative actions required or DOE comments made to DOE/HQ, NRC, and/or USEC requests made. The administrative staff also optically digitized all documents received or were transmitted to maintain the integrity of the program.

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2.2.5 Site Safety Representatives (SSRs)

The SSRs were site-based inspectors that managed all DOE inspection-related activities at the GDPs. The SSRs assigned all inspection report numbers utilized by the various DOE inspections conducted at the facility. The SSRs also attended inspection entrance and exit interviews; reviewed all violations of regulatory requirements and recommended enforcement action; prepared appropriate documentation of findings and enforcement action; recommended the severity level and mitigation of a civil penalty, if any; reviewed responses to Notices of Violations submitted by USEC to determine whether the corrective actions identified to prevent recurrence of the issue were appropriate; prepared, or provided input to, evaluations of USEC's responses to proposed civil penalties and orders, as appropriate; reviewed USQ conditions and supporting JCOs; and attended/participated in enforcement and management conferences and regulatory issues meetings with USEC.

2.3 Program Structure

The DOE RO Program was created to assure that the public and worker health and safety were protected and the common defense and security of the United States were provided for, with respect to the operation and maintenance of the PORTS, as its previous DOE management action was transferred over to the USEC. Under DOE RO inspection activities, if this protection could not be reasonably assured by USEC's actions, USEC would not be permitted to continue to operate or maintain the facility. Based on the Articles of the ROA, USEC has the ultimate responsibility for the safety of its activities and the safeguarding of nuclear facilities and materials used in its operation. The DOE RO function only ensures that USEC has adequately discharged this ultimate responsibility.

In order to accomplish this DOE RO function, the RO Manager established an inspection program that was not only aimed at confirming compliance on the part of USEC with the ROA Implementation Requirements, but also on evaluating the adequacy and effectiveness of USEC's performance to operate and maintain the facility. This was accomplished by the independent inspection effort of the SSRs. The SSRs had the freedom and authority to review or investigate any of the nineteen (19) functional areas of the ROA, and to direct the performance and scope of special and functional area inspections as he or she deemed appropriate.

All inspections conducted were of two basic categorizations: routine and special. Routine inspections were performed on a planned, and scheduled basis and made up the core of the program. The purpose of routine inspections was to maintain ongoing assurance of USEC's compliance with the requirements of the ROA. This effort was characterized in large part by repetitive, cyclic inspection of the 19 functional areas described in Section 3 of the ROA by the SSRs. The SSRs devoted approximately 60% of their available on-site time to direct inspection. In addition, at least 15% of this direct inspection time was conducted outside normal hours and during each shift of facility operation.

The site-based inspection activity was supplemented by inspections and appraisals conducted and coordinated out of the DOE Oak Ridge office. These inspection activities were conducted at a greater technical depth than those conducted by the SSRs. The frequency for these inspections were delineated in Section 4.2, Table 4.2, *DOE Appraisal Frequency*, of the ROA. In both the SSR inspections and ROA Functional Area inspections (DOE Appraisals), the RO Manager had the authority to modify the PORTS inspection program based on USEC's regulatory performance.

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In contrast to the routine inspections, special inspections were performed in response to non-routine events or circumstances. The level and extent of effort expended on a special inspection was determined by the RO Manager based on the degree of threat or risk to public health and safety presented by the situation or the nature and source of the event resulting in the need for the special inspection. Examples where special inspections may result include, but are not limited to: allegations and concerns, incidents and unusual events, special follow up inspections of committed corrective actions not covered by the routine inspection program, response to threats, and a situation outside the defined written program of routine inspections necessitating a special inspection.

A listing and summary of all SSR, Functional Area and Special Inspections conducted at PORTS has been enclosed as Attachment B. The statistics associated with the issued DOE Inspection Reports as to the number and type of new and closed findings, has been provided as Attachment C. Specific details on each issue identified in each Inspection Report issued, including its history to closure or escalated enforcement action, has been provided in Attachment D.

2.4 Program Scope

The DOE RO inspection program was developed taking into account several factors which directly affect the scope, depth, and emphasis of the inspections conducted. These factors include:

- The inspection program requirements defined in the documents authorizing the RO function,
- The safety significance of lessee operations being inspected,
- The DOE resources available to implement the inspection program, and
- the NRC inspection activities planned to be conducted at PORTS as detailed in the NRC Master Assessment Plan.

As a result of these considerations, the RO staff developed and implemented a *Regulatory Oversight Inspection and Enforcement Manual* (RO Manual) which was issued on January 1, 1994. This document contains all the administrative and inspection procedures that are required to implement the 19 functional areas of the ROA. This document also provides the guidance necessary for the SSRs to conduct their day-to-day inspections of the leased GDPs.

2.5 Training & Qualification of ROA Inspection Personnel

2.5.1 SSR Training and Qualification

Formal training of the SSRs began in September 1993 which included 390 classroom hours of instruction with additional required reading and self-study. A significant portion of the course work consisted of the formalized Facility Representative's *Advance Nuclear Course* (M.L. Chew and Associates), NRC's *Fundamentals of Inspection* course (NRC-G-101), NRC's *Inspecting for Performance* course (NRC-G-303), the *Gaseous Diffusion Technology* training course (R.H. Dyer and Associates), and DOE's *Conduct of Operations* course. The SSRs also received site required training, such as *Facility Unescorted Access* training, site *General Employee Training* (GET), *Radiation Worker II* training, a 40-hour *HAZWOPER Basic 24 - Training for Hazardous Waste Operations* course, a Security briefing, and specialized nuclear criticality safety training courses.

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On June 14, 1994, the two PORTS SSR candidates underwent an oral board examination in Oak Ridge, Tennessee to certify them as SSRs. Neither SSR had difficulty in the examination and no provisional qualification requirements were imposed on either of them. In addition, since their qualification, the SSRs have undergone continuing professional and personal development training. This training has enabled the SSRs to better relate to the diverse nature of responsibilities and pressures each of the GDP Managers has to deal with in order to meet production goals, as well as, to ensure the safety of their personnel, and the protection of plant equipment and security information.

2.5.2 DOE Matrixed and Contractor Personnel

All DOE matrixed and contracted inspection personnel underwent a one-week indoctrination training program which included, the *Gaseous Diffusion Technology* training course, *DOE Regulatory Oversight Manual* training, GET, site-specific security (*Facility Unescorted Access*), and in some cases, site-specific *Escort Training*. Those individuals given lead responsibilities during RO inspections or project management alignments, had to clearly demonstrate from previous experience, their capabilities in these areas before they were assigned these key tasks.

2.6 Inspection Follow-up System (IFS)

It was RO policy to carefully manage the follow-up of open inspection issues that required further review by DOE. As inspection issues were opened in the DOE Inspection Reports, which included Notices of Violations (NOV), Non-Cited Violations (NCV), Notices of Deviation (NOD), Unresolved Items (URI), and Inspection Follow-up Items (IFI), these items were entered into the DOE Inspection Follow-up System (IFS). The master IFS database was managed from Oak Ridge, Tennessee with the data files being periodically uploaded to the SSRs IFS database files. The overall responsibility for the accuracy of the data in the IFS database was assigned to the SSRs. The IFS data was completed concurrent with the issuance of each DOE Inspection Report.

Further, as information was received at DOE/ORO that was either directly (e.g., response to an NOV) or indirectly-related (e.g., JCO) to these issues, it was entered into the IFS to assure that appropriate consideration was given to the issue's safety significance. The issues were also prioritized for timely closeout, particularly those having high safety significance or those older than three months. Other older, less significant IFS issues were given higher priority for closure after the first annual Functional Area inspections were completed. All subsequent inspections of open IFS issues, whether leading to closeout or not, were documented in a DOE Inspection Report, and re-processed into the IFS similar to that in which it was initially issued. The final IFS printout summary for all PORTS inspection items has been enclosed as Attachment E.

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3.0 ROA AUDITS AND APPRAISALS

Section 4.2.2, *Audits and Appraisals*, of Chapter 4, *Department of Energy Oversight*, of the ROA provides the RO Program description for comprehensively evaluating PORTS to verify its conformance with the *Implementation Requirements* established in Section 3 of the ROA. The approach identified in the ROA, includes the performance of USEC self-assessments, in addition to DOE inspections, reviews, and other activities set forth in Chapter 4 of the ROA. This combination of USEC and DOE assessments, coupled with the USEC commitments contained within the ROA, were determined to provide the adequate assurance that the Leased Premises would continue to comply with the Nuclear Safety and Safeguards and Security requirements set forth in Chapter 3 of the ROA during the interim regulatory oversight period.

A summary of all DOE Appraisals and inspections conducted at PORTS has been compiled and enclosed as Attachment B. The Attachment begins by identifying the breakdown of DOE inspection types performed (SSR, Functional Area, Special, and DOE/HQ) and the DOE Directives that required SSR or Special Inspection follow-up action. A description of each inspection topic follows, then for more detail on each inspection activity itself, a table was provided to identify the inspection period, the exit meeting date, report issuance date, the date when all of the report's findings were closed, the type of inspection that was conducted (SSR, Special, or Functional Area inspection), the purpose of the inspection, the ROA areas inspected, and the number and types of new findings (violation, deviation, non-cited violation, unresolved item, and inspector follow-up item) raised and the number and types of findings closed. Attachment C was added to provide the statistical details associated with what reports/documents were issued during the 39 inspection periods DOE established for the ROA inspection effort (July 1, 1993 through March 2, 1997) which was also used to create the twelve (12) Figures attached to depict the ROA inspection effort.

In addition, Attachment D was provided to further amplify on the historical details associated with each inspection finding, including follow-up to eventual closeout. Attachment D was utilized by the SSRs to electronically monitor and track the status of each ROA inspection item during the ROA leasing period, and identifies all issues cited from the various inspection reports; USEC commitments that were to be verified as a result of a Management or Enforcement Conference action; and open DOE/HQ report findings that required SSR inspection follow-up for closure. For completeness, a copy of the official DOE tracking system, the Inspection Follow-up System (IFS) has been included as Attachment E.

As a collateral SSR follow-up responsibility, DOE/ORO issued a DOE Directive that required the SSRs to periodically provide status on the DOE/HQ performed Independent Self Assessment (ISA) Report. Though status of these issues was being tracked separately from the IFS and the Attachment D, *SSR Status Tracking System*, this ISA status report has been included in this report as Attachment F for completeness.

Finally, a summary of all USEC Internal Appraisal/Audits conducted since the ROA was implemented has been compiled and enclosed as Attachment G of this report. This attachment identifies those USEC Internal Appraisals/Audits conducted by ROA functional area, and by year performed.

A discussion involving the DOE and USEC appraisals conducted at PORTS follows. The DOE Appraisals include the DOE/HQ assessments performed and the DOE/ORO Functional Area inspections conducted. For discussion on the SSR, Special, and DOE Directive Follow-up inspections conducted, see Section 4.0 of this report.

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3.1 DOE/HQ Appraisals

3.1.1 Criticality Safety Management Assessment (NE-32)

On October 18, 1993, a Lawrence Livermore National Laboratory (LLNL) Team was formed to conduct a Criticality Safety Management Assessment at PORTS during the period October 18-22, 1993. The team was made up of four members (two from LLNL, one LLNL consultant, and one from DOE/HQ's Fission Energy and System Safety Group), whose site visit was coordinated through a member of the DOE NE-33 Staff. The focus of the assessment was on the PORTS Criticality Safety Group (CSG) to make a determination of the quality of the criticality safety program in place at the time of the inspection, and its functional relationship with plant operations.

The Team concluded that the site's Nuclear Criticality Safety Approval documentation needed improvement and left their specific concerns with the PORTS CSG to be disposed of by the lessee in accordance with its local corrective action program and to its site priorities. No formal report was issued, nor was there any further action requested of DOE/ORO to perform inspection verification activities.

3.1.2 Independent Self Assessment (ISA) of PORTS Operations

In accordance with the Energy Policy Act of 1992, after certain conditions were satisfied, regulatory oversight for the GDPs was to be transferred from DOE to NRC. In order to anticipate and address the projected change in oversight responsibility, the Secretary of Energy, under the organization of the DOE Oak Ridge Operations (DOE/ORO) office, commissioned a 10-member Independent Safety Assessment (ISA) Team to conduct a compliance and performance-based assessment at the PORTS facility during the period October 25, 1993 and November 12, 1993. The final report for this assessment effort was issued in February 1994.

The purpose of this assessment was threefold. First, the ISA was to examine those reciprocal functional areas that were specified in the DOE/USEC Lease ROA as they were currently being performed to determine whether these areas were achieving their intended objective of assuring nuclear safety and providing safeguards and security for the site. The Team concluded that the plant was being operated with an acceptable nuclear safety program and with effective safeguards and security.

Second, the Team was to assess the current state of compliance these programs were in when compared to the Implementation Requirements identified in Section 3 of the ROA. The Team found a total of 50 concerns, which they felt, if satisfied, would be expected to improve the nuclear safety and safeguards and security programs at PORTS. These 50 concerns have been tabulated for completeness in Attachment F of this report.

Third, the Team was to judge whether the functional areas defined by the ROA and the Implementation Requirements stipulated therein for each functional area, were adequately achieving their intended goals. The Team found that the 19 functional areas listed in the ROA, Appendix A, Section 3, Operational Requirements, adequately addressed the nuclear safety, safeguards, and security issues relevant to PORTS operations. The Team found no areas important to safety had been omitted. Recommendations were made pertaining to amending the basic objectives to two functional areas, Section 3.3, *Operations*, and Section 3.5, *Training and Qualification*.

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The RO staff reviewed the ISA report when it was issued and determined no immediate corrective actions or special inspections were justified. DOE/HQ management upon receipt of the document formally requested DOE/ORO to act upon these recommendations by May 26, 1994 as documented in DOE Memorandum from NE-32 to EO-20, dated April 29, 1993, *Independent Safety Assessment (ISA)*. This memo was followed by a DOE Letter to USEC on May 17, 1994, *CC-70-7003/94-001: Revision to Appendix A to the Regulatory Oversight Agreement*. In this Letter, the DOE/ORO RO Manager proposed changes to ROA Sections 3.2.2.3, and 3.12.2.1, and proposed adding the following new sections: 3.2.2.4, 3.3.2.8, 3.3.2.9, and 3.19.2.3. USEC responded favorably to the request in its Letter to DOE/ORO dated June 30, 1994, and requested a follow-on technical meeting to discuss the changes further. Ultimately, no changes were made to the ROA since the Functional Area Team inspections began at PORTS on May 16, 1994. However, prior to the start of the Functional Area Team Inspections, the ISA concerns and necessary actions were made available to the RO Functional Area Teams so they could focus their inspection efforts on the specific concerns of the ISA. For additional details, See DOE Memorandum from EO-21 to NE-30 dated June 16, 1994, and Attachment F.

In addition, after the issuance of the ISA, USEC met with DOE/HQ and made a response to each concern identified in the report. These responses were delineated in LMUS Interoffice Memorandum, POEF-005-94-65, dated May 31, 1994, *USEC/MMUS Response to Independent Safety Appraisal*. USEC did not formally commit to the dates and actions outlined in their memo. However, MMUS/USEC personnel indicated they would work to completing the actions as if they were commitments. For completeness, these items have also been included in the Attachment F writeup.

As assurance that MMUS/USEC completed these corrective actions as scheduled, or had adequate justification for their not being completed, the RO Manager requested the SSRs to periodically status the items. This request was made under DOE Memorandum dated September 15, 1994, *ISA Concern Follow-Up*. As of June 6, 1996, the PORTS SSRs found that all 50 concerns had been closed out (and in some cases, canceled) by USEC. The SSRs review of these actions indicated that the majority of the issues had not actually been resolved nor corrected. Instead, the issues were just transferred to another action item, or a statement was added that, *[N]o action is recommended or required at this time*. Others were tied to the FSAR Upgrade or to a Nuclear Safety Upgrade (NSU) Project (UEO-1036, *Uranium Enrichment (UE) Nuclear Safety Upgrades Program Plan*, Part 4.0, *Other DOE Requests*). Several of these NSU Projects have been further linked to DOE Compliance Plan Items. All these various connections and displacements have been identified in Attachment F. The Attachment also provides a discussion as to ultimately what action was required or taken to resolve the item to support the NRC Certification effort.

Although, the ISA corrective actions were not fully resolved under the ROA interim regulatory transition period, the ISA did serve as an indicator for concentrated inspections to be performed by the SSRs, and the DOE Functional Area inspection teams.

3.1.3 Radiological Control Evaluation (EH-16)

During the period September 27, 1993 through October 1, 1993, a four-person EH-16 Team conducted an evaluation of the Radiological Control Program at PORTS. The Team concluded that the poor working relationships between the radiological control organization, line management, and the workforce have rendered key aspects of the Radiological Control Program ineffective and unworkable. The Team stated that if the following issues were not resolved, this will likely result in the

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site being unable to attain certification to operate as a commercial entity.

- In some process buildings, the workforce and managers were openly contemptuous of radiological control requirements, initiative, and personnel;
- Radiological control personnel were often not helpful in assisting other plant personnel adjust to the new radiological requirements;
- Supervisory personnel and other managers had not yet received the same level of radiological training as many of their workers which resulted in their inability to enforce radiological requirements and work practices;
- Radiological control requirements had been initiated in some areas which did not appear to be necessary;
- The radiological control organization did not have control over some program elements necessary to ensure worker safety, such as barriers, postings, issuance of dosimetry and bioassay participation. In the case of barriers and postings, building managers had the ability to remove them when the hazards still existed;
- There was little evidence of plant management holding themselves and workers accountable for the failure to take and follow the measures necessary to put an industry standard program in place. This included procedure adherence, adequate familiarization and training for new requirements, and the institution of new programs such as "soft-side" containments; and
- It appeared that plant management, the radiological control organization, and the workforce had elected not to work in a proactive fashion in an attempt to implement new programs and requirements and to improve the working environment. There was no evidence of mutual respect, trust and cooperation.

These issues were cited to the lessee in the context of further improvements in Radiological Control at the site. The Team further requested that the Manager, DOE/ORO, to perform another radiological control review of the PORTS facility, because the evaluation team was concerned that technical issues may still exist regarding the presence of transuranics in some facilities and the adequacy of workplace air monitoring.

Follow-on inspections by the DOE/ORO SSRs, Functional Area appraisal teams and the DOE/HQ ISA, added to the DOE/HQ evaluation results by providing more specific deficiencies related to their concerns and were presented to plant management for corrective action. In addition, current weaknesses with the PORTS Radiation Protection Program have been added to the DOE Compliance Plan as CPI No. 12, "Radiation Protection Procedures," and DOE CPI No. 13, "Posting of Radioactive Materials." Further, the PORTS Radiation Protection Program, as described in Section 5.3, *Radiation Protection*, of the USEC Application to the NRC will be flowed down to its implementing procedures as is required under DOE CPI No. 21, "Management Controls." As a result of these actions, DOE/ORO has concluded that the DOE/HQ observations and concerns from this assessment had been adequately addressed to support USEC's application submittal and NRC's Certification of the facility.

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3.2 DOE Functional Area Inspections (DOE/ORO Appraisals)

A total of five (5) Functional Area Inspections covering the 19 ROA functional areas were performed in 1994. Seventy (70) findings resulted from these inspections, of which all but one has been closed. The one item that remains open is 70-7002/94-13-07), which will be transferred to the NRC for their follow-up inspection. The five functional area inspections have been summarized below. Details on the findings from these inspection reports can be found in Attachment D.

Inspection Report (70-7002)	Subject	No. of Findings
94-13	Regulatory Oversight Appraisal of the <i>Organization Plan</i> (ROA 3.1), <i>Management Controls and Oversight</i> (ROA 3.2), <i>Quality Assurance</i> (ROA 3.6), and <i>Fire Protection</i> (ROA 3.10) ROA Functional Areas.	23
94-14	Regulatory Oversight Appraisal of the <i>Operations</i> (ROA 3.3), <i>Training and Qualification</i> (ROA 3.5), and <i>Maintenance</i> (ROA 3.7) ROA Functional Areas.	11
94-15	Regulatory Oversight Appraisal of the <i>Engineering Reviews</i> (ROA 3.4), <i>Emergency Preparedness</i> (ROA 3.13), and <i>Accident Analyses</i> (ROA 3.17) ROA Functional Areas.	10
94-16	Regulatory Oversight Appraisal of the <i>Radiation Protection Programs, Systems, Designs, and Permits</i> (ROA 3.8), <i>Nuclear Criticality Safety</i> (ROA 3.9), <i>Environmental Protection</i> (ROA 3.11), <i>Waste Management Program</i> (ROA 3.16), and <i>Chemical Safety</i> (ROA 3.19) ROA Functional Areas.	14
94-17	Regulatory Oversight Appraisal of the <i>Nuclear Material Safeguards</i> (ROA 3.12), <i>Packaging and Transporting Nuclear Materials</i> (ROA 3.14), <i>Sampling and Analysis</i> (ROA 3.15), and <i>Security</i> (ROA 3.18) ROA Functional Areas.	12

One Functional Area inspection (70-7001/95-18) was conducted in 1995 involving 10 ROA functional areas which are required to be conducted annually in accordance with the DOE appraisal frequency guidelines of Table 4.2, in Section 4 of the ROA. The inspection identified eight (8) findings, of which all but two, have been subsequently closed. These two items (70-7002/95-18-03 and 70-7002/95-18-06) will be transferred to the NRC for their followup inspection. Thirty-two (32) closures were also made during this inspection.

Because of the indeterminate state of the NRC Certification date, no Functional Area Inspections were performed in 1996. This relaxation of the Table 4.2 inspection requirements was authorized by the RO Manager. Additional background on DOE inspection priorities near the end of the ROA Project have been included in Section 4.3 of this report.

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3.3 USEC Internal Appraisals/Audits

In accordance with Section 4.2.2 of the ROA, USEC was to conduct internal appraisals (i.e., self-assessments), which were to address all of the Implementation Requirements in Chapter 3 of the ROA at least annually. Further, the Implementation Requirements for half of the basic objectives in Chapter 3 were to be addressed during the first half of the each fiscal year. USEC was also to submit its schedule for internal appraisals to the RO Manager at the beginning of each fiscal year. In addition, USEC was to submit its internal appraisal reports and planned corrective actions, including completion schedules, to DOE within 30 days of the completion of the internal appraisal field work.

For completeness, a compilation of the Appraisals/Audits conducted by USEC, and their findings, during the fiscal years (FY) of FY 1994, 1995, 1996, and early 1997, have been enclosed as Attachment G. USEC's Appraisal effort was viewed by the SSRs as evolutionary, beginning with the roll-up Appraisals accomplished in 1994, to performing performance-based audits in 1995, and finally performing audits on an integrated systems approach in 1996.

As to the 1994 Appraisals, these documents were not unique audits nor appraisals. Instead, the PORTS Quality Assurance (QA) organization drew upon the results of specific audit reports it had conducted over the spectrum of, in cases, individual ROA Implementation Requirements. The Appraisal did not identify all cited deficiencies from the individual audit reports. Instead, only those issues deemed "programmatic" were cited. For example, an audit finding stating, *a formal inventory program to account for non-exempt byproduct material sources and to provide for their control, movement, and leak testing should be maintained to also comply with ROA Implementation Requirement 3.18.2.1b*, would not be cited in the ROA Appraisal because the procedure that controls the activities of nuclear material control and accountability had been issued. Failure to follow or expand a procedure, an implementation noncompliance, was not considered a finding against the ROA.

In FY 1995, the QA organization evolved to performing more performance-based audits, i.e., looking at the effectiveness of the programs established. This resulted in less findings because by now, the procedural controls to identify the scope and content of the programs had been identified and/or issued.

In FYs 1996 and 1997, the QA organization finally evolved to its current state of audit performance, that of integrating similarly-related Implementation Requirements and auditing against the total of these requirements systematically, i.e., performance of a vertical slice through all elements that make up that functional area, such as design controls.

DOE inspection guidance for the SSRs to conduct their inspection activity involving the USEC functional area internal appraisals, was provided in DOE Temporary Instruction, TI-3.3/01, Rev. 0, *Inspection of USEC Self-Assessment Activities*, dated November 11, 1994. SSR review of these reports were documented periodically in their monthly SSR inspection reports as these reports became available. The SSRs did focus their attention in this area more so, in DOE Inspection Report 70-7002/95-01. In this report, the SSRs reviewed CY 1994 audits/appraisal conducted, and identified two (2) specific weaknesses with these reports. The SSRs concluded that USEC's program for detecting and preventing problems was weak in the area of self-assessment. The SSRs stated, that this weakness did not constitute a violation of the ROA. Further, the inspectors observed that the lessee's newer 1995 audits/appraisals appeared to be much improved, being more comprehensive

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and rigorous, performance-based audits.

The SSRs performed another review of the lessee's internal audits conducted in 1995 as detailed in DOE Inspection Report 70-7002/96-03. This time, the SSRs noted that the lessee had self-identified a deficiency in its corrective action program (USEC Audit Report No. OPCI96A001, dated 4/2/96) which concluded that the lessee's corrective action plans were not effective in correcting deficiencies or in preventing their recurrence. The SSRs also noted that there was a declining trend on closing corrective actions on time. Approximately 20% of the corrective action plans inspected were found completed as scheduled. Based on the lessee's degraded performance in this area, both from the SSRs and PORTS QA perspectives, DOE convened a Management Conference on May 3, 1996, to discuss, in part, the shortcomings of the lessee's corrective action program.

From review of Attachment G, there are still 9 outstanding corrective actions involving ROA deficiencies still open, and 24 other issues indeterminate as to their closure status. Many of these latter 24 items were issued in FY 1997 and their corrective actions may still be under review. All of these open items have been evaluated by the SSRs and were found to be similar to DOE Compliance Plan Items already characterized for USEC corrective action to meet NRC Certification requirements. No new issues were identified that have not already been addressed by either currently open DOE inspection items or DOE Compliance Plan Issues.

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4.0 DOE ROA OPERATIONAL OVERSIGHT ACTIVITIES

Section 4.2.3, *Operational Oversight*, of Chapter 4, *Department of Energy Oversight*, to the ROA provides the RO Program description for DOE to conduct day-to-day oversight inspections at the PORTS facility, as well as, conduct investigations of all events relating to nuclear safety or safeguards designated as requiring an investigation in DOE Order 5484.1A, *Environmental Protection, Safety, and Health Protection Information Reporting Requirements*. The first operational oversight provision was accomplished by the SSRs who were assigned to PORTS and were given office space by USEC. These two individuals reported to the DOE RO Manager and performed their day-to-day oversight function by maintaining a site presence for surveillance and inspection of operational activities to ensure that the plant continues to meet the Implementation Requirements set forth in Chapter 3 of the ROA. These inspections were documented in *Routine Inspection* reports.

The second operational oversight provision was normally accomplished by a contingent of DOE/ORO and DOE/HQ matrixed inspection personnel or by contracted personnel experienced in accident analysis and event and causal factors. These inspections were documented in *Special Inspection* reports.

See Attachments B-E for additional details on the kinds and types of findings identified in accomplishing these two activities. For pictorial representations of the data compiled in these Attachments, see Figures 1-12. A discussion involving SSR, Special, and DOE directed follow-up inspections conducted at PORTS follows.

4.1 Site Safety Representative (SSR) Inspections

ROP-IP-001, *Site Safety Representative Inspection Activities*, of the RO Manual, provided the guidance for how the SSRs were to conduct their inspection efforts. Basically, the SSRs were to spend approximately 60% of their available on-site time performing direct inspection of the lessee's operational activities. For their remaining time, the SSRs were to review open items for closure, and other administrative responsibilities. In addition, the inspector was to spend at least 15% of this direct inspection time outside normal working hours and during each shift of facility operation. The SSRs were responsible for ensuring that each PORTS facility or area was inspected at a frequency commensurate to the level of risk.

The SSRs performed 33 inspections over the 44 months the ROA was applicable. Their inspection effort resulted in 129 findings. The inspectors also closed 209 findings during the same period.

Initially, from July 1, 1993 through October 20, 1993, the SSRs performed 75 *Walkthrough Inspections*, which were written up in bi-weekly reports and submitted to the PORTS Nuclear Regulatory Affairs (NRA) Manager for resolution. The walkthroughs conducted during November and December 1993, were rolled up into one (1) SSR Inspection Report (70-7002/93-03). The SSRs performed their walkthrough inspections utilizing checklists they had established to review particular elements of the RO Program, applicable to the facility or area under inspection. This two-step inspection process was terminated in early 1994, and was replaced by a single inspection report to cover the inspection period under review. The SSR inspection periods were set to occur monthly. This practice continued up through August 31, 1995, when the inspections went to a 6-week inspection coverage. Specifics on the SSR inspections can be found in Attachments B-E.

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4.2 Special Inspections

ROP-AP-001, *Policy and Guidance for Development of the DOE Regulatory Oversight Program*, of the RO Manual, provides the direction for what constitutes a *Special Inspection*. The purpose of the special inspection is to sharply focus the examination and evaluation of lessee controls on a particular aspect of operation in response to a specific event or condition. The guidance for a special inspection is developed on a case-by-case basis and will be in the form of a general inspection or concept of action.

The level and extent of effort expended on a special inspection is determined by the RO Manager based on the degree of threat or risk to the general health and safety presented by the situation or nature and source of the event resulting in the special inspection. Examples of items that might result in a special inspection include: allegations and concerns; incidents and unusual events; special follow-up inspections of corrective actions not covered by the routine inspection program; a response to requests; or a situation outside the defined written program of routine inspections necessitating a special inspection.

During the time frame July 1, 1993 through March 2, 1997, seven special inspections were conducted at PORTS. These involved the following issues:

Inspection Report (70-7002)	Subject	No. of Findings
95-13	Observation of the full participation Emergency Response Exercise conducted on January 11, 1995	1
95-14	DOE response to a failure to follow NCS procedures involving the X-705 microfiltration and filter press	0
95-17	Evaluation of the integrated response capabilities in conducting the 1995 full participation Emergency Response Exercise	0
96-09	Evaluation of waste management controls associated with PCB/R waste	1
96-10	Verification of lessee corrective actions taken in response to a DOE <i>Order to Take Action</i> , dated April 5, 1996	2
96-11	Evaluation of the circumstances involving the movement of a 14-ton cylinder with mobile equipment prior to the OSR-required 5-day cooldown period	2
97-02	Evaluation to determine if the NCSA upgrade commitment schedule was sacrificing NCSAE quality	0

Since the conduct of these inspections, three (3) findings still remain open (70-7002/96-09-01, 70-7002/96-11-01, and 70-7002/96-11-02) and will be transferred to the NRC for their follow-up inspection. For specifics on the Special Inspections conducted, see Attachments B-E.

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4.3 DOE/ORO Directed Follow-up Inspections

4.3.1 1989 NE-80 Quality Verification Inspection (QVI)

In accordance with DOE Letter, *Quality Verification Inspection Findings Open at Portsmouth*, dated August 24, 1994, the RO Manager informed USEC that ten (10) findings from the 1989 DOE Office of Nuclear Energy Self-Assessment (NE-80), Quality Verification Inspection (QVI) remained open and that DOE was going to continue to track completion of these items because of the potential impact their corrective actions will have on compliance with Chapter 3 of the ROA. The RO Manager further stated, that it was his intent to include follow-up on these QVIs during the upcoming appraisals of PORTS plant activities in accordance with the ROA. Seven (7) of the ten (10) findings directly impacted the ROA and were identified in the subject DOE letter. The SSRs tracked these items as 10 IFIs, which are identified in Attachment D.

The results of DOE's inspection effort to verify USEC's resolution of these issues were documented in DOE Inspection Report 70-7002/97-03. All 10 QVI concerns were closed.

4.3.1 PORTS-93-01, Assessment of HEU Suspension Activities

In accordance with DOE Memorandum, *Request for Action Plan to Address Office of Nuclear Safety Concerns in Supervision Project Assessment Reports*, dated April 6, 1994, the DOE/ORO Manager informed the DOE Director, Office of Uranium Programs, Office of Nuclear Energy (NE-30), that the DOE RO Manager had requested USEC to provide the status on three Office of Nuclear Safety concerns (PORTS-93-01-03, -93-01-07, and -93-01-08), along with the dates for their completion. The USEC response to the RO Manager's request [DOE Letter RI-70-7002/94-003, *Portsmouth Gaseous Diffusion Plant Report (Report No. PORTS 93-01)*, dated February 2, 1994] was attached to this letter. The DOE/ORO Manager further stated that the PORTS SSRs would be reviewing these three areas during their regular inspections. If a concern developed in any area, the RO Manager was to take appropriate enforcement action. The SSRs tracked these items as 3 IFIs, which are identified in Attachment D.

The results of DOE's inspection effort to verify USEC's resolution of these issues were documented in DOE Inspection Report 70-7002/97-03. All 3 DOE/NE-30 concerns were closed.

4.3.2 April 28, 1994, Enforcement Conference

In accordance with DOE RO Manual, Technical Instruction TI-3.2/01, Rev. 0, *Inspection of USEC Implementation of April 28, 1994 Enforcement Conference Commitments*, dated October 6, 1995, the Functional Area inspection teams were to support the SSRs by performing an inspection of USEC's implementation of the commitments made to DOE as a result of the April 28, 1994 enforcement conference. Thirteen (13) specific inspection areas were identified. The SSRs tracked these 13 commitments as IFIs, which are identified in Attachment D.

The Functional Area Team performed this inspection and documented its results in DOE Inspection Report 70-7002/95-18. All of the 13 inspection items were closed by the Team. Two items were found to be not completed as committed, and were added as two examples to the five (5) cited in Notice of Deviation 70-7002/95-18-08. Further, because two commitments were tied to the completion of USEC Nuclear Safety Upgrade (NSU) Projects, an administrative link was made to tie these items to counterpart DOE Compliance Plan Issues.

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4.3.3 Pre-Certification Open Item Issues Closure Plan

In accordance with DOE Memorandum from the RO Manager to the SSRs, *Gaseous Diffusion Plant Inspection Strategy*, dated August 29, 1995, the RO Manager directed the SSRs to concentrate on two main RO inspection activities during the remaining time prior to NRC Certification of the GDPs (at that time, NRC Certification of the GDPs was anticipated would occur in mid-1996 at the earliest). These activities included - (1) inspection of functional areas and related buildings that may not have been addressed in the past, and (2) the closure of open items.

The SSRs provided the RO Manager with their proposed plan to work off the open inspection items in March 1996. The SSRs, at that time, had an open inspection item backlog of 59 items. These 59 items were then translated into the open inspection item work off plan depicted in Figures 8A and 8B.

Development of this plan was instrumental in focusing attention on closing issues, instead of raising new, redundant issues. The result was a reduction of the open inspection item backlog to only 12 issues remaining open at the time of NRC transition at 12:01 a.m. on March 3, 1997. It is anticipated that this number would have been 6 had the DOE inspection reports been issued sooner or USEC could have responded earlier.

4.3.4 May 9, 1996, Management Conference

In accordance with DOE Letter, *EA-70-7003/96-0001: USEC Action Plan in Response to DOE Management Conference*, dated October 30, 1996, the PORTS SSRs were to perform a review and verify completion of fifteen (15) USEC commitments made as a result of the May 9, 1996 management conference, as they applied to PORTS activities. These commitments were formally documented in a USEC letter to DOE (James Miller/USEC to J. Dale Jackson/DOE), dated June 14, 1996. As part of the close out action of this issue, the SSRs were to document the results of this augmented inspection effort in a SSR inspection report. The SSRs tracked these 15 commitments as IFIs, which are identified in Attachment D.

In addition to reviewing USEC's stated commitments made its June 14, 1996 letter, the SSRs reviewed a USEC follow-on letter [USEC letter, *United States Enrichment Corporation (USEC) - Portsmouth Gaseous Diffusion Plant (PORTS) Docket No. 70-7002 - Supplemental Response to Address DOE Management Conference Concerns*, dated October 18, 1996] which was submitted to DOE to address a continuing concern USEC was having with the maintenance and adherence of the PORTS Authorization Basis.

The SSRs also interviewed management and staff personnel, reviewed associated documentation, and performed selected field inspections. The results of USEC's fifteen (15) commitments made were documented in DOE Inspection Reports 70-7002/96-08 and 70-7002/97-03. Between the two reports, all 15 commitments were closed.

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5.0 DOE/USEC MANAGEMENT/ENFORCEMENT CONFERENCES

Appendix B to the ROA, *Enforcement Process*, established the procedure by which DOE could take prompt and vigorous enforcement actions when dealing with USEC when it did not comply with the applicable DOE Implementation Requirements contained in Chapter 3 of the ROA. This included: Shutdown Authority, Notices of Violation, Civil Penalties, and Notices of Deviation for failure of USEC to take agreed upon actions. This procedure had been implemented into the RO Program as ROP-AP-006, Rev. 1, *Enforcement Policy Implementation*, dated May 17, 1994, in the RO Manual.

As part of the escalated enforcement process, DOE will held either an Enforcement Conference or Management Conference with the lessee. These two conference types were determined to be instrumental in communicating DOE's concerns to USEC, allowing USEC an opportunity to provide its plans for improving its management controls at the GDPs, and to provide a focal point of continued communication.

5.1 Enforcement Conferences

There were three (3) enforcement conferences held with USEC that involved PORTS activities. These were held on April 28, 1994, April 26, 1995, and January 15, 1997. The three enforcement conferences have been summarized in Attachment H, enclosed with this report.

No civil penalty resulted in the first enforcement conference. However, three (3) civil penalty actions resulted from the remaining two enforcement conferences. These have been summarized below:

- A \$20,000.00 civil penalty was imposed on May 24, 1995, for improperly moving a liquid UF₆ cylinder with a straddle carrier (Level II Violation 70-7002/94-12-03). The penalty was reduced by \$10,000.00 as a result of the lessee taking prompt corrective action and meaningful attention in correcting the root causes of the violation.
- A \$20,000.00 civil penalty was imposed on January 19, 1997 for failure of the lessee to evaluate a change to its traffic pattern to repair a valve at 20th Street and Pike Avenue which involved a USQ condition (Level II Violation 70-7002/96-08-03).
- A \$20,000.00 civil penalty was imposed on January 19, 1997, for improperly moving a liquid UF₆ cylinder with mobile equipment before the OSR-required five-day cooldown of the cylinder had been completed (Level II Violation 70-7002/96-11-02).

SSR inspection activities related to verifying the completion of USEC commitments made as a result of the April 28, 1994 Enforcement Conference, can be found in Section 4.3.2 of this report.

5.2 Management Conferences

There were two (2) management conference held with USEC that involved PORTS activities. These were held on May 9, 1996, and December 19, 1996. The details of these Management Conferences have been summarized in Attachment H, enclosed with this report. SSR inspection activities related to verifying the completion of USEC commitments made as a result of the May 9, 1996 Management Conference, can be found in Section 4.3.4 of this report.

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6.0 DOE TRANSITIONAL SUPPORT INSPECTION ACTIVITIES

As part of the GDP Certification process, DOE is required to provide a Compliance Plan to the NRC in accordance with Section 76.35(b) of 10 CFR 76. This Section states:

A plan prepared and approved by DOE for achieving compliance with respect to any areas of noncompliance with NRC's regulations that are identified by the Corporation as of the date of application that includes:

- (1) A description of the areas of noncompliance;*
- (2) A plan of actions and schedules for achieving compliance; and*
- (3) A justification for continued operation with adequate safety and safeguards.*

Another part of the GDP Certification process, required USEC to provide NRC with an assessment of its potential accidents and consequences to establish the basis for limiting conditions for operation of the plant with respect to the potential for releases of radioactive material, and its Technical Safety Requirements (TSRs), in accordance with Section 76.85 and Section 76.87, respectively, of 10 CFR 76. USEC deferred providing the safety basis for these technical submittals to the DOE. Instead, USEC provided NRC with DOE's 1985 Final Safety Analysis Report (FSAR), as amended, only updated to include the current operating configuration of the PORTS facility. USEC called this modified version of the FSAR, their Application Safety Analysis Report (SAR). Also, USEC's TSR submittal was again, a modification of their Operational Safety Requirements (OSRs) previously prepared by DOE. All three topic areas of DOE Compliance Plan, FSAR Upgrade, and TSR transitioning, as they relate to PORTS activities, are described in more detail below.

6.1 DOE Compliance Plan POA (Plan of Action) Verification Inspections

USEC had submitted five revisions to their SAR Application document to NRC, and in kind, DOE had issued four Compliance Plan revisions (one USEC revision occurred before DOE could make a separate submittal). The DOE Compliance Plan for PORTS was documented in DOE/ORO-2027/R4, *Plan for Achieving Compliance with NRC Regulations at the Portsmouth Gaseous Diffusion Plant*, dated October 11, 1996. The document contained 44 Non-Proprietary Compliance Plan Issues (CPIs), and 5 Proprietary CPIs. Since the issuance of the DOE Compliance Plan, 3 CPI's were deleted (1 Proprietary and 2 Non-Proprietary), leaving a total of 46 CPIs for transition.

In addition, the entire complement of 46 issues, contained 223 Plan of Actions (POA) statements. Because the NRC Certification date slipped from the original October 1995 date to that of March 3, 1997, many of the POAs were completed. The DOE Compliance Plan POA Verification Team interfaced with the SSRs to verify closure of these items at PORTS during the period October, 1996 through February 14, 1997. The final tally of open issues and open POAs is summarized below. Additional specifics have been provided in Attachment I.

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Variable	Open		Closed		Totals
	Non-Proprietary	Proprietary	Non-Proprietary	Proprietary	
Issues	26	4	16	0	46
Actions	86	49	61	27	223

6.2 DOE Safety Analysis Report Upgrade (SARUP)/Safety Evaluation Report (SER) Verification and Validation Inspections

PORTS was designed and constructed in the early 1950's to supply enriched uranium to both the United States Government Weapons Production Program and to the Atomic Energy Program. At that time, there was no requirement that a safety analysis report be documented to identify the major safety events (major hazards, inhibitors, and sequences) and establish an envelope for safe operations. Between 1980 and 1985, DOE issued a FSAR for PORTS, that included OSRs. The FSAR was produced following the guidance provided in DOE Order 5480.1A, *Environment Safety and Health Program for DOE Operations*, and DOE Order 5481.1A, *Safety Analysis and Review System*. The FSAR analyzed the unique risks associated with the operation of the GDP, examined the impact of these hazards during accident and process upset conditions, and evaluated the risk both on- and off-site personnel.

Since 1990, DOE has established a program to update the safety basis of the PORTS FSAR. This program was known as the GDP SAR Upgrade Program or SARUP as it is commonly referred to. In response to DOE's commitment to support the GDP certification by NRC, the SARUP Program involving the Leased Space facility analysis, was accelerated and re-prioritized to provide the maximum technical input for USEC's certification application submitted to the NRC. Beginning in 1994, the SARUP Program changed its development direction to the new DOE Order 5480.23, *Nuclear Safety Analysis Reports*, as guided by DOE Standards DOE-STD-3009-94 and DOE-STD-1027-92. In early 1996, DOE established a Safety Evaluation Report (SER) Review Team to review the finalized SARUP Program product. This SER Review Team performed site inspections to verify and validate some of the technical information that was provided by the SARUP Project. All site visits were coordinated with the SSRs.

The result of the two projects was the issuance of the Upgraded SAR to DOE in January 1997, and the issuance of the SER on February 3, 1997. The latter issuance of the SER allowed DOE to fulfill its commitment to provide the SAR to USEC by February 15, 1997 so that the USEC SAR review process could begin. DOE actually fulfilled its DOE Compliance Plan, CPI No. 2, *Update the Application Safety Analysis Report*, commitment on February 14, 1997.

With regards to the SER Review Team effort, the Team identified a total of 503 essential review comments addressing areas where further evaluation was required to determine whether acceptance criteria identified in the Upgraded SAR had been met. Of the 503 essential review comments, 244 were identified as significant safety concerns, meaning the concerns reflect conditions that (1) have the potential to involve hazardous material or energy releases with significant consequences to the public, workers, or the environment, and that may otherwise be left without coverage in the SAR and/or (2) are potential technical errors that could invalidate major conclusions relevant to the safety basis. These 244 concerns were identified with an "EA" prefix to

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its item number. The remaining comments consist primarily of acceptance criteria compliance issues and were categorized with an "EB" prefix to its item number.

Proposed resolutions for these EA issues were identified in the SER document. However, the SER Review Team did not necessarily evaluate those resolutions for acceptance. There were also a number of issues that were not resolved, and these have been identified in Attachment J. The conclusion of the SER Review Team was that the SAR met the acceptance criteria for significant safety issues, contingent upon the DOE and the SAR contractor satisfactorily addressing the open items. DOE completed its review of these issues, and as stated earlier, and provided the Upgraded PORTS SAR to USEC on February 14, 1997.

6.3 OSR to TSR Transition

As part of USEC's application submittal to the NRC, USEC included a modified SAR (as previously described in Section 6.2 of this report) and corresponding TSRs which are similar to the OSRs although they were in a slightly different format. In supporting the transition to NRC regulation, the DOE RO staff took steps to facilitate the review and approval of the new TSRs for USEC implementation use during the transition period between NRC's decision to certify and the date on which NRC regulation commenced.

As DOE issued these new TSRs for implementation use at PORTS, the SSRs performed verification inspections to attest that the DOE requirements in the accompanying SER and Transition Requirement (TR) documents were being complied with.

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7.0 PENDING USEC/DOE PORTS TRANSITION ISSUES

Now that the NRC has assumed nuclear regulatory oversight for USEC activities at the GDPs, there is still a need to coordinate DOE and USEC activities at the GDPs to ensure that:

- USEC and DOE activities at the GDPs do not adversely affect the operations of the other party in terms of health and safety, environmental protection, safeguards and security, and nuclear regulatory compliance; and
- Situations with the potential to affect both DOE and USEC operations and personnel, such as emergencies and threats directed toward site activities, are managed in a coordinated manner that protects the health and safety of DOE and USEC personnel, including their respective contractors/subcontractors, and the public.

In keeping with these principles, USEC and DOE signed a *Resolution of USEC/DOE Shared Site Issues*, on January 25, 1996. The details of this statement were later translated into two PORTS Shared Site Issues (SSI) procedures, SSI/PO-P001, *Administration of Shared Site Issues*, Rev. 0, dated October 30, 1996, and SSI/PO-P002, *Administration of Radiation Protection Issues*, Rev. 0, dated October 30, 1996. Both procedures formalized the mechanisms for interface and control necessary to implement the DOE and USEC shared site agreement.

Review of these shared issues, indicated that thirteen (13) issues have been identified back in early 1996 that were in the working stages of resolution, and sixteen (16) additional items were identified yet to be resolved. Since then, the following 12 items have been completed:

- FSAR Upgrade (partial - DOE submitted Upgraded SAR to USEC on February 14, 1997; however, DOE budget impacts are unknown at this time)
- Plant Shared Systems and Continuity of Essential Services
- Safety Management Controls
- Control of Work Activities and Interface
- Coordination and Notification of Plant Changes
- Emergency Management Coordination
- Third Party Activities on GDP Sites
- Physical Protection Coordination
- Event Notification
- Helipad Access
- Communication of Incident Information and Media Coordination
- Radiation Protection Exposure Monitoring and Controls

As of March 3, 1997, eight (8) items were being worked for resolution, and eleven (11) issues remained unresolved. All 19 open issues have been identified in Attachment K.

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8.0 DOE OPEN ITEMS BEING IDENTIFIED TO NRC

In accordance with DOE Compliance Plan Issue No. 1, *Transition from DOE Regulation to NRC Regulation*, USEC is to identify to NRC on the date that NRC assumes regulation authority for PORTS, a listing of all open USEC commitments made to DOE. The following constitutes the open inspection, compliance plan, and regulatory relief items that DOE has identified are open as of March 3, 1997. Other commitments made by USEC to DOE in LERs, correspondence, etc., will be identified to NRC by USEC.

8.1 DOE Inspection Items

There were 12 DOE inspection items that were still considered open at the conclusion of the DOE SSR inspection period ending March 2, 1997. These open items, identified in Attachment L, will be identified in DOE Inspection Report 70-7002/97-03. In addition, to facilitate the closeout inspection effort at PORTS, 13 inspection items were administratively closed because the issue raised was similar to a DOE Compliance Plan item. Leaving these items open would have required a redundant closure verification to be performed by NRC. The identity of these 13 issues has been provided in Attachment M.

8.2 DOE Compliance Plan Items

At the conclusion of the DOE Compliance Plan on-site verification of completed USEC Plan of Action (POA) items on February 7, 1997, there were 86 Non-Proprietary, and 49 Proprietary POAs that remained open. These 135 open POAs have been tabulated in Attachment I.

8.3 Justifications for Continued Operation (JCO) for PORTS Potential Unreviewed Safety Question (USQ) Issues

During the course of the ROA, DOE/ORO exercised enforcement discretion by allowing USEC to continue to operate, even though the facility was operating outside of the operating bounds of the FSAR or OSR/TSRs, provided USEC submitted to DOE a Safety Evaluation (SE), JCO or USQD that showed sufficient compensatory measures had been evaluated to be taken to ensure the health and safety of plant workers and the public. The JCOs in effect at the time of transition have been tabulated in Attachment N. This data was acquired from the USEC Nuclear Regulatory Affairs (NRA) Staff at PORTS who has been tracking the site's JCO activities. The NRA Manager identified to the SSRs, that all JCOs were expected to be resolved by March 3, 1997, and none would be in effect under NRC regulatory oversight. The only JCOs applicable at that time would be the JCOs specified in the DOE Compliance Plan.

The SSRs verified that the five (5) JCOs identified in Attachment N were being tracked by the site's Operations organization by reviewing PORTS Morning Report, dated February 27, 1997.

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9.0 LESSONS LEARNED

The DOE/ORO Regulatory Oversight Program for the GDPs was effective in demonstrating that the GDPs could continue to be operated safely as the plants transitioned their management systems, controls, and oversight programs, plans and procedures from a DOE to NRC regulatory environment. Although both the DOE and NRC regulatory oversight approaches assure the protection of the workers and the public, and promote the common defense and security, there are differences that need to be transcended before a facility can meet the conditions for an NRC Certificate of Conformance or License to operate.

Under DOE, regulatory oversight has generally been from the perspective of a knowledgeable owner-operator who placed emphasis on prescriptive requirements under a compliance-based and performance-oriented DOE Orders System. This was coupled with direct DOE involvement in day-to-day facility operations. The NRC, on the other hand, has no owner-operator responsibilities for any of the nuclear facilities it oversees. Further, NRC stresses greater formality in documenting operating practices than DOE does, primarily so that there is a written record of commitments made by the operators of these facilities to provide commensurate assurance of adequate safety and safeguards under NRC's system of regulations. This places the emphasis for safety on the operator who has the ultimate responsibility for the safety of its activities and the safeguarding of nuclear facilities and materials used in its operation. The NRC function only ensures that the operator has adequately discharged its ultimate responsibility.

The transition that was required for this GDP cultural evolution to occur required a tremendous amount of flexibility by DOE in granting USEC regulatory relief in order for USEC to initiate many of its newly developed programs and operational controls to operate under the NRC regulatory environment. While these new management controls were placed into service, DOE still had to maintain its regulatory oversight responsibility both for the facilities that transitioned to the new requirements, as well as the facilities still under the old controls. As a result of this DOE to NRC transition process, several lessons learned were identified from an inspection and enforcement (I&E) perspective which would help facilitate the future transition of other DOE facilities to NRC regulatory oversight. These lessons learned include both positive and negative observations derived from DOE/ORO's experience in the GDP certification process:

9.1 Activities Required Prior to Initiating the RO Program

1. **Emulate the NRC Organization and Methodology as Much as Possible** - it is essential that the DOE regulatory oversight organization structure itself to conduct its operations parallel to the way NRC conducts its regulatory and inspection operations. Emulating the NRC will not only assist the regulated organization in experiencing the upcoming NRC regulatory inspection environment, but it will also foster the proper climate for transitioning the organization to be more function-oriented in conducting its operations (e.g., one plant maintenance organization), as well as to allow the organization to upgrade its programs, plans, and procedures plant-wide while still operating its facilities. To accomplish this NRC posture, four actions need to occur:
 - a) **Separate the Regulatory Oversight Function Totally from the DOE Operation and Management Functions** - it is essential to establish the regulatory oversight organization totally independent of the DOE management and production functions of the facility. The RO Manager's organization needs to be totally independent of all production, cost, schedule, and budgetary concerns in order to focus its activities on transitioning the facility to the NRC way of doing business. This includes both

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the regulation and inspection functions. The DOE O&M functions should remain with the DOE Site Manager.

Under this new DOE organizational structure, the DOE RO Manager must also have complete single-source responsibility and authority for discharging those oversight responsibilities traditionally assigned to both the DOE headquarters and field organizations. The NRC will assist DOE in this process by consulting on how to develop this new organizational structure, as well as, on how to train regulatory and inspection personnel. Contracting out for experienced ex-NRC personnel will also satisfy this function.

- b) **Create a Separate Regulatory Issues and I&E Entity Within the New RO Organizational Structure** - it is essential that the RO organization be divided into two branches similar to that performed by the NRC. One branch should provide the technical support to review all regulatory issues raised by either the site or by DOE field, regional, or headquarters personnel. This branch will also process all Authorization Basis document revision proposals, and issue the authorizing DOE Safety Evaluation Reports and transmittal documents. The other branch should be the I&E arm of the organization that verifies and validates that the regulated organization is complying with its operating commitments and DOE ROA regulations.
- c) **Issue Clear and Concise Regulations** - it is essential that the ROA be written in terms that can be clearly understood by both the regulator and the organization that is to be regulated. The ROA needs to be developed from existing DOE Orders and Standards which directly impact nuclear safety and safeguards and security. These documents need to be either referenced in the ROA requirement for strict compliance if directly coupled to that ROA requirement, or a DOE stand-alone Standard should be written to help facilitate the understanding of the criteria that made up the regulation and how it will be enforced. Under NRC's terminology, this would be a NUREG or Nuclear Regulatory Standard. As an example that might require a DOE Standard to be written would be to explain what is meant by the ROA Implementation Requirement, *[A] corrective maintenance program shall be implemented to ensure that prompt and effective maintenance is performed on malfunctioning nuclear safety systems, safeguards, and security equipment.*
- d) **Involve the Office of Chief Counsel in all Formal Lessee Communications** - it is essential to involve the Office of Chief Counsel (OCC) in all regulatory matters involving the regulated organization. The ROA is a legal document and DOE's divesting of its management and production functions to the lessee does not eliminate DOE's overall legal responsibility to require the lessee to take action sometimes the lessee may consider is contrary to its understanding of the terms and conditions of the lease or to cite the lessee with a violation that could cause financial harm to its operations through the interaction of another government agency such as OSHA or the EPA. In order to avoid any potential legal action from the lessee, OCC involvement needs to occur for all formal meetings held (e.g., enforcement conferences), as well as for the review and concurrence of all written documents transmitted to the lessee.

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2. **Maintain Up-to-Date Authorization Basis Documents** - it is essential that the authorization basis documents for which the ROA requirements are to be based upon, are accurate and maintained up-to-date with the current facility configuration and with current DOE-approved analysis methods. In the case of the GDPs, DOE stopped updating their FSARs in 1986, which necessitated a significant upgrade before NRC would certify the facilities. Similarly, if these documents have not been maintained at another DOE installation, an attempt must be made by the regulated facility to evaluate all issued safety evaluations made to the current plant configuration to identify any "as-found" conditions that may constitute an Unreviewed Safety Question requiring DOE approval to continue operating in that condition or return it to its original configuration. As a minimum, the regulated facility's Operational Safety Requirements (OSRs) or Technical Safety Requirements (TSRs) must be an accurate reflection of the facility's current operational practices until the Final Safety Analysis Report (FSAR) can be updated.
3. **Identify all Legacy Issues** - it is essential that a walkthrough of all facilities to be regulated is conducted and that all equipment and/or materials not specifically identified under the Leased Spaces be reconciled. At the GDPs, only DOE waste materials were accounted for. Uranium-contaminated equipment brought on-site for spare/piece-part replacement or for decontamination, were stored in the process buildings prior to the ROA without a Nuclear Criticality Safety Approval (NCSA) being documented. If another DOE installation has DOE equipment or materials stored in it, then these storage space should be excluded from the Lease and controlled as a DOE Space.

Similarly, DOE Orders that were not implemented or fully implemented (e.g., DOE Order 5480.22, *Technical Safety Requirements*), or if DOE waivers were received in the past for a current operating condition [e.g., a design criteria waiver was granted by DOE to the GDPs prior to the ROA involving the Criticality Accident Alarm System (CAAS) that was carried over by the regulated organization as an exception to implementing the operational requirements for the CAAS system under the ROA], then these issues too need to be reconciled early before they become a certification or licensing issue with the NRC.

4. **Determine How On-Going Pre-Lease Conditions are to be Controlled** - it is essential that the regulated organization identify to DOE all activities currently underway that will not be completed until after consummation of the Lease. At the GDPs, major modifications were underway before the ROA went into effect. Subsequent inspection of the completed modifications before they were put into service under the ROA, presented an enforcement issue because they were considered pre-existing conditions.
5. **Require Corrective Action Plans be Developed for each Identified ROA Exception** - it is essential that when the ROA is prepared, that the regulated organization must identify item(s) not in ROA compliance and present a corrective action plan, with completion dates, for each item. Under the ROA, there is a *Status of Conformance* section. In several cases, the lessee was able to make generalized statements that subsequently negated any ability by the DOE inspector to cite the lessee for a nonconforming condition in that particular ROA activity. For example, the lessee stated, *[N]ot all procedures required to support the quality assurance program have been prepared or approved*. As a result of this statement, no quality assurance (QA) violations were written against the QA Program. Ultimately, the regulated organization had to commit to the NRC in the DOE Compliance Plan, to identify its QA Program and to flow this document down into its implementing procedures to verify that all stated QA requirements had been implemented.

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6. **Baseline the Facility by Performing a Performance-Based Independent Self Assessment (ISA)** - it is essential that DOE baselines the facility prior to implementing the ROA. This ISA assessment was accomplished at the GDPs after the initiation of the ROA, which was too late to initiate any change to the ROA since, as stated earlier, it is a legal document. Accomplishing the ISA before the ROA is initiated would serve four purposes. First, the ISA will make a determination on the degree of compliance the facility's currently established programs are assuring nuclear safety and providing safeguards and security for the site. Second, the ISA will assess the current state of compliance these programs are in when compared to the Implementation Requirements of the ROA. Third, the ISA can make a judgment as to whether the functional areas defined by the ROA and the Implementation Requirements stipulated therein for each functional area, are adequate to achieve their intended goals. Finally, the fourth purpose from this assessment, would be to make a determination as to what nuclear safety upgrades are required in order to bring the facility up to current DOE requirements, as well as, to satisfy expected NRC requirements. This latter purpose will also serve as the cost baseline for any proposed DOE reimbursable Nuclear Safety Upgrades that the regulated organization may request as part of its certification cost to meet the identified NRC requirements.

9.2 Activities Required After Initiating the RO Program

1. **Provide Sufficient Administrative and Regulatory Support to the SSRs** - it is essential that the SSRs be provided with sufficient administrative, computer, and regulatory technical support up-front in order to allow them to have adequate inspection time to evaluate the lessee's state of compliance in each leased facility's process and control areas. Because of their high visibility role in representing the RO Manager on-site, the SSRs were severely taxed by information requests received from all avenues within DOE, including the RO Staff, that required significant amounts of their time to follow-up on or to coordinate the activities to acquire the information sought by these individuals. Many of these information requests went beyond the information the SSRs already provided in their morning reports which were required to be submitted daily. Further, since the SSRs were the site point of contact for all DOE inspection-related activities, they soon became overloaded just by the sheer numbers of inspections being performed, the tracking of the findings these DOE inspectors were identifying, including the corrective actions being taken by the lessee to resolve these issues, as well as, following up on the issues even though they were not their own. This workload was in addition to their own normal inspection responsibilities, which included the writing, tracking, following up on, and closing of their own issues.

The result of all these collateral responsibilities was that the work off rate of open inspection issues stalled, rendering a backlog to the extent that significant contractor support was required in the last phase of the transition to NRC regulatory oversight to status and close these issues. To minimize the excessive workload placed on these individuals, the SSRs will require during the entire interim ROA inspection period (depending on the type of DOE facility that may undergo NRC certification) the following support personnel:

a) **Three (3) Full-Time On-Site Personnel**

- One (1) Administrative Assistant on-site to screen incoming phone calls; prepare inspection report and evidence files; type or process finalized inspection reports; prepare the morning and weekly reports, including fact

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sheets; transmit document information requests; handle equipment and supply needs; and to arrange clearances, site access, meeting times, and identify site contacts for visiting DOE inspection personnel.

- At least two (2) full-time technical support personnel on-site to track and trend regulatory issues, follow-up on events, research and prepare inspection reports, respond to DOE/Regional and DOE/HQ requests, closeout open inspection issues, and to conduct special inspection activities, as required.

b) One (1) DOE Regional Office-Based Person

At least one full time technical support person off-site at the DOE Regional Office is needed to analyze LER results for determining degraded management control weaknesses or component failure trends; monitor regulatory performance indicators such as timeliness of the lessee in providing its corrective action plans to resolve identified issues, responsiveness in addressing the generic implication of the identified issues, and ability to meet stated commitment completion dates; identify related DOE issues raised to the regulated organization's corporate counterparts; and to walkthrough all inspection reports and response correspondence to ensure their timely issuance.

2. **Perform Compliance-Based Inspections** - it is essential that the regulated facility meets the requirements defined in its stated programs, plans, and procedures. Because of the amount of regulatory change the regulated organization will be experiencing, the organization can not recognize that performance-based issues, such as, increasing maintenance work request backlogs, constantly changing or shifting work priorities, and/or perceived poorly developed program management controls as a result of failing to follow procedures or inadequate procedures, are also important to be corrected in order to help mitigate the potential for a regulatory issue down the road. These are intangibles and since the regulated organization is experiencing evolutionary change, a compliance-based inspection program will have far more meaning on the lessee to bear in mind, "Say what you do, Do what you say."
3. **Escalate Repetitive ROA Violations** - it is essential that the regulated organization respond to the cause of all cited violations and deviations in its own terms, as well as to identify all remedial corrective actions taken to immediately correct the cited condition, identify all secondary corrective actions to bring the cited condition into full compliance, and to identify all long-term corrective actions to prevent recurrence of the issue in any other program or related operating facility (generic implications). Allowance of this freedom to the lessee to address and correct its own problems, will provide an adequate basis to later request an enforcement or management conference should the noncompliant condition return rendering a repeat ROA violation. This also helps to keep DOE out of managing the facility's operations.
4. **Initiate Stop Work/Show Cause Orders Early in the ROA Regulatory Process** - it is essential that if the lessee makes, causes, or creates a situation where a significant potential exists or existed to potentially threaten worker or public safety or the common defense or security, DOE needs to issue a Stop Work immediately on that activity or to issue a Show Cause Order to demonstrate the importance DOE takes in the safety of its facilities and operations. At the GDPs, it would have been more beneficial to the lessee if

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DOE had issued a show-cause order initially in the area of configuration management before increased management attention was brought to bear in resolving the discrepancy. Further, minimizing the use of these enforcement tools early in the ROA regulatory oversight process will bring greater confusion as to "why now?" (alluding to an NRC concern versus DOE concern) if applied later during the interim transition period.

5. **Evaluate the Effectiveness of Committed Corrective Actions Taken to Resolve Cited Violations and Deviations** - it is essential that DOE evaluate the effectiveness of committed corrective actions cited by the lessee to ensure that the cited regulatory issue has been resolved generically across the entire site, and at other similar installations that will be coming under NRC certification or licensing. Many similar regulatory issues were identified by DOE early during the ROA interim inspection period, but were summarily closed out if the lessee took the specific corrective actions it had committed to. The basis for this approach was because these sites are so large, each of the process buildings were treated as independent facilities. For example, identification of an OSR violation in one building was treated as being applicable to only that one facility because the regulator had not cited any other buildings. Subsequently, another similar violation occurred in another building requiring similar corrective actions.

By DOE holding the item open, and re-inspecting the "issue" at other facilities, identifying the same or related problems, this will eventually cause the regulated organization to identify an effective generic corrective action. Further, by delaying closure of the previously identified finding, not only will this help minimize the number of repeat violations or deviations cited, but it will also cause the lessee to put more resources on resolving the issue because of the growing age of the open issue and increasing regulatory visibility.

6. **Issue ROA Interpretations when Conflicts are Identified** - it is essential that when a differing professional opinion occurs between the regulating and regulated organizations, that the regulator issue an interpretation to explain the regulatory basis for the dissenting requirement. For example, at the GDPs, a recurring issue occurred involving one ROA requirement requiring the regulated organization to report all changes it intended to make to its Authorization Basis documents, and to receive DOE approval "before" the change was "implemented." This caused a lot of confusion because under NRC requirements, NRC is to only be notified if the change constitutes a potential Unreviewed Safety Question (USQ).

Further, under this ROA requirement, Was DOE to approve the modification before it was to be issued to the construction forces to implement the change?, or Could DOE be requested to approve the change before the modified equipment, function, or operation was placed into service? Although a lot of dialogue occurred involving this issue, including DOE's preparation of an interpretation on what constituted the lessee's Authorization Basis documents (the lessee thought the ROA was its Authorization Basis document), no attempt was made to revise the vagueness of the ROA requirement's wording. Should a point of contention exist far beyond a written interpretation, then the regulation should be changed so that it can be more clearly understood.

Overall, because this was a first-of-a-kind operation for DOE, in hind-sight, a number of mistakes were made. However, a number of benefits were also derived from the ROA and certification effort at the GDPs. Some of these benefits included:

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- **USEC Internal Appraisals Shifted to Performance-Based Program Assessments** - USEC Internal Appraisals/Audits in the past have been compliance-based program inspections. With the advent of NRC regulatory oversight and their use of a performance-based inspection approach to regulating its facilities, so too has USEC gone. Though this has caused an additional cultural shock to the facility, i.e., improving performance beyond just meeting the requirements, this change resulted in the end, to increase worker awareness of their regulatory responsibilities. These performance-based findings also caused management to initiate change if the established plant administrative requirements themselves were found impeding worker or plant safety, rather than just leaving the requirement in place and employing "work-around" measures, as was accomplished in the past.
- **Marked Cleanliness of the GDP Facilities** - a true indicator that measures management's attention to its facilities is the degree these facilities are kept clean. Since the implementation of the ROA, the GDP facilities have taken on greater attention to cleanliness, and reduction of contamination control zones to minimize repeat ROA violations radiation protection violations. Focused management attention in doing the job right the first time and cleaning up afterwards, helped to bring attention to detail to the GDP working environment.
- **Revised Problem Identification and Corrective Action Systems** - the previous GDP Nonconformance Reporting System was considered ineffective because of the inability of all personnel to initiate a problem report and to have the problem elevated to upper management attention, if the case warranted it. In the past, a majority of the plant issues cited were relegated to a "track and trend" fate. Since the ROA began, the site has instituted a new Problem Reporting and Corrective Action System, which ensures the root cause of significant conditions adverse to quality are corrected in a timely manner, and that the corrective actions initiated against the issue, are, and have been, effective in preventing the problems recurrence. The new system also allows all plant employees the opportunity to formally identify any plant hazards and/or procedural error they feel needs corrected.
- **Establishment of Regulatory Performance Indicators** - as a result of two DOE Enforcement Conferences and two Management Conference involving PORTS activities, USEC has employed a series of new regulatory-minded performance indicators to its previous production and cost performance indicators. These indicators have increased management awareness in being prompt when identifying or reporting nonconforming conditions to its regulator or to seek relief up-front rather than fix and then inform the regulator.
- **Incorporation of Nuclear Power Plant Experience Lessons Learned** - because of similar problems that occurred at PGDP but not at PORTS and vice versa were not communicated between the GDPs, the GDPs experienced regulatory distress which sometimes impacted production. For example, testing of both the inboard and outboard autoclave isolation valves was recognized at PORTS, and was being accomplished there. However, this requirement and practice was never relayed to PGDP, resulting in a subsequent enforcement action by DOE. The new Uranium Enrichment (UE) lessons learned program should prevent recurrence of this type problem.
- **Configuration Management is Now Better Understood** - Although elements of a configuration management were in place at the beginning of the ROA transition period, some aspects of the configuration management system involving Safety Systems structures, systems, and components (SSC) were not in place or fully implemented. These include issuance of a SSC List (SSCL), Engineering Design procedures, "As-Built/As-Verified" drawings, engineering data sheets, and physical control and traceability of SSCs. Today, system boundary drawings exist that encapsulates

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those items that are now deemed "Q" and "AQ" SSCs.

- **Program Management Controls have Become More Integrated** - PORTS has taken an integrated approach in solving its management control problems by initiating its Quality of Operations Plan (QOOP) which has prioritized those management controls that need the highest priority of integrated program development, issuance, and implementation, and bringing constant management attention to fulfill its expectations. As a result of this effort, the previously fragmented areas of regulatory issues management, records management and document control, maintenance, engineering, and many other functional areas, have now been centralized under dedicated PORTS Managers for these assigned areas.
- **Legacy Issues were Brought to the Forefront** - Pre-ROA issues that previously went unnoticed were questioned by the DOE Functional Area inspectors which ultimately brought these issues to the forefront of discussion, such as, the changing the facility's configuration without performing a thorough USQD, previous DOE waivers granted, and the applicability of the site's QA requirements to the Laboratory, and Packaging and Transportation.
- **DOE Site Assistance Inspections were Authorized** - In areas where significant problems were identified by DOE, DOE/ORO inspectors evaluated the areas and provided their informal comments to USEC for resolution. These areas included Corrective Action and Commitment Management, USQD Resolutions, and deletion of Pre-ROA IRMS issues.
- **PORTS Safety Basis was Challenged Bringing Definition to Gray Areas** - during several prominent events at the site, DOE investigators questioned various operational practices that had a bearing on the design basis of the plant. These included: questioning the PORTS NRA personnel as to what they felt constituted their "Authorization Basis" documents, the numbers and kinds of Process Gas Leak Detector (PGLD) alarms being received in the Area Control Rooms (ACRs), and how "as-found" conditions were being evaluated for potential USQs (e.g., re-routing of traffic patterns to adjacent cylinder cooling yards).
- **ROA Functional Area Team Inspections Provided more Meaningful Program Assessments** - because of the mix of personnel used to perform the functional area inspections, having backgrounds with DOE, LMUS, INPO, NRC, and the commercial industry, the team was able to pinpoint critical target areas requiring more specialized/focused Inspections or greater USEC attention.
- **Direct Day-to-Day Interface with NRC Resident Inspectors** - provided DOE and USEC with a conduit directly to NRC Region III and with NRC/HQ in helping to resolve regulatory matters that were a concern to all parties prior to NRC Certification of PORTS. This give-and-take process allowed all meaningful issues to be placed on the table for discussion and resolution, rather than to allow the issue to simmer awaiting some regulatory enforcement action to correct it. Items in this area include: CAAS alarm coverage, and shared site issues.

Finally, when all is said and done, the DOE I&E Program did accomplish its primary mission of assuring that the PORTS Leased Premises complied with the Nuclear Safety and Safeguards and Security requirements set forth in the ROA during the interim period that DOE exercised regulatory oversight authority over USEC. Further, as a result of the DOE I&E Program, many deficiencies were identified that had been previously unrecognized because of DOE's role of owner-operator. As a result of bringing these management control and hardware deficient items to the lessee's attention, these items were subsequently identified by USEC to the NRC in its Certification Application submittal which necessitated also placing them into the DOE

DOE to NRC Regulatory Oversight Transition Summary

DOE/ORO/PORTS Inspection-Related Activities

Compliance Plan which is also required by the NRC to be submitted with the application submittal. This in effect, has brought regulatory relief for the regulated organization, which could have resulted in NRC violations, with possible civil penalty impositions, had they not been identified in the DOE Compliance Plan.

DOE to NRC Regulatory Oversight Transition Summary

DOE/ORO/PORTS Inspection-Related Activities

ATTACHMENTS

- A. PORTS Regulatory Oversight Summary
- B. PORTS DOE ROA Inspection Report/Directives Summary
- C. PORTS DOE ROA Inspection Report Statistics
- D. PORTS DOE Regulatory Findings History Report
- E. IFS Summary Report
- F. Status of DOE Independent Self Assessment (ISA) Findings
- G. USEC Internal Appraisal Findings Status Report
- H. Enforcement/Management Conference Background
- I. Open PORTS DOE Compliance Plan of Action Items
- J. Open PORTS DOE FSAR/SER Items - Leased Spaces
- K. Pending USEC/DOE PORTS Transition Issues
- L. Open PORTS DOE Inspection Items
- M. PORTS DOE Inspection Item Closures Based on DOE CPIs
- N. Open JCOs that have Modified Plant Operational Practices

FIGURES

- 1. DOE Regulatory Oversight Program - Organizational Structure
- 2. PORTS DOE Regulatory Oversight Program MAP - Milestones, Activities, and Personnel
- 3. Timeline of PORTS DOE ROA Inspections Conducted
- 4. Timeline of when PORTS DOE Inspection Reports were Issued
- 5. Cumulative Profile of DOE Inspection Findings
- 6. Differential Profile of DOE Findings Profile
- 7. Timeline of DOE Inspection Findings by Finding Type
- 8. Closure Plan of Open DOE Inspection Items
- 9. Profile of DOE Inspection Findings Issued by ROA Functional Area
- 10. Number of DOE Inspections Conducted by ROA Functional Area
- 11. Timeline of DOE Inspections Conducted by ROA Functional Area
- 12. ROA Functional Areas having Open Inspection Items as of March 3, 1997

PORTS DOE REGULATORY OVERSIGHT SUMMARY

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(July 1, 1993 through March 2, 1997)

1. DOE issued 46 Inspection Reports, and held 2 Enforcement Conferences and 2 Management Conferences during the period July 1, 1993 through March 2, 1997. A total of 254 issues (226 inspection findings and 28 USEC committed corrective actions) were identified, of which, 236 items have been closed. In addition, six (6) issued violations were subsequently withdrawn based upon additional information provided by the lessee. A breakdown of the types of inspections and associated findings and closures follow (See also Attachments B - D for additional details):
 - 33 - SSR Inspection Reports (129 findings, 175 closures)
 - 6 - Functional Inspection Reports (78 findings, 32 closures)
 - 7 - Special Inspection Reports (6 findings, 1 closure)
 - 2 - DOE Enforcement Conferences (13 committed lessee corrective actions requiring DOE inspection follow-up)
 - 1 - DOE Management Conference (15 committed lessee corrective actions requiring DOE inspection follow-up)
 - 2 - DOE/HQ Investigation Report (13 findings, 0 closures)
2. There were three (3) Level II violations issued by DOE involving PORTS operations. The first Level II citation (70-7002/94-12-03) involved the improper movement of a liquid UF₆ cylinder with a straddle carrier. This violation resulted in a civil penalty being levied against the lessee in the amount of \$20,000.00. The penalty was reduced by \$10,000.00 as a result of the lessee taking prompt corrective action and meaningful attention in correcting the root causes of the violation. The second Level II citation (70-7002/96-08-03) involved the failure of the lessee to ensure that a proposed change to its traffic pattern to repair a valve at 20th Street and Pike Avenue, did not involve a potential USQ. A civil penalty of \$20,000.00 was issued against the lessee. The third Level II violation (70-7002/96-11-02) involved the improper movement of a liquid UF₆ cylinder with mobile equipment before the OSR-required five day cooldown of the cylinder had been completed. A civil penalty of \$20,000.00 was issued against the lessee. The remaining 62 violations were deemed Level III violations.
3. A total of 18 ROA inspection items were closed based on the provisions of 16 DOE Compliance Plan Issues (CPIs): 8, 9, 17, 19, 21, 23, 24, 26, 30, 32, and A.1 (See Attachment M)
4. Out of 2546 ROA inspection findings and/or USEC commitments evaluated, 12 findings were not able to be closed because (a) there were no counterpart DOE CPIs that could be associated with these items similar to those issues identified in Attachment M; (b) the DOE Inspection Report was issued late so there was insufficient time for the lessee to respond and to perform the adequacy and completeness verification inspection; and (c) the DOE Inspection Report has not been issued. These items will be identified to the NRC to be evaluated as part of their inspection activities. These 12 open DOE Inspection items have been enclosed as Attachment L.
5. The following constitutes the final breakdown of ROA inspection items (this includes the 41 IFIs DOE/ORO directed the SSRs and Functional Area inspectors to follow-up on):

	Total Inspection Items Evaluated	No. of Findings Withdrawn	No. of Directed Followup Items	No. of RO Followup Items	No. of Items Open	No. of Items Closed	No. of Directed Followup Closures	No. of Closures Linked to DOE CPIs
Violations (NOV)	65	6	0	59	8	51	0	5
Non-Cited Violations (NCV)	57	0	0	57	2	55	0	2
Deviations (DEV)	4	0	0	4	2	2	0	0
Unresolved Items (URI)	50	0	0	50	0	50	0	1
Inspector follow-up Items (IFI)	78	0	41	37	0	78	41	10
TOTALS	254	6	41	207	12	236	41	18

PORTS DOE REGULATORY OVERSIGHT SUMMARY

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (July 1, 1993 through March 2, 1997)

6. All DOE ISA findings but one (PR 12.3 involving the PORTS vulnerability assessment does not consider toxicological effects) have been statused as "Closed" or "canceled" by USEC even though many of these issues were only transferred to another problem area's corrective action plan. The one open item was placed on hold to determine the impact of NRC requirements. See Attachment F for details.
7. Nine (9) out of 108 USEC identified findings from its Internal Appraisals/Audits conducted on the ROA Implementation Requirements (as required to be conducted under ROA Section 4.2.2) remain open. The status of 24 other issues remain indeterminate, many of which were issued in 1997. All issues were found captured by current DOE Compliance Plan Issues or open DOE inspection findings.
8. There were 135 out of 223 DOE CPI Plan of Action (POA) corrective actions that were not resolved by DOE prior to the NRC transition and are therefore, being identified to NRC for their disposition. (See Attachment I)
9. The result of DOE's Safety Evaluation Review (SER) review of the PORTS Safety Analysis Report Upgrade Project's (SARUP) finalized product issued in January 1997, resulted in 503 essential review comments, 244 of which were identified as safety significant concerns (designated as "EA"). Of these 244 "EA" concerns, 69 items have not been satisfactorily been addressed and they remain open for the next annual SARUP review cycle. In addition, 3 lesser significant review comments remain open. These have been tabulated in Attachment J. DOE reviewed these comments and issued the Upgraded SAR to USEC on February 14, 1997.
8. PORTS has 5 Safety Evaluations (SEs) open that constitute potential USQ issues that required a Justifications for Continued Operation (JCOs) to be prepared. These issues are contained in Attachment N.

PORTS DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-03)

<u>SSR Inspection Reports (SSRs)</u>	<u>Functional Inspection Reports</u>	<u>Special Inspection Reports</u>	<u>DOE/HQ Reports</u>	<u>DOE Directives</u>
93-003	94-13*	95-13	QVI	DOE Letter dtd 08/24/93
94-01	94-14	95-14	PGDP-93-01	RI-70-7002/94-003
94-02	94-15	95-17	Radiological Control	RI-70-7003/94-001
94-03	94-16	96-09*	Criticality Safety	RI-70-7003/94-003
94-04	94-17	96-10	ISA	TI-3.2/01
94-05	95-18*	96-11*		RG-70-7003/96-001
94-06		97-02		RG-70-7003/96-003
94-07				EA-70-7003/96-001
94-08				
94-09				
94-10				
94-11				
94-12				
95-01				
95-02				
95-03				
95-04				
95-05				
95-06				
95-07				
95-08				
95-09				
95-10				
96-01				
96-02				
96-03				
96-04				
96-05				
96-06				
96-07*				
96-08*				
97-01				
97-03				

* Reports that have issues remaining open and will be identified to NRC for further closeout verification

PGDP DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-03)

Inspection Report No.	Inspection Type	Inspection Topic
93-03	SSR	Walkthrough Inspection for December, 1993 (RP)
94-01	SSR	Monthly Inspection for January, 1994 (Ops, Maint, RP, NCS, Fire Prot, Emerg Prep, P&T, Sampling, and Waste Mg'mt)
94-02	SSR	Monthly Inspection for February, 1994 (Ops, Eng'g Reviews, T&Q, QA, Maint, RP, NCS, Fire Prot, Environ Prot, Emerg Prep, P&T, Security, and Chem Safety)
94-03	SSR	Monthly Inspection for March, 1994 (Ops, Maint, RP, NCS, Fire Prot, Nucl Mat'ls & Safe, Emerg Prep, P&T, Security, and Chem Safety)
94-04	SSR	Monthly Inspection for April, 1994 (MC&O, Ops, RP, NCS, Fire Prot, Environ Prot, and Waste Mg'mt)
94-05	SSR	Monthly Inspection for May, 1994 (Ops, QA, Maint, RP, NCS, Fire Prot, Nucl Mat'ls & Safe, Emerg Prep, Waste Mg'mt, and Accid Anal)
94-06	SSR	Monthly Inspection for June, 1994 (Ops, QA, RP, NCS, Fire Protect, Nucl Mat'ls & Safe, P&T, Waste Mg'mt, and Chem Safety)
94-07	SSR	Monthly Inspection for July, 1994 (MC&O, Ops, Maint, RP, NCS, Fire Prot, Environ Prot, Emerg Prep, P&T, Waste Mg'mt, Security, and Chem Safety)
94-08	SSR	Monthly Inspection for August, 1994 (MC&O, Ops, QA, NCS, Fire Prot, Emerg Prep, P&T, Waste Mg'mt, Accid Anal, Security, and Chem Safety)
94-09	SSR	Monthly Inspection for September, 1994 (Ops, RP, NCS, Fire Prot, Environ Prot, Nucl Mat'ls & Safe, and Chem Safety)
94-10	SSR	Monthly Inspection for October, 1994 (MC&O, Ops, QA, RP, NCS, Fire Prot, Emerg Prep, and Accid Anal)
94-11	SSR	Monthly Inspection for November, 1994 (MC&O, Ops, T&Q, RP, NCS, Fire Prot, and Emerg Prep)
94-12	SSR	Monthly Inspection for December, 1994 (Ops, RP, NCS, Nucl Mat'ls & Safe, and Sampling)
94-13	Functional	ROA Section 4.2.2 DOE Required Appraisal Inspections for 1994 (MC&O, QA, and Fire Prot)
94-14	Functional	ROA Section 4.2.2 DOE Required Appraisal Inspections for 1994 (Ops, T&Q, and Maint)
94-15	Functional	ROA Section 4.2.2 DOE Required Appraisal Inspections for 1994 (Eng'g, Reviews, Emerg Prep, and Accident Anal)
94-16	Functional	ROA Section 4.2.2 DOE Required Appraisal Inspections for 1994 (Environ. Prot, Waste Mg'mt, RP, NCS, and Chem Safety)
94-17	Functional	ROA Section 4.2.2 DOE Required Appraisal Inspections for 1994 (Nucl Mat'l & Safe, Pkg'g & Trans, Sampling & Anal, and Security)
95-01	SSR	Monthly Inspection for January, 1995 (Ops, Eng'g Reviews, Maint, NCS, Fire Prot, and Audits & Appraisals)

PGDP DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-03)

Inspection Report No.	Inspection Type	Inspection Topic
95-02	SSR	Monthly Inspection for February, 1995 (No ROA Areas Evaluated)
95-03	SSR	Monthly Inspection for March, 1995 (Ops, RP, Nucl Mat'ls & Safe, and Emerg Prep)
95-04	SSR	Monthly Inspection for April, 1995 (Ops, RP, NCS, and Security)
95-05	SSR	Monthly Inspection for May, 1995 (MC&O, Ops, RP, NCS, Fire Prot, Environ Prot, Emerg Prep, and Security)
95-06	SSR	Monthly Inspection for June, 1995 (MC&O, Ops, T&Q, RP, NCS, and Fire Prot)
95-07	SSR	Monthly Inspection for July, 1995 (MC&O, Ops, RP, NCS, and Fire Prot)
95-08	SSR	Monthly Inspection for August, 1995 (Ops, QA and Emerg Prep)
95-09	SSR	6-Week Inspection for September - Mid October 1995 (MC&O, Ops, Maint, RP, Nucl Mat'ls & Safe, Emerg Prep, and Waste Mg'mt)
95-10	SSR	6-Week Inspection for Mid October - November 1995 (Organ Plan, Maint, NCS, and Fire Prot)
95-11	SSR	NOT USED - Shifted from Monthly to 6-Week Inspection Report Periods
95-12	SSR	NOT USED - Shifted from Monthly to 6-Week Inspection Report Periods
95-13	Special	Observation of the 1994 Full Participation Emergency Response Exercise Conducted on 01/14/95
95-14	Special	DOE Response to a Failure to Follow NCS Procedures Involving X-705 Microfiltration and Filter Press
95-15	Special (Unannounced)	NOT USED - Unreviewed Safety Question Determination Inspection (Verbally Canceled After Inspection Performed Per DOE ROM)
95-16	Special	NOT USED - Deletion of IRMS Issues Post-ROA (Canceled Per DOE Letter RG-70-7003/96-0003)
95-17	Special	Evaluation of the Integrated Emergency Response Capabilities in Conducting the 1995 Full Participation Emergency Response Exercise
95-18	Functional	ROA Section 4.2.2 DOE Required Appraisal Inspections for 1995 (Organ Plan, MC&O, Ops, Eng'g Reviews, QA, RP, NCS, Fire Prot, Nucl Mat'ls & Safe, Emerg Prep, Accident Anal, Security, and Chem Safety)
96-01	SSR	6-Week Inspection for December - Mid January 1996 (Organ Plan, Ops, T&Q, QA, RP, NCS, and Emerg Prep)
96-02	SSR	6-Week Inspection for Mid January - February 1996 (Ops, RP, NCS, and Environ Prot)

PGDP DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-03)

Inspection Report No.	Inspection Type	Inspection Topic
96-03	SSR	6-Week Inspection for March - Mid April 1996 (Ops, RP, and Chem Safety)
96-04	SSR	6-Week Inspection for Mid April - May 1996 (Ops, Eng'g Reviews, RP, NCS, and Nucl Mat'ls & Safe)
96-05	SSR	6-Week Inspection for June - Mid July 1996 (MC&O, Ops, Maint, NCS, and Fire Prot)
96-06	SSR	6-Week Inspection for Mid July - August 1996 (MC&O, Ops, QA, RP, Emerg Prep, and Waste Mg'mt)
96-07	SSR	6-Week Inspection for September - Mid October 1996 (Ops, T&Q, RP, and Emerg Prep)
96-08	SSR	6-Week Inspection for Mid October - November 1996 (Ops and Emerg Prep)
96-09	Special	Evaluation of Waste Mg'mt Controls Associated with PCB/R Waste
96-10	Special	Verification of Lessee Corrective Actions Taken in Response to DOE Order to Take Action dated 04/05/96
96-11	Special	Evaluation of the Circumstances Involving the Movement of a 14-Ton Cylinder with Mobile Equipment Prior to the Required 5-Day Cooldown Period
97-01	SSR	6-Week Inspection for December - Mid January 1997 (Ops, RP, Nucl Mat'ls & Safe, and Emerg Prep)
97-02	Special	Evaluation to Determine if NCSA Upgrade Commitment Schedule is Sacrificing NCSA/E Quality
97-03	SSR	6-Week Inspection for Mid January - February 1997 (Ops, RP, and Emerg Prep)

PORTS DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-03)

Report No.	Inspect Start Date	Inspect Stop Date	Exit Meeting Date	Report Issue Date	Report Closed Date	Report Status	Insp Type	Purpose of Inspection	Inspection Area(s)	ROA ORs	New Items						Closures					
											V	D	N	U	I	Total	V	D	N	U	I	Total
93-003	12/06/93	12/06/93	None	01/05/94	08/30/94	Closed	SSR	Walkthru inspection of X-710 Tech Serv Bldg	Rad Protection	3.8	1	0	0	0	0	1	0	0	0	0	0	0
94-01	01/01/94	01/31/94	02/09/94	03/03/94	06/05/95	Closed	SSR	Monthly Inspection (January 1994)	Operations Maintenance	3.3	0	0	3	0	8	11	0	0	0	0	2	2
									Rad Protection	3.7												
									Nuel Crit Safety	3.8												
									Fire Protection	3.9												
									Emergency Prep	3.10												
									Pkg'g & Trans	3.13												
94-02	02/01/94	02/28/94	03/09/94	05/06/94	03/12/96	Closed	SSR	Monthly Inspection (February 1994)	Sampling & Anal	3.14												
									Waste Mgt'mt	3.15												
									Operations	3.16	4	0	3	5	0	16	0	0	0	0	2	2
									Eng'g Reviews	3.3												
									Training & Qual	3.4												
									Quality Assurance	3.5												
94-03	03/01/94	03/31/94	04/11/94	06/15/94	03/12/96	Closed	SSR	Monthly Inspection (March 1994)	Maintenance	3.6												
									Rad Protection	3.7												
									Nuel Crit Safety	3.8												
									Fire Protection	3.9												
									Nuel Mat'l & Safe	3.10												
									Emergency Prep	3.12												
94-03	03/01/94	03/31/94	04/11/94	06/15/94	03/12/96	Closed	SSR	Monthly Inspection (March 1994)	Pkg'g & Trans	3.13												
									Security	3.14												
									Chemical Safety	3.18	1	0	4	6	2	13	0	0	0	4	1	5
									Operations	3.19												
									Maintenance	3.3												
									Rad Protection	3.7												

PORTS DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-03)

Report No.	Inspect Start Date	Inspect Stop Date	Exit Meeting Date	Report Issue Date	Report Closed Date	Report Status	Insp Type	Purpose of Inspection	Inspection Area(s)	ROA ORs	New Items						Closures													
											V	D	N	U	I	Total	V	D	N	U	I	Total								
94-04	04/01/94	04/30/94	05/13/94	07/21/94	03/12/96	Closed	SSR	Monthly Inspection (April 1994)	MC&O Operations Rad Protection Nuc Crit Safety Fire Protection Environ Protect Waste Mg'mt	3.2 3.3 3.8 3.9 3.10 3.11 3.16	1	0	1	5	2	10	0	0	0	2	2	4								
94-05	05/01/94	05/31/94	06/10/94	08/30/94	05/25/95	Closed	SSR	Monthly Inspection (May 1994)	Operations Quality Assurance Maintenance Rad Protection Nuc Crit Safety Fire Protection Nuc Mat'ls & Safe Emergency Prep Waste Mg'mt Accident Analysis	3.3 3.6 3.7 3.8 3.9 3.10 3.12 3.13 3.16 3.17	0	0	4	2	0	6	1	0	1	2	1	5								
94-06	06/01/94	06/30/94	07/13/94	10/07/94	03/12/96	Closed	SSR	Monthly Inspection (June 1994)	Operations Quality Assurance Rad Protection Nuc Crit Safety Fire Protection Nuc Mat'ls & Safe Pkg'g & Trans Waste Mg'mt Chemical Safety	3.3 3.6 3.8 3.9 3.10 3.12 3.14 3.16 3.19	1	0	2	3	0	6	0	0	0	4	0	4								
94-07	07/01/94	07/31/94	08/11/94	10/07/94	06/26/95	Closed	SSR	Monthly Inspection (July 1994)	MC&O Operations Maintenance Rad Protection Nuc Crit Safety Fire Protection Environ Protect Emergency Prep Pkg'g & Trans Waste Mg'mt Security Chemical Safety	3.2 3.3 3.7 3.8 3.9 3.10 3.11 3.13 3.14 3.16 3.18 3.19	0	0	0	1	1	2	0	0	0	2	0	2								

PORTS DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7001/97-03)

Report No.	Inspect Start Date	Inspect Stop Date	Exit Meeting Date	Report Issue Date	Report Closed Date	Report Status	Insp Type	Purpose of Inspection	Inspection Area(s)	ROA ORs	New Items						Closures					
											V	D	N	U	I	Total	V	D	N	U	I	Total
94-08	08/01/94	08/31/94	09/09/94	11/18/94	01/08/96	Closed	SSR	Monthly Inspection (August 1994)	MC&O Operations Quality Assurance Nucl Crit Safety Fire Protection Emergency Prep Pkg'g & Trans Waste Mg'mt Accident Analysis Security Chemical Safety	3.2 3.3 3.6 3.9 3.10 3.13 3.14 3.16 3.17 3.18 3.19	0	0	5	4	1	10	0	0	0	1	1	2
94-09	09/01/94	09/30/94	10/27/94	02/13/95	04/09/96	Closed	SSR	Monthly Inspection (September 1994)	Operations Rad Protection Nucl Crit Safety Fire Protection Environ Protect Nucl Mat'ls & Safe Chemical Safety	3.3 3.8 3.9 3.10 3.11 3.12 3.19	3	0	1	0	0	4	0	0	0	0	0	0
94-10	10/01/94	10/31/94	11/22/94	02/13/95	03/12/96	Closed	SSR	Monthly Inspection (October 1994)	MC&O Operations Quality Assurance Rad Protection Nucl Crit Safety Fire Protection Emergency Prep Accident Analysis	3.2 3.3 3.6 3.8 3.9 3.10 3.13 3.17	1	0	1	3	0	5	0	0	0	0	0	0
94-11	11/01/94	11/30/94	12/13/94	04/03/95	04/09/96	Closed	SSR	Monthly Inspection (November 1994)	MC&O Operations Training & Qual Rad Protection Nucl Crit Safety Fire Protection Emergency Prep	3.2 3.3 3.5 3.8 3.9 3.10 3.13	0	0	2	1	1	4	0	0	0	2	1	3
94-12	12/01/94	12/31/94	01/31/95	04/10/95		Closed	SSR	Monthly Inspection (December 1994)	Operations Rad Protection Nucl Crit Safety Nucl Mat'ls & Safe Sampling & Anal	3.3 3.8 3.9 3.12 3.15	2	1	1	1	0	5	1	0	0	0	0	1

PORTS DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-03)

Inspection reports including New Items and Closures																							
Report No.	Inspect Start Date	Inspect Stop Date	Exit Meeting Date	Report Issue Date	Report Closed Date	Report Status	Insp Type	Purpose of Inspection	Inspection Area(s)	ROA ORs	New Items					Closures							
											V	D	N	U	I	Total	V	D	N	U	I	Total	
94-13	05/16/94	05/27/94	05/27/94	09/06/94		Open	Functional	Functional Inspection (Organ, MC&O, QA, and Fire Protection)	Organ Plan MC&O Quality Assurance Fire Protection	3.1 3.2 3.6 3.10	10	0	3	3	7	23	0	0	0	0	0	0	
94-14	06/06/94	06/17/94	06/17/94	08/31/94		Closed	Functional	Functional Inspection (Operations, T&Q, and Maintenance)	Operations Training & Qual Maintenance	3.3 3.5 3.7	7	0	1	0	3	11	0	0	0	0	0	0	
94-15	07/18/94	07/29/94	07/29/94	09/30/94	02/10/97	Closed	Functional	Functional Inspection (Eng'g Reviews, Emergency Prep, and Accident Analysis)	Eng'g Reviews Emergency Prep Accident Analysis	3.4 3.13 3.17	3	0	4	1	2	10	0	0	0	0	0	0	
94-16	08/15/94	08/25/94	08/25/94	11/30/94		Closed	Functional	Functional Inspection (Rad Protection, Nuc Crit Safety, Environ Protection, Waste Mg'mt, and Chem Safety)	Rad Protection Nuc Crit Safety Environ Protect Waste Mg'mt Chemical Safety	3.8 3.9 3.11 3.16 3.19	3	0	4	1	6	14	0	0	0	0	0	0	
94-17	09/19/94	09/30/94	09/23/94 09/30/94	12/07/94		Closed	Functional	Functional Inspection (Nuc Mat'ls & Safe, Pkg'g and Transportation, Sampling & Anal, and Security)	Nuc Mat'ls & Safe Pkg'g & Trans Sampling & Anal Security	3.12 3.14 3.15 3.18	5	0	6	0	1	12	0	0	0	0	0	0	
95-01	01/01/95	01/31/95	02/24/95	05/03/95	01/08/96	Closed	SSR	Monthly Inspection (January 1995)	Operations Eng'g Reviews Maintenance Nuc Crit Safety Fire Protection Audits & Appraisals	3.3 3.4 3.7 3.9 3.10 4.2.2	0	0	0	2	0	2	0	0	0	0	0	1	1
95-02	02/01/95	02/28/95	03/31/95	05/25/95	04/09/96	Closed	SSR	Monthly Inspection (February 1995)	No ROA Areas Evaluated		0	0	0	1	0	1	0	0	7	1	3	11	

PORTS DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-03)

Report No.	Inspect Start Date	Inspect Stop Date	Exit Meeting Date	Report Issue Date	Report Closed Date	Report Status	Insp Type	Purpose of Inspection	Inspection Area(s)	ROA ORs	New Items						Closures					
											V	D	N	U	I	Total	V	D	N	U	I	Total
95-03	03/01/95	03/31/95	05/09/95	06/05/95	12/09/96	Closed	SSR	Monthly Inspection (March 1995)	Operations Rad Protect Nucl Mat'l's & Safe Emergency Prep	3.3 3.8 3.12 3.13	0	0	1	2	1	4	2	0	14	4	0	20
95-04	04/01/95	04/30/95	05/09/95	06/26/95	07/19/96	Closed	SSR	Monthly Inspection (April 1995)	Operations Rad Protection Nuc Crit Safety Security	3.3 3.8 3.9 3.18	0	0	0	1	1	2	2	0	3	2	4	11
95-05	05/01/95	05/31/95	06/29/95	08/18/95	02/13/97	Closed	SSR	Monthly Inspection (May 1995)	MC&O Operations Rad Protection Nuc Crit Safety Fire Protection Environ Protect Emergency Prep Security	3.2 3.3 3.8 3.9 3.10 3.11 3.13 3.18	0	0	6	1	0	7	0	0	2	3	0	5
95-06	06/01/95	06/30/95	07/21/95	10/04/95	12/09/96	Closed	SSR	Monthly Inspection (June 1995)	Managerial Controls Operations Training & Qual Rad Protection Nuc Crit Safety Fire Protection	3.2 3.3 3.5 3.8 3.9 3.10	2	0	0	0	0	2	1	0	1	2	0	4
95-07	07/01/95	07/31/95	08/28/95	11/03/95	07/19/96	Closed	SSR	Monthly Inspection (July 1995)	MC&O Operations Rad Protection Nuc Crit Safety Fire Protection	3.2 3.3 3.8 3.9 3.10	0	0	0	1	0	1	2	0	0	1	0	3
95-08	08/01/95	08/31/95	10/02/95	11/15/95	05/20/96	Closed	SSR	Monthly Inspection (August 1995)	Operations QA Emergency Prep	3.3 3.6 3.13	0	0	0	0	1	1	1	0	1	1	1	4
95-09	09/01/95	10/15/95	11/22/95	01/08/96	12/09/96	Closed	SSR	6 - Week Inspection (Sept - mid Oct 1995)	MC&O Operations Maintenance Rad Protection Nucl Mat'l's & Safe Emergency Prep Waste Mg'mt	3.2 3.3 3.7 3.8 3.12 3.13 3.16	2	0	0	0	0	2	3	0	4	4	1	12

PORTS DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-03)

Report No.	Inspect Start Date	Inspect Stop Date	Exit Meeting Date	Report Issue Date	Report Closed Date	Report Status	Insp Type	Purpose of Inspection	Inspection Area(s)	ROA ORs	New Items						Closures					
											V	D	N	U	I	Total	V	D	N	U	I	Total
95-10	10/16/95	11/30/95	12/20/95	03/12/96		Closed	SSR	6 - Week Inspection (mid Oct - Nov 1995)	Organ Plan Maintenance Nuc Crit Safety Fire Protection	3.1 3.7 3.9 3.10	1	0	1	0	0	2	3	1	5	6	2	17
95-11						VOID	SSR	Not Used (Shifted to 6-Week Inspections)			0	0	0	0	0	0	0	0	0	0	0	0
95-12						VOID	SSR	Not Used (Shifted to 6-Week Inspections)			0	0	0	0	0	0	0	0	0	0	0	0
95-13	01/03/95	01/14/95	01/14/95	05/11/95	01/22/96	Closed	Special	Observation of the Full Participation Emergency Response Exercise conducted on 01/14/95	Emergency Prep	3.13	1	0	0	0	0	1	0	0	0	0	0	0
95-14	01/11/95	01/13/95	01/13/95	04/03/95	04/03/96	Closed	Special	Response to failure to follow NCS procedures for operation of the X-705 microfiltration and filter press	Nuc Crit Safety	3.9	0	0	0	0	0	0	0	0	0	0	0	0
95-15						Cancel	Special	Unreviewed Safety Question Determination (USQD) Requirements (Performed in 95-18)			0	0	0	0	0	0	0	0	0	0	0	0
95-16						Cancel	Special	Pre-ROA IRMS issues deletion (Replaced by RG-70-7003/96-001 and RG-70-7003/96-003)			0	0	0	0	0	0	0	0	0	0	0	0

PORTS DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-03)

Report No.	Inspect Start Date	Inspect Stop Date	Exit Meeting Date	Report Issue Date	Report Closed Date	Report Status	Insp Type	Purpose of Inspection	Inspection Area(s)	ROA ORs	New Items						Closures					
											V	D	N	U	I	Total	V	D	N	U	I	Total
95-17	11/03/95	11/04/95	11/04/95	01/22/96	01/22/96	Closed	Special	Evaluate the Teamwork '95 Emergency Exercise	Emergency Prep	3.13	0	0	0	0	0	0	1	0	0	0	0	1
95-18	10/31/95	11/08/95	11/08/95	01/31/96	[REDACTED]	Closed	Functional	Functional Inspection (MC&O, Ops, Eng'g Reviews, QA, Rad Protection, Nucl Crit Safety, Fire Protection, Nucl Mat'ls & Safe, Emerg Preparedness, Accident Analysis, Security, and Chemical Safety)	MC&O Operations	3.2	6	1	1	0	0	8	5	0	7	1	19	32
									Eng'g Reviews	3.3												
									Qual Assurance	3.4												
									Rad Protection	3.6												
									Nuc Crit Safety	3.8												
									Fire Protection	3.9												
									Nucl Mat'ls & Safe	3.10												
									Emerg Preparedness	3.12												
									Accident Analysis	3.13												
									Security	3.17												
									Chemical Safety	3.18												
									Chem Safety	3.19												
96-01	12/01/95	01/15/96	01/31/96	04/09/96	[REDACTED]	Closed	SSR	6 - Week Inspection (Dec - mid Jan 1996)	Organ Plan	3.1	1	0	0	0	0	1	5	0	3	2	1	11
									Operations	3.3												
									Training & Qual	3.5												
									Qual Assurance	3.6												
									Rad Protection	3.8												
									Nuc Crit Safety	3.9												
									Emergency Prep	3.13												
96-02	01/16/96	02/29/96	04/04/96	05/20/96	05/20/96	Closed	SSR	6 - Week Inspection (mid Jan - Feb 1996)	Operations	3.3	0	0	0	0	0	0	2	0	1	1	3	7
									Rad Protection	3.8												
									Nuc Crit Safety	3.9												
									Environ Protect	3.11												
96-03	03/01/96	04/15/96	05/23/96	07/19/96	09/03/96	Closed	SSR	6 - Week Inspection (Mar - mid Apr 1996)	Operations	3.3	0	0	0	1	0	1	0	0	0	2	3	5
									Rad Protection	3.8												
									Chem Safety	3.19												
96-04	04/16/96	05/31/96	07/02/96	09/03/96	02/10/97	Closed	SSR	6 - Week Inspection (mid Apr - May 1996)	Operations	3.3	2	0	0	0	0	2	1	0	0	1	0	2
									Eng'g Reviews	3.4												
									Rad Protection	3.8												
									Nuc Crit Safety	3.9												
									Nucl Mat'ls & Safe	3.12												

PORTS DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7001/97-03)

Report No.	Inspect Start Date	Inspect Stop Date	Exit Meeting Date	Report Issue Date	Report Closed Date	Report Status	Insp Type	Purpose of Inspection	Inspection Area(s)	ROA ORs	New Items						Closures					
											V	D	N	U	I	Total	V	D	N	U	I	Total
96-05	06/01/96	07/15/96	05/23/96	10/31/96	10/31/96	Closed	SSR	6 - Week Inspection (Jun - mid Jul 1996)	MC&O Operations Maintenance Nuc Crit Safety Fire Protection	3.2 3.3 3.7 3.9 3.10	0	0	0	0	0	0	2	0	1	0	1	4
96-06	07/16/96	08/31/96	09/26/96	12/09/96		Closed	SSR	6 - Week Inspection (mid Jul - Aug 1996)	MC&O Operations Qual Assurance Rad Protection Emergency Prep Waste Mg'mt	3.2 3.3 3.6 3.8 3.13 3.16	1	0	0	1	0	2	3	0	0	1	0	4
96-07	09/01/96	10/15/96	11/14/96	02/10/97		Open	SSR	6 - Week Inspection (Sept - mid Oct 1996)	Operations Training & Qual Rad Protection Emergency Prep	3.3 3.5 3.8 3.13	0	1	0	0	0	1	4	0	1	0	0	5
96-08	10/16/96	11/30/96	12/05/96	12/27/96		Open	SSR	6 - Week Inspection (mid Oct - Nov 1996)	Operations Emergency Prep	3.3 3.13	2	1	2	0	0	5	1	0	0	1	0	2
96-09	04/10/96	04/11/96	04/11/96	05/20/96		Open	Special	Review process lube oil spill to determine if waste segregation and minimization requirements were being met.	Waste Mg'mt	3.16	1	0	0	0	0	1	0	0	0	0	0	0
96-10	06/03/96	06/05/96	06/05/96	09/27/96		Closed	Special	Verify actions taken in response to DOE Order dated 04/05/96	MC&O Eng'g Reviews	3.2 3.4	2	0	0	0	0	2	0	0	0	0	0	0
96-11	12/16/96	12/21/96	12/19/96	12/27/96		Open	Special	Review activities surrounding the improper movement of a 14-ton cylinder using mobile equipment before cylinder had completed its req'd 5-day cooldown.	MC&O Operations	3.2 3.3	2	0	0	0	0	2	0	0	0	0	0	0

PORTS DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES *(Inspection Reports Identified Up to and Including 70-7001/97-03)*

Report No.	Inspect Start Date	Inspect Stop Date	Exit Meeting Date	Report Issue Date	Report Closed Date	Report Status	Insp Type	Purpose of Inspection	Inspection Area(s)	ROA ORs	New Items					Closures					Total
											V	D	N	U	I	V	D	N	U	I	
97-01	12/01/96	01/10/97	01/30/97	02/13/97	02/13/97	Closed	SSR	6 - Week Inspection (Dec - Jan 10, 1997)	Operations Rad Protection Nuel Mat'l's & Safe Emergency Prep	3.3 3.8 3.12 3.13	0	0	0	0	0	2	0	2	0	1	5
97-02	02/04/97	02/07/97	02/07/97	02/28/97	02/28/97	Closed	Special	Determination of the impact on NCSA/E quality, if PORTS continues to push for completing the PORTS NCSAs IAW the USEC committed schedule for completion issued in the DOE Compliance Plan	MC&O Nuel Crit Safety	3.2 3.9	0	0	0	0	0	0	0	0	0	0	0
97-03	01/11/97	03/03/97	03/12/97			Closed	SSR	6 - Week Inspection (Jan 11 - Mar 3, 1997)	Operations Rad Protection Emerg Prep	3.3 3.8 3.13	0	0	0	0	0	2	1	2	0	0	12
DOE Ltr to USEC dtd 08/24/93 [1989 DOE QVI]	****	****	****	****		Closed	SSR (97-03)	1989 Quality Verification Inspection (QVI) Follow-up of open items	N/A		0	0	0	0	10	0	0	0	0	0	0
RL-70-7002/94-003 [PORTS-93-01]	05/24/93	05/28/93	05/28/93	04/06/94 (Date DOE Memo issued to perform inspect)		Closed	SSR (97-03)	DOE Assessment of PORTS Bldgs X-326 and X-705 HEU Suspension Project. PORTS informed of DOE/HQ report for CA on 02/02/94 (RL-70-7002/94-003). The 04/06/94 DOE Ltr was response to USEC CAs identified.	Operations Training & Qual Nuel Crit Safety Maintenance	N/A	0	0	0	0	3	0	0	0	0	0	0

PORTS DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-03)

Report No.	Inspect Start Date	Inspect Stop Date	Exit Meeting Date	Report Issue Date	Report Closed Date	Report Status	Insp Type	Purpose of Inspection	Inspection Area(s)	ROA ORs	New Items						Closures					
											V	D	N	U	I	Total	V	D	N	U	I	Total
TI-3.2 /01	10/10/95 10/20/96	10/19/95 10/29/96	10/19/95 12/10/96	10/06/95 (Date DOE-ROM Issued TI-3.2/01)	02/10/97	Closed	Special (95-18)	Regulatory Oversight Enforcement Conf due to Indication of a Breakdown in Management Controls	MC&O Rad Protection	3.2 3.8	0	0	0	0	0	13	0	0	0	0	0	0
EA-70-7003/96-001	12/04/96	12/09/96	12/10/96	10/30/96		Closed	SSR (96-08) (97-03)	Regulatory Oversight Management Conf Due to Failure of USEC to Improve its Ops Mgmt Controls & to Improve Specific Programs Addressed by these Controls	MC&O Operations Engineering	3.2 3.3 3.4	0	0	0	0	0	15	0	0	0	0	0	0
RI-70-7003/94-001	01/12/94	01/12/94	-----	01/12/94	01/26/96	Closed (RG-70-7003/9 6-0001)	Special (95-16)	Request for USEC to Provide a Listing of all Items that were on IRMS prior to 07/01/93 (Replaced by RG-70-7003/96-0001 and RG-70-7003/96-0003)	MC&O	3.2	0	0	0	0	0	0	0	0	0	0	0	0
RI-70-7003/94-003	03/03/94	03/03/94	-----	04/12/94		Open	Special	Request for USEC to Provide UF, False Alarm Data Being Compiled at PORTS and PGDP so that DOE can Evaluate the Safety Significance of these Failures	MC&O	3.2	0	0	0	0	0	0	0	0	0	0	0	0
RG-70-7003/96-0001	07/11/95	07/12/95	-----	01/26/96	07/16/96	Closed (RG-70-7003/9 6-0003)	N/A	Response to an Employee Concern that IRMS Issues had been Improperly Deleted at the Time of USEC Transition	MC&O	3.2	0	0	0	0	0	0	0	0	0	0	0	0

PORTS DOE ROA Inspection Report/Directives Summary

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-03)

Report No.	Inspect Start Date	Inspect Stop Date	Exit Meeting Date	Report Issue Date	Report Closed Date	Report Status	Insp Type	Purpose of Inspection	Inspection Area(s)	ROA ORs	New Items						Closures											
											V	D	N	U	I	Total	V	D	N	U	I	Total						
RG-70-7003/96-0003	07/16/95	07/16/95	-----	07/16/96	████████	Cancel	SSR (96-04)	Response to an Employee Concern that IRMS Issues had been Improperly Deleted at the Time of USEC Transition	MC&O	3.2	0	0	0	0	0	0	0	0	0	0	0	0	0					
EA-70-7002/97-0001	12/16/96	12/16/96	-----	12/16/96		Open	SSR (96-11)	DOE Management Conference Notification on USEC's improper handling of cylinders containing liquid UF ₆ . SSR inspection to be conducted in parallel	Operations	3.3	0	0	0	0	0	0	0	0	0	0	0	0	0					
STATISTICAL SUMMARY											Number of Inspection Findings Evaluated						65	4	57	50	78	254	51	2	55	50	50	208
											• Number of Withdrawals						6	0	0	0	0	6	6	0	0	0	0	6
											• Number of Directed Followup Items						0	0	0	0	41	41	0	0	0	0	41	41
											Total Number of DOE RO Inspection Findings Issued						65	4	57	50	37	213	57	2	55	50	37	201
											No. of RO Inspection Items Requiring Follow-up						207						195					
											Number of RO Inspection Items Remaining Open						8	2	2	0	0	12						

No. of SSR Inspections Conducted

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PORTS DOE ROA Inspection Report Statistics

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-03)

SSR Inspection Period Report No.	Inspect Start Date	Inspect Stop Date	Inspections Conducted During Inspection Period	Inspection Reports/ DOE Directives Issued During Inspection Period	New Items					Closures					No. Open Items at Start		Net Open Items at End	
					V	D	N	U	I	Total	Accum	V	D	N	U	I	Total	Accum
No. of Functional Area Inspections Conducted																		
No. of Special Inspections Conducted																		
Total Number of Inspections Conducted																		
	07/01/93	07/31/93								0	0						0	0
	08/01/93	08/31/93	QVI	QVI					10	10	10						0	0
	09/01/93	09/30/93								0	10						0	0
	10/01/93	10/31/93								0	10						0	0
	11/01/93	11/30/93								0	10						0	0
	12/01/93	12/31/93	93-03							0	10						0	0
94-01	01/01/94	01/31/94	94-01	93-03	1	0	0	0	0	1	11	0	0	0	0	0	0	0
94-02	02/01/94	02/28/94	94-02, PORTS-93-01							0	11						0	0
94-03	03/01/94	03/31/94	94-03	94-01	0	0	3	0	8	11	22	0	0	0	0	2	2	2
94-04	04/01/94	04/30/94	94-04	PORTS-93-01	0	0	0	0	3	3	25	0	0	0	0	0	0	2
94-05	05/01/94	05/31/94	94-05, 94-13	94-02	4	0	3	9	0	16	41	0	0	0	0	2	2	4
94-06	06/01/94	06/30/94	94-06, 94-14	94-03	1	0	4	6	2	13	54	0	0	0	4	1	5	9
94-07	07/01/94	07/31/94	94-07, 94-15	94-04	1	0	2	5	2	10	64	0	0	0	2	2	4	13
94-08	08/01/94	08/31/94	94-08, 94-16	94-05, 94-14	7	0	5	2	3	17	81	1	0	1	2	1	5	18
94-09	09/01/94	09/30/94	94-09, 94-17	94-13, 94-15	13	0	7	4	9	33	114	0	0	0	0	0	0	18
94-10	10/01/94	10/31/94	94-10	94-06, 94-07	1	0	2	4	1	8	122	0	0	0	6	0	6	24
94-11	11/01/94	11/30/94	94-11	94-08, 94-16	3	0	9	5	7	24	146	0	0	0	1	1	2	26
94-12	12/01/94	12/31/94	94-12	94-17	5	0	6	0	1	12	158	0	0	0	0	0	0	26

PORTS DOE ROA Inspection Report Statistics

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-03)

SSR Inspection Period	Inspection Start Date	Inspect Stop Date	Inspections Conducted During Inspection Period	Inspection Reports/ DOE Directives Issued During Inspection Period	New Items							Closures							No. Open Items at Start	Net Open Items at End
Report No.	Date	Date			V	D	N	U	I	Total	Accum	V	D	N	U	I	Total	Accum		

95-01	01/01/95	01/31/95	95-01, 95-13, 95-14	94-09, 94-10	4	0	2	3	0	9	167	0	0	0	0	0	0	26	132
95-02	02/01/95	02/28/95	95-02		4	0	2	3	0	9	167	0	0	0	0	0	0	26	141
95-03	03/01/95	03/31/95	95-03		0	0	0	0	0	0	167	0	0	0	0	0	0	26	141
95-04	04/01/95	04/30/95	95-04	94-11, 94-12, 95-14	2	1	3	2	1	9	176	1	0	0	2	1	4	30	146
95-05	05/01/95	05/31/95	95-05	95-01, 95-02, 95-13	1	0	0	3	0	4	180	0	0	7	1	4	12	42	146
95-06	06/01/95	06/30/95	95-06	95-03, 95-04	0	0	1	3	2	6	186	4	0	17	6	4	31	73	138
95-07	07/01/95	07/31/95	95-07		0	0	0	0	0	0	186	0	0	0	0	0	0	73	138
95-08	08/01/95	08/31/95	95-08	95-05	0	0	6	1	0	7	193	0	0	2	3	0	5	78	138
95-09	09/01/95	10/15/95	95-09	TI-3.2/01, 95-06	2	0	0	0	13	15	208	1	0	1	2	0	4	82	126
95-10	10/16/95	11/30/95	95-10, 95-17, 95-18	95-07, 95-08	0	0	0	1	1	2	210	3	0	1	2	1	7	89	121
96-01	12/01/95	01/15/96	96-01	95-09	2	0	0	0	0	2	212	3	0	4	4	1	12	101	111
96-02	01/16/96	02/29/96	96-02	95-17, 95-18	6	1	1	0	0	8	220	6	0	7	1	19	33	134	86
96-03	03/01/96	04/15/96	96-03, 96-09	95-10, 96-01	2	0	1	0	0	3	223	8	1	8	8	3	28	162	86
96-04	04/16/96	05/31/96	96-04	96-02, 96-09	1	0	0	0	0	1	224	2	0	1	1	3	7	169	61
96-05	06/01/96	07/15/96	96-05, 96-10							0	224						0	169	55
96-06	07/16/96	08/31/96	96-06	96-03	0	0	0	1	0	1	225	0	0	0	2	3	5	174	51
96-07	09/01/96	10/15/96	96-07	96-04, 96-10	4	0	0	0	0	4	229	1	0	0	1	0	2	176	53
96-08	10/16/96	11/30/96	96-08	EA-96-01, 96-05	0	0	0	0	15	15	244	2	0	1	0	1	4	180	64
97-01	12/01/96	01/10/97	97-01, 96-11	96-06, 96-08, 96-11	5	1	2	1	0	9	253	4	0	0	2	2	8	188	65
97-02	01/11/97	03/03/97	97-02	96-07, 97-01, 97-02	0	1	0	0	0	1	254	6	0	3	0	1	10	198	56
	03/04/97	03/31/97		97-03	0	0	0	0	0	0	254	9	1	1	2	0	38	236	56
					0	0	0	0	0	0									18

PORTS DOE ROA Inspection Report Statistics

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7001/97-03)

SSR Inspection Period Report No.	Inspect Start Date	Inspect Stop Date	Inspections Conducted During Inspection Period	Inspection Reports/ DOE Directives Issued During Inspection Period	New Items						Closures						No. Open Items at Start	Net Open Items a End		
					V	D	N	U	I	Total	Accum	V	D	N	U	I			Total	Accum
			SUBTOTALS		65	4	57	50	78	254	254	51	2	55	50	78	236	236	18	18
			WITHDRAWALS									6	0	0	0	0	6	242	18	12
			REMAINING ITEMS		8	2	2	0	0	12										

PORTS DOE Regulatory Findings History Report

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
SSR Inspection Report EA-70-7002/93-003 - Walkthrough Inspection for December, 1993 (RP)												
1	93-03-01	Failure to adhere to RWP procedures regarding use of protective clothing and self-monitoring.	NOV (III)	3.8.2.19	A radiation worker was observed to be working in a posted Contamination Area in Building X-710, Room 262, without wearing the protective clothing required by the RWP. The individual also exited the contamination area step off pad without monitoring.	01/05/94	09/07/94	94-05	Closed	94-05	8/30/94	This issue resulted in NOV 94-05-03 being identified
DOE/HQ NE-80 Report - Followup of 10 Quality Verification Inspection Findings (SSR to Perform Followup Inspection per DOE letter to USEC dated 08/24/93 and DOE Memorandum dated 05/06/94)												
2	QV1.1 (DOE Ltr to USEC dtd 08/24/93)	Implement Management Walk-Through Surveillance Program	IFI (NA)	N/A	NE-80 Follow-up inspection conducted in January 1993	08/24/94	10/31/94	97-03	Closed	97-03	05/21/97	
3	QV1.4A (DOE Ltr to USEC dtd 08/24/93)	Inadequate procedure preparation/control.	IFI (NA)	N/A	NE-80 Follow-up inspection conducted in January 1993	08/24/94	08/15/94	97-03	Closed	97-03	05/21/97	This item is administratively linked to the closure of NOV 95-18-03 and was administratively closed in 97-03
4	QV1.4B (DOE Ltr to USEC dtd 08/24/93)	Procedure use/audit verification	IFI (NA)	N/A	NE-80 Follow-up inspection conducted in January 1993	08/24/94	08/15/94	97-03	Closed	97-03	05/21/97	This item is administratively linked to the closure of DOE CPI No. 30, "Procedures Program" and was administratively closed in 97-03
5	QV1.5A (DOE Ltr to USEC dtd 08/24/93)	Problem reporting UF6 cylinder shipping and receiving areas	IFI (NA)	N/A	NE-80 Follow-up inspection conducted in January 1993	08/24/94		97-03	Closed	97-03	05/21/97	
6	QV1.7B (DOE Ltr to USEC dtd 08/24/93)	Formal Maintenance Training Program	IFI (NA)	N/A	NE-80 Follow-up inspection conducted in January 1993	08/24/94		97-03	Closed	97-03	05/21/97	This item is administratively linked to the closure of NOV 94-14-07 which itself, was administratively linked to the closure of DOE CPI No. 26, "Systems Approach to Training." This item was administratively closed in 97-03

PORTS DOE Regulatory Findings History Report

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
7	QV1.11 (DOE Ltr to USEC did 08/24/93)	Insufficient attention to counterfeit or misrepresented parts	IFI (NA)	N/A	NE-80 Follow-up inspection conducted in January 1993	08/24/94	10/31/94	97-03	Closed	97-03	05/21/97	This item is administratively linked to the closure of DOE CPI No. 23, "Plant Changes and Configuration Management," DOE CPI No. 32, "Quality Assurance Program Implementation," and DOE CPI No. 21, "Management Controls," and was administratively closed in 97-03
8	QV1.12A (DOE Ltr to USEC did 08/24/93)	QA Program inadequate to assure control of Critical Activities	IFI (NA)	N/A	NE-80 Follow-up inspection conducted in January 1993.	08/24/94		97-03	Closed	97-03	05/21/97	This item is administratively linked to the closure of DOE CPI No. 32, "Quality Assurance Program Implementation," and was administratively closed in 97-03
9	QV1.13 (DOE Ltr to USEC did 08/24/93)	Calibration Program has no formal marking standards	IFI (NA)	N/A	NE-80 Follow-up inspection conducted in January 1993	08/24/94	06/30/95	97-03	Closed	97-03	05/21/97	This item is administratively linked to the closure of IFI 94-14-05 and was administratively closed in 97-03
10	QV1.14A (DOE Ltr to USEC did 08/24/93)	Inadequate identifying system for equipment calibration	IFI (NA)	N/A	NE-80 Follow-up inspection conducted in January 1993	08/24/94		97-03	Closed	97-03	05/21/97	
11	QV1.15 (DOE Ltr to USEC did 08/24/93)	WACS (Work Authorization Control System) System lacks Necessary Formality	IFI (NA)	N/A	NE-80 Follow-up inspection conducted in January 1993	08/24/94	06/30/94	97-03	Closed	97-03	05/21/97	This item is administratively linked to the closure of DOE CPI No. 24, "Maintenance Program," and was administratively closed in 97-03
DOE/HQ ES&H Report - PORTS-93-01: Assessment of the PORTS Buildings X-326 and X-705 HEU Suspension Project, conducted 05/24-28/93 (SSR to Perform Followup Inspection per DOE Memorandum dated 02/02/94)												
12	PORTS-93-01- 03 (RI-70-7002/ 94-003) [Ports-93-01]	Procedures are not developed and used in a manner to ensure that safety-related activities are conducted and controlled in a manner consistent with the safety basis of the facility.	IFI (NA)	N/A	Review of X-326 and X-705 facility documentation and observation of activities.	02/02/94		97-03	Closed	97-03	05/21/97	This item is administratively linked to the closure of NOV 94-13-02 and was administratively closed in 97-03

PORTS DOE Regulatory Findings History Report

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
13	PORTS-93-01-07 (RI-70-7002/94-003) [Ports-93-01]	The calibration program did not provide assurance that instruments associated with the four safety systems in Building X-705 would perform their functions.	IFI (NA)	N/A	Review of the calibration records that support the four instruments that make up the microfiltration system to determine traceability of the calibration and to detect and correct adverse trends or out-of-tolerance conditions	02/02/94		97-03	Closed	97-03	05/21/97	
14	PORTS-93-01-08 (RI-70-7002/94-003) [Ports-93-01]	Plant personnel have conducted safety-related activities without completing required training on those activities.	IFI (NA)	N/A	Review of the training program administrative and implementation procedures, training records and mat'ls, and conduct of training HEU Suspension and support activities.	02/02/94		97-03	Closed	97-03	05/21/97	This item is administratively linked to the closure of NOV 94-14-07 and was administratively closed in 97-03
SSR Inspection Report 70-7002/94-01 - Monthly Inspection for January, 1994 (Ops, Maint, RP, NCS, Fire Prot, Emerg Prep, P&T, Sampling, and Waste Mg'mt)												
15	94-01-01	LER PTS-CASOPS-1993-0044, Review of lessee investigation.	IFI (NA)	3.9.2.2	Actuation of coolant rupture disk and relief valve on cell 27-2-13 and the subsequent release of 5,000 pounds of freon to the building atmosphere.	03/03/94	06/08/94	94-02	Closed	94-02	05/06/94	This issue resulted in the following NOV's being identified: NOV 94-02-02, NOV 94-02-03, and NOV 94-02-04
16	94-01-02	Justification of definition, "MODIFIED TRU"	IFI (NA)	3.8.2.10	Technical Basis Evaluation justifying the definition of "modified TRU" to include only alpha-emitting nuclides and justifying the current guidelines for adjusting allowable contamination levels based upon "modified TRU" levels.	03/03/94	06/08/94	94-01	Closed	94-01	03/03/94	
17	94-01-03	Reasons for not analyzing environmental samples for TRU isotopes.	IFI (NA)	3.11.2.3	Technical Basis Evaluation indicating the reason for not analyzing environmental samples for TRU isotopes in accordance with the Portsmouth Environmental Monitoring Plan, DOE Order 5400.5 and 40 CFR 61, Subpart H.	03/03/94	06/08/94	94-02 94-04	Closed	94-04	07/21/94	

PORTS DOE Regulatory Findings History Report

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
18	94-01-04	Plan for Characterizing TRU Contamination	IFI (NA)	3.8.2.10	Need to examine the plan under which Health Physics is using to characterize TRU contamination and subsequent dose assessment activities.	03/03/94	06/08/94	94-02 94-03	Closed	94-03	06/15/94	
19	94-01-05	Plan for determining the effects of TRU releases to the environment.	IFI (NA)	3.11.2.3	Need to examine the plan under which Environmental Monitoring is using to characterize TRU contamination and subsequent dose assessment activities.	03/03/94	06/08/94	94-02 94-04	Closed	94-04	07/21/94	
20	94-01-06	Steps taken to assess worker and public doses due to thorium isotopes.	IFI (NA)	3.8.2.10	Technical Basis Evaluation of steps taken to assess worker and public doses due to thorium isotopes.	03/03/94	06/08/94	94-01	Closed	94-01	03/03/94	
21	94-01-07	Improper postings, contamination control and use of RWPs.	IFI (NA)	3.8.2.10	Follow-up on the Lessee's efforts to correct Radiation Protection related non-cited violations and inconsistencies.	03/03/94	06/08/94	94-08	Closed	94-08	11/18/94	This item resulted in IFI 94-08-02, NCV 94-08-03, and NCV 94-08-04 being identified
22	94-01-08	Definition of "as soon as practical" in NCSA-PLANT001.001	IFI (NA)	3.9.2.7	NCSA-PLANT001.001 states that container contents shall be repacked in a new container if corrosion is found "as soon as practical". Eighty-nine corroded canisters were identified by the inspector in the X-326 building.	03/03/94	06/08/94	94-02	Closed	94-02	05/06/94	Elevated to NOV 94-02-01
23	94-01-09	Incorrect calculation of Cf-252 source activities for shipment.	NCV (NA)	3.14.2.5	Irregularities in shipping including incorrect source activities, failure to perform cask radiological survey, and no quality control requirements.	03/03/94	06/30/94	95-03	Closed	95-03	06/05/95	This item resulted in IFI 95-03-03
24	94-01-10	Improper documentation of radiation surveys of UF ₆ cylinders.	NCV (NA)	3.14.2.1	Failure to properly survey UF ₆ cylinders in the X-344 Toll Enrichment Facility prior to shipment.	03/03/94	08/29/94	95-03	Closed	95-03	06/05/95	

PORTS DOE Regulatory Findings History Report

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
25	94-01-11	Improper certification of shipping packages (overpacks) per NRC COC with DOE.	NCV (NA)	3.14.2.1	USEC failed to be listed as an authorized user of NRC certified shipping packages (Paducah Tiger Overpacks).	03/03/94	06/08/94	94-05	Closed	94-05	08/30/94	
SSR Inspection Report 70-7002/94-02 - Monthly Inspection for February, 1994 (Ops, Eng'g Reviews, T&O, QA, Maint, RP, NCS, Fire Prot, Environ Prot, Emerg Prep, P&T, Security, and Chem Safety)												
26	94-02-01	Storage of fissile material in a configurations not supported by a NCSA.	NOV (III)	3.9.2.2	NCSA-PLANT001.001 states that container contents shall be repacked in a new container if corrosion is found "as soon as practical". Eighty-nine corroded canisters were identified by the inspector in the X-326 building. Failure to perform NCSA.	05/06/94	06/08/94		Withdra wn	DOE Ltr	07/21/94	Rolled up IFI 94-01-08 Withdrawn WITHDRAWN - DOE accepted USEC's response denial dated 06/13/94, and withdrew the NOV via DOE Letter dated 07/21/94.
27	94-02-02	Failure to follow procedures for startup of cell 27-2-13	NOV (III)	3.2.2.1	Failure to ensure pressure blind multiplier (PBM) valve was open prior to startup of cell 27-2-13.	05/06/94	05/23/94	94-12	Closed	94-12	04/10/95	Formerly IFI 94-01-01. This item resulted in NOD 94-12-04 for failing to meet a violation response commitment.
28	94-02-03	Failure to perform timely issuance of ERS event report findings.	NOV (III)	3.2.2.3	The final ERS report for Occurrence Report ORO-MMES-PORTCASOPS-1993-0041, Safety system actuation; Freon Rupture Disc on 27-2-13 was completed 61 days after the required completion date.	05/06/94	06/06/94	95-03	Closed	95-03	06/05/95	Formerly IFI 94-01-01
29	94-02-04	Improper implementation of a configuration change to Speedomax.	NOV (III)	3.4.2.1	Removal of dust/protective cover and manual de-energize of the recycle valve of cell 27-2-13.	05/06/94	06/08/94	95-10	Closed	95-10	03/12/96	Formerly IFI 94-01-01
30	94-02-05	Completion of investigation into installation of a Tuffline valve with incompatible materials.	URI (NA)	3.7.2.1	Inspection performed at the X-705 decontamination facility in the uranium reclamation area as a follow-up to the reported failure of a one inch Tuffline valve. This had caused the release of 45 liters of uranyl nitrate solution on February 21, 1994.	05/06/94	08/29/94	94-04	Closed	94-04	07/21/94	

PORTS DOE Regulatory Findings History Report

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
31	94-02-06	Review of lessee report on investigation of failed ceramic module and subsequent pressure rise of bag filter resulting in activation of the safety system.	URI (NA)	3.2.2.3	Inspection performed at the X-705 decontamination facility in response to a microfiltration unit safety system activation.	05/06/94	08/29/94	94-03	Closed	94-03	06/15/94	
32	94-02-07	Inspection criteria applicable to annual calciner checks.	URI (NA)	3.3.2.3	Semiannual calciner thickness check was performed per OSR GAT/GDP-1074, Part H, Rev. 3. But the inspection criteria were not available	05/06/94	03/07/94	94-03	Closed	94-03	06/15/94	Elevated to NOV 94-03-06
33	94-02-08	Engineering reviews for manifold valve procurement	URI (NA)	3.4.2.1	Valve replacement and manifold modification for the X-344A Toll Enrichment Facility.	05/06/94		95-09	Closed	95-09	01/08/96	
34	94-02-09	Training of Uranium Material Handling personnel to perform radiological surveys.	URI (NA)	3.5.2.5	Radiological survey training was reviewed at the X-343 Feed Vaporization and Sampling Facility.	05/06/94	12/31/97	94-04 94-09 95-03	Closed	95-03	06/05/95	
35	94-02-10	Failure to calibrate radiation survey instruments.	NCV (NA)	3.8.2.20	Inspection was conducted at the X-705 decontamination facility. Of seven radiation survey instruments in service, one (SN 07-00420) was observed to be out-of-calibration.	05/06/94	08/29/94	95-02	Closed	95-02	05/25/95	
36	94-02-11	Proper approval of modification to radiation cluster NCM-0057.	URI (NA)	3.8.2.12	In the X-705 decontamination facility radiation cluster NCM-0057 was noted to be covered with rigid plastic with a small air line underneath and no engineering review of this modification was available at the time.	05/06/94	06/08/94	94-05	Closed	94-05	08/30/94	
37	94-02-12	Spacing of drums used for fissionable and radioactive waste.	URI (NA)	3.9.2.6	Drums at the X-326 facility were observed to be spaced less than 24". Documentation could not be found at the time which indicated less than 24" was an approved spacing.	05/06/94	01/15/96	94-04 94-07 95-10	Closed	95-10	03/12/96	

PORTS DOE Regulatory Findings History Report

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
38	94-02-13	Inclusion of verification of low level radionuclide effluent sources in 1993 Environmental Monitoring Report.	URI (NA)	3.11.2.1	Verification of effluent air emissions in NESHAP Annual report as required by 40 CFR 61, section 93 (b) (4) (i), in the X-710 facility.	05/06/94	06/08/94	94-03	Closed	94-03	06/15/94	
39	94-02-14	Failure to have updated emergency procedures.	URI (NA)	3.13.2.3	Discovery of unrevised emergency procedures in the X-300 facility.	05/06/94	06/08/94	94-03	Closed	94-03	06/15/94	Elevated to NCV 94-03-07
40	94-02-15	Improper use of units in documenting survey results for transportation.	NCV (NA)	3.14.2.1	Lessee used "cpm" vs. "dpm" in completion of radioactive material shipping documentation during surveys at the X-343 facility.	05/06/94	08/29/94	95-03	Closed	95-03	06/05/95	
41	94-02-16	Improper performance of radiation survey of UF6 cylinders.	NCV (NA)	3.14.2.1	Lessee took radiation dose rate readings at an inappropriate distance from cylinders and used this incorrect information in completion of radioactive material shipping documentation during surveys at the X-343 facility.	05/06/94	08/31/95	95-03	Closed	95-03	06/05/95	
SSR Inspection Report 70-7002/94-03 - Monthly Inspection for March, 1994 (Ops, Maint, RP, NCS, Fire Prot, Nucl Mat'ls & Safe, Emerg Prep, P&T, Security, and Chem Safety)												
42	94-03-01	Completion of investigation of autoclave containment valve positions.	URI (NA)	3.2.2.1	Inspection performed at the autoclave facilities (X-344A, X-343, and X-342A) in response to an event involving a proposed procedure validation of a new autoclave calibration procedure.	06/15/94		94-06	Closed	94-06	10/07/94	
43	94-03-02	Annunciation of pH Safety System Alarm.	URI (NA)	3.2.2.1	Inspection activities were performed at the X-705 Decontamination Facility in response to an event on March 3, 1994 involving the Microfiltration Influent pH Shutdown Safety System.	06/15/94		95-03	Closed	95-03	06/05/95	

PORTS DOE Regulatory Findings History Report

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
44	94-03-03	Actuation of a designated safety system during an outgassing from cell 33-1-10.	URI (NA)	3.2.2.1	Inspection activities were performed at the X-333 facility following the actuation of a designated safety system during an outgassing from cell 33-1-10 on March 10, 1994.	06/15/94		94-06	Closed	94-06	10/07/94	
45	94-03-04	Airborne radioactivity levels beyond the posted "Radioactive Airome Area."	IFI (NA)	3.8.2.11	Inspection activities were performed at the X-705 Decontamination Facility in response to an event on January 25-26, 1994, during a compressor teardown.	06/15/94		95-02	Closed	95-02	05/25/95	
46	94-03-05	Identification of airborne radioactivity by a first floor CAM in building X-705 on March 10, 1994.	IFI (NA)	3.8.2.13	Inspection activities were performed at the X-705 Decontamination Facility in response to an event on March 10, 1994, when airborne radioactivity was identified by a first floor continuous air monitor.	06/15/94		95-02	Closed	95-02	05/25/95	
47	94-03-06	Performance of tests on a safety-related component without using an approved procedure.	NOV (III)	3.3.2.3	As noted, this was a follow-up of URI 94-02-07 and involved a calcliner ultrasonic test performed in the X-705 facility being performed without an approved procedure.	06/15/94	05/02/96	95-03	Closed	95-03	06/05/95	This item was identified during review of URI 94-02-07 for closure
48	94-03-07	Failure to update contact list in the Emergency Procedures.	NCV (NA)	3.13.2.3	The inspectors reviewed the most recent revision of the Portsmouth Emergency Plan.	06/15/94	03/17/95	95-03	Closed	95-03	06/05/95	Rolled up from URI 94-02-14
49	94-03-08	Establishment of ALARA goals and procedures.	URI (NA)	3.8.2.6	The inspectors held discussion with lessee Health Physics personnel who indicated procedure UE2-ESH-RP-1035 (ALARA goals and procedure) had not yet been completed.	06/15/94		94-11	Closed	94-11	04/03/95	

PORTS DOE Regulatory Findings History Report

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No {Rept #}	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
50	94-03-09	Commonality of floor drain headers from clean area and contamination area to storm sewer.	NCV (NA)	3.8.2.13	A review of the contamination control practices were reviewed at the X-343 Feed Vaporization and Sampling Facility.	06/15/94	05/04/94	95-03	Closed	95-03	06/05/95	
51	94-03-10	Contaminated water outside the small cylinder area cleaning containment dike, across a posted High Contamination Area Boundary.	NCV (NA)	3.8.2.13	Radiation protection practices were reviewed at the X-705 facility to assure requirements were being met.	06/15/94	05/24/95	95-02	Closed	95-02	05/25/95	
52	94-03-11	Criticality implications of waste accumulation on the second floor of X-326 at column B-42	URI (NA)	3.9.2.5	A general inspection of the X-326 process building revealed several areas of concern.	06/15/94		94-07 95-10	Closed	95-10	03/12/96	
53	94-03-12	Failure to implement the onsite Packaging and Transportation Safety Manual.	NCV (NA)	3.2.2.1	A review of the on-site Packaging and Transportation Safety Manual (POEF-2053) was performed. The manual was determined to have not been implemented since its initial issuance in 1991.	06/15/94	05/06/94	95-03	Closed	95-03	06/05/95	
54	94-03-13	Review of the implementation of changes to the security plan related to HEU Purchase Agreement.	URI (NA)	3.18.2.1	A meeting was held on March 31, 1994, to evaluate the issues involved with the HEU Purchase Agreement between the USA and the Russian Federation.	06/15/94		94-04	Closed	94-04	07/21/94	
SSR Inspection Report 70-7002/94-04 - Monthly Inspection for April, 1994 (MC&O, Ops, RP, NCS, Fire Prot, Environ Prot, and Waste Mg't)												
55	94-04-01	Safety system actuation during operation of calciner #2 (ORO-MMES-CCUPOPS-1994-0003)	URI (NA)	3.2.2.3	During routine processing of uranium oxide on the X-705 calciner #2, the system automatically shutdown feed inappropriately at 23% can height vs. the proper 80% level.	07/21/94		94-07	Closed	94-07	10/07/94	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
56	94-04-02	Failure to properly perform safety-related maintenance.	NOV (III)	3.6.2.5	In response to an inspection finding (94-02-05) involving the incorrect use of nonconforming plugs in a safety related system, the inspectors determined a violation had occurred.	07/21/94	12/22/94		Withdrawn	DOE Ltr	08/30/94	WITHDRAWN - USEC denied the conditions cited in this NOV on 08/19/94. USEC contended that the components involved were not safety system components and therefore, the ROA did not apply. DOE agreed with the response and withdrew the issue via DOE Letter dated 08/30/94. To verify the other corrective actions made in the response, DOE generated a new issue to replace this NOV. This issue was called IFI 94-04-10.
57	94-04-03	Complete review of safety system event reports for previous four months.	IFI (NA)	3.2.2.3	Increased frequency of safety system calibration problems in the X-705 facility prompted a lessee review.	07/21/94		94-05	Closed	94-05	08/30/94	
58	94-04-04	Failure to follow radiation protection procedures.	NCV (NA)	3.2.2.1	The inspectors reviewed aspects of the lessee's implementation of the radiation protection program.	07/21/94	05/23/95	95-03	Closed	95-03	06/05/95	
59	94-04-05	Failure to properly post contamination and radiological area.	NCV (NA)	3.8.2.11	The inspectors reviewed aspects of the lessee's implementation of the radiation protection program.	07/21/94	05/23/95	95-03	Closed	95-03	06/05/95	
60	94-04-06	Review of evaluation of materials storage for criticality safety.	URI (NA)	3.9.2.5	Inspection activities were conducted at the X-326 facility on April 8, 1994. NCS administrative controls were examined.	07/21/94		95-09	Closed	95-09	01/08/96	
61	94-04-07	Clarification of site-wide barrel spacing and covering requirements.	URI (NA)	3.9.2.5	Inspection activities were conducted at the X-700 facility on April 8, 1994. NCS administrative controls were examined.	07/21/94		94-07 95-10	Closed	95-10	03/12/96	
62	94-04-08	Determination of the effect stuck needle had on accuracy of flow meter at location A-23.	URI (NA)	3.11.2.1	Inspection of the environmental protection requirements.	07/21/94		94-05	Closed	94-05	08/30/94	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
63	94-04-09	Review of event report involving release of contaminated material into the X-735 sanitary landfill.	URI (NA)	3.16.2.3	Inspection was performed following the release of contaminated material into the X-735 sanitary landfill	07/21/94		94-06	Closed	94-06	10/07/94	Elevated to NOV 94-06-03
64	94-04-10	Implementation of corrective actions as described in USEC letter dated 8/19/94 in response to findings of inspection 70-7002/94-04.	IFI (NA)	3.2.2.3	Implementation of corrective actions as described in USEC letter dated 8/19/94 in response to findings of inspection 70-7002/94-04.	08/30/94		95-09	Closed	95-09	01/08/96	USEC response to NOV 94-04-02 on 08/19/94, identified the item was not a violation of the ROA. DOE agreed in a letter dated 08/30/94 and replaced NOV 94-04-02 with IFI 94-02-10.
SSR Inspection Report 70-7002/94-05 - Monthly Inspection for May, 1994 (Ops, QA, Maint, RP, NCS, Fire Prot, Nucl Mat'ls & Safe, Emerg Prep, Waste Mg'mt, and Accid Anal)												
65	94-05-01	Freon rupture disks - OSR limiting safety system settings.	URI (NA)	3.2.2.3	During an audit of Engineering Safety System records on May 19, 1994, it was noted that the maximum potential setpoint pressure given for freon rupture disks exceeded the pressure allowed in the LSSS.	08/30/94		94-06	Closed	94-06	10/07/94	This item resulted in NCV 94-06-04 and NCV 94-06-05 being identified
66	94-05-02	UF6 detector alarms during sampling activities (ORO--MMES-PORTCASOPS-1994-0009.	URI (NA)	3.2.2.3	The inspectors conducted inspection activities concerning the May 30, 1994 and May 31, 1994, outleakage of UF6 during sampling operations at cells 31-3-5, 31-2-5, 33-3-6 and 33-2-7.	08/30/94		94-07	Closed	94-07	10/07/94	
67	94-05-03	Improper (incomplete) revisions to RWPs.	NCV (NA)	3.2.2.1	Inspection activities were performed to discern if the lessee had completed the corrective actions as stated in a letter dated February 10, 1994. A new violation was identified.	08/30/94	05/09/95	95-02	Closed	95-02	05/25/95	
68	94-05-04	Out of calibration argon gammagraphs.	NCV (NA)	3.7.2.2	Inspection activities at Emergency Monitoring Station #7 (X-1007 Fire Station) and #3 (Building X-109B) indicated that the Argon Gammagraphs were out of calibration.	08/30/94	02/13/95	95-02	Closed	95-02	05/25/95	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
69	94-05-05	Improper completion of Radiation Work Permit (RWP).	NCV (NA)	3.2.2.1	Inspection activities were conducted at the X-343 facility and it was noted that the associated RWPs did not accurately reflect the prevailing radiological conditions.	08/30/94	05/19/95	95-02	Closed	95-02	05/25/95	
70	94-05-06	RWP failed to document the removable alpha and beta contamination levels and corresponding surveys were not identified by number as required by UE-SPP-ESH-9.	NCV (NA)	3.2.2.1	During closure inspections for a previous violation, a new violation was identified.	08/30/94	05/19/95	95-02	Closed	95-02	05/25/95	
SSR Inspection Report 70-7002/94-06 - Monthly Inspection for June, 1994 (Ops, OA, RP, NCS, Fire Protect, Nucl Mat'ls & Safe, P&T, Waste Mgmt, and Chem Safety)												
71	94-06-01	Revised USQD for modifications to the CADP System in X-333 and X-330.	URI (NA)	3.4.2.3	During an Oak Ridge Operations Regulatory Oversight staff inspection (June 6 through June 17, 1994) it was determined that modifications were made to the X-333 and X-330 UF6 detection systems without a USQD.	10/07/94		94-08	Closed	94-08	11/18/94	
72	94-06-02	Review of lessee investigation reports related to radioactive or radioactively contaminated items outside of radiological areas.	URI (NA)	3.2.2.3	Review of ORO-MMES-PORTTECOPS-1994-001, ORO-MMES-PORTTECOPS-1994-002, ORO-MMES-PORTGENPLT-1994-001.	10/07/94		95-08	Closed	95-08	11/15/95	Rolled up URI 94-04-09
73	94-06-03	Failure to properly characterize radioactive wastes to permit segregation and transfer to a proper disposal facility.	NOV (III)	3.16.2.3	The inspectors visually examined waste generation practices and documents associated with the release of radiologically contaminated material into the X-735 Sanitary Landfill.	10/07/94	11/30/94	95-10	Closed	95-10	03/12/96	Rolled up URI 94-04-09
74	94-06-04	Failure to observe operating bounds for freon rupture disks as established by OSRs.	NCV (NA)	3.2.2.3	The inspectors performed follow-up inspection activities in connection with the violation of OSR LSSS for freon rupture disks.	10/07/94	04/22/96	95-03	Closed	95-03	06/05/95	Rolled up URI 94-05-01

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
75	94-06-05	Failure to discontinue or monitor an affected area if a correct mode of operation cannot be attained.	NCV (NA)	3.3.2.1	The inspectors performed follow-up inspection activities in connection with the violation of OSR LSSS for freon rupture disks.	10/07/94	12/28/94	95-05	Closed	95-05	08/18/95	Rolled up URI 94-05-01
76	94-06-06	Applicable NCS requirements and proper labeling of containers in the X-7745R Recycle/Assembly Storage Yard.	URI (NA)	3.8.2.10	Waste storage containers at the X-7745R (North) Recycle/Assembly Storage Yard were inspected on June 1, 1994, and it was noticed that not all containers had a Radioactive Materials Tag (T-130). There were no NCS control requirements posted.	10/07/94		95-07	Closed	95-07	11/03/95	A follow up inspection of this issue indirectly occurred in 70-7002/94-09. The result was the identification of NOV 94-04-04. This item should have been closed in that report.
SSR Inspection Report 70-7002/94-07 - Monthly Inspection for July, 1994 (MC&O, Ops, Maint, RP, NCS, Fire Prot, Environ Prot, Emerg Prep, P&T, Waste Mg'mt, Security, and Chem Safety)												
77	94-07-01	Contamination at the low assay withdrawal station.	IFI (NA)	3.2.2.3	Inspection activities were performed at the Low Assay Withdrawal Station in the X-333 Process Building in response to an event on July 6, 1994, involving the spread of radioactive contamination beyond proper boundaries.	10/07/94		95-04	Closed	95-04	06/26/95	
78	94-07-02	Availability of an updated IRMS report to reflect all regulatory commitments and actions.	URI (NA)	3.2.2.4	The inspectors discussed the commitment tracking system with the lessee on July 28, 1994. Irregularities were noted.	10/07/94		94-11	Closed	94-11	04/03/95	
SSR Inspection Report 70-7002/94-08 - Monthly Inspection for August, 1994 (MC&O, Ops, QA, NCS, Fire Prot, Emerg Prep, P&T, Waste Mg'mt, Accid Anal, Security, and Chem Safety)												
79	94-08-01	Revision of procedure UE2-MC-RE1030, "Event Reporting System."	URI (NA)	3.2.2.1	The inspectors noted conflicting statements in procedure UE2-MC-RE1030, in that conflicting instructions were given regarding event reporting timing.	11/18/94		95-03	Closed	95-03	06/05/95	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
80	94-08-02	Full and consistent implementation of contamination control posting requirements per H&S SPP H-37.	IFI (NA)	3.8.2.11	Inspection activities were conducted to determine if the lessee had improved performance in the areas of radiological postings and boundaries.	11/18/94		95-02	Closed	95-02	05/25/95	This item was identified as a result of resolving IFI 94-01-07
81	94-08-03	Improper storage/disposal of trash and contamination control clothing.	NCV (NA)	3.8.2.13	On August 1, the inspectors observed yellow shoe covers and trash inside door #4 of the X-333 process building and contamination control clothing on the ground in various areas around the plant site.	11/18/94	03/31/95	95-03	Closed	95-03	06/05/95	This item was identified as a result of resolving IFI 94-01-07
82	94-08-04	Improper use or failure to use RWPs as required by H&S SPP M-4, Rev. 1.	NCV (NA)	3.8.2.18	RWPs were inspected in the X-705 Decontamination Facility, the X-333 and X-326 Process Buildings, the X-343 Feed Vaporization and Sampling Facility, X-344A Toll Enrichment Facility and the X 700 Converter Shop.	11/18/94	05/18/95	95-02	Closed	95-02	05/25/95	This item was identified as a result of resolving IFI 94-01-07
83	94-08-05	Definition of "normal decontamination techniques" and personnel release limits in procedure UE2-MC-RE1030.	URI (NA)	3.2.2.3	The inspectors reviewed NCR-PTS-94-217 regarding personnel contamination.	11/18/94		95-03	Closed	95-03	06/05/95	
84	94-08-06	Specification of operating pressure range for NC cluster alarms in procedure IMP-117.	URI (NA)	3.9.2.11	During inspection of the X-705 Decontamination facility, cluster alarms NCM-0002 and NCM-0059 were examined.	11/18/94		95-09	Closed	95-09	01/08/96	
85	94-08-07	Improper storage of radioactive waste per FCA-606.	NCV (NA)	3.2.2.1	FCA-606 requires drums to be covered in the X-705 Decontamination facility. Drums were found to be partially uncovered.	11/18/94	04/27/95	94-09 95-03	Closed	95-03	06/05/95	The effectiveness of the corrective actions taken to resolve this issue were evaluated with the closure of NOV 94-11-04

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES

(Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
86	94-08-08	Improper storage of uranium oxide.	NCV (NA)	3.2.2.1	A can was observed in the Uranium Material Storage area of the X-705 Decontamination Facility which was not contained inside a poly bag.	11/18/94	05/03/95	94-09 95-09	Closed	95-09	01/08/96	
87	94-08-09	Determination of facts surrounding use and maintenance of damaged equipment used for transportation of radioactive and fissionable materials.	URI (NA)	3.9.2.7	On August 29, 1994, the inspectors observed a truck transporting containers for fissionable material and spacing control appeared to be compromised.	11/18/94		95-02	Closed	95-02	05/25/95	
88	94-08-10	Failure to secure polybottles for transport as required by FCA-506.	NCV (NA)	3.9.2.3	On August 29, 1994, the inspectors observed a truck transporting containers for fissionable material and spacing control appeared to be compromised. FCA-506 requirements were not met.	11/18/95	02/09/95	95-03	Closed	95-03	06/05/95	
SSR: Inspection Report 70-7002/94-09 - Monthly Inspection for September, 1994 (Ops, RP, NCS, Fire Prot, Environ Prot, Nucl Mat'l's & Safe, and Chem Safety)												
89	94-09-01	Failure to follow procedures concerning verification of worker training by job supervisor.	NCV (NA)	3.2.2.1	The lessee reported on September 13, 1994, that four contractors were working in an area of the X-330 process Building without proper protective equipment.	02/13/95	04/27/95	95-06	Closed	95-06	10/04/95	
90	94-09-02	Failure to properly tag UF6 cylinders or to place UF6 cylinders in properly posted storage areas based on the results of radiation surveys.	NOV (III)	3.8.2.10	On September 23, 1994, the inspectors reviewed the labeling of cylinders with UE-14 radiation tags stored in the X-745F North Process Gas Stockpile Yard. Eight cylinders were improperly tagged with dose rates higher than those actually measured.	02/13/95	06/15/95	95-08 96-01	Closed	96-01	04/09/96	

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
91	94-09-03	Failure to post RWP's at the entrance of work areas covered by RWP's.	NOV (III)	3.8.2.19	Areas in proximity to the security portal for the X-326 Process Building, the Boneyard, Minimetro, and cylinder cleaning areas of the X-705 Decontamination Building did not have RWPs posted as required.	02/13/95	03/23/95		Withdrawn	DOE Ltr	04/03/95	WITHDRAWN - DOE accepted USEC's response denial dated 03/16/95, and withdrew the NOV via DOE Letter dated 04/03/95.
92	94-09-04	Failure to adhere to NCS approvals for operations.	NOV (III)	3.9.2.5	The inspectors reviewed the X-774SR Storage Yard on September 12, 1994, to determine if the requirements of NCSA-774SR001.001 were being met. Labeling, segregation, spacing and signage were improper.	02/13/95	03/23/95	95-07	Closed	95-07	11/03/95	
SSR Inspection Report 70-7002/94-10 - Monthly Inspection for October, 1994 (MC&O, Ops, QA, RP, NCS, Fire Prot, Emerg Prep, and Acid/Annl)												
93	94-10-01	Further investigation into possible causes and corrective actions for UF6 releases from LCCs during routine sampling and maintenance.	URI (NA)	3.2.2.3	The inspectors examined four reported instances in which smokehead detectors were actuated.	02/13/95		94-11 95-05	Closed	95-05	08/18/95	
94	94-10-02	Failure to manage corrective actions.	NOV (III)	3.2.2.4	The inspectors examined the implementation of the IRMS process and discovered numerous inadequacies indicative of a programmatic problem.	02/13/95		95-06	Closed	95-06	10/04/95	
95	94-10-03	Causes for multiple failures of redundant safety system components in the autoclave systems (thermocouples and valves).	URI (NA)	3.2.2.3	Multiple NCRs were identified indicating possible problems with redundant safety system components.	02/13/95	05/30/95	95-06	Closed	95-06	10/04/95	
96	94-10-04	Use of yellow and magenta barrier materials for other than radiological controls.	NCV (NA)	3.8.2.1	Inspectors noted on October 20, 1994, in the X-326 Process Building, that a radiological barrier had been improperly used to isolate a PCB spill.	02/13/95	04/27/95	95-03	Closed	95-03	06/05/95	

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No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
97	94-10-05	Completion of lessee identification and correction of discrepancies with NCS safety documents.	URI (NA)	3.9.2.2	The inspectors walked down 38 NCSAs, FCAs and DMs and six discrepancies were identified.	02/13/95		95-10	Closed	95-10	03/12/96	
SSR Inspection Report 70-7002/94-11 - Monthly Inspection for November, 1994 (MC&O, Ops, T&O, RP, NCS, Fire Prot, and Emerg Prep)												
98	94-11-01	Review of lessee investigation of noncompliance with criticality safety contingency procedures.	URI (NA)	3.9.2.6	Inspector examined a lessee report which indicated on Nov. 9, 1994, X-705 Decontamination Building shift operators had made a procedural documentation error related to NCS control specifications.	04/03/95		94-12 95-05	Closed	95-05	08/18/95	
99	94-11-02	Failure to maintain storage column uranium content log records for the period January 1994 through June 1994.	NCV (NA)	3.2.2.5	It was noted that in the X-705 Decontamination Building Oil and Grease Unit that log records were not available and therefore OSR compliance could not be verified.	04/03/95	06/08/95	95-05	Closed	95-05	08/18/95	
100	94-11-03	Lessee identification of cylinder valve replacements.	IFI (NA)	3.2.2.3	Potential problem areas in which lessee personnel were not identifying faulty valves (13 were noted).	04/03/95		95-01	Closed	95-01	05/03/95	
101	94-11-04	Improper spacing of drums containing uranium bearing materials.	NCV (NA)	3.2.2.1	The inspectors examined drum placement in the X-705 Decontamination Facility for NCS compliance.	04/03/95	06/08/95	96-01	Closed	96-01	04/09/96	
SSR Inspection Report 70-7002/94-12 - Monthly Inspection for December, 1994 (Ops, RP, NCS, Nucl Mat'ls & Safe, and Sampling)												
102	94-12-01	Completion of lessee investigation into the striking of a depleted uranium cylinder by a railcar.	URI (NA)	3.2.2.3	The lessee reported that on December 7, 1994, a full 14-ton UF6 cylinder of cold, solid, depleted UF6 was struck by a slow-moving railcar at the X-330 Process Building Tails Withdrawal Alley.	04/10/95		95-05	Closed	95-05	08/18/95	

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No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
103	94-12-02	Improper classification of event and subsequent late notification of DOE per Appendix G of procedure UE2-MC-RE1030.	NCV (NA)	3.2.2.1	The lessee reported that on December 28, 1994, that a criticality alarm at Unit 25-7 in the X-326 Process Building actuated. The report was not timely.	04/10/95	06/08/95	95-09	Closed	95-09	01/08/96	This item was issued when a commitment made to NOV 94-02-02 was found not having been completed.
104	94-12-03	Improper movement of liquid UF6 cylinder by straddle carrier.	NOV (II)	3.3.2.6	The lessee reported that on December 29, 1994, a 10-ton cylinder containing liquid UF6 was moved using a straddle carrier. This violated handling procedures.	04/10/95	06/29/95	95-07	Closed	95-07	11/03/95	This Level II violation resulted in a civil penalty of \$20,000.00 being imposed against the lessee on 05/24/95. The penalty was reduced to \$10,000.00 as a result of the lessee taking prompt corrective action and meaningful attention in correcting the root causes of the violation.
105	94-12-04	Failure to include checks for PBM block valve status as part of the quarterly freon checks per commitments made to DOE via letter dated 6/13/94.	NOD (NA)	3.2.2.1	The lessee failed to meet commitments made in regard to Violation 94-02-02	04/10/95	06/29/95	95-10	Closed	95-10	03/12/96	
106	94-12-05	Failure to perform safety-related maintenance as specified by the OSRs.	NOV (III)	3.3.2.2	Outdated and incomplete forms were used in the X-330 and X-333 Process Buildings and Code seals were not verified to be in place in the X-326 Process building, contrary to OSR requirements	04/10/95	12/31/97	97-03	Closed	97-03	05/21/97	
Functional Inspection Report 70-7002/94-13 (MC&O, QA, and Fire Prot)												
107	94-13-01	Completion of autoclave OSR annual surveillance test.	URI (NA)	3.2.2.2	The inspectors reviewed the record packages for three Autoclave 2, Building X-343, calibration and OSR tests performed on May 21, 1994.	09/06/94	12/31/97	96-01	Closed	96-01	04/09/96	

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No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
108	94-13-02	Failure to follow document control procedures.	NOV (III)	3.2.2.1	Inspector review of the actual process flow for new or revised procedures indicated that requirements were not being met.	09/06/94		97-03	Closed	97-03	05/21/97	PORTS-93-01-03 is administratively linked to the closure of this item. Issue was administratively linked to the closure of DOE CPI No. 23, "Plt Changes and CM," and DOE CPI 30, "Procedures Program" and administratively closed in 97-03.
109	94-13-03	Implementation of USEC policy of prompt identification and evaluation of vendor and/or material related problems in the lessons learned system.	IFI (NA)	3.2.2.4	The inspectors reviewed the procedure control process for tracking commitments regarding traceability and retrievability.	09/06/94		94-11	Closed	94-11	04/13/95	
110	94-13-04	Failure to implement administrative controls for the maintenance of records related to nuclear safety.	NOV (III)	3.2.2.5	The inspectors reviewed procedure control processes for records management.	09/06/94	10/18/94		Withdrawn	DOE Ltr	04/13/95	WITHDRAWN - DOE accepted USEC's response denial dated 03/15/95, and withdrew the NOV via DOE Letter dated 04/13/95.
111	94-13-05	Status of procedures development for the QPP.	IFI (NA)	3.6.2.5	The inspectors examined the Quality Program Plan Flowdown to Procedures.	09/06/94		96-02 97-01	Closed	97-01	02/13/97	Issue was administratively linked to the closure of CPI 32, "Quality Assurance Program Implementation" and administratively closed in 97-01
112	94-13-06	Verify adequacy of implementation of procedures implementing the system for continually pursuing improvement in quality.	IFI (NA)	3.6.2.3	The inspectors examined the Nonconformance Reporting and Corrective Actions programs.	09/06/94		95-09 96-02	Closed	96-02	05/20/96	This item was administratively closed in 70-7002/96-02 because the issue was similar in nature to NOV 95-18-03. Resolution of NOV 95-18-03 will also resolve this issue.
113	94-13-07	Failure to prepare, review, approve, issue, use, maintain and revise documents and related records for items that can impact public health and safety.	NOV (III)	3.6.2.4	The inspectors reviewed the document control and records management process.	09/06/94	12/31/96	95-01 97-03	Open			
114	94-13-08	Failure to maintain design handbook procedures.	NCV (NA)	3.6.2.5	The inspectors reviewed the control of work processes, MSR work packages and engineering review packages.	09/06/94	03/29/96	95-10	Closed	95-10	03/12/96	

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No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
115	94-13-09	Failure to implement procedures and practices to ensure the procured items for safety systems and components meet criteria.	NCV (NA)	3.6.2.7	The inspectors reviewed the Procurement Control process.	09/06/94	12/22/94	95-09	Closed	95-09	01/09/96	
116	94-13-10	Implementation of improved receipt inspection and testing practices.	IFI (NA)	3.4.2.1	The inspectors reviewed the inspection and acceptance testing process.	09/06/94		95-08	Closed	95-08	11/15/95	
117	94-13-11	Failure of management to demonstrate a strong commitment to a fire protection program.	NOV (III)	3.10.2.1	The inspectors reviewed the USEC fire safety program requirements and policy statements pertaining to fire protection to assure a strong management commitment to fire protection exists.	09/06/94	02/23/95	95-04	Closed	95-04	06/26/95	
118	94-13-12	Inadequate testing and maintenance of fire suppression systems.	NOV (III)	3.10.2.3	The inspectors examined the maintenance and material condition of the fire protection system and noted a failure to test and maintain fixed fire suppression systems, six examples.	09/06/94	02/10/97	97-01	Closed	97-01	02/13/97	
119	94-13-13	Failure to maintain a reliable water supply with sectional isolation valves.	NOV (III)	3.10.2.5	The inspectors examined the fire protection system to assure a reliable water supply was maintained and discovered the fire protection post indicating valves not adequately tested.	09/06/94	12/31/96	97-01 97-03	Closed	97-03	05/21/97	
120	94-13-14	Full implementation of performance based training for fire protection personnel.	IFI (NA)	3.10.2.8	The inspectors reviewed the training and qualification of fire protection personnel.	09/06/94		95-18	Closed	95-18	01/31/96	
121	94-13-15	Failure to maintain mobile fire apparatus.	NOV (III)	3.10.2.9	The inspectors reviewed the maintenance records for mobile fire protection apparatus.	09/06/94	06/08/95	95-09	Closed	95-09	01/08/96	

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No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
122	94-13-16	Review of corrections to material deficiencies in the fire water distribution system.	IFI (NA)	3.10.2.4	The inspectors examined the maintenance of the manual fire suppression systems.	09/06/94		95-04	Closed	95-04	06/26/95	
123	94-13-17	Determine compliance with ROA Implementing Requirement 3.10.2.12	URI (NA)	3.10.2.12	The inspectors were unable to complete an evaluation of the fire hazard evaluation process.	09/06/94		95-04	Closed	95-04	06/26/95	
124	94-13-18	Determine compliance with ROA Implementing Requirement 3.10.2.13.	URI (NA)	3.10.2.13	The inspectors were unable to complete an evaluation of the fire protection design review process.	09/06/94		95-04	Closed	95-04	06/26/95	
125	94-13-19	Fire protection appraisals of important buildings - scope and depth.	IFI (NA)	3.10.2.14	The inspectors evaluated the conduct of fire protection appraisals of important buildings.	09/06/94		95-04	Closed	95-04	06/26/95	
126	94-13-20	Failure to conduct root cause analyses for all fires.	NOV (III)	3.10.2.15	The inspectors examined the lessee's program for investigation and root cause determination of the causes of fires.	09/06/94	07/07/95	95-09	Closed	95-09	01/08/96	
127	94-13-21	Availability of portable fire extinguishers throughout the plant.	NCV (NA)	3.10.2.16	The inspectors examined the placement and maintenance of portable fire extinguishers.	09/06/94	03/29/95	95-04	Closed	95-04	06/26/95	
128	94-13-22	Failure of fire alarms to report to continuously manned locations.	NOV (III)	3.10.2.17	The inspectors reviewed the functionality of the fire alarm system.	09/06/94	07/07/95	95-09	Closed	95-09	01/08/96	
129	94-13-23	Failure to control welding, burning, and hot work via a written permit system.	NOV (III)	3.10.2.18	The inspectors examined the control of welding, burning and hot work for adequacy.	09/06/94	03/16/95	95-04	Closed	95-04	06/26/95	
Functional Inspection Report 70-7002/94-14 (Ops, T&O, Maint)												
130	94-14-01	Failure to conduct tests to verify proper operation after significant maintenance.	NOV (III)	3.3.2.2	The inspectors examined the conduct of safety system surveillance and post-maintenance operability testing.	08/31/94	11/30/94		Withdra wn	DOE Ltr	01/17/95	WITHDRAWN - DOE Accepted USEC's appeal and withdrew the NOV on 01/17/95.

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No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
131	94-14-02	Implementation of independent reviews of the results of OSR surveillance tests and safety-system check sheets.	IFI (NA)	3.3.2.2	The inspectors examined the conduct independent reviews of safety system surveillance and post-maintenance operability testing.	08/31/94		95-18	Closed	95-18	01/31/96	Elevated to NCV 95-18-01
132	94-14-03	Failure to use approved procedures for performance of required OSR surveillance tests for safety system components.	NOV (III)	3.3.2.3	The inspectors examined the conduct of initial and periodic safety system operability testing.	08/31/94	11/30/94		Withdrawn	DOE Ltrs	01/17/95 03/06/95	WITHDRAWN - USEC denied the two examples cited in the violation. DOE accepted USEC's response on Example #2 and withdrew it via a letter on 01/17/95 USEC made a second appeal on Example #1 in a letter dated 02/16/95. DOE accepted this new information and withdrew Example #1, hence the violation, on 03/06/95.
133	94-14-04	Understanding of and policy regarding the applicability of ROA Implementation Requirement 3.3.2.4 to USEC personnel.	IFI (NA)	3.3.2.4	The inspectors evaluated the performance of management monitoring and plant tours.	08/31/94		95-18	Closed	95-18	01/31/96	
134	94-14-05	Failure to identify as found conditions for engineering reviews to determine whether the as found conditions potentially involving USQs.	NOV (III)	3.3.2.7	The inspectors evaluated the performance of safety reviews of "as-found" conditions.	08/31/94	12/31/97	95-18 97-01 97-03	Closed	97-03	05/21/97	QVI.13 is administratively linked to the closure of this item. This item was administratively linked to the closure of DOE CPI No. 24, "Maintenance Program," and CPI No. 30, "Procedures Program," and administratively closed in 97-03.
135	94-14-06	Failure to include weights used for torque wrench testing in the calibration program.	NCV (NA)	3.7.2.3	The inspectors reviewed the traceability to standards of MT&E equipment.	08/31/94	10/27/95	95-18	Closed	95-18	01/31/96	

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(Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
136	94-14-07	Failure of line management to define training needs and to assure that training was completed and proficiency demonstrated. (ROA 3.5.2.1.)	NOV (III)	3.5.2.1	The inspectors evaluated management responsibilities regarding training and qualification.	08/31/94	12/30/94	96-01	Closed	96-01	04/09/96	PORTS-93-01-08 is administratively linked to the closure of this item. Issue was administratively linked to the closure of CPI 26, "Systems Approach to Training" and administratively closed in 96-01
137	94-14-08	Failure to define training requirements and provide training to supervisors and managers regarding safety and safeguards and security. (ROA 3.5.2.7)	NOV (III)	3.5.2.7	The inspectors examined training for supervisors and management regarding safety and safeguards.	08/31/94	10/27/95	96-02	Closed	96-02	05/20/96	
138	94-14-09	Action to be taken if a component fails post-maintenance test.	IFI (NA)	3.3.2.3	The inspectors examined post maintenance testing and troubleshooting activities in the X-343 building.	08/31/94		95-18	Closed	95-18	01/31/96	
139	94-14-10	Alteration of the operation of a safety system (UF6 detection system) without performing a USQ screening per SA-001. (ROA 3.2.2.1)	NOV (III)	3.2.2.1	The inspectors reviewed modifications performed on the UF6 detection system in the X-330 and X-333 cascade process buildings.	08/31/94	03/19/96	95-18	Closed	95-18	01/31/96	
140	94-14-11	Failure to maintain traceability of test documents to demonstrate equipment operability.	NOV (III)	3.6.2.5	The inspectors evaluated safety related work controls.	08/31/94	03/30/95	95-08	Closed	95-08	11/15/95	
Functional Inspection Report 70-7002/94-15 (Eng'g Reviews, Emerg Prep, Accid Anal)												
141	94-15-01	Inadequate procedure system to control changes to the plant design and equipment. (ROA Requirement 3.4.2.1)	NOV (III)	3.4.2.1	The inspectors evaluated the procedural control of safety related plant or equipment design changes.	09/30/94	02/10/97	96-07	Closed	96-07	02/10/97	This item led to the identification of NOD 96-07-01 for failure to proceduralize the "At Risk" design implementation process.
142	94-15-02	Failure to perform USQ screening reviews on procedure changes. (ROA Requirement 3.17.2.4)	NCV (NA)	3.17.2.4	The inspectors reviewed 30 new or revised procedures to determine if documented screening reviews were performed.	09/30/94	04/10/95	95-10	Closed	95-10	03/12/96	

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No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
143	94-15-03	Replacement of HARMS II dispersion modeling computer code.	IFI (NA)	3.13.2.9	The inspectors evaluated the capability of the lessee to assess the potential consequences of events.	09/30/94		95-13 95-10	Closed	95-10	03/12/96	
144	94-15-04	Accuracy of dosimetric results for individuals exposed from a criticality accident.	IFI (NA)	3.13.2.9	The inspectors evaluated the ability of the lessee to ensure accurate dosimetric results for individuals exposed to a criticality incident.	09/30/94		95-10	Closed	95-10	03/12/96	
145	94-15-05	Inadequate provisions to assess the actual or potential consequences of an emergency and specific predetermined actions to be taken in response to emergencies. (ROA Requirement 3.13.2.9)	NOV (III)	3.13.2.9	The inspectors evaluated the capability for overall assessment of the actual or potential consequences of an emergency.	09/30/94	10/25/95	95-10	Closed	95-10	03/12/96	
146	94-15-06	Demonstration that revised information release procedure provides for timely and accurate information release.	URI (NA)	3.13.2.13	The inspectors reviewed the public information program for adequacy.	09/30/94		95-10	Closed	95-10	03/12/96	
147	94-15-07	Failure to adequately define and complete emergency response training in a consistent manner. (ROA Requirement 3.13.2.14)	NOV (III)	3.13.2.14	The inspectors reviewed the program for training of emergency response organization individuals regarding their duties.	09/30/94	01/11/96	96-01	Closed	96-01	04/09/96	
148	94-15-08	Failure of the drill and exercise program to verify that the emergency plan provides adequate guidance to assist the plant staff to assess and mitigate the consequences of emergencies. (ROA Requirement 3.13.2.15)	NCV (NA)	3.13.2.15	The inspectors evaluated the adequacy of the emergency plan drill and exercise program for adequacy.	09/30/94	09/20/95	95-13 95-10	Closed	95-10	03/12/96	
149	94-15-09	Failure to prepare a JCO in response to QA Audit OPEN94A01, Engineering Review. (ROA Requirement 3.2.2.1)	NCV (NA)	3.2.2.1	The inspectors evaluated lessee response to a significant safety related audit finding.	09/30/94	11/14/95	95-18	Closed	95-18	01/31/96	

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No	Item No	Issue	CAT	ROA	Activity	Date	Action	Update	Status	Report	Date	Comments
150	94-15-10	Preparation and distribution of a document without adequate classification review, (ROA Requirement 3.18.2.2)	NCV	(NA)	The inspectors noted that the classification review process had failed in one instance to prevent the potential compromise of matter classified as confidential.	09/30/94	04/10/95	95-08	Closed	95-08	11/15/95	
Functional Inspection Report 70-7002/94-16 (RP, NCS, Envtiron Prot, Waste Mgmt, and Chem Safety)												
151	94-16-01	Failure of management to implement designated responsibilities for radiation protection of workers.	NOV	(III)	The inspectors reviewed the responsibilities of the facility managers relating to the methods and procedures for radiation protection.	11/30/94	10/31/96	95-02 96-02 96-05	Closed	96-05	10/31/96	
152	94-16-02	Designation of a Radiation Protection Manager.	IFI	(NA)	The inspectors reviewed the organization of the Health Physics Department.	11/30/94		95-04	Closed	95-04	06/26/95	
153	94-16-03	Failure to have ALARA goals and an ALARA committee.	NCV	(NA)	The inspectors examined the elements of the ALARA program.	11/30/94	01/31/95	95-04	Closed	95-04	06/26/95	
154	94-16-04	Improper radiological postings.	NCV	(NA)	Radiological posting was evaluated in the X305, X-333, X-326, X-744H, X-744L, and X-705 buildings.	11/30/94	01/31/95	95-04	Closed	95-04	06/26/95	
155	94-16-05	Failure to follow procedure UB2-HP-RP1031 regarding training of source custodians and inventory and leak test of radioactive sources.	NCV	(NA)	The inspectors examined the nonexempt byproduct material control program.	11/30/94	07/07/95	96-02	Closed	96-02	05/20/96	
156	94-16-06	Positive measures for controlling radioactive sources.	IFI	(NA)	The inspectors examined the nonexempt byproduct material control program.	11/30/94		96-02	Closed	96-02	05/20/96	
157	94-16-07	Failure to maintain a current inventory of all non-exempt sources.	NOV	(III)	The inspectors examined the nonexempt byproduct material control program.	11/30/94	01/26/95	96-02	Closed	96-02	05/20/96	

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No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
158	94-16-08	Staff awareness of requirements governing the provision of annual dose summary to an individual.	IFI (NA)	3.8.2.21	The inspectors reviewed the program for radiation exposure recordkeeping and reporting.	11/30/94		96-01 96-05	Closed	96-05	10/31/96	
159	94-16-09	Inconsistent and incomplete recording of information for issuance of visitor TLDs and failure to obtain exposure history for new employees.	IFI (NA)	3.8.2.22	The inspectors reviewed the program for radiation exposure recordkeeping and reporting.	11/30/94		96-01	Closed	96-01	04/09/96	
160	94-16-10	Failure to report NCS noncompliances to management.	NOV (III)	3.9.2.7	The inspectors reviewed NCS control procedures and practices.	11/30/94	12/31/97	97-03	Closed	97-03	05/21/97	This issue was administratively linked to the closure of DOE CPI No. 8, "NCSA Documents," and DOE CPI No. 9, "NCSA Implementation," and was administratively closed in 97-03.
161	94-16-11	Inconsistent labeling of radioactive waste.	NCV (NA)	3.16.2.1	The inspectors evaluated the handling, transportation and storage of radioactive and mixed wastes.	11/30/94	02/23/95	95-10	Closed	95-10	03/12/96	
162	94-16-12	Complete inspection of lessee's compliance with this requirement.	URI (NA)	3.16.2.4	The review of off-site shipment of LLW and mixed waste was not completed.	11/30/94		95-10	Closed	95-10	03/12/96	
163	94-16-13	Chemical safety respiratory protection program.	IFI (NA)	3.19.2.1	The inspectors evaluated the monitoring and control of air contaminants.	11/30/94		96-03	Closed	96-03	07/19/96	This item was found to be similar to the issue contained in NOV 95-18-07 and therefore, was linked to its closure. This item was then administratively closed in 96-03.
164	94-16-14	Process hazards analysis for use of chlorine in building X-611.	IFI (NA)	3.19.2.1	The inspectors reviewed the storage of chemicals and hazardous materials	11/30/94		96-03	Closed	96-03	07/19/96	
Functional Inspection Report 70-7002/94-17 (Nucl Mat'ls & Safe, P&T, Sampling, and Security)												
165	94-17-01	Failure to revise or red-line procedures controlling NMC&A activities within a 3-year period as required by UEO-210, Rev. 1.	NCV (NA)	3.12.2.1	The inspectors examined the adequacy of written plans and procedures for special nuclear material.	12/07/94	12/31/97	97-03	Closed	97-03	05/21/97	This item was administratively linked to the closure of DOE CPI No. A.1, "Materials Control and Accountability Manuals and Procedures," and admin closed in 97-03.

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No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
166	94-17-02	Incomplete reporting and accounting of SNM above threshold limits.	NOV (III)	3.12.2.2	The inspectors examined the adequacy of reporting and accounting for special nuclear material.	12/07/94	06/08/95	95-18	Closed	95-18	01/31/96	
167	94-17-03	Use of borrowed passwords to enter data into the AnaLIS computer.	NOV (III)	3.2.2.1	The inspectors examined the adequacy of the measurement control program for special nuclear material.	12/07/94	06/12/95	95-18	Closed	95-18	01/31/96	
168	94-17-04	Failure to conduct formal internal review and assessments defined in the NMC&A plan and procedures.	NCV (NA)	3.12.2.7	The inspectors examined the adequacy of the independent audit and assessment program for special nuclear material.	12/07/94	02/23/95	95-09	Closed	95-09	01/08/96	Although closed in 95-09, additional corrective action followup will be accomplished under NOV 95-06-01
169	94-17-05	Failure to fully develop and implement the performance testing and effectiveness verifications aspects of the SNM protection program.	NCV (NA)	3.12.2.8	The inspectors examined the adequacy of the performance testing of SNM protection program for special nuclear material.	12/07/94	05/31/95	95-18	Closed	95-18	01/31/96	
170	94-17-06	Use of overpacks with unrepaired holes in the outer shell.	NCV (NA)	3.14.2.6	The inspectors reviewed the lessee program for shipping UF6 cylinders and their associated overpacks.	12/07/94	02/23/95	95-10	Closed	95-10	03/12/96	
171	94-17-07	Failure to use NIST traceable standards to calibrate equipment to measure nuclear material.	NOV (III)	3.15.2.2	The inspectors reviewed the lessee program control of sampling and analysis measuring equipment.	12/07/94	03/30/95	96-01	Closed	96-01	04/09/96	
172	94-17-08	Maintenance and availability of DES radios for protective force members.	IFI (NA)	3.18.2.1d	The inspector reviewed activities related to the Site Safeguards and Security Plan (POEF-2014).	12/07/94		95-18	Closed	95-18	01/31/96	
173	94-17-09	Failure to formally document the security-system performance testing program.	NCV (NA)	3.18.2.1f	The inspector reviewed activities related to the security-system performance testing.	12/07/94	07/07/95	95-18	Closed	95-18	01/31/96	

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No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
174	94-17-10	Failure to properly mark classified documents and information.	NOV (III)	3.18.2.2b	The inspectors evaluated the controls placed on classified documents and information for adequacy.	12/07/94	10/30/95	95-18	Closed	95-18	01/31/96	
175	94-17-11	Failure of 7% of cleared employees to have completed the 1993 Annual Security Education Refresher Briefing or the make-up sessions.	NCV (NA)	3.18.2.2f	The inspectors examined the security education and awareness program.	12/07/94	08/18/95	95-18	Closed	95-18	01/31/96	
176	94-17-12	Failure of the unclassified computer system to provide the level of protection mandated by DOE Order 1360.2B.	NOV (III)	3.18.2.3f	The inspectors evaluated the unclassified computer security program.	12/07/94	10/30/95	95-18	Closed	95-18	01/31/96	
Technical Instruction TI-3.2/01 dated 10/06/95 - DOE RO Manager Instructions on Verifying USEC Commitments Made at April 28, 1994 DOE Enforcement Conference (Functional Area Inspectors to Perform)												
177	Com'mt-01 [TI-3.2/01]	Crew Briefings - Div/Dep Div Mgrs will meet with all plant employees to stress procedure adherence	IFI (NA)	3.2.2.1	Eval of regulatory performance involving adherence to procedures (at least 10 violations cited)	10/06/95	Qtrly thru 1994	95-18	Closed	95-18	01/31/96	
178	Com'mt-02 [TI-3.2/01]	Drill Program - At least one drill will be conducted somewhere in an ops space each day of the normal work week and scheduled monthly	IFI (NA)	3.2.2.1	Eval of regulatory performance involving adherence to procedures (at least 10 violations cited)	10/06/95	Drill each workday beginning 12/93	95-18	Closed	95-18	01/31/96	
179	Com'mt-03 [TI-3.2/01]	Plt Mg'mt Communications - Various bulletins, memoranda, and advisories will be issued to communicate mg'mts expectations for the safety of workers and the public	IFI (NA)	3.2.2.1	Eval of regulatory performance involving adherence to procedures (at least 10 violations cited)	10/06/95	04/25/94	95-18	Closed	95-18	01/31/96	
180	Com'mt-04 [TI-3.2/01]	Sweep Teams - 5 man sweep teams will conduct unannounced peer review of procedure use through CY 94	IFI (NA)	3.2.2.1	Eval of regulatory performance involving adherence to procedures (at least 10 violations cited)	10/06/95	12/31/94	95-18	Closed	95-18	01/31/96	

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No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
	4A	Supervisor Training - 2-1/2 weeks of first line supv tm'g for all first line supervisors	IFI (NA)	3.2.2.1	Replacement for Sweep Teams	12/28/94	12/28/94	95-18	Closed	95-18	01/31/96	The lessee could not produce records that this training had occurred. As a result, this issue became one of the examples in NOD 95-18-02 (Example 3)
	4B	Procedures Upgrade Project - Lessons learned from the sweep teams have been integrated into the NSU Project involving Procedure Upgrades which will be continued	IFI (NA)	3.2.2.1	Replacement for Sweep Teams	12/28/94	12/28/94	95-18	Closed	95-18	01/31/96	The NSU program on Procedures Upgrades will correct this issue. Also, DOE Compliance Plan Item No. 30, "Procedures Program," was planned to track the resolution of this issue.
	4C	Mg'mt Emphasis - Procedure adherence will be continually emphasized by mg'mt in both their periodic monitoring and in any meetings or briefings that are held	IFI (NA)	3.2.2.1	Replacement for Sweep Teams	12/28/94	12/28/94	95-18	Closed	95-18	01/31/96	
	4D	GDP QOOP - A GDP Quality of Operations Plan (QOOP) will be developed and implemented to improve operations across the board, including both the quality of the procedures themselves and the adherence of the workers to those procedures	IFI (NA)	3.2.2.1	Replacement for Sweep Teams	12/28/94	12/28/94	95-18	Closed	95-18	01/31/96	
	4E	Coaches - Experienced coaches are being hired on an interim basis to work with key line mgrs to help improve overall performance that will include consistent procedural compliance	IFI (NA)	3.2.2.1	Replacement for Sweep Teams	12/28/94	12/28/94	95-18	Closed	95-18	01/31/96	
181	Com'mt-05 [TI-3.2/01]	Increased Control of UF6 Ops - 2 independent ops checks will be performed for all disconnect/movement of cylinders. Interlocks will perform function in C-310 burp stations and withdrawal positions	IFI (NA)	3.2.2.1	Eval of regulatory performance involving adherence to procedures (at least 10 violations cited)	10/06/95	04/28/94	95-18	Closed	95-18	01/31/96	Independent verification checks were found not being performed in all cases. This issue became an example to NOD 95-18-02 (Example 4)

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No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
182	Com'mt-06 [TI-3.2/01]	Procedures Upgrade - \$14.5M will allocated to accelerate schedule to complete upgrade of 1700 procedures	IFI (NA)	3.2.2.1	Eval of regulatory performance involving adherence to procedures (at least 10 violations cited)	10/06/95	06/01/96	95-18	Closed	95-18	01/31/96	The NSU program on Procedures Upgrades will correct this issue. Also, DOE Compliance Plan Item No. 30, "Procedures Program," was planned to track the resolution of this issue.
183	Com'mt-07 [TI-3.2/01]	Formal USEC Policies - USEC will issue policies on the formality and discipline of ops, employee discipline, and regulatory interactions	IFI (NA)	3.2.2.1	Eval of regulatory performance involving adherence to procedures (at least 10 violations cited)	10/06/95	07/01/94	95-18	Closed	95-18	01/31/96	
184	Com'mt-08 [TI-3.2/01]	Culture Change Initiative - Adoption of a safety culture of formality and discipline in ops and in adhering to procedures	IFI (NA)	3.2.2.1	Eval of regulatory performance involving adherence to procedures (at least 10 violations cited)	10/06/95	10/06/95	95-18	Closed	95-18	01/31/96	
185	Com'mt-09 [TI-3.2/01]	Performance Measures - USEC will monitor the efficacy of corrective actions taken with respect to the commitments made in its EA response	IFI (NA)	3.2.2.1	Eval of regulatory performance involving adherence to procedures (at least 10 violations cited)	10/06/95	05/01/94	95-18	Closed	95-18	01/31/96	
186	Com'mt-10 [TI-3.2/01]	Mgmt Control Enhancements - A USEC employee will assigned at each site to be primary DOE reg interface, and Reg Assurance Program will be separate from production.	IFI (NA)	3.2.2.1	Eval of regulatory performance involving adherence to procedures (at least 10 violations cited)	10/06/95	10/01/94	95-18	Closed	95-18	01/31/96	
187	Com'mt-11 [TI-3.2/01]	Clarify Reporting Req'mts - Ltr issued to remind personnel of their responsibilities to notify USEC and DOE of GDP events	IFI (NA)	3.2.2.3	Eval of the accuracy, categorization, and timeliness of reporting plant events to DOE	10/06/95	04/01/94	95-18	Closed	95-18	01/31/96	

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No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
188	Com'mt-12 [TI-3.2/01]	USEC Interpretation of the Categorization and Reporting Criteria - Personnel have been informed to err on the side of caution when uncertain which category applies to a given event (go to next higher level)	IFI (NA)	3.2.2.3	Eval of the accuracy, categorization, and timeliness of reporting plant events to DOE	10/06/95	04/01/94	95-18	Closed	95-18	01/31/96	
189	Com'mt-13 [TI-3.2/01]	Lessons Learned Discussions with the PSSs - Discussions were held with PSSs to make them aware of miscategorization problems	IFI (NA)	3.2.2.3	Eval of the accuracy, categorization, and timeliness of reporting plant events to DOE	10/06/95	04/01/94	95-18	Closed	95-18	01/31/96	
SSR Inspection Report 70-7002/95-01 - Monthly Inspection for January, 1995 (Ops, Eng'g Reviews, Maint, NCS, Fire Prot, and Audits & Appraisals)												
190	95-01-01	Review of lessee investigation of containment shutdown of autoclave in X-343.	URI (NA)	3.2.2.3	The inspectors reviewed two events where autoclaves went into the containment mode while the autoclave was in operation, thus actuating safety system valves.	05/05/95		95-06	Closed	95-06	10/04/95	
191	95-01-02	Review of JCO for the filling of 10-ton cylinders with U-234 having a weighted average assay in excess of the 5% specified in OSR Part K, Table 2.3.4.1.	URI (NA)	3.2.2.3	The inspectors reviewed three events dealing with the filling of cylinders to an average assay greater than 5.0%.	05/03/95		95-09	Closed	95-09	01/08/96	
SSR Inspection Report 70-7002/95-02 - Monthly Inspection for February, 1995 (No ROA Areas Evaluated)												
192	95-02-01	Completion of lessee event reports concerning HF or fluorine outleakages at X-342 facility.	URI (NA)	3.2.2.3	The inspectors began inquiry into several outleakages of HF or fluorine from instruments or valves at the X-342 facility.	05/25/95		96-01	Closed	96-01	04/09/96	
SSR Inspection Report EA-70-7002/95-003 - Monthly Inspection for March, 1995 (Ops, RF, Nucl Mat'ls & Safe, and Emerg Prep)												
193	95-03-01	Operator sleeping in ACR #5 while on duty.	NCV (NA)	3.3.2.1	An operator was discovered to be sleeping in the ACR #5 of the X-326 building.	06/05/95	09/08/95	95-18	Closed	95-18	01/31/96	

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No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
194	95-03-02	Completion of engineered corrective actions for fragmenting rupture disks and downstream relief valves.	IFI (NA)	3.4.2.3	The inspectors began evaluation of the lessee's engineered corrective actions regarding the freon relief system on non-uprated cells and certain other areas.	06/05/95	12/31/97	95-18	Closed	95-18	01/31/96	
195	95-03-03	Inspection of cranes and lifting devices used for handling cylinders containing liquid UF ₆ .	URI (NA)	3.14.2.5	The inspectors began a review of the development of a QA plan for packaging and transportation of radioactive material.	06/05/95	02/28/97	96-01 96-02 96-06	Closed	96-06	12/09/96	Issue was administratively linked to the closure of CPI No. 19, "Packaging and Transportation" and administratively closed in 96-06.
196	95-03-04	Adequacy of crane inspection program.	URI (NA)	3.7.2.2	The inspectors reviewed OSR ERP, LAW & Tails Withdrawal facilities and OSR UF ₆ Cylinder Heating Autoclaves.	06/05/95	02/03/97	95-04 95-18 96-02	Closed	96-02	05/20/96	
SSR Inspection Report 70-7002/95-04 - Monthly Inspection for April, 1995 (Ops, RP, NCS, and Security)												
197	95-04-01	Implementation of an apparent change in operation of the OGRU not analyzed in the FSAR, OSR or NCSA.	URI (NA)	3.4.2.3	Nuclear criticality safety activities related to the X-705 truck alley drain oil and grease removal unit were inspected.	06/26/95		96-03	Closed	96-03	07/19/96	
198	95-04-02	Weakness in the operation of the OGRU.	IFI (NA)	3.4.2.3	Nuclear criticality safety activities related to the X-705 truck alley drain oil and grease removal unit were inspected.	06/26/95		96-03	Closed	96-03	07/19/96	
SSR Inspection Report 70-7002/95-05 - Monthly Inspection for May, 1995 (MC&O, Ops, RP, NCS, Fire Prot, Environ Prot, Emerg Prep, and Security)												
199	95-05-01	Adherence to guidelines for operation of the CADP.	URI (NA)	3.3.2.1	The inspectors reviewed the status of the UF ₆ detection system in the X-333 building following an associated OSR violation.	08/18/95		95-18	Closed	95-18	01/31/96	This issue became part of NOV 95-18-03
200	95-05-02	Use of containments that failed to meet NCS requirements.	NCV (NA)	3.2.2.1	The inspectors reviewed lessee actions concerning the discovery of potential violations of NCS requirements in the X-705 tunnel basement.	08/18/95		96-01	Closed	96-01	04/09/96	

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(Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
201	95-05-03	Failure to follow procedures.	NCV (NA)	3.2.2.1	The inspectors evaluated the lessee's managerial controls with regard to the use of procedures.	08/18/95		97-01	Closed	97-01	02/13/97	This item was generated from a followup review of NCV 94-01-09
202	95-05-04	Failure to observe operating bounds for safety systems and components as established by the OSRs.	NCV (NA)	3.3.2.1	The inspectors observed operations and noted 5 examples of failure to meet OSR requirements.	08/18/95	02/03/97	95-18 97-01	Closed	97-01	02/13/97	This issue became part of NOV 95-18-03
203	95-05-05	Failure to post access to a high contamination area.	NCV (NA)	3.8.2.11	The inspectors noted that access to a High Contamination Area described by RWP 95-705-0025-G was not posted from the pipe galley in the X-705 tunnel basement.	08/18/95	10/20/95	96-01	Closed	96-01	04/09/96	
204	95-05-06	Improper labeling and posting of fissile material area.	NCV (NA)	3.9.2.5	Lessee self-identified NCS concerns were inspected.	08/18/95	10/31/96	96-05	Closed	96-05	10/31/96	
205	95-05-07	Ineffective implementation of the security program.	NCV (NA)	3.18.2.1.	The inspectors evaluated lessee measures taken to ensure effective management and implementation of the security program.	08/18/95	10/31/95	95-18	Closed	95-18	01/31/96	
SSR Inspection Report 70-7002/95-06 - Monthly Inspection for June, 1995 (MC&O, Ops, T&O, RP, NCS, and Fire Prot)												
206	95-06-01	Deviating from procedures without required review and approval.	NOV (III)	3.2.2.1	The inspectors reviewed the procedure control and use process and noted six instances of noncompliance.	10/04/95	12/16/96	96-06	Closed	96-06	12/09/96	
207	95-06-02	Failure to control nonexempt byproduct material.	NOV (III)	3.8.2.16	The inspectors examined the use of a sealed source in the X-326 building.	10/04/95	11/08/95	96-01	Closed	96-01	04/09/96	
SSR Inspection Report 70-7002/95-07 - Monthly Inspection for July, 1995 (MC&O, Ops, RP, NCS, and Fire Prot)												

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No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
208	95-07-01	Completion and review of USQD for 18 as found conditions involving NCS single contingency operations.	URI (NA)	3.9.2.2	The inspectors began review of the lessee finding of 18 as found conditions in the X-705 decontamination facility and other areas that constitute NCS single contingency operations without documented safety analyses.	11/03/95		96-03	Closed	96-03	07/19/96	
SSR Inspection Report 70-7002/95-08 - Monthly Inspection for August, 1995 (Ops, QA and Emerg Prep)												
209	95-08-01	Physical condition of tunnel connecting the Process Building and X-300 Plant Control Facility and associated cables.	IFI (NA)	3.7.2.2	On August 22, 1995, the inspectors performed a walkthrough of the tunnels connecting the Process Buildings and the X-300 Plant Control Facility.	11/15/96		96-02	Closed	96-02	05/20/96	
SSR Inspection Report 70-7002/95-09 - 6-Week Inspection for September - Mid October 1995 (MC&O, Ops, Maint, RP, Nucl Mat'ls & Safe, Emerg Prep, and Waste Mg'mt)												
210	95-09-01	Improper reporting of Unusual Occurrences to DOE.	NOV (III)	3.2.2.3	The inspectors reviewed the DOE records and the Occurrence Report Processing System to ascertain the timeliness of required reports. 5 instances of late reporting were found.	01/08/96	09/11/96	96-04	Closed	96-04	09/03/96	
211	95-09-02	Failure of line management to implement administrative radiation exposure controls.	NOV (III)	3.8.2.9	Following an event, the inspectors determined that an individual who should have been placed on restricted duties was engaged in proscribed activities.	01/08/96	12/16/96	96-06	Closed	96-06	12/09/96	
SSR Inspection Report 70-7002/95-10 - 6-Week Inspection for Mid October - November 1995 (Organ Plan, Maint, NCS, and Fire Prot)												
212	95-10-01	Failure to document acceptance test for two gages on form UE-502.	NCV (NA)	3.7.2.3	The inspectors examined the implementation of the instrument calibration program.	03/12/96	02/10/97	96-07	Closed	96-07	02/10/97	Issue was administratively linked to the closure of CPI 24, "Maintenance Program" and administratively closed in 96-07.

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(Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
213	95-10-02	Failure to have formal acceptance criteria for testing and maintaining fore pumps and associated equipment.	NOV (III)	3.6.2.8	The inspectors reviewed the performance of fixed fire suppression testing.	03/12/96	12/31/96	97-03	Closed	97-03	05/21/97	This item was linked to NOV 95-18-08 which was used to partially close this issue in 97-03.
SSR Inspection Report 70-7002/95-11 (Not Used Since SSR Inspection Periods Shifted to a 6-Week Reporting Cycle)												
		Not used										
SSR Inspection Report 70-7002/95-12 (Not Used Since SSR Inspection Periods Shifted to a 6-Week Reporting Cycle)												
		Not used										
Special Inspection Report 70-7002/95-13 (Observation of the 1994 Full Participation Emergency Response Exercise Conducted on 01/14/95)												
214	95-13-01	Failure to conduct proper annual emergency exercise.	NOV (III)	3.13.2.15	The inspectors observed the Full Participation Emergency Response Exercise conducted on January 14, 1995.	05/11/95	01/31/96	95-17	Closed	95-17	01/22/96	
Special Inspection Report 70-7002/95-14 (DOE Response to a Failure to Follow NCS Procedures Involving X-705 Microfiltration and Filter Press)												
		No items identified										
Special Inspection Report 70-7002/95-15 (Unreviewed Safety Determination Inspection) - Not Performed. Verbally Cancelled by the RO Manager												
		Not used										
Special Inspection Report 70-7002/95-16 (Review of Lessee's Method of Comparing Pre-ROA DOE IRMS Items to the ROA Before They were Cancelled) - NOT ISSUED												
		Not Issued										
Special Inspection Report 70-7002/95-17 (Evaluation of the Integrated Emergency Response Capabilities in Conducting the 1995 Full Participation Emergency Response Exercise)												
		No items identified										
Functional Inspection Report 70-7002/95-18 (Organ Plan, MC&O, Ops, Eng'g Reviews, QA, RP, NCS, Fire Prof, Nucl Mat'l's & Safe, Emerg Prep, Accident Anal, Security, and Chem Safety)												

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No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
215	95-18-01	Failure to perform independent reviews for autoclave surveillance tests.	NCV (NA)	3.3.2.2	The inspector followed up on the lack of independent review of OSR surveillances.	01/31/96	03/03/97	97-03	Closed	97-03	05/21/97	
216	95-18-02	Failure to meet 5 written commitments to DOE.	NOD (NA)	3.2.2.1	The inspector reviewed the implementation of USEC commitments which resulted from an April 2, 1994 enforcement conference.	01/31/96	12/31/97	97-03	Closed	97-03	05/21/97	
217	95-18-03	Failure to detect and prevent quality problems.	NOV (III)	3.6.2.3	The inspector reviewed the corrective actions taken by the lessee for a May, 1995, OSR violation involving the deactivation of the wrong UF6 detector.	01/31/96	12/31/96	96-03 97-03	Open			QVI.4A is administratively linked to the closure of this item.
218	95-18-04	Failure to follow procedures (6 examples).	NOV (III)	3.2.2.1	The Procedure and Document Control process was evaluated.	01/31/96	11/27/96	97-01	Closed	97-01	02/13/97	
219	95-18-05	Failure to receive DOE approval for changes to the PORTS FSAR.	NOV (III)	3.4.2.3	The inspectors evaluated the lessee's performance of required engineering reviews of proposed changes to the plant facilities, procedures, and or tests which involve an unreviewed safety question.	01/31/96	08/13/97	96-10 96-07	Closed	96-07	02/10/97	
220	95-18-06	Improper issuance of safety-related procedures.	NOV (III)	3.6.2.4	The inspectors examined the process used to issue, use, and revise safety related procedures.	01/31/96	12/31/97	97-03	Open			
221	95-18-07	Improper implementation of the respiratory protection program.	NOV (III)	3.8.2.7	The inspectors reviewed the implementation of the lessee's respiratory protection program.	01/31/96	10/31/96	96-05	Closed	96-05	10/31/96	
222	95-18-08	Failure to demonstrate "strong management commitment to fire protection."	NOV (III)	3.10.2.1	The inspectors evaluated management's commitment to fire protection.	01/31/96	12/16/96	96-06	Closed	96-06	12/09/96	Issue was administratively linked to the closure of CPI 17, "Fire Protection Procedures and Hot Work Program" and administratively closed in 96-06.

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No	Item No	Issue	CAT (Sev)	ROA Section	Activity	Date Issued	Action Compl	Update Report	Status	Report Date	Comments
223	96-01-01	Failure to perform required nuclear safety and safeguards and security retraining at specified intervals.	NOV (III)	3.5.2.6	The inspectors reviewed aspects of the training program to verify requirements were being met.	04/09/96	10/11/96	97-03	Closed	97-03	05/21/97
SSR Inspection Report 70-7002/96-01 - 6-Week Inspection for December - Mid January 1996 (Organ Plan, Ops, T&O, QA, RP, NCS, and Emerg Prep)											
224	96-03-01	Completion of JCO addressing facilities outside design basis.	URI (NA)	3.4.2.1	The inspectors began evaluation of the lessee's engineered corrective actions regarding an as-found condition on the CAAS involving the X-334 Transformer Cleaning Facility, X-640-1 Fire Pump House and the X-744L Stores and Maintenance Warehouse.	07/19/96	08/06/96	96-04	Closed	96-04	09/03/96
SSR Inspection Report 70-7002/96-03 - 6-Week Inspection for March - Mid April 1996 (Ops, RP, and Chem Safety)											
225	96-04-01	Failure to notify DOE of as found condition potentially involving an unreviewed safety question and submitting it for review.	NOV (III)	3.3.2.7	The inspectors followed up on the implementation of a JCO involving the CAAS System dated April 18, 1996.	09/03/96	02/10/97	96-07	Closed	96-07	02/10/97
226	96-04-02	Conduct of tests of safety-related equipment without an approved procedure.	NOV (III)	3.3.2.3	The inspectors reviewed the lessee's conduct of tests of safety related electric fire pumps.	09/03/96	12/27/96	96-08	Closed	96-08	12/27/96
DOE Letter to USBC Dated October 30, 1996. DOE ROM informed USBC that SSRs Would be Performing an Augmented Inspection to Verify USBC Commitments Made at the May 9, 1996 DOE Management Conference (Results to be Reported in SSR Inspection Report)											
227	Com'mt-2.1.1 [EA-70-7003/96-01]	Regulatory Commitments - A procedure to flow-down regulatory commitments to policies & special process has been developed. A to handle Cert Appl. commitments	IFI (NA)	3.2.2.1	In spite of CAs taken since the 1994 Enforce Conf, procedure-related NOV's continue to be cited at PORTS & PGDP	10/06/95	06/07/96	97-03	Closed	97-03	05/21/97

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No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
228	Com'mt-2.1.2 [EA-70-7003 /96-01]	Procedure Upgrades - USEC will complete its upgrade of procedures IAW the schedule shown in the Compliance Plan	IFI (NA)	3.2.2.1	In spite of CAs taken since the 1994 Enforce Conf, procedure-related NOV's continue to be cited at PORTS & PGDP	10/06/95	NSU Project Item	97-03	Closed	97-03	05/21/97	This issue was linked to DOE CPI No. 30, "Procedures Prog," and admin closed in 97-03
229	Com'mt-2.1.3 [EA-70-7003 /96-01]	Organ Roles & Resp - Sect 6.1 of the Cert Appl involving organizational roles & responsibilities will be flowed-down IAW Compliance Plan	IFI (NA)	3.2.2.1	In spite of CAs taken since the 1994 Enforce Conf, procedure-related NOV's continue to be cited at PORTS & PGDP	10/06/95	DOE Compliance Plan Item	97-03	Closed	97-03	05/21/97	This issue was linked to DOE CPI No. 21, "Mgmt Controls," Plan of Action No. 2, and admin closed in 97-03
230	Com'mt-2.1.4 [EA-70-7003 /96-01]	Procedure Quality & Adherence Improvements - USEC is to complete four (4) near-term corrective actions to improve procedure quality & adherence	IFI (NA)	3.2.2.1	In spite of CAs taken since the 1994 Enforce Conf, procedure-related NOV's continue to be cited at PORTS & PGDP	10/06/95	12/31/96	97-03	Closed	97-03	05/21/97	
231	Com'mt-2.1.5 [EA-70-7003 /96-01]	QOOP Initiative Revision - QOOP initiative on Conduct of Operations will be revised	IFI (NA)	3.2.2.1	In spite of CAs taken since the 1994 Enforce Conf, procedure-related NOV's continue to be cited at PORTS & PGDP	10/06/95	07/15/96	97-03	Closed	97-03	05/21/97	
232	Com'mt-2.2.1 [EA-70-7003 /96-01]	Consolidation of CA Process - CA process will be revised to provide clear direction, accountability & resp, and establish clear procedure interfaces	IFI (NA)	3.6.2.3	Quality problem trends at PORTS and PGDP indicate the UE corrective action process has not been effective in preventing problem recurrence	10/06/95	08/31/96	97-03	Closed	97-03	05/21/97	
233	Com'mt-2.2.2 [EA-70-7003 /96-01]	Root Cause & CAP Trn'g - Select Mgrs and individuals will be trained on root cause & CAP development	IFI (NA)	3.6.2.3	Quality problem trends at PORTS and PGDP indicate the UE corrective action process has not been effective in preventing problem recurrence	10/06/95	09/30/96	97-03	Closed	97-03	05/21/97	
234	Com'mt-2.2.3 [EA-70-7003 /96-01]	CA Performance Indicators - CA performance indicators will be developed and provided to Mgmt starting August 1996	IFI (NA)	3.6.2.3	Quality problem trends at PORTS and PGDP indicate the UE corrective action process has not been effective in preventing problem recurrence	10/06/95	08/01/96	97-03	Closed	97-03	05/21/97	

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No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
235	Com'mt-2.2.4 [EA-70-7003 /96-01]	SCAQ CAP Reviews - Open SCAQs will be reviewed by the MAAT against new SCAQ criteria and revised, if necessary	IFI (NA)	3.6.2.3	Quality problem trends at PORTS and PGDP indicate the UE corrective action process has not been effective in preventing problem recurrence	10/06/95	09/30/96	97-03	Closed	97-03	05/21/97	
236	Com'mt-2.2.5 [EA-70-7003 /96-01]	Monthly Completed CAP Surveillances - Monthly surveillances will be conducted over 6 mos to monitor effectiveness of CAs taken	IFI (NA)	3.6.2.3	Quality problem trends at PORTS and PGDP indicate the UE corrective action process has not been effective in preventing problem recurrence	10/06/95	01/01/97	96-08 97-03	Closed	97-03	05/21/97	
237	Com'mt-2.2.6 [EA-70-7003 /96-01]	CA Audits - Previously planned CA Program audits will be conducted in October 1996 to monitor improvements in the CA process	IFI (NA)	3.6.2.3	Quality problem trends at PORTS and PGDP indicate the UE corrective action process has not been effective in preventing problem recurrence	10/06/95	10/31/96	97-03	Closed	97-03	05/21/97	
238	Com'mt-2.3.1 [EA-70-7003 /96-01]	As-Found Procedure Infrastructure Evaluation - A review of existing procedures assoc with identifying and dispositioning as-found conditions will be conducted	IFI (NA)	3.3.2.6	Since Sept 1995, a significant number of "as-found" conditions have been identified in PORTS & PGDP PRs that have not been reviewed for their potential as USQs	10/06/95	09/30/96	96-08	Closed	96-08	12/27/96	Inspector review of the lessee's commitment to develop an issue a new procedural infrastructure associated with the identification and dispositioning of "as-found" conditions revealed no such provisions in the new procedures. NOD 96-08-05 was issued to address the missed commitment.
239	Com'mt-2.3.2 [EA-70-7003 /96-01]	As-Found Procedure Rev's & Training - Identified changes to as-found procedures will be revised and appropriate personnel will be trained	IFI (NA)	3.3.2.6	Since Sept 1995, a significant number of "as-found" conditions have been identified in PORTS & PGDP PRs that have not been reviewed for their potential as USQs	10/06/95	09/30/96	96-08 97-03	Closed	97-03	05/21/97	This item was also administratively linked to the closure of NOD 96-08-05 and administratively closed in 97-03

PORTS DOE Regulatory Findings History Report

ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
240	Com'mt-2.3.3 [EA-70-7003 /96-01]	Disposition of As-Found Conditions During SAR Preparation - As-found conditions identified during the Cert Appl SAR preparation process will be dispositioned as USEC previously described to DOE in its response to DOE's June 5, 1996 Order to Take Action at PORTS	IFI (NA)	3.3.2.6	Since Sept 1995, a significant number of "as-found" conditions have been identified in PORTS & PGDP PRs that have not been reviewed for their potential as USQs	10/06/95	As scheduled in USEC's response to DOE's Order to Take Action	97-03	Closed	97-03	05/21/97	
241	Com'mt-2.3.4 [EA-70-7003 /96-01]	As-Found Condition Performance Indicators - As-found performance indicators will be developed and reported to mg'mt by July 31, 1996	IFI (NA)	3.3.2.6	Since Sept 1995, a significant number of "as-found" conditions have been identified in PORTS & PGDP PRs that have not been reviewed for their potential as USQs	10/06/95	07/31/96	96-08	Closed	96-08	12/27/96	
SSR Inspection Report 70-7002/96-05 - 6-Week Inspection for June - Mid July 1996 (MC&O, Ops, Maint, NCS, and Fire Prot)												
		No items identified										
SSR Inspection Report 70-7002/96-06 - 6-Week Inspection for Mid July - August 1996 (MC&O, Ops, QA, RP, Emerg Prep, and Waste Mg'mt)												
242	96-06-01	Failure to follow procedures - 3 examples: 1. Use of cylinder stacker for moving UF6 cylinders 2. Failure to write problem report promptly. 3. Failure to maintain 60 days of shipping documents.	NOV (III)	3.2.2.1	The inspectors reviewed activities related to the lessee's implementation of procedural controls.	12/09/96	04/30/97	97-03	Closed	97-03	05/21/97	
243	96-06-02	Necessity for USQD involving cylinder stacker use.	URI (NA)	3.4.2.3	The inspectors began determination of whether an USQ existed regarding changes to procedure XP4-CO-CA-2367 involving use of cylinder stackers and forklifts for empty cylinder movement.	12/09/96	12/27/96	96-08	Closed	96-08	12/27/96	
SSR Inspection Report 70-7002/96-07 - 6-Week Inspection for September - Mid October 1996 (Ops, T&O, RP, and Emerg Prep)												

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
244	96-07-01	Failure to meet commitment to DOE.	NOD (NA)	3.4.2.1	The inspectors evaluated corrective actions committed to in response to NOV 94-15-01.			97-03	Open			
SSR Inspection Report 70-7002/96-08 - 6-Week Inspection for Mid October - November 1996 (Ops and Emerg Prep)												
245	96-08-01	Failure to follow procedures, 5 examples.	NOV (III)	3.2.2.1	The inspectors evaluated the lessee's implementation of managerial controls.	12/27/96	12/31/97	97-03	Open			
246	96-08-02	Failure to follow RWP procedures.	NCV (NA)	3.2.2.1	The inspectors evaluated the lessee's implementation of managerial controls.	12/27/96	03/14/97	97-03	Open			
247	96-08-03	Failure to ensure that proposed change in traffic pattern did not involve an USQ.	NOV (II)	3.3.2.6	The inspectors observed vehicular traffic in the vicinity of the X-745B cylinder yard.	01/19/97	12/31/97	97-03	Open			NOV 96-08-03 was not issued with inspection report 96-08. A DOE enforcement Conference was held on 01/15/97 to discuss the violation. On 1/19/97, DOE issued the noncompliance as a severity level II violation and imposed a civil penalty of \$20,000.00.
248	96-08-04	Failure to maintain PORC approved documents per UE2-PO-OR1030.	NCV (NA)	3.2.2.1	The inspectors evaluated the lessee's implementation of managerial controls.	12/27/96	03/14/97	97-03	Open			
249	96-08-05	Failure to proceduralize the process or criteria for dispositioning as-found conditions and provide training on the associated procedure.	NOD (NA)	3.2.2.1	The inspectors verified proper implementation of commitments made by the lessee in response to a DOE Management Conference.	12/27/96	02/26/97	97-03	Open			
Special Inspection Report 70-7002/96-09 (Evaluation of Waste Mg't Controls Associated with PCB/R Waste)												
250	96-09-01	Failure to minimize the amount of PCB/R waste requiring disposal.	NOV (III)	3.16.2.2	Waste management practices related to the generation and control of PCBs and PCB mixed waste from process lubrication oil spills.	05/20/96	03/30/97	97-03	Open			
Special Inspection Report 70-7002/96-10 (Verification of Lessee Corrective Actions Taken in Response to DOE Order to Take Action dated 04/05/96)												

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ROA INSPECTION FINDINGS AND DOE DIRECTED INSPECTION FOLLOW-UP ACTIVITIES (Inspection Reports Identified Up to and Including 70-7002/97-03)

No	Item No [Rept #]	Issue	CAT (Sev)	ROA Section	Activity Evaluated	Date Issued	Action Compl	Update Report	Status	Report Closed	Date Closed	Comments
251	96-10-01	Failure to follow procedures.	NOV (III)	3.2.2.1	The inspectors evaluated the lessee's implementation of managerial controls.	09/27/96	02/10/97	96-07	Closed	96-07	02/10/97	
252	96-10-02	Failure to maintain listing of all changes to the plant and equipment safety systems evaluated.	NOV (III)	3.4.2.2	The inspectors reviewed the listing of changes to the plant and equipment safety systems.	09/27/96	06/30/97	97-03	Closed	97-03	05/21/97	
Special Inspection Report 70-7002/96-11 (Evaluation of the Circumstances Involving the Movement of a 14-Ton Cylinder with Mobile Equipment Prior to the Required 5-Day Cooldown Period)												
253	96-11-01	Failure to follow procedures (3 examples).	NOV (III)	3.2.2.1	The inspectors evaluated the lessee's implementation of managerial controls related to the improper movement of a liquid filled cylinder.	01/19/97	04/25/97	97-03	Open			NOV 96-11-01 was not issued with inspection report 96-11. A DOE enforcement Conference was held on 01/15/97 to discuss the violation. On 01/19/97, DOE issued the noncompliance as a severity level III violation
254	96-11-02	Failure to adhere to OSR applicable to UF6 cylinder movement (e.g., movement of a liquid UF6 cylinder using straddle carrier.	NOV (II)	3.3.2.1	The inspectors evaluated the lessee's implementation of managerial controls related to the improper movement of a liquid filled cylinder.	01/19/97	02/28/97	97-03	Open			NOV 96-11-02 was not issued with inspection report 96-11. A DOE enforcement Conference was held on 01/15/97 to discuss the violation. On 01/19/97, DOE issued the noncompliance as a severity level II violation and imposed a civil penalty of \$20,000.00.
SSR Inspection Report 70-7002/97-01 - 6-Week Inspection for December - Mid January 1997 (Ops, RP, Nucl Mat'l's & Safe, and Emerg Prep)												
		No items identified										
Special Inspection Report 70-7002/97-02 - Evaluation to Determine if NCSA Upgrade Commitment Schedule is Sacrificing NCSA/E Quality												
		No items identified										
SSR Inspection Report 70-7002/97-03 - 6-Week Inspection for Mid January - February 1997 (Ops, RP, and Emerg Prep)												
		No items identified										

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PORTSMOUTH GASEOUS DIFFUSION PLANT
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REPORT NUMBER	ITEM NUMBER	SUBJECT	ISSUED	STATUS SCHEDULE FOLLOWUP	CATEGORY	SEVERITY LEVEL	ROA RQMT	BUILDING
70-7002/93-03	01	Failure to adhere to RWP procedures regarding use of protective clothing and self-monitoring.	01/05/94	CLOSED	VIOLATION	III	3.8.2.19	X-710 TECHNICAL SERVICES
70-7002/94-01	01	LER PTS-CASOPS-1993-0044, Review of lessee investigation.	03/02/94	CLOSED	INSPECTION FOLLOWUP	NA	3.2	X-326 PROCESS BUILDING
70-7002/94-01	02	Justification of definition, "MODIFIED TRU"	03/03/94	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE
70-7002/94-01	03	Reasons for not analyzing environmental samples for TRU isotopes.	03/03/94	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE
70-7002/94-01	04	Plan for Characterizing TRU Contamination	03/03/94	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE
70-7002/94-01	05	Plan for determining the effects of TRU releases to the environment.	03/03/94	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE
70-7002/94-01	06	Steps taken to assess worker and public doses due to thorium isotopes.	03/03/94	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE
70-7002/94-01	07	Improper postings, contamination control and use of RWPs.	03/03/94	CLOSED	INSPECTION FOLLOWUP	NA	3.8	X-700 CONVERTER SHOP AND
70-7002/94-01	08	Definition of "as soon as practical" in NCSA-PLANT001.001	03/03/94	CLOSED	INSPECTION FOLLOWUP	NA	3.9	X-326 PROCESS BUILDING
70-7002/94-01	09	Incorrect calculation of Cf-252 source activities for shipment.	03/03/94	CLOSED	NON-CITED VIOLATION	NA	3.14.2.5	
70-7002/94-01	10	Improper documentation of radiation surveys of UF6 cylinders.	03/03/94	CLOSED	NON-CITED VIOLATION	NA	3.14.2.1	X-344A UF6 SAMPLING

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REPORT NUMBER	ITEM NUMBER	SUBJECT	ISSUED	STATUS SCHEDULE FOLLOWUP	CATEGORY	SEVERITY LEVEL	ROA RQMT	BUILDING
70-7002/94-01	11	Improper certification of shipping packages (overpacks) per NRC COC with DOE.	03/03/94	CLOSED	NON-CITED VIOLATION	NA	3.14.2.1	NOT APPLICABLE
70-7002/94-02	01	Storage of fissile material in a configurations not supported by a NCSA.	05/06/94	WITHDR	VIOLATION	III	3.9.2.2	X-326 PROCESS BUILDING
70-7002/94-02	02	Failure to follow procedures for startup of cell 27-2-13	05/06/94	CLOSED	VIOLATION	III	3.2.2.1	X-326 PROCESS BUILDING
70-7002/94-02	03	Failure to perform timely issuance of ERS event report findings.	05/06/94	CLOSED	VIOLATION	III	3.2.2.3	X-326 PROCESS BUILDING
70-7002/94-02	04	Improper implementation of a configuration change to Speedomax.	05/06/94	CLOSED	VIOLATION	III	3.4.2.1	X-326 PROCESS BUILDING
70-7002/94-02	05	Completion of investigation into installation of a Tuffline valve with incompatible materials.	05/06/94	CLOSED	UNRESOLVED ITEM	NA		X-705 DECONTAMINATION
70-7002/94-02	06	Review of lessee report on investigation of failed ceramic module and subsequent pressure rise of bag filter resulting in activation of the safety system.	05/06/94	CLOSED	UNRESOLVED ITEM	NA		X-705 DECONTAMINATION
70-7002/94-02	07	Inspection criteria applicable to annual calciner checks.	05/06/94	CLOSED	UNRESOLVED ITEM	NA	3.3	NOT APPLICABLE
70-7002/94-02	08	Engineering reviews for manifold valve procurement	05/06/94	CLOSED	UNRESOLVED ITEM	NA	3.4	X-344A TOLL ENRICHMENT
70-7002/94-02	09	Training of Uranium Material Handling personnel to perform radiological surveys.	05/06/94	CLOSED	UNRESOLVED ITEM	NA	3.5	MULTIPLE BUILDINGS
70-7002/94-02	10	Failure to calibrate radiation survey instruments.	05/06/94	CLOSED	NON-CITED VIOLATION	NA	3.8.2.20	X-705 DECONTAMINATION

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70-7002/94-02	11	Proper approval of modification to radiation cluster NCM-0057.	05/06/94	CLOSED	UNRESOLVED ITEM	NA	3.8	X-705 DECONTAMINATION
70-7002/94-02	12	Spacing of drums used for fissionable and radioactive waste.	05/06/94	CLOSED	UNRESOLVED ITEM	NA	3.9	X-326 PROCESS BUILDING
70-7002/94-02	13	Inclusion of verification of low level radionuclide effluent sources in 1993 Environmental Monitoring Report.	05/06/94	CLOSED	UNRESOLVED ITEM	NA		X-710 TECHNICAL SERVICES
70-7002/94-02	14	Failure to have updated emergency procedures.	05/06/94	CLOSED	UNRESOLVED ITEM	NA	3.13	X-300 PLANT CONTROL
70-7002/94-02	15	Improper use of units in documenting survey results for transportation.	05/06/94	CLOSED	NON-CITED VIOLATION	NA	3.14.2.1	X-343 FEED, VAPORIZATION
70-7002/94-02	16	Improper performance of radiation survey of UF6 cylinders.	05/06/94	CLOSED	NON-CITED VIOLATION	NA	3.14.2.1	X-343 FEED, VAPORIZATION
70-7002/94-03	01	Completion of investigation of autoclave containment valve positions.	06/15/94	CLOSED	UNRESOLVED ITEM	NA		MULTIPLE BUILDINGS
70-7002/94-03	02	Annunciation of pH Safety System Alarm.	06/15/94	CLOSED	UNRESOLVED ITEM	NA		X-705 DECONTAMINATION
70-7002/94-03	03	Actuation of a designated safety system during an outgassing from cell 33-1-10.	06/15/94	CLOSED	UNRESOLVED ITEM	NA		X-333 PROCESS BUILDING
70-7002/94-03	04	Airborne radioactivity levels beyond the posted "Radioactive Airborne Area."	06/15/94	CLOSED	INSPECTION FOLLOWUP	NA		X-705 DECONTAMINATION
70-7002/94-03	05	Identification of airborne radioactivity by a first floor CAM in building X-705 on March 10, 1994.	06/15/94	CLOSED	INSPECTION FOLLOWUP	NA		X-705 DECONTAMINATION

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REPORT NUMBER	ITEM NUMBER	SUBJECT	ISSUED	STATUS SCHEDULE FOLLOWUP	CATEGORY	SEVERITY LEVEL	ROA RQMT	BUILDING
70-7002/94-03	06	Performance of tests on a safety-related component without using an approved procedure.	06/15/94	CLOSED	VIOLATION	III	3.3.2.3	X-705 DECONTAMINATION
70-7002/94-03	07	Failure to update contact list in the Emergency Procedures.	06/15/94	CLOSED	NON-CITED VIOLATION	NA	3.13.2.3	NOT APPLICABLE
70-7002/94-03	08	Establishment of ALARA goals and procedures.	06/15/94	CLOSED	UNRESOLVED ITEM	NA		NOT APPLICABLE
70-7002/94-03	09	Commonality of floor drain headers from clean area and contamination area to storm sewer.	06/15/94	CLOSED	NON-CITED VIOLATION	NA	3.8.2.13	X-343 FEED, VAPORIZATION
70-7002/94-03	10	Contaminated water outside the small cylinder area cleaning containment dike, across a posted High Contamination Area Boundary.	06/15/94	CLOSED	NON-CITED VIOLATION	NA	3.8.2.13	X-705 DECONTAMINATION
70-7002/94-03	11	Criticality implications of waste accumulation on the second floor of X-326 at column B-42	06/15/94	CLOSED	UNRESOLVED ITEM	NA		X-326 PROCESS BUILDING
70-7002/94-03	12	Failure to implement the onsite Packaging and Transportation Safety Manual.	06/15/94	CLOSED	NON-CITED VIOLATION	NA	3.2.2.1	NOT APPLICABLE
70-7002/94-03	13	Review of the implementation of changes to the security plan related to HEU Purchase Agreement.	06/15/94	CLOSED	UNRESOLVED ITEM	NA	3.18	NOT APPLICABLE
70-7002/94-04	01	Safety system actuation during operation of calciner #2 (ORO-MMES-CCUPOPS-1994-0003)	07/21/94	CLOSED	UNRESOLVED ITEM	NA		X-705 DECONTAMINATION
70-7002/94-04	02	Failure to properly perform safety-related maintenance.	07/21/94	WITHDR	VIOLATION	III	3.6.2.5	MULTIPLE BUILDINGS
70-7002/94-04	03	Complete review of safety system event reports for previous four months.	07/21/94	CLOSED	INSPECTION FOLLOWUP	NA	3.2	X-705 DECONTAMINATION

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70-7002/94-04	04	Failure to follow radiation protection procedures.	07/21/94	CLOSED	NON-CITED VIOLATION	NA	3.2.2.1	MULTIPLE BUILDINGS
70-7002/94-04	05	Failure to properly post contamination and radiological areas.	07/21/94	CLOSED	NON-CITED VIOLATION	NA	3.8.2.11	X-326 PROCESS BUILDING
70-7002/94-04	06	Review of evaluation of materials storage for criticality safety.	07/21/94	CLOSED	UNRESOLVED ITEM	NA	3.9	X-326 PROCESS BUILDING
70-7002/94-04	07	Clarification of site-wide barrel spacing and covering requirements.	07/21/94	CLOSED	UNRESOLVED ITEM	NA	3.9	X-700 CONVERTER SHOP AND
70-7002/94-04	08	Determination of the effect stuck needle had on accuracy of flow meter at location A-23.	07/21/94	CLOSED	UNRESOLVED ITEM	NA	3.11	NOT APPLICABLE
70-7002/94-04	09	Review of event report involving release of contaminated material into the X-735 sanitary landfill.	07/21/94	CLOSED	UNRESOLVED ITEM	NA	3.16	NOT APPLICABLE
70-7002/94-04	10	Implementation of corrective actions as described in USEC letter dated 8/19/94 in response to findings of inspection 70-7002/94-04.	07/21/94	CLOSED	INSPECTION FOLLOWUP	NA		MULTIPLE BUILDINGS
70-7002/94-05	01	Freon rupture disks - OSR limiting safety system settings.	08/30/94	CLOSED	UNRESOLVED ITEM	NA	3.3	MULTIPLE BUILDINGS
70-7002/94-05	02	UF6 detector alarms during sampling activities (ORO--MMES-PORTCASOPS -1994-0009.	08/30/94	CLOSED	UNRESOLVED ITEM	NA		X-333 PROCESS BUILDING
70-7002/94-05	03	Improper (incomplete) revisions to RWP.	08/30/94	CLOSED	NON-CITED VIOLATION	NA	3.2.2.1	X-710 TECHNICAL SERVICES
70-7002/94-05	04	Out of calibration argon gammagraphs.	08/30/94	CLOSED	NON-CITED VIOLATION	NA	3.7.2.2	X-1007 FIRE STATION

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REPORT NUMBER	ITEM NUMBER	SUBJECT	ISSUED	STATUS SCHEDULE FOLLOWUP	CATEGORY	SEVERITY LEVEL	ROA RQMT	BUILDING
70-7002/94-05	05	Improper completion of Radiation Work Permit (RWP).	08/30/94	CLOSED	NON-CITED VIOLATION	NA	3.2.2.1	X-343 FEED, VAPORIZATION
70-7002/94-05	06	RWP failed to document the removable alpha and beta contamination levels and corresponding surveys were not identified by number as required by UE-SPP-ESH-9.	08/30/94	CLOSED	NON-CITED VIOLATION	NA	3.2.2.1	X-710 TECHNICAL SERVICES
70-7002/94-06	01	Revised USQD for modifications to the CADP System in X-333 and X-330.	10/07/94	CLOSED	UNRESOLVED ITEM	NA		MULTIPLE BUILDINGS
70-7002/94-06	02	Review of lessee investigation reports related to radioactive or radioactively contaminated items outside of radiological areas.	10/07/94	CLOSED	UNRESOLVED ITEM	NA		NOT APPLICABLE
70-7002/94-06	03	Failure to properly characterize radioactive wastes to permit segregation and transfer to a proper disposal facility.	10/07/94	CLOSED	VIOLATION	III	3.16.2.3	X-330 PROCESS BUILDING
70-7002/94-06	04	Failure to observe operating bounds for freon rupture disks as established by OSRs.	10/07/94	CLOSED	NON-CITED VIOLATION	NA	3.3.2.1	MULTIPLE BUILDINGS
70-7002/94-06	05	Failure to discontinue or monitor an affected area if a correct mode of operation cannot be attained.	10/07/94	CLOSED	NON-CITED VIOLATION	NA	3.3.2.1	MULTIPLE BUILDINGS
70-7002/94-06	06	Applicable NCS requirements and proper labeling of containers in the X-7745R Recycle/Assembly Storage Yard.	10/07/94	CLOSED	UNRESOLVED ITEM	NA	3.16	
70-7002/94-07	01	Contamination at the low assay withdrawal station.	10/07/94	CLOSED	INSPECTION FOLLOWUP	NA		X-333 PROCESS BUILDING
70-7002/94-07	02	Availability of an updated IRMS report to reflect all regulatory commitments and actions.	10/07/94	CLOSED	UNRESOLVED ITEM	NA	3.2	NOT APPLICABLE

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REPORT NUMBER	ITEM NUMBER	SUBJECT	ISSUED	STATUS SCHEDULE FOLLOWUP	CATEGORY	SEVERITY LEVEL	ROA RQMT	BUILDING
70-7002/94-08	01	Revision of procedure UE2-MC-RE1030, "Event Reporting System."	11/18/94	CLOSED	UNRESOLVED ITEM	NA		NOT APPLICABLE
70-7002/94-08	02	Full and consistent implementation of contamination control posting requirements per H&S SPP H-37.	11/18/94	CLOSED	INSPECTION FOLLOWUP	NA	3.8.	X-105 ELECTRONIC
70-7002/94-08	03	Improper storage/disposal of trash and contamination control clothing.	11/18/94	CLOSED	NON-CITED VIOLATION	NA	3.8.2.13	X-333 PROCESS BUILDING
70-7002/94-08	04	Improper use or failure to use RWP's as required by H&S SPP M-4, Rev. 1.	11/18/94	CLOSED	NON-CITED VIOLATION	NA	3.8.2.18	X-705 DECONTAMINATION
70-7002/94-08	05	Definition of "normal decontamination techniques" and personnel release limits in procedure UE2-MC-RE1030.	11/18/94	CLOSED	UNRESOLVED ITEM	NA	3.2.2.3	NOT APPLICABLE
70-7002/94-08	06	Specification of operating pressure range for NC cluster alarms in procedure IMP-117.	11/18/94	CLOSED	UNRESOLVED ITEM	NA	3.9.2.11	X-705 DECONTAMINATION
70-7002/94-08	07	Improper storage of radioactive waste per FCA-606.	11/18/94	CLOSED	NON-CITED VIOLATION	NA	3.2.2.1	X-705 DECONTAMINATION
70-7002/94-08	08	Improper storage of uranium oxide.	11/18/94	CLOSED	NON-CITED VIOLATION	NA	3.2.2.1	X-705 DECONTAMINATION
70-7002/94-08	09	Determination of facts surrounding use and maintenance of damaged equipment used for transportation of radioactive and fissionable materials.	11/18/94	CLOSED	UNRESOLVED ITEM	NA		NOT APPLICABLE
70-7002/94-08	10	Failure to secure polybottles for transport as required by FCA-506.	11/18/95	CLOSED	NON-CITED VIOLATION	NA	3.9.2.3	NOT APPLICABLE

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70-7002/94-09	01	Failure to follow procedures concerning verification of worker training by job supervisor.	02/13/95	CLOSED	NON-CITED VIOLATION	NA	3.2.2.1	X-330 PROCESS BUILDING
70-7002/94-09	02	Failure to properly tag UF6 cylinders or to place UF6 cylinders in properly posted storage areas based on the results of radiation surveys.	02/13/95	CLOSED	VIOLATION	III	3.8.2.10	NOT APPLICABLE
70-7002/94-09	03	Failure to post RHPs at the entrance of work areas covered by RHPs.	02/13/95	WITHDR	VIOLATION	III	3.8.2.19	MULTIPLE BUILDINGS
70-7002/94-09	04	Failure to adhere to NCS approvals for operations.	02/13/95	CLOSED	VIOLATION	III	3.9.2.5	NOT APPLICABLE
70-7002/94-10	01	Further investigation into possible causes and corrective actions for UF6 releases from LCCs during routine sampling and maintenance.	02/13/95	CLOSED	UNRESOLVED ITEM	NA		
70-7002/94-10	02	Failure to manage corrective actions.	02/13/95	CLOSED	VIOLATION	III	3.2.2.4	NOT APPLICABLE
70-7002/94-10	03	Causes for multiple failures of redundant safety system components in the autoclave systems (thermocouples and valves).	02/13/95	CLOSED	UNRESOLVED ITEM	NA		NOT APPLICABLE
70-7002/94-10	04	Use of yellow and magenta barrier materials for other than radiological controls.	02/13/95	CLOSED	NON-CITED VIOLATION	NA	3.8.2.1	X-326 PROCESS BUILDING
70-7002/94-10	05	Completion of lessee identification and correction of discrepancies with NCS safety documents.	02/13/95	CLOSED	UNRESOLVED ITEM	NA	3.9.2.2	MULTIPLE BUILDINGS
70-7002/94-11	01	Review of lessee investigation of noncompliance with criticality safety contingency procedures.	04/03/95	CLOSED	UNRESOLVED ITEM	NA		X-705 DECONTAMINATION

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70-7002/94-11	02	Failure to maintain storage column uranium content log records for the period January 1994 through June 1994.	04/03/95	CLOSED	NON-CITED VIOLATION	NA	3.2.2.5	X-705 DECONTAMINATION
70-7002/94-11	03	Lessee identification of cylinder valve replacements.	04/03/95	CLOSED	INSPECTION FOLLOWUP	NA	3.2.2.3	NOT APPLICABLE
70-7002/94-11	04	Improper spacing of drums containing uranium bearing materials.	04/03/95	CLOSED	NON-CITED VIOLATION	NA	3.2.2.1	X-705 DECONTAMINATION
70-7002/94-12	01	Completion of lessee investigation into the striking of a depleted uranium cylinder by a railcar.	04/10/95	CLOSED	UNRESOLVED ITEM	NA		X-330 PROCESS BUILDING
70-7002/94-12	02	Improper classification of event and subsequent late notification of DOE per Appendix G of procedure UE2-MC-RE1030.	04/10/95	CLOSED	NON-CITED VIOLATION	NA	3.2.2.1	X-326 PROCESS BUILDING
70-7002/94-12	03	Improper movement of liquid UF ₆ cylinder by straddle carrier.	04/10/95	CLOSED	VIOLATION	II	3.3.2.6	X-343 FEED, VAPORIZATION
70-7002/94-12	04	Failure to include checks for PBM block valve status as part of the quarterly freon checks per commitments made to DOE via letter dated 6/13/94.	04/10/95	CLOSED	DEVIATION	NA		MULTIPLE BUILDINGS
70-7002/94-12	05	Failure to perform safety-related maintenance as specified by the OSRs.	04/10/95	CLOSED	VIOLATION	III	3.3.2.2	MULTIPLE BUILDINGS
70-7002/94-13	01	Completion of autoclave OSR annual surveillance test.	09/06/94	CLOSED	UNRESOLVED ITEM	NA	3.2	NOT APPLICABLE
70-7002/94-13	02	Failure to follow document control procedures.	09/06/94	CLOSED	VIOLATION	III	3.2.2.1	NOT APPLICABLE

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70-7002/94-13	03	Implementation of USEC policy of prompt identification and evaluation of vendor and/or material related problems in the lessons learned system.	09/06/94	CLOSED	INSPECTION FOLLOWUP	NA	3.2	NOT APPLICABLE
70-7002/94-13	04	Failure to implement administrative controls for the maintenance of records related to nuclear safety.	09/06/94	WITHDR	VIOLATION	III	3.2.2.5	NOT APPLICABLE
70-7002/94-13	05	Status of procedures development for the QPP.	09/06/94	CLOSED	INSPECTION FOLLOWUP	NA	3.2	NOT APPLICABLE
70-7002/94-13	06	Verify adequacy of implementation of procedures implementing the system for continually pursuing improvement in quality.	09/06/94	CLOSED	INSPECTION FOLLOWUP	NA	3.6	NOT APPLICABLE
70-7002/94-13	07	Failure to prepare, review, approve, issue, use, maintain and revise documents and related records for items that can impact public health and safety.	09/06/94	OPEN / /	VIOLATION	III	3.6.2.4	NOT APPLICABLE
70-7002/94-13	08	Failure to maintain design handbook procedures.	09/06/94	CLOSED	NON-CITED VIOLATION	NA	3.6.2.5	NOT APPLICABLE
70-7002/94-13	09	Failure to implement procedures and practices to ensure the procured items for safety systems and components meet criteria.	09/06/94	CLOSED	NON-CITED VIOLATION	NA	3.6.2.7	NOT APPLICABLE
70-7002/94-13	10	Implementation of improved receipt inspection and testing practices.	09/06/94	CLOSED	INSPECTION FOLLOWUP	NA	3.6	NOT APPLICABLE
70-7002/94-13	11	Failure of management to demonstrate a strong commitment to a fire protection program.	09/06/94	CLOSED	VIOLATION	III	3.10.2.1	NOT APPLICABLE

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70-7002/94-13	12	Inadequate testing and maintenance of fire suppression systems.	09/06/94	CLOSED	VIOLATION	III	3.10.2.3	NOT APPLICABLE
70-7002/94-13	13	Failure to maintain a reliable water supply with sectional isolation valves.	09/06/94	CLOSED	VIOLATION	III	3.10.2.5	NOT APPLICABLE
70-7002/94-13	14	Full implementation of performance based training for fire protection personnel.	09/06/94	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE
70-7002/94-13	15	Failure to maintain mobile fire apparatus.	09/06/94	CLOSED	VIOLATION	III	3.10.2.9	NOT APPLICABLE
70-7002/94-13	16	Review of corrections to material deficiencies in the fire water distribution system.	09/06/94	CLOSED	INSPECTION FOLLOWUP	III		NOT APPLICABLE
70-7002/94-13	17	Determine compliance with ROA Implementating Requirement 3.10.2.12	09/06/94	CLOSED	UNRESOLVED ITEM	NA	3.10	NOT APPLICABLE
70-7002/94-13	18	Determine compliance with ROA Implementing Requirement 3.10.2.13.	09/06/94	CLOSED	UNRESOLVED ITEM	NA	3.10	NOT APPLICABLE
70-7002/94-13	19	Fire protection appraisals of important buildings - scope and depth.	09/06/94	CLOSED	INSPECTION FOLLOWUP	NA	3.10	NOT APPLICABLE
70-7002/94-13	20	Failure to conduct root cause analyses for all fires.	09/06/94	CLOSED	VIOLATION	III	3.10.2.15	NOT APPLICABLE
70-7002/94-13	21	Availability of portable fire extinguishers throughout the plant.	09/06/94	CLOSED	NON-CITED VIOLATION	NA	3.10.2.16	NOT APPLICABLE
70-7002/94-13	22	Failure of fire alarms to report to continuously manned locations.	09/06/94	CLOSED	VIOLATION	III	3.10.2.17	NOT APPLICABLE

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70-7002/94-13	23	Failure to control welding, burning, and hot work via a written permit system.	09/06/94	CLOSED	VIOLATION	III	3.10.2.18	NOT APPLICABLE
70-7002/94-14	01	Failure to conduct tests to verify proper operation after significant maintenance.	08/31/94	WITHDR	VIOLATION	III	3.3.2.2	NOT APPLICABLE
70-7002/94-14	02	Implementation of independent reviews of the results of OSR surveillance tests and safety-system check sheets.	08/31/94	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE
70-7002/94-14	03	Failure to use approved procedures for performance of required OSR surveillance tests for safety system components.	08/31/94	WITHDR	VIOLATION	III	3.3.2.3	X-330 PROCESS BUILDING
70-7002/94-14	04	Understanding of and policy regarding the applicability of ROA Implementation Requirement 3.3.2.4 to USEC personnel.	08/31/94	CLOSED	INSPECTION FOLLOWUP	NA		NOT APPLICABLE
70-7002/94-14	05	Failure to identify as found conditions for engineering reviews to determine whether the as found conditions potentially involving USQs.	08/31/94	CLOSED	VIOLATION	III	3.3.2.7	NOT APPLICABLE
70-7002/94-14	06	Failure to include weights used for torque wrench testing in the calibration program.	08/31/94	CLOSED	NON-CITED VIOLATION	NA	3.7.2.3	NOT APPLICABLE
70-7002/94-14	07	Failure of line management to define training needs and to assure that training was completed and proficiency demonstrated. (ROA 3.5.2.1.)	08/31/94	CLOSED	VIOLATION	III	3.5.2.1	NOT APPLICABLE
70-7002/94-14	08	Failure to define training requirements and provide training to supervisors and managers regarding safety and safeguards and security. (ROA 3.5.2.7)	08/31/94	CLOSED	VIOLATION	III	3.5.2.7	NOT APPLICABLE

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70-7002/94-14	09	Action to be taken if a component fails post-maintenance test.	08/31/94	CLOSED	INSPECTION FOLLOWUP	NA		X-343 FEED, VAPORIZATION
70-7002/94-14	10	Alteration of the operation of a safety system (UF6 detection system) without performing a USQ screening per SA-001. (ROA 3.2.2.1)	08/31/94	CLOSED	VIOLATION	III	3.2.2.1	MULTIPLE BUILDINGS
70-7002/94-14	11	Failure to maintain traceability of test documents to demonstrate equipment operability.	08/31/94	CLOSED	VIOLATION	III	3.6.2.5	NOT APPLICABLE
70-7002/94-15	01	Inadequate procedure system to control changes to the plant design and equipment. (ROA Requirement 3.4.2.1)	09/30/94	CLOSED	VIOLATION	III	3.4.2.1	NOT APPLICABLE
70-7002/94-15	02	Failure to perform USQ screening reviews on procedure changes. (ROA Requirement 3.17.2.4)	09/30/94	CLOSED	NON-CITED VIOLATION	NA	3.17.2.4	NOT APPLICABLE
70-7002/94-15	03	Replacement of HARMS II dispersion modeling computer code.	09/30/94	CLOSED	INSPECTION FOLLOWUP	NA	3.13	NOT APPLICABLE
70-7002/94-15	04	Accuracy of dosimetric results for individuals exposed from a criticality accident.	09/30/94	CLOSED	INSPECTION FOLLOWUP	NA	3.13	NOT APPLICABLE
70-7002/94-15	05	Inadequate provisions to assess the actual or potential consequences of an emergency and specific predetermined actions to be taken in response to emergencies. (ROA Requirement 3.13.2.9)	09/30/94	CLOSED	VIOLATION	III	3.13.2.9	NOT APPLICABLE
70-7002/94-15	06	Demonstration that revised information release procedure provides for timely and accurate information release.	09/30/94	CLOSED	UNRESOLVED ITEM	NA	3.13	NOT APPLICABLE

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70-7002/94-15	07	Failure to adequately define and complete emergency response training in a consistent manner. (ROA Requirement 3.13.2.14)	09/30/94	CLOSED	VIOLATION	III	3.13.2.14	NOT APPLICABLE
70-7002/94-15	08	Failure of the drill and exercise program to verify that the emergency plan provides adequate guidance to assist the plant staff to assess and mitigate the consequences of emergencies. (ROA Requirement 3.13.2.15)	09/30/94	CLOSED	NON-CITED VIOLATION	NA	3.13.2.15	NOT APPLICABLE
70-7002/94-15	09	Failure to prepare a JCO in response to QA Audit OPEN94A01, Engineering Review. (ROA Requirement 3.2.2.1)	09/30/94	CLOSED	NON-CITED VIOLATION	NA	3.2.2.1	NOT APPLICABLE
70-7002/94-15	10	Preparation and distribution of a document without adequate classification review. (ROA Requirement 3.18.2.2)	09/30/94	CLOSED	NON-CITED VIOLATION	NA	3.18.2.2b	NOT APPLICABLE
70-7002/94-16	01	Failure of management to implement designated responsibilities for radiation protection of workers.	11/30/94	CLOSED	VIOLATION	III	3.8.2.2	NOT APPLICABLE
70-7002/94-16	02	Designation of a Radiation Protection Manager.	11/30/94	CLOSED	INSPECTION FOLLOWUP	NA	3.8.2.4	NOT APPLICABLE
70-7002/94-16	03	Failure to have ALARA goals and an ALARA committee.	11/30/94	CLOSED	NON-CITED VIOLATION	NA	3.8.2.6	NOT APPLICABLE
70-7002/94-16	04	Improper radiological postings.	11/30/94	CLOSED	NON-CITED VIOLATION	NA	3.8.2.11	NOT APPLICABLE
70-7002/94-16	05	Failure to follow procedure UE2-HP-RP1031 regarding training of source custodians and inventory and leak test of radioactive sources.	11/30/94	CLOSED	NON-CITED VIOLATION	NA	3.2.2.1	NOT APPLICABLE

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70-7002/94-16	06	Positive measures for controlling radioactive sources.	11/30/94	CLOSED	INSPECTION FOLLOWUP	NA	3.8.2.16	X-720 MAINTENANCE & STORES
70-7002/94-16	07	Failure to maintain a current inventory of all non-exempt sources.	11/30/94	CLOSED	VIOLATION	III	3.8.2.16	X-326 PROCESS BUILDING
70-7002/94-16	08	Staff awareness of requirements governing the provision of annual dose summary to an individual.	11/30/94	CLOSED	INSPECTION FOLLOWUP	NA	3.8.2.21	NOT APPLICABLE
70-7002/94-16	09	Inconsistent and incomplete recording of information for issuance of visitor TLDs and failure to obtain exposure history for new employees.	11/30/94	CLOSED	INSPECTION FOLLOWUP	NA	3.8.2.22	NOT APPLICABLE
70-7002/94-16	10	Failure to report NCS noncompliances to management.	11/30/94	CLOSED	VIOLATION	III	3.9.2.7	X-326 PROCESS BUILDING
70-7002/94-16	11	Inconsistent labeling of radioactive waste.	11/30/94	CLOSED	NON-CITED VIOLATION	NA	3.16.2.1	NOT APPLICABLE
70-7002/94-16	12	Complete inspection of lessee's compliance with this requirement.	11/30/94	CLOSED	UNRESOLVED ITEM	NA	3.16.2.4	NOT APPLICABLE
70-7002/94-16	13	Chemical safety respiratory protection program.	11/30/94	CLOSED	INSPECTION FOLLOWUP	NA	3.19.2.1	NOT APPLICABLE
70-7002/94-16	14	Process hazards analysis for use of chlorine in building X-611.	11/30/94	CLOSED	INSPECTION FOLLOWUP	NA	3.19.2.1	NOT APPLICABLE
70-7002/94-17	01	Failure to revise or red-line procedures controlling NMC&A activities within a 3-year period as required by UEO-210, Rev. 1.	12/07/94	CLOSED	NON-CITED VIOLATION	NA	3.12.2.1	NOT APPLICABLE

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70-7002/94-17	02	Incomplete reporting and accounting of SNM above threshold limits.	12/07/94	CLOSED	VIOLATION	III	3.12.2.2	NOT APPLICABLE
70-7002/94-17	03	Use of borrowed passwords to enter data into the AnaLIS computer.	12/07/94	CLOSED	VIOLATION	III	3.2.2.1	NOT APPLICABLE
70-7002/94-17	04	Failure to conduct formal internal review and assessments defined in the NMC&A plan and procedures.	12/07/94	CLOSED	NON-CITED VIOLATION	NA	3.12.2.7	NOT APPLICABLE
70-7002/94-17	05	Failure to fully develop and implement the performance testing and effectiveness verifications aspects of the SNM protection program.	12/07/94	CLOSED	NON-CITED VIOLATION	NA	3.12.2.8	NOT APPLICABLE
70-7002/94-17	06	Use of overpacks with unrepaired holes in the outer shell.	12/07/94	CLOSED	NON-CITED VIOLATION	NA	3.14.2.6	NOT APPLICABLE
70-7002/94-17	07	Failure to use NIST traceable standards to calibrate equipment to measure nuclear material.	12/07/94	CLOSED	VIOLATION	III	3.15.2.2	NOT APPLICABLE
70-7002/94-17	08	Maintenance and availability of DES radios for protective force members.	12/07/94	CLOSED	INSPECTION FOLLOWUP	NA	3.18.2.1d	NOT APPLICABLE
70-7002/94-17	09	Failure to formally document the security-system performance testing program.	12/07/94	CLOSED	NON-CITED VIOLATION	NA	3.18.2.1f	NOT APPLICABLE
70-7002/94-17	10	Failure to properly mark classified documents and information.	12/07/94	CLOSED	VIOLATION	III	3.18.2.2b	NOT APPLICABLE
70-7002/94-17	11	Failure of 7% of cleared employees to have completed the 1993 Annual Security Education Refresher Briefing or the make-up sessions.	12/07/94	CLOSED	NON-CITED VIOLATION	NA	3.18.2.2f	NOT APPLICABLE

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70-7002/94-17	12	Failure of the unclassified computer system to provide the level of protection mandated by DOE Order 1360.2B.	12/07/94	CLOSED	VIOLATION.	III	3.18.2.3f	NOT APPLICABLE
70-7002/95-01	01	Review of lessee investigation of containment shutdown of autoclave in X-343.	05/05/95	CLOSED	UNRESOLVED ITEM	NA		X-343 FEED, VAPORIZATION
70-7002/95-01	02	Review of JCO for the filling of 10-ton cylinders with U-234 having a weighted average assay in excess of the 5% specified in OSR Part K, Table 2.3.4.1.	05/03/95	CLOSED	UNRESOLVED ITEM	NA		NOT APPLICABLE
70-7002/95-02	01	Completion of lessee event reports concerning HF or fluorine outleakages at X-342 facility.	05/25/95	CLOSED	UNRESOLVED ITEM	NA		NOT APPLICABLE
70-7002/95-03	01	Operator sleeping in ACR #5 while on duty.	06/05/95	CLOSED	NON-CITED VIOLATION	NA	3.3.2.1	X-326 PROCESS BUILDING
70-7002/95-03	02	Completion of engineered corrective actions for fragmenting rupture disks and downstream relief valves.	06/05/95	CLOSED	INSPECTION FOLLOWUP	NA		MULTIPLE BUILDINGS
70-7002/95-03	03	Inspection of cranes and lifting devices used for handling cylinders containing liquid UF ₆ .	06/05/95	CLOSED	UNRESOLVED ITEM	NA		NOT APPLICABLE
70-7002/95-03	04	Adequacy of crane inspection program.	06/05/95	CLOSED	UNRESOLVED ITEM	NA		MULTIPLE BUILDINGS
70-7002/95-04	01	Implementation of an apparent change in operation of the OGRU not analyzed in the FSAR, OSR or NCSA.	06/26/95	CLOSED	UNRESOLVED ITEM	NA		X-705 DECONTAMINATION
70-7002/95-04	02	Weakness in the operation of the OGRU.	06/26/95	CLOSED	INSPECTION FOLLOWUP	NA		X-705 DECONTAMINATION

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70-7002/95-05	01	Adherence to guidelines for operation of the CADD.	08/18/95	CLOSED	UNRESOLVED ITEM	NA		X-333 PROCESS BUILDING
70-7002/95-05	02	Use of containments that failed to meet NCS requirements.	08/18/95	CLOSED	NON-CITED VIOLATION	NA	3.2.2.1	X-705 DECONTAMINATION
70-7002/95-05	03	Failure to follow procedures.	08/18/95	CLOSED	NON-CITED VIOLATION	NA	3.2.2.1	NOT APPLICABLE
70-7002/95-05	04	Failure to observe operating bounds for safety systems and components as established by the OSRs.	08/18/95	CLOSED	NON-CITED VIOLATION	NA	3.3.2.1	NOT APPLICABLE
70-7002/95-05	05	Failure to post access to a high contamination area.	08/18/95	CLOSED	NON-CITED VIOLATION	NA	3.8.2.11	NOT APPLICABLE
70-7002/95-05	06	Improper labeling and posting of fissile material area.	08/18/95	CLOSED	NON-CITED VIOLATION	NA	3.9.2.5	X-330 PROCESS BUILDING
70-7002/95-05	07	Ineffective implementation of the security program.	08/18/95	CLOSED	NON-CITED VIOLATION	NA	3.18.2.1.	NOT APPLICABLE
70-7002/95-06	01	Deviating from procedures without required review and approval.	10/04/95	CLOSED	VIOLATION	III	3.2.2.1	NOT APPLICABLE
70-7002/95-06	02	Failure to control nonexempt byproduct material.	10/04/95	CLOSED	VIOLATION	III		NOT APPLICABLE
70-7002/95-07	01	Completion and review of USQD for 18 as found conditions involving NCS single contingency operations.	11/03/95	CLOSED	UNRESOLVED ITEM	NA		X-705 DECONTAMINATION
70-7002/95-08	01	Physical condition of tunnel connecting the Process Building and X-300 Plant Control Facility and associated cables.	11/15/96	CLOSED	INSPECTION FOLLOWUP	NA		

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70-7002/95-09	01	Improper reporting of Unusual Occurrences to DOE.	01/08/96	CLOSED	VIOLATION	III	3.2.2.3	NOT APPLICABLE
70-7002/95-09	02	Failure of line management to implement administrative radiation exposure controls.	01/08/96	CLOSED	VIOLATION	III	3.8.2.9	NOT APPLICABLE
70-7002/95-10	01	Failure to document acceptance test for two gages on form UE-502.	03/12/96	CLOSED	NON-CITED VIOLATION	NA	3.7.2.3	NOT APPLICABLE
70-7002/95-10	02	Failure to have formal acceptance criteria for testing and maintaining fore pumps and associated equipment.	03/12/96	CLOSED	VIOLATION	III	3.6.2.8	NOT APPLICABLE
70-7002/95-13	01	Failure to conduct proper annual emergency exercise.	05/11/95	CLOSED	VIOLATION	III	3.13.2.15	NOT APPLICABLE
70-7002/95-18	01	Failure to perform independent reviews for autoclave surveillance tests.	01/31/96	CLOSED	NON-CITED VIOLATION	II	3.3.2.2	NOT APPLICABLE
70-7002/95-18	02	Failure to meet 5 written commitments to DOE.	01/31/96	CLOSED	DEVIATION	NA		NOT APPLICABLE
70-7002/95-18	03	Failure to detect and prevent quality problems.	03/31/96	OPEN 05/17/96	VIOLATION	III	3.6.2.3	NOT APPLICABLE
70-7002/95-18	04	Failure to follow procedures (6 examples).	01/31/96	CLOSED	VIOLATION	III	3.2.2.1	NOT APPLICABLE
70-7002/95-18	05	Failure to receive DOE approval for changes to the PORTS FSAR.	01/31/96	CLOSED	VIOLATION	III	3.4.2.3	NOT APPLICABLE
70-7002/95-18	06	Improper issuance of safety-related procedures.	03/31/96	OPEN / /	VIOLATION	III	3.6.2.4	NOT APPLICABLE

INSPECTION FOLLOWUP SYSTEM - ITEMS SUMMARY REPORT
PORTSMOUTH GASEOUS DIFFUSION PLANT
AS OF 04/10/97

ATTACHMENT E

REPORT NUMBER	ITEM NUMBER	SUBJECT	ISSUED	STATUS SCHEDULE FOLLOWUP	CATEGORY	SEVERITY LEVEL	ROA RQMT	BUILDING
70-7002/95-18	07	Improper implementation of the respiratory protection program.	01/31/96	CLOSED	VIOLATION	III	3.8.2.7	NOT APPLICABLE
70-7002/95-18	08	Failure to demonstrate "strong management commitment to fire protection."	03/31/96	CLOSED	VIOLATION	III	3.10.2.1	NOT APPLICABLE
70-7002/96-01	01	Failure to perform required nuclear safety and safeguards and security retraining at specified intervals.	04/11/96	CLOSED	VIOLATION	III	3.5.2.6	
70-7002/96-03	01	Completion of JCO addressing facilities outside design basis.	07/19/96	CLOSED	UNRESOLVED ITEM	NA		NOT APPLICABLE
70-7002/96-04	01	Failure to notify DOE of as found condition potentially involving an unreviewed safety question and submitting it for reievew.	09/03/96	CLOSED	VIOLATION	III	3.3.2.7	NOT APPLICABLE
70-7002/96-04	02	Conduct of tests of safety-related equipment without an approved procedure.	09/03/96	CLOSED	VIOLATION	III	3.3.2.3	
70-7002/96-06	01	Failure to follow procedures - 3 examples: 1. Use of cylinder stacker for moving UF6 cylinders 2. Failure to write problem report promptly 3. Failure to maintain 60 days of shipping documents.	12/09/96	CLOSED	VIOLATION	III	3.2.2.1	
70-7002/96-06	02	Necessity for USQD involving cylinder stacker use.	12/09/96	CLOSED	UNRESOLVED ITEM	NA		
70-7002/96-07	01	Failure to meet commitment to DOE.	/ /	OPEN / /	DEVIATION	NA		

INSPECTION FOLLOWUP SYSTEM - ITEMS SUMMARY REPORT
PORTSMOUTH GASEOUS DIFFUSION PLANT
AS OF 04/10/97

ATTACHMENT E

REPORT NUMBER	ITEM NUMBER	SUBJECT	ISSUED	STATUS SCHEDULE FOLLOWUP	CATEGORY	SEVERITY LEVEL	ROA RQMT	BUILDING
70-7002/96-08	01	Failure to follow procedures, 5 examples.	12/27/96	OPEN / /	VIOLATION	III	3.2.2.1	NOT APPLICABLE
70-7002/96-08	02	Failure to follow RWP procedures.	12/27/96	OPEN / /	NON-CITED VIOLATION	NA	3.2.2.1	NOT APPLICABLE
70-7002/96-08	03	Failure to ensure that proposed change in traffic pattern did not involve an USQ.	12/27/96	OPEN / /	VIOLATION	II	3.3.2.6	NOT APPLICABLE
70-7002/96-08	04	Failure to maintain PORC approved documents per UE2-PO-OR1030.	12/27/96	OPEN / /	NON-CITED VIOLATION	III	3.2.2.1	NOT APPLICABLE
70-7002/96-08	05	Failure to proceduralize the process or criteria for dispositioning as-found conditions and provide training on the associated procedure.	12/27/96	OPEN / /	DEVIATION	NA		NOT APPLICABLE
70-7002/96-09	01	Failure to minimize the amount of PCB/R waste requiring disposal.	05/20/96	OPEN / /	VIOLATION	III	3.16.2.2	
70-7002/96-10	01	Failure to follow procedures.	09/27/96	CLOSED	VIOLATION	III	3.2.2.1	
70-7002/96-10	02	Failure to maintain listing of all changes to the plant and equipment safety systems evaluated.	09/27/96	CLOSED	VIOLATION	III	3.4.2.2	
70-7002/96-11	01	Failure to follow procedures (3 examples).	12/27/96	OPEN / /	VIOLATION	III	3.2.2.1	NOT APPLICABLE
70-7002/96-11	02	Failure to adhere to OSR applicable to UF6 cylinder movement (e.g., movement of a liquid UF6 cylinder using straddle carrier.	12/27/96	OPEN / /	VIOLATION	II	3.3.2.1	NOT APPLICABLE

STATUS OF DOE ISA FINDINGS

USEC RESOLUTION STATUS TO DOE'S INDEPENDENT SELF ASSESSMENT (ISA)
(DOE ISA was conducted at Paducah during the Period November 30 through December 17, 1993)

ISA Concern No.	Issue Description	Equiv. ROA Requirement	Status	USEC Corrective Action Taken	SSR Evaluation
PR 1.1	Site job descriptions for managers and supervisors are not current in that they do not include all safety elements of the job and do not uniformly assign stop work authority where indicated; moreover, an excessive period of two or more years will be required to update and upgrade the job descriptions at the current level of effort assigned to the program.	3.1.2.1	Closed	Identified as a duplicate issue to 1993 Integrated Technical Audit (OPMC93A02, Item F-01) and closed.	Audit Finding F-01 was found closed on BPS Entry UX93I1042. This issue was related to DOE Compliance Plan Item No. 2, "Management Controls."
PR 1.2	Formal United States Enrichment Corporation planning for "privatization", with an ultimate organizational approach for operating the Portsmouth and Paducah Gaseous Diffusion Plants, has not been initiated.	3.1.2.1	Closed	Submission of application for certification of GDPs under 10 CFR 76 by the NRC initiates action for transfer of regulation. Application was submitted 9/14/95	The Energy Policy Act of 1992 mandates that USEC issue a "privatization plan" by 7/1/95. Not an ROA issue.
PR 2.1	The elements of the Portsmouth Gaseous Diffusion Plant procedures upgrades program are not formally recorded in a program description document; therefore, management goals and milestones of the program are not explicitly defined.	3.2.2.1	Closed	Develop an UE Procedures plan/mission to establish program goals	
PR 2.2	DOE oversight audits of the Portsmouth Gaseous Diffusion Plant have become excessively burdensome to the Portsmouth Martin Marietta Utility Services (MMUS) organization, and have the potential of limiting the resources that MMUS management can allocate to nuclear safety assurance and to site safeguards and security.	No applicable ROA IR	Closed	No action is planned to address this issue.	
PR 2.3	The Martin Marietta Utility Services Safety Analysis Department has not been on distribution for incident or abnormal event reports, which could provide leads to unreviewed safety questions that were not previously detected or defined.	3.2.2.3	Closed	The Safety Analysis Dept. Was added to the initial distribution of all incidents and abnormal event reports.	

STATUS OF DOE ISA FINDINGS

USEC RESOLUTION STATUS TO DOE'S INDEPENDENT SELF ASSESSMENT (ISA)
(DOE ISA was conducted at Paducah during the Period November 30 through December 17, 1993)

ISA Concern No.	Issue Description	Equiv. ROA Requirement	Status	USEC Corrective Action Taken	SSR Evaluation
PR 3.1	Operational maintenance work in the cascade buildings is not being accomplished in a timely manner.	3.7.2.1	Closed	An assessment evaluated work practices and work control system which lead to additional staff in form of Cascade Maint. Dept. Mgr, Maint, Coordinators, and maint. mechanics and I&C mechanics.	
PR 3.2	Non-direct reading instruments increase the chance for error in recording important operating parameters.	No ROA IR	Closed	The conversion of readings to useful or reportable scales is part of both the classroom and skills based training for every operator. Applicable lesson title at PORTS is OCA01.03.05, Process Control.	
PR 3.3	Not all operational safety requirement surveillances are being performed within the interval prescribed by the existing approved operational safety requirements.	3.3.2.2	Closed	The OSR content established under DOE Order 5480.22 and adopted as the std. For the upgraded OSRs requires the inclusion of a definition of the surveillance frequencies and the stated grace period in the OSR. In light of the fact that the OSRs are not changed all surveillances are determined to be in compliance.	
PR 3.4	Some existing operational safety requirements (OSRs) are vague and the degree of compliance with them is unmeasurable; moreover, the OSR concept is not well understood by all cascade operations personnel.	3.3.2.1	Canceled	Revise OSR in question and incorporate improvements in TSR submit revised OSR and TSR to NRC for approval as part of application for certification. Actions were canceled on 11/27/95, therefore, issue was canceled.	This issue was linked to the closure of CPI No. 1, "Transition from DOE regulation to NRC regulation.
PR 4.1	The scope or design of engineering service orders can be modified without review and approval by the Safety Analysis Department.	3.4.2.1	Closed	Internal Audit Report No. OPEN94A01 identified this issue. This issue was disclosed as Finding 2 in Internal Audit Report No. OPT096A001 and problem report PR-96-PTS-5388 was issued	This issue was identified as NOV 70-7002/94-15-01 and subsequently resulted in NOD 70-7002/96-07-01 for failure to proceduralize design implementation process.

STATUS OF DOE ISA FINDINGS

USEC RESOLUTION STATUS TO DOE'S INDEPENDENT SELF ASSESSMENT (ISA)
(DOE ISA was conducted at Paducah during the Period November 30 through December 17, 1993)

ISA Concern No.	Issue Description	Equiv. ROA Requirement	Status	USEC Corrective Action Taken	SSR Evaluation
PR 4.2	The configuration control system governing the procurement and control of safety system configuration items is not fully documented and implemented.	3.4.2.1	Closed	Issue procurement procedures UE2-PM-PC-1035, 1036, 1038 and provide training and issue identification and control procedure UE2-MC-QI-1030	This issue was identified as NCV 70-7002/94-13-09 and closed in DOE SSR IR 70-7002/95-09
PR 4.3	The implementation of the procedure for issuing safety system configuration items (SSCIs) does not limit those who may withdraw these items, and the procedure does not incorporate steps requiring the SSCI storage area to be locked.	3.6.2.3	Closed	Revised and issue SPP BS-332-113	This issue was identified as IFI 70-7002/94-13-05 and closed in DOE SSR IR 70-7002/97-01. The issue was linked to the closure of DOE CPI No. 32 "Quality Assurance Program Implementation".
PR 4.4	Specifications used to procure safety system configuration items are not reviewed by the Safety Analysis Department.	3.4.2.1	Closed	Procedure UE2-BM-PC-1035 "Procurement Control of Safety System Configuration Items" was issued requiring SAD review	This issue was identified as IFI 70-7002/94-13-05 and closed in DOE SSR IR 70-7002/97-01. The issue was linked to the closure of DOE CPI No. 32 "Quality Assurance Program Implementation".
PR 4.5	The current Final Safety Analysis Report and operational safety requirements are not incorporated into the Nuclear Safety Department document control system.	3.6.2.4	Closed	The FSAR and OSRs were to be incorporated into the Nuclear Safety Controlled Document System.	This issue was identified as NOV 70-7002/94-13-07 and remains open. The issue was identified in noncompliance with ROA requirements in DOE Compliance Plan Issue No. 26, "Records Mg'mt and Doc. Ctrl Program
PR 4.6	Portions of some procedures related to the unreviewed safety question determination process are not clear and do not provide assurance that all proposed new or revised operations and engineering procedures receive review by Safety Analysis Department.	3.3.2.1	Closed	The procedure control procedure UE2-PS-PS1031 has been issued and other procedures (SPP-PS-001, 002, 003) are being deleted.	This issue was identified as IFI 70-7002/94-13-05. The issue was administratively linked to the closure of DOE CPI No. 32 "Quality Assurance Program Implementation and administratively closed in DOE SSR IR 70-7002/97-01
PR 4.7	DOE and the United States Enrichment Corporation have not reached formal agreement on the definition of the authorization basis for operating the gaseous diffusion plants.	Not ROA IR	Closed	DOE issued a letter that defined what constituted the Authorization Bases under the ROA.	

STATUS OF DOE ISA FINDINGS

USEC RESOLUTION STATUS TO DOE'S INDEPENDENT SELF ASSESSMENT (ISA)
(DOE ISA was conducted at Paducah during the Period November 30 through December 17, 1993)

ISA Concern No.	Issue Description	Equiv. ROA Requirement	Status	USEC Corrective Action Taken	SSR Evaluation
PR 4.8	Documented qualification requirements and training records are not maintained for personnel involved in conducting various engineering reviews.	3.5.2.1	Closed	This finding is a duplicate of UE-QPP Finding No. 13, Action 2 and was closed 1/14/94	This issue was identified as IFI 70-7002/94-13-05. The issue was administratively linked to the closure of DOE CPI No. 32 "Quality Assurance Program Implementation and administratively closed in DOE SSR IR 70-7002/97-01. This issued was also identified as NOV 70-7002/94-14-07. The issue was administratively linked to the closure of DOE CPI No. 26, "Systems Approach to Training" and administratively closed in DOE SSR IR 70-7002/96-01.
PR 6.1	Failure of timely follow-up of in-use Immediate Action Changes with a comprehensive change review and approval process as required by SPP-PS-001, Procedure Request, Development, Review, and Approval Control, increases nuclear safety risk in operations at the Portsmouth Gaseous Diffusion Plant.	3.3.2.1 3.2.2.1	Closed	The procedure control procedure, UE2-PS-PS1031 eliminates Red-Line changes and institutes an improved Immediate Action Change (IAC) approval cycle allowing only critical procedures to be processed by IAC.	
PR 6.2	The Immediate Action Change or Red-Line process is being used to circumvent the normal procedure development and control process. This practice increases the potential for nuclear safety risk; moreover, the tacit acceptance of such activity undermines the credibility of the Portsmouth Gaseous Diffusion Plant management regarding proper development and control of procedures.	3.3.2.1	Closed	The procedure control procedure, UE2-PS-PS1031 eliminates Red-Line changes and institutes an improved Immediate Action Change (IAC) approval cycle allowing only critical procedures to be processed by IAC.	

STATUS OF DOE ISA FINDINGS

USEC RESOLUTION STATUS TO DOE'S INDEPENDENT SELF ASSESSMENT (ISA)
(DOE ISA was conducted at Paducah during the Period November 30 through December 17, 1993)

ISA Concern No.	Issue Description	Equiv. ROA Requirement	Status	USEC Corrective Action Taken	SSR Evaluation
PR 7.1	The on-the-job training for maintenance personnel who assume new assignments lacks formality and is not auditable to show that all maintenance is performed by personnel familiar with the work being performed.	3.5.2.1	Canceled	The training program accreditation plan (TPAP) addendum was replaced with the Uranium Enrichment Regulatory Training Plan for FY-94, dtd 9/93. This plan calls for the concurrent training development of Nuclear Safety Related Tasks in Maintenance, as well as for 7 other training programs. This item was later found to be a duplicate of Tiger Team Finding TC-5 and the issue canceled on 04/11/95.	This issued was also identified as NOV 70-7002/94-14-07. The issue was administratively linked to the closure of DOE CPI No. 26, "Systems Approach to Training" and administratively closed in DOE SSR IR 70-7002/96-01.
PR 7.2	Work control packages for nonsafety systems and safety-related systems generally lack some documentation that is required by MAP-WC-001, Work Control Program.	3.7.2.1	Closed	Provide a job walkdown check sheet to the planners and update procedure MAP-WC-001 and develop planner and supervisor guides.	This issue was linked to the closure of DOE CPI No 24, "Maintenance Program"
PR 8.1	The radiological protection program and its accompanying implementation documents do not effectively address all applicable Regulatory Oversight Agreements implementation requirements.	3.8.2.1	Closed	Implement radiation protection program upgrade procedures. Complete self-assessment to identify program deficiencies and implement the Rad Protection Program fully.	This issue was identified as NOV 70-7002/94-16-01 and closed in DOE SSR IR 70-7002/95-05. This issue is also linked to the closure of DOE CPI No. 12 "Radiation Protection Procedures".
PR 9.1	The <u>Nuclear Criticality Safety Manual</u> does not provide adequate guidance for an effective nuclear criticality safety program.	3.9.2.1	Closed	Revise and Issue SPP-H-30	This issue is linked to the closure of DOE CPI Nos. 8, "Nuclear Criticality Safety Approval Documents", 9, "Nuclear Criticality Safety Approval Implementation", and 10 "Nuclear Criticality Safety Training for Managers".

STATUS OF DOE ISA FINDINGS

USEC RESOLUTION STATUS TO DOE'S INDEPENDENT SELF ASSESSMENT (ISA)
(DOE ISA was conducted at Paducah during the Period November 30 through December 17, 1993)

ISA Concern No.	Issue Description	Equiv. ROA Requirement	Status	USEC Corrective Action Taken	SSR Evaluation
PR 9.2	Nuclear criticality safety procedures for administrative and engineered process control have not been fully implemented.	3.9.2.1	Closed	Revise and issue NCS procedure on "evaluations and approval" to include documented peer review, prepare and issue NCS procedures on surveillances, calculations, and NCS engineer qualifications.	This issue is linked to the closure of DOE CPI Nos. 8, "Nuclear Criticality Safety Approval Documents", 9, "Nuclear Criticality Safety Approval Implementation", and 10 " Nuclear Criticality Safety Training for Managers".
PR 9.3	Nuclear criticality safety signs for administrative controls and process limits are not formally standardized.	3.9.2.5	Closed	Portsmouth signs have been standardized, but not formally in a procedure. SPP-H-30 is being revised to meet anticipated regulatory req'ts. A NCS upgrade fund proposal has been drafted.	This issue is linked to the closure of DOE CPI Nos. 8, "Nuclear Criticality Safety Approval Documents", 9, "Nuclear Criticality Safety Approval Implementation", and 10 " Nuclear Criticality Safety Training for Managers".
PR 9.4	The consequences of the maximum credible fission yield in the event of a criticality accident should be reevaluated in the Final Safety Analysis Report upgrade.	3.9.2.3	Closed	Deficiencies of analysis in the existing FSAR are FSAR are being addressed by the Gaseous Diffusion Plant safety Analysis Report upgrade. No action is planned at this time.	
PR 10.1	A physical fitness program is not available nor is there a procedure for maintaining the physical fitness of the personnel who are part of the Fire Protection Shift Operations, as required by the National Fire Protection Association 1500, Chapter 8, 1991 issue.	Not an ROA IR	Closed	NRPA 1500 is not a required standard in the ROA. No action is recommended or required at this time.	
PR 10.2	Selected recommendations important to the nuclear safety of the Portsmouth Gaseous Diffusion Plant that were developed by the Factory Mutual Corporation appraisal dated June 1990 and conducted from January 23 through 26 and March 5 through 9, 1990, have not been closed.	Not an ROA IR	Closed	After the transition to USEC all outstanding recommendations except one were canceled since not required by the ROA. No further action required.	

STATUS OF DOE ISA FINDINGS

USEC RESOLUTION STATUS TO DOE'S INDEPENDENT SELF ASSESSMENT (ISA)
(DOE ISA was conducted at Paducah during the Period November 30 through December 17, 1993)

ISA Concern No.	Issue Description	Equiv. ROA Requirement	Status	USEC Corrective Action Taken	SSR Evaluation
PR 10.3	Martin Marietta Utility Services management has made no provision for replacement of the existing fire alarm system(s).	3.10.2.1	Closed	Perform a preliminary review of the alarm system to determine status to the system. Develop action plan to correct deficiencies identified in the alarm system review.	This issue was identified as NOV 70-7002/94-13-01 and closed in DOE SSR IR 70-7002/95-04.
PR 10.4	Neither the United States Enrichment Corporation nor Martin Marietta Utility Services management has established a system for periodic review of exemptions to fire protection requirements.	3.10.2.12	Closed	Review of existing exemptions is not required by the ROA, nor was it previously required by DOE orders. No action is recommended or planned at this time.	This was identified as URI 70-7002/94-13-17 and closed in DOE SSR IR 70-7002/95-04.
PR 10.5	Testing frequencies, as established by National Consensus Codes, are not being used at the Portsmouth Gaseous Diffusion Plant.	Not an ROA IR	Closed	The frequencies for code testing are based upon the DOE-ORO guide as they were prior to July 1 1993.	
PR 11.1	The revised Environmental Monitoring Plan, which should reflect the requirements of the Regulatory Oversight Agreement, has not been issued.	3.11.2.1	Closed	The EMP for the PORTS GDP was issued March 31, 1994.	
PR 11.2	There is no administrative limit which assures that the cause of the generated releases will be shut down in sufficient time to avoid exceeding the maximum allowable Effective Dose Equivalent of 10 mrem/yr stipulated in 10 CFR 60, subpart H-Standard 60.9.	Not an ROA IR	Closed	Additional technical controls have been placed on the primary emission vents to reduce Tc emissions. All Rad emission vents have been identified and where required, emission permit applications have been filed with the OEPA.	
PR 12.1	The costs and effectiveness of highly enriched uranium protection services, which the United States Enrichment Corporation has agreed to provide in the lease agreement with DOE, have not been fully established and agreed upon by these two organizations.	3.12.2.1	Closed	Prepare site safeguards and security plans.	

STATUS OF DOE ISA FINDINGS

USEC RESOLUTION STATUS TO DOE'S INDEPENDENT SELF ASSESSMENT (ISA)
(DOE ISA was conducted at Paducah during the Period November 30 through December 17, 1993)

ISA Concern No.	Issue Description	Equiv. ROA Requirement	Status	USEC Corrective Action Taken	SSR Evaluation
PR 12.2	The Portsmouth Gaseous Diffusion Plant system for tracking and resolving classified findings from external appraisals of the security and nuclear safeguards program does not ensure timely resolution and correction.	3.2.2.4	Closed	Develop a procedure for tracking classified findings.	This was identified as NCV 70-7002/95-05-07 and closed in DOE SSR IR 70-7002/95-18.
PR 12.3	The Portsmouth Gaseous Diffusion Plant Vulnerability Assessment does not consider the toxicological effects, which could be substantially more hazardous than the radiological effects, of materials released by radiological sabotage events.	Not an ROA IR	Open	The ROA between DOE and USEC does not require the consideration of toxicological effects in vulnerability assessments. This issue will be addressed through a baseline assessment at PORTS. Baseline put on Hold due to uncertainty of NRC requirements in this area.	
PR 13.1	Full preparations for all probable emergencies are not complete because of the lack of familiarity with some emergency equipment and facilities, including alternate Emergency Operations Centers.	3.13.2.7 & 3.13.2.14	Closed	On two occasions (01/19/94 and 02/21/94) the X-300 alternate Emergency Operations Center was activated. These two events familiarized the PORTS personnel to the alternate EOC.	This issue was identified as NOV 70-7002/94-15-07 and closed in DOE SSR IR 70-7002/96-01.
PR 13.2	The call-in list for the Joint Public Information Center is not organized according to specific job functions, and therefore, does not assure that all job functions will be covered in the activated Joint Public Information Center.		Closed	Reorganize the current Joint Public Information Center call down list according to specific job functions to ensure that all of them will be covered when the center is activated.	
PR 14.1	The Portsmouth Gaseous Diffusion Plant management has not assigned overall responsibility and authority for packaging and transporting nuclear materials, and as cited in the ISA report, has not assured compliance with applicable regulations, the Regulatory Oversight Agreement, and plant procedures.	3.14.2.5	Closed	Name and assign oversight responsibility to Packaging and Transportation Compliance Manager. Define roles and responsibilities for Packaging and Transporting nuclear material.	This issue was linked to the closure of DOE CPI No. 19, "Mg'mt Ctrls."

STATUS OF DOE ISA FINDINGS

USEC RESOLUTION STATUS TO DOE'S INDEPENDENT SELF ASSESSMENT (ISA)
(DOE ISA was conducted at Paducah during the Period November 30 through December 17, 1993)

ISA Concern No.	Issue Description	Equiv. ROA Requirement	Status	USEC Corrective Action Taken	SSR Evaluation
PR 14.2	The Portsmouth Gaseous Diffusion Plant training program for railroad personnel and "DOT HAZMAT employees" does not meet the safety training requirements of 49 CFR 217.11 and 49 CFR 172.700, respectively, in that not all certifications are complete and periodic training of railroad personnel has not been established.	Not an ROA IR	Closed	49 CFR Part 209 APP A excludes all industrial track from Federal Railroad Administration compliance. PGDP does not plan to implement any 49 CFR requirements. Develop Plant Railroad Operational Stds.	
PR 14.3	The Portsmouth Gaseous Diffusion Plant Transportation Safety Quality Assurance Program Plan and the Quality Assurance Program do not meet the requirements of the Regulatory Oversight Agreement, in that not all elements of the existing plan have been implemented.	3.14.2.5	Closed	Full implementation of packaging and transportation quality assurance has been scheduled for April 1, 1995.	A separate quality assurance program complying with 10 CFR 76.60(g) was committed to in the DOE CPI. The Federal Reg. cited requires P&T QAP to meet 10 CFR 71. Action submitted under separate cover from Application SAR. This issue was identified as IFI 70-7001/94-16-01 and closed in DOE SSR IR 70-7001/96-03. The issue was linked to the closure of CPI No. 19, "Mg'mt Ctrls" POA No. 2.
PR 14.4	Martin Marietta Utility Services hazardous materials operations are not in compliance with the Hazardous Materials Transportation Regulations, 49 CFR 100-178, in that MMUS has not registered as a shipper or for the use of DOT exemptions and IAEA Certificates of Competent Authority.	3.14.2.8	Closed	MMUS registered with the DOT on 12/10/93. Training and Qualification has records of completion of training required by 49 CFR. No further action required.	
PR 14.5	Although a review of available records indicates that the Portsmouth Gaseous Diffusion Plant railroad has proved to be a safe operation, compliance with the safety-related requirements of 49 CFR 210-240 is not complete, and compliance with the Regulatory Oversight Agreement is not assured.		Closed	Complete the best management practice plan for the operation of PORTS rail facilities by the end of FY-94	

STATUS OF DOE ISA FINDINGS

USEC RESOLUTION STATUS TO DOE'S INDEPENDENT SELF ASSESSMENT (ISA)
(DOE ISA was conducted at Paducah during the Period November 30 through December 17, 1993)

ISA Concern No.	Issue Description	Equiv. ROA Requirement	Status	USEC Corrective Action Taken	SSR Evaluation
PR 14.6	Some of the Portsmouth Gaseous Diffusion Plant operations for transporting nuclear materials are not administratively controlled by procedures; nor are all operating procedures subjected to the 3-year review required by Martin Marietta Utility Services management. These deficiencies indicate that compliance with the Regulatory Oversight Agreement is not assured.		Closed	Completion and implementation of the Best Management Practice Plan for operation of the PORTS rail facilities and modification of RMH 27.4 and RMH 27.4.1 will assure compliance with the ROA	
PR 16.1	The revision of the Portsmouth Gaseous Diffusion Plant <u>Health & Safety Manual</u> , Standard Practice Procedure R2, has not been issued, and its present draft does not specify responsibility for administering the training of waste handlers.		Closed	E&WM defines the training needs for waste handlers and the ITD perform the required training task. E&WM verifies training prior to worker performance.	
PR 18.1	Section S of the Portsmouth Gaseous Diffusion Plant <u>Standard Practice Manual</u> provides outdated, inaccurate, and incomplete information regarding security requirements.	3.18.2.1	Closed	All procedures in Section "S" are being revised and due for issuance as of July 31, 1994	
PR 18.2	The Portsmouth Gaseous Diffusion Plant classification program does not ensure that authorized derivative classifiers are fully trained to perform their classification duties.	3.18.2.1	Closed	Prepare training program and revise list of classifiers and train and certify approved derivative classifiers.	
PR 18.3	The Portsmouth Gaseous Diffusion Plant secret document accountability program does not meet all requirements of Title 10 of the CFR, paragraph 95.41, which is cited in the Uranium Enrichment Operating Plan.	3.18.2.1	Closed	As per instructions from DOE, PORTS has been operating under Modified Accountability since July 1992.	
PR 19.1	Organizations obtaining information on chemicals used throughout the site do not provide that information to the Safety Analysis Department for analysis of potential impacts on nuclear safety.	3.19.2.1	Closed	The Safety Analysis Dept, as access to all information concerning chemicals used throughout the site.	

USEC INTERNAL APPRAISAL FINDINGS STATUS REPORT

PORTS INTERNAL APPRAISALS/AUDITS CONDUCTED AND RESULTS

(Internal Appraisals Conducted and Reports Issued From July 1, 1993 Up Through March 2, 1997)

ROA RO	ROA IRs Evaluated	PGDP Appraisal No.	Appraisal Subject/ Appraisal Summary	Date Issued	Find No.	Finding Subject	Find Status	Comments
USEC Internal Appraisals/Audits Conducted in FY 1994								
3.1	3.1.2.1 3.1.2.2	OPMC93A02	<u>ORGANIZATION PLAN</u> The organization chart and position descriptions require revision to reflect current organization and to comply with the requirements of the Safety Basis & Framework Document (SBFD)	10/22/93	F-1	Responsibilities for safe operation is not clearly delineated in each position description.	Closed	Appraisal developed from Audit Report No. OPMC93A02. Of 18 generic position descriptions reviewed only 1 clearly delineated responsibility for safe operation.
3.2	3.2.2.1 3.2.2.5	OPMC93A03	<u>MANAGERIAL OVERSIGHT & CONTROL</u> Audit disclosed areas of SBFD, i.e., Procedures development, records creation, Collection, maintenance and disposal of records which do not conform to the ROA requirements.	9/28/93	A.1	Current Procedures Mg'mt. Dept. Practices are allowing procedures to be approved and issued prior to completion of safety reviews.	Closed	Appraisal derived from Audit Report No. OPMC93A03. Finding A.1 against Implementation Requirement 3.2.2.1
					A.2	Current practices related to incorporating anew or revised procedures into procedure manuals are inadequate to ensure that only the latest and correct revision are available for use.	Closed	Finding A.2 against Implementation Requirement 3.2.2.1
					E.1	Adequate protection from physical and environmental hazards is not being provided for QA records temporarily stored through out the plant site.	Closed	Finding E.1 against Implementation Requirement 3.2.2.5
					E.2	QA records are being forwarded to Records Management.	Closed	Finding E.2 against Implementation Requirement 3.2.2.5

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ROA RO	ROA IRs Evaluated	PGDP Appraisal No.	Appraisal Subject/ Appraisal Summary	Date Issued	Find No.	Finding Subject	Find Status	Comments
3.3	3.3.2.1 3.3.2.2	OPCO94A01	<u>OPERATIONS</u> The appraisal did not identify any adverse issues. However, other assessments showed that PORTS is not in compliance with the ROA. Problems have been identified with the manner the plant administers the OSR program and the Administration of the programs implemented to ensure that all plant changes are adequately reviewed. Based on the results of the internal appraisal, the '93 Mg'mt. Self-Assessment data, the review of the 1993 external audit findings, and evaluation of '93 Occurrence reports, this assessment determined that adequate practices are not in place to fully meet the provisions of the ROA.	7/22/94	1	Administrative conflicts exist between FSAR, OSR and associated implementing procedures.	XXXX	Appraisal derived from Audit report No. OPCO94A01
	3.3.2.3 3.3.2.4 3.3.2.5				2	No provisions are in place for the independent review of OSR surveillance tests and safety system check sheets.	XXXX	
	3.3.2.6				3	Proposed changes which involve a USQ or a change in the authority basis or OSR are not to be implemented without DOE consent and written approval.	XXXX	Finding 3 against Implementation Requirement 3.3.2.6
	3.3.2.7							
3.4	3.4.2.1	OPEN94A01	<u>ENGINEERING REVIEWS</u> The appraisal determined that the PORTS facility is not in full compliance with ROA Section 3.4.	8/22/94	F-1	The procedures and controls established to ensure that appropriate reviews of changes to OSRs and plant or equipment designs that input safety are not always being followed.	Closed	Appraisal derived from Internal Audit Report No. OPEN94A01. In addition to the findings F-1, F-2 & F-3 four additional findings were identified which deviate from the ROA requirements
	3.2.2.5 3.6.2.4				F-2	Records keeping practices are not adequate to support configuration management needs.	Closed	
	3.1.1 3.1.2.1				F-3	The scope and requirements for configuration management program have not been adequately defined, documented or effectively communicated.	Closed	
3.5	3.5.2.1 thru 3.5.2.7	OPTR94A02	<u>TRAINING & QUALIFICATION</u> This appraisal determined the facility training program is not in full compliance with ROA Implementation Requirement 3.5.2.1 regarding completion of required training.	10/11/94	F-1	The training organization has not provided necessary training or guidance to the matrixed Division Training Coordinators to ensure plant-wide understanding of the facility compliance and requalification requirements.	Closed	Appraisal derived from Internal Audit Report OPTR94A02. The audit reports states the program does not meet the implementation requirements 3.5.2.1, 3.5.2.2, and 3.5.2.3.

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3.6	3.6.2.1 3.6.2.2 3.6.2.3 3.6.2.4 3.6.2.5 3.6.2.6 3.6.2.7	OPQS94A01	<u>QUALITY ASSURANCE</u> The appraisal did not identify any adverse issues. The appraisal concluded that adequate practices are in place as identified in POEF-412-93-106, Compensatory Actions-PORTS to support the provisions of the ROA Section 3.6 QA requirements. This technical audit report found the QAP is in a state of transition and all procedures are not in place which is consistent with the appraisal. This audit determined that adequate practices and programs are in place to support the ROA during the development and transition of the QAP. No new findings were issued	4/29/94	None	No findings identified	N/A	Appraisal derived from Internal Audit Report No. OPQS94A01. This audit report identified that based on the evaluation of previous audits the QA program is not in compliance with the ROA. No new findings were listed. Completion of efforts associated with implementing the QPF(UEO-221) and associated procedures will ensure compliance with the requirement.
3.7	3.7.2.1 3.7.2.2 3.7.2.3 3.7.2.4	OPGP94A01	<u>MAINTENANCE</u> This audit determined that adequate procedures have not been implemented to ensure completion of all required corrective maintenance and preventative maintenance.	10/28/93	A-1	Safety system field manuals are outdated, incorrect and do not provide maintenance personnel the information to complete required maintenance on Safety System Components (SSCs).	Closed	Appraisal derived from the Audit Report No. OPGP94A01
					A-2	Pyrotronic detectors are not being controlled as SSCs by all PORTS departments.	Closed	
					A-3	Procedure development actions are inadequate to support plant-wide maintenance efforts.	Open	
					A-4	SSCs rejected by Receiving Inspection are not being dispositioned in a timely manner.	Closed	
					A-5	Receiving Inspection are not being provided adequate information to establish and complete all required receipt inspection operations in a timely manner.	Closed	
					6	Current material ordering and stocking practice will not ensure that replacement parts are available to support maintenance on SSCs.	Closed	

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					7	Training mandated by applicable material control procedures has not been completed.	Closed	
					8	Qtrly inspections of storerooms and warehouse area are not being completed.	Closed	
					9	Purchase Orders (POs) do not contain all required safety system instructions or designators.	Closed	
					10	Stores employees are not being provided information to comply with all provisions or applications.	Closed	
3.8	3.8.2.1 thru 3.8.2.23	OPHS94A01	<u>RADIATION PROTECTION PROGRAMS, SYSTEMS, DESIGNS & PERMITS</u> The audit showed that PORTS personnel have implemented adequate programs or are in the process of implementing upgraded requirements. No new or additional findings were issued as result of this audit.	12/22/93	None	No findings identified	N/A	Appraisal derived from Internal Audit Report No. OPHS94A01. In April '93 an audit of S&H Div. found level of employee compliance was to be inadequate. Based on the April '93 Internal Assessment Audit, the plant is not in compliance with the ROA implementation requirement. A new finding was not issued because completion of previously identified action should bring the plant into full compliance with ES&H requirements. A formal inventory program to account for nonexempt by product material sources and to provide for their control, movement, and leak testing should be maintained to also comply with Implementation Requirement 3.18.2.1b

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3.9	3.9.2.1 3.9.2.2 3.9.2.3 3.9.2.4 3.9.2.5 3.9.2.6 3.9.2.8 3.9.2.9 3.9.2.10		<u>NUCLEAR CRITICALITY SAFETY PROGRAM</u> This audit determined that an adequate NCS Program was in place. The audit did disclose general disregard by Operations and Maintenance Personnel for safe geometry. Over 15 months effective corrective action has not been implemented.	5/22/94				Appraisal derived from Audit Report OPNS 9401. Based on preceding evaluations, the plant is not in compliance with Implementation requirements 3.9.2.4, 3.9.2.6, 3.9.2.7 due to the absence of implementation of a training program for NCS personnel, and incorporates NCS Dept. Review of corrective actions, methods, procedures, and revisions involving fissile material. NCS operations must be governed by written procedures, IR 3.9.2.6. All personnel did not receive job specific NCS training when required. Plant was not in compliance with Management Controls & Oversight ROA requirements due to absence of procedures to allow inspection to requirements in accordance with ANSI/ANS 8.5 pertaining to maintaining intended distribution and concentrations per ROA IR 3.9.2.9
	3.9.2.7				1	Corrective actions have not been effective in preventing the recurrence of NCS violations pertaining to space requirements and safe geometries.	Closed	Finding 1 against Implementation requirement 3.9.2.7
3.10	3.10.2.3	OPFP94A01	<u>FIRE PROTECTION</u> This appraisal determined that the PORTS facility is not in full compliance with ROA Section 3.1	9/30/94	F-1	A preventative maintenance program has not been established for the safety system components of the fire protection system (Safety System)	Closed	Appraisal derived from Internal Audit Report No. OPFP94A01. Appraisal Report transmittal letter identified noncompliance with implementation requirements 3.10.2.3, 3.10.2.8, 3.10.2.11, 3.10.2.14, 3.10.2.15, 3.10.2.16.
	3.10.2.3				F-2	Complete maintenance records are not being maintained for work on the sprinkler system.	Closed	
	3.10.2.8				F-3	Auxiliary Emergency Squad members who are expected to perform internal structural fire fighting are not being required to attend qtrly training drills & attendance is not being documented.	Closed	

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	3.10.2.8				F-4	All plant fire fighters are not being medically approved annually as emergency responders for hazardous waste incidents.	Closed	
	3.10.2.11				F-5	Qtrly and after serving tests of air samples are not being performed on the breathing air from the MAKO Breathing Air System.	Closed	
	3.10.2.14				F-6	Fire protection engineering building appraisals are not performed annually and biannually according to the schedule requirements of the organization.	Closed	
	3.10.2.15				F-7	Fires not categorized as Category I, II, III occurrences are not being reported as nonconformances.	Closed	
	3.10.2.16				F-8	There is not a fully established annual & 6 yr. maintenance program for portable fire extinguishers to meet OSHA requirements.	Closed	
	3.10.2.16				F-9	All fixed weld shop permits are not being updated annually.	Closed	
	3.2.2.1				F-10	MMUS fire protection procedures are not being maintained up-to-date and internal guidance documents are not under a formal document control system.	Open	Finding duplicated to the Nuclear Safety Upgrade Program.
					F-11	Deficiencies identified during fire services assessments of plant facilities are not being entered into IRMS.	Closed	

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3.11	3.11.2.1 3.11.2.2 3.11.2.3 3.11.2.4	OPEV94A01	<u>ENVIRONMENTAL PROTECTION</u> Several past assessments identified that the meteorological tower does not comply with ROA. Based on results of internal appraisal and other audits, this audit determined that adequate practices and programs are in place to support the provisions of the ROA. But subject to the correction of the meteorological tower deficiencies PORTS is not in compliance.	5/2/94	None	No findings identified	N/A	Appraisal derived from Internal Audit Report No. OPEV94A01. In early '93, NOAA made recommendations for regulatory compliance with the completion of the meteorological up-grades the plant can be in compliance with the ROA.
3.12	3.12.2.1 3.12.2.2 3.12.2.3 3.12.2.4 3.12.2.5	OPNM94A04	<u>NUCLEAR MATERIAL SAFEGUARDS</u> The audit disclosed two minor items which were reported as observations. These items do not reflect major problems that might compromise safe operation of PORTS facility. Evaluated physical barriers, storage facilities and computerized accounting program as well as assigned security force.	11/22/93	None	No findings identified	N/A	Appraisal derived from Audit Report No. OPMN94A04
3.12	3.12.2.1 through 3.12.2.9	OPNM94A05	<u>NUCLEAR MATERIALS CONTROL AND ACCOUNTABILITY</u> The audit provided assurance that the PORTS Nuclear Materials Control and Accountability (NMC&A) Plan meets the intent of DOE Order 5633.3A. There are no findings relating to this audit thus it was concluded that PORTS is in compliance with all NMC&A regulatory requirements for an enrichment facility.	7/20/94	None	No findings identified	N/A	Appraisal derived from Audit No. OPMN94A05

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3.13	3.13.2.1 through 3.13.2.15	OPEP94A01	<u>EMERGENCY PREPAREDNESS</u> This appraisal determined that adequate practices are in place to assure an effective Emergency Preparedness Plan.	10/31/94	None	No findings identified	N/A	Appraisal derived from Internal Audit Report No. OPEP94A01 The audit report identified that the facility is not in full compliance with Implementation requirements 3.13.2.2, 3.13.2.9 and 3.13.2.14. Implementation Requirement 3.13.2.2 requires a hazard assessment, 3.13.2.9 requires an assessment of actual or potential consequences of an emergency, and 3.13.2.14 requires training for emergency response organization. Each of these items is transferred to the Nuclear Safety Upgrade Project with completion planned for late '95
3.14	3.14.2.1 3.14.2.2 3.14.2.3 3.14.2.4 3.14.2.5 3.14.2.6 3.14.2.7 3.14.2.8	OPTC94A01	<u>PACKAGING & TRANSPORTATION SAFETY</u> The audit determined an auditable Transportation and Packaging Safety Program. The appraisal determined that the PORTS facility has adequate programs, policies, practices, procedures and controls in place and are being implemented to meet Implementation Requirement 3.14. Accordingly no adverse findings or observations are contained in the report as adequate compensatory actions have been established. Implementation Requirement 3.14.2.5	5/23/94	None	No findings identified	N/A	Appraisal derived from Internal Audit Report No. OPTC94A01, ISA UX94A0029-PR14.1 states PORTS management has not assigned overall responsibility and authority for packaging and transportation of nuclear materials and as cited has not assured compliance with appropriate regulations. The status of noncompliance was acknowledged in the audit report and PORTS stated based on this finding they were not in compliance with the ROA. But PORTS has adequate compensatory measures.
3.15	3.15.2.1 3.15.2.2 3.15.2.3 3.15.2.4 3.15.2.5	OPAL94A01	<u>SAMPLING AND ANALYSIS</u> This audit determined that adequate practices and programs are in place for compliance with SBFD. No findings were identified that require the development and implementation of any additional corrective actions	2/9/94	None	No findings identified	N/A	Appraisal derived from Internal Report No. OPAL94A01

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3.16	3.16.2.1 3.16.2.2 3.16.2.3 3.16.2.4 3.16.2.5 3.16.2.6	OPWM94A01	<u>WASTE MANAGEMENT</u> The appraisal did not identify any adverse issues, The appraisal concluded that adequate practices and programs are in place for compliance.	3/22/94	None	No findings identified	N/A	Appraisal derived from Internal Audit Report No. OPWM94A01
3.17	3.17.2.1 3.17.2.2 3.17.2.3 3.17.2.4	OPNS94A02	<u>ACCIDENT ANALYSIS</u> This appraisal did not identify any adverse issues. This audit determined that adequate practices and programs were in place to support the provisions of the ROA.	5/22/94	None	No findings identified	N/A	Appraisal derived from Internal Audit Report No. OPNS94A02

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3.18	3.18.2.1a	OPSS94A01	<u>SECURITY</u> There were no new findings identified in the June 1994 internal audit. However, this appraisal has determined that based on the results of previous assessments the PORTS plant is not in full compliance with all of the requirements of section 3.18	8/31/94	1	The Site Safeguards and Security Plan (SSP) needs to be updated to reflect current operating practices.	XXXX	Appraisal derived from Internal Audit No. OPSS94A01. DOE memo EO-23-1982 on 11/04/91 provided interim approval of SSP.
	3.18.2.1b 3.18.2.1c 3.18.2.1d 3.18.2.1e 3.18.2.1f 3.18.2.1g 3.18.2.2a 3.18.2.2b 3.18.2.2c 3.18.2.2d 3.18.2.2e							
	3.18.2.2f							A security education refresher briefing to reach all personnel annually is not in place. The previous security briefing missed 7% of the plant personnel and no actions to train the 7% group. The audit reported no findings related to this implementation requirement. The audit did state based on the evaluation during this audit the plant is not in full compliance.
	3.18.2.2g							
	3.18.2.2h							A classified computer security program for unclassified computer systems is not developed and training been given
	3.18.2.2i 3.18.2.2j 3.18.2.3a 3.18.2.3b 3.18.2.3c							

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	3.18.2.3.d							No policy, procedures or program has been implemented for the identification or control of unclassified nuclear information (UCNI) The audit reported no findings related to this implementation requirement. The audit did state based on the evaluation during this audit the plant is not in full compliance.
	3.18.2.3e							Measures are not in place to control and protect UCNI. The audit reported no findings related to this implementation requirement. The audit did state based on the evaluation during this audit the plant is not in full compliance.
	3.18.2.3f 3.18.2.3g							A training program for implementation of the new unclassified computer program is not available. The audit reported no findings related to this implementation requirement. The audit did state based on the evaluation during this audit the plant is not in full compliance.
3.19	3.19.2.1 3.19.2.2	OPIH94A01	<u>CHEMICAL SAFETY</u> The audit determined an effective program has been implemented which ensures the level of air contaminants are within limits. The program is enforced by routine inspections and surveys by Industrial Hygiene.	1/22/94	None	No findings identified	N/A	Appraisal derived from Internal Report No. OPIH94A01. Storage of chemicals was found to be adequate. Operations procedures are in place and being utilized.
USEC Internal Appraisals/Audits Conducted in FY 1995								
3.1	3.1.2.1 3.1.2.2	OPMC94A05	<u>ORGANIZATION PLAN</u> This appraisal determined that full compliance with the ROA implementation requirements and adequate organization controls will be in place upon completion of corrective actions already in progress.	10/20/94	None	No findings identified	N/A	Appraisal derived from Internal Audit Report No. OPMC94A05

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3.2	3.2.2.1 3.2.2.2 3.2.2.3 3.2.2.4 3.2.2.5	OPMC94A04	<u>MANAGERIAL CONTROLS & OVERSIGHT</u> This appraisal determined that an effective program is in place for Managerial controls and oversight. No findings were reported	9/30/94	None	No findings identified	N/A	Appraisal derived from Internal Audit Report No. OPMC94A04
3.3 3.9 3.17	3.1.2.1a 3.1.2.1b 3.2.2.2 3.2.2.3 3.2.2.5	OPOP95A03	<u>OPERATIONS</u> The audit resulted in 11 findings being found only one of which was considered a noncompliance with ROA Section 3.3.2.3. The remaining findings were cases where specific procedural requirements are not being met. Management's expectation in the area of conduct of operations are not fully implemented.	5/23/95				
	3.3.2.1				1	Cascade operations cannot assure that CIF ₃ Storage Tank high pressure alarms in X-333 and X-330 will actuate at the required pressures	Closed	Finding No. 11 in audit report is a noncompliance with implementation requirement 3.3.2.3. A tech violation of OSR
	3.9.2.1 3.9.2.2 3.9.2.4 thru 3.9.2.12 and 3.17.2.4							
3.4	3.4.2.1a	OPGE95A01	<u>DESIGN CONTROL</u> The audit determined that an adequate system of controls is established and implemented to ensure initial design activities address IRS of ROA. Field design change activities are not managed. The audit also identified the basic elements of NQA-1 have not been applied to design control.	9/12/95	1	Changes to the critical designs are not properly implemented, planned, or controlled in the field.	Closed	Appraisal derived from Internal Audit Report No. OPGE95A01. Audit report states adequate procedures and controls were not in place to ensure configuration control of plant changes. The report further states the plant is not in compliance with 3.4.2.2, 3.4.2.3, 3.9.2.3, 3.17.2.1, 3.17.2.2, 3.17.2.3 but upon completion of the corrective action for finding 1 the plant will be in compliance with the IRs.
3.4	3.4.2.1b	OPPC95A01	<u>PROCUREMENT & MATERIAL CONTROL</u> An effective system of control has been established for the procurement and material control of safety system configuration items. The audit contained no findings.	9/18/95	None	No findings identified	N/A	Appraisal derived from Internal Audit Report No. OPPC95A01

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3.5	3.5.2.1 3.5.2.2 3.5.2.3 3.5.2.4 3.5.2.5 3.5.2.6	OPTR95A01	<u>TRAINING & QUALIFICATION</u> The audit contained no new findings. Previously defined deficiencies are being address in the Nuclear Safety Upgrade Project. The program enhancements through the NSU project will result in compliance by 1/97. A review of the project indicates project is on status and target.	10/17/95	None	No findings identified	N/A	Deficiencies in the plant's training program allow it to be in noncompliance with IR's 3.5.2.1, 3.5.2.2 & 3.5.2.5 per the audit report.
3.6	3.6.2.1 thru 3.6.2.9	OPMC95A01	<u>QUALITY ASSURANCE</u> The appraisal concluded the QA program was in compliance with Implementation requirements 3.6.2.3 and 3.6.2.9. The program was determined not to be in compliance with Implementation requirements 3.6.2.1, 3.6.2.2, 3.6.2.4, 3.6.2.5, 3.6.2.6, 3.6.2.7, and 3.6.2.8. The appraisal determined that practices and programs are in place to provide safe plant operations.	3/29/95	None	No findings identified	N/A	Appraisal derived from Internal Audit Report No. OPMC95A01
3.7	3.7.2.1 3.7.2.2 3.7.2.3 3.7.2.4	OPGS95A01	<u>MAINTENANCE</u> The appraisal report focuses on status of action being taken to upgrade plant programs in regard to Corrective Maintenance, Preventative Maintenance, Calibration, and control of maintenance work. The report identifies no new findings.	11/23/94	None	No findings identified	N/A	Appraisal derived from Internal Audit Report No. OPGS95A01
3.8	3.8.2.1 thru 3.8.2.23	OPHP95A01	<u>RADIATION ON PROTECTION PROGRAM, SYSTEMS, DESIGN, AND PERMITS</u> The appraisal concludes that there is an effective Rad Protection Program. The report contains 4 new findings regarding HP records	12/27/94	1	Reports fro radiation exposure for terminated employees are not sent to the System Safety Development Center (SSDC) with 3 days.	Closed	Appraisal derived from Appraisal Report No. OPHP95A01. Finding No. 1 is against Implementation Requirement 3.8.2.21
					2	Not all monitored individuals are included in summary exposure reports sent to SSDC	Closed	Finding No. 2 is against Implementation requirement 3.8.2.21
					3	Exposures received from other DOE sites are not being included in annual summary for each individual.	Closed	Finding No. 3 is against Implementation requirement 3.8.2.21

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					4	Dosimetry records for visitors and subcontractors are not always adequately maintained.	Closed	Finding No. 4 is against Implementation requirement 3.8.2.22
3.10	3.10.2.1 thru 3.10.2.19	OPFS95A01	<u>FIRE PROTECTION</u> The appraisal concluded the plant is not in compliance with all implementation requirements of the ROA. The audit contained 8 new findings.	10/13/95	1	Maintenance support for Fire Protection equipment and systems is lacking	Closed	Appraisal derived from Internal Audit Report No. OPFS95A01. Finding No. 1 is against Implementation requirement 3.10.2.1
					2	Inadequate levels of supervisory personnel are being maintained.	Closed	Finding No. 2 is against Implementation requirement 3.10.2.1
					3	Design changes have been made to facilities without comprehensive fire protection impact reviews.	Closed	Finding No. 3 is against Implementation requirement 3.10.2.3
					4	Maintenance and repair of the fire suppression water systems are inadequately tracked and controlled.	Closed	Finding No. 4 is against Implementation requirement 3.10.2.3
					5	Function of fire protection engineering in performance of design reviews has not been formalized.	Closed	Finding No. 5 is against Implementation requirement 3.10.2.13
					6	Frequency of bldg. appraisals are not being fulfilled.	Closed	Finding No. 6 is against Implementation requirement 3.10.2.14
					7	Discrepancies found in fire protection bldg. Appraisals are not verified and assigned corrective action ownership.	Closed	
					8	Controlled substances to be used for medical duties are not being secured.	Closed	Implementation requirement 3.10.2.19
3.13	3.13.2.1 3.13.2.2 3.13.2.3 3.13.2.4 3.13.2.5 3.13.2.6 3.13.2.7 thru 3.13.2.15	OPEC95A01	<u>EMERGENCY PLANNING</u> This audit confirmed EMP is not yet in compliance with all IRS of the ROA. The Nuclear Safety Upgrade Program and NRC compliance plan have identified and are addressing the programs significant deficiencies. The appraisal did not identify any new findings.	10/16/95	None	No findings identified	N/A	Existing document does not reflect current practice and organization. No prescribed Hazards assessment process is identified. Formal updating of current EMP manual on an established annual basis has not been done.

USEC INTERNAL APPRAISAL FINDINGS STATUS REPORT

PORTS INTERNAL APPRAISALS/AUDITS CONDUCTED AND RESULTS

(Internal Appraisals Conducted and Reports Issued From July 1, 1993 Up Through March 2, 1997)

ROA RO	ROA IRs Evaluated	PGDP Appraisal No.	Appraisal Subject/ Appraisal Summary	Date Issued	Find No.	Finding Subject	Find Status	Comments
3.15	3.15.2.1 thru 3.15.2.6	OPTS95A01	<u>SAMPLING AND ANALYSIS</u> The report identifies no findings and concludes that control systems are working to achieve an effective sampling and analysis.	1/23/95	None	No findings identified	N/A	Appraisal derived from Internal Audit Report No. OPTS95A01
3.12 3.18	3.12.2.4	OPSS95A01	<u>SAFEGUARDS & SECURITY</u> This appraisal determined that the plant is not in full compliance with ROA implementation requirements 3.12.2.4, 3.18.2.2h, 3.18.2.2j, 3.18.2.3d, 3.18.2.3e, and 3.18.2.3f. The noncompliances were determined to be of minimal impact and did not represent a downgrading of the plant security program.	6/26/95	1	Picture badge TLDs of terminated employees are not being removed from access portals in a timely manner.	Closed	Appraisal derived from Internal Audit Report No. OPSS95A01
	3.12.2.5 & 3.12.2.8				2	Access control practices at the Drive Gate Pedestrian Portal could allow unauthorized entry.	Closed	Finding No. 2 against Implementation requirement 3.12.2.4
	3.18.2.1a 3.18.2.1b 3.18.2.1c 3.18.2.1d 3.18.2.1e 3.18.2.1f 3.18.2.1g							An observation was noted in the audit that the plant has not developed an implementation plan to the requirements of DOE Order 5630.15, This observation is against Implementation requirement 3.18.2.1c
	3.18.2.2a 3.18.2.2b 3.18.2.2c				3	Controls over classified document access are not being followed.	Closed	Not considered a noncompliance with the ROA.
	3.18.2.2d 3.18.2.2e 3.18.2.2f							The program is deemed to meet the intent of IR 3.18.2.2d, procedures need to be up dated to meet the requirements of DOE Order 5630.15
	3.18.2.2g 3.18.2.2h 3.18.2.2i				4	Division computer security officers are not performing all duties required by the computer security program	Closed	Finding No. 4 is against Implementation requirement 3.18.2.2h
	3.18.3.3a 3.18.3.3b 3.18.3.3c 3.18.3.3d 3.18.3.3e							The program for protecting DOE interests other than SNM does not include measures to protect UCNI mandated by DOE Order 5650.3A. Not a new finding

USEC INTERNAL APPRAISAL FINDINGS STATUS REPORT

PORTS INTERNAL APPRAISALS/AUDITS CONDUCTED AND RESULTS (Internal Appraisals Conducted and Reports Issued From July 1, 1993 Up Through March 2, 1997)

ROA RO	ROA IRs Evaluated	PGDP Appraisal No.	Appraisal Subject/ Appraisal Summary	Date Issued	Find No.	Finding Subject	Find Status	Comments
3.19	3.19.2.1 3.19.2.2	OPIS95A04	<u>CHEMICAL SAFETY</u> The appraisal identifies no findings and concludes that control systems are working to achieve an effective Chemical Safety Program.	1/24/95	None	No findings identified	N/A	Appraisal derived from Internal Audit Report No. OPIS95A04
3.19	3.19.2.1 3.19.2.2	OPSA95A01	<u>CHEMICAL SAFETY</u> The audit team found the plant to be in compliance with the ROA. The appraisal identified four new findings.	9/15/95	1	Plant is deficient in processing changes to Process Safety Management (PSM) related procedures to reflect current practices.	Closed	Appraisal derived from Internal Audit Report No.OPSH95A04.
					2	Various IH&S procedures contained in standard practices, procedures manual, H&S manual , Independent Safety Procedures, I-H procedures manual do not reflect current practices.	Closed	
					3	Failure to implement all the requirements of the non-ionizing Radiation Safety Program.	Closed	
					4	There is no program to comply with the requirements of 29 CFR 1910.22.	Closed	Floor loading limitations are not posted. IRMS item no. UX9514621
USEC Internal Appraisals/Audits Conducted in FY 1996								
3.2	3.2.2.1 thru 3.2.2.5	OPRM96A01	<u>MANAGEMENT CONTROLS & OVERSIGHT</u> The audit team determined that PORTS is not in full compliance with ROA IR 3.2.2.1 and 3.2.2.5. This noncompliance has been identified in DOE Compliance Plan, as Issue 29 previously. Due to the formalization of the Compliance Plan no new ROA findings have been issued.	5/21/96	None	No findings identified	N/A	Appraisal derived from Internal Audit Report No. OPRM96A01 . This audit addressed the document control and records management functions of management controls.
3.3	3.3.2.1	OPCO96A001	<u>OPERATIONS</u> The audit found ROA compliance with 4 of 7 Implementation requirements of Section 3.3. Eight new findings were issued	6/4/96	1	MBWA program is not being effectively implemented.	Closed	Appraisal report derived from Internal Audit Report OPCO96A001. The audit report identified 11 deficiencies, 8 findings issued of which 5 were repeat findings from '95 Operations audit. Of the 5 repeats, 2 had been closed but the deficiency persists.

USEC INTERNAL APPRAISAL FINDINGS STATUS REPORT

PORTS INTERNAL APPRAISALS/AUDITS CONDUCTED AND RESULTS

(Internal Appraisals Conducted and Reports Issued From July 1, 1993 Up Through March 2, 1997)

ROA RO	ROA IRs Evaluated	PGDP Appraisal No.	Appraisal Subject/ Appraisal Summary	Date Issued	Find No.	Finding Subject	Find Status	Comments
	3.3.2.2 3.3.2.3 3.3.2.4				2	Operator aids in the Cascade Bldgs are in poor condition including implementation of new conduct of operations procedures.	Open	Finding No. 2 is against Implementation requirement 3.2.2.5.
	3.3.2.5 3.2.2.2				3	The Operator Round/Tour Inspection sheets are not effectively utilized to document conditions. (Repeat finding)	Open	Finding No. 3 is against Implementation requirement 3.3.2.5
	3.3.2.6 3.3.2.7 3.2.2.3				4	The required reading file is not effectively implemented (repeat finding)	Open	Finding No. 4 is against Implementation requirement 3.3.2.5
	3.1.2.1 3.9.2.8				5	There is no procedure that initiates the screening process for USQs .	Closed	Finding No. 5 is against Implementation requirement 3.2.2.6/3.2.2.7
					6	PORTS does not have approved position descriptions in place for present organization chart.	Compl.	Repeat finding in 3.3 issued 11/17/93 Finding No. 6 is against Implementation requirement 3.1.2.1
					7	The required monthly surveys of NCS are not being performed.	Closed	Finding No. 7 is against Implementation requirement 3.9.2.8
					8	Visual inspections for slings are not being performed.	Closed	Finding No. 8 is against Implementation requirement 3.9.2.8
3.4 3.17	3.4.2.1 3.4.2.2 3.4.2.3	OPTO96A001	<u>DESIGN CONTROL</u> The audit found Design Control to be in compliance with 2 of 3 Implementation requirements of ROA 3.4.2 and in compliance with 3.17. The appraisal contains two new findings.	8/21/96	1	Deficiencies exist in the technical rigor of the evaluation of "as found" conditions of SSCs for operability.	Closed	Appraisal derived from Internal Audit Report No. OPTO96A001 PR-96-PTS-5387 Finding No. 1 is against Implementation requirement 3.4.2.1a. PR-QA-96-5387
	3.17.2.1 3.17.2.2 3.17.2.3 3.17.2.4				2	The "at risk" process currently in use in the design and installation process is not defined in any existing procedure.	XXXX	Finding No. 2 is against Implementation requirement 3.4.2.1

USEC INTERNAL APPRAISAL FINDINGS STATUS REPORT

PORTS INTERNAL APPRAISALS/AUDITS CONDUCTED AND RESULTS
(Internal Appraisals Conducted and Reports Issued From July 1, 1993 Up Through March 2, 1997)

ROA RO	ROA IRs Evaluated	PGDP Appraisal No.	Appraisal Subject/ Appraisal Summary	Date Issued	Find No.	Finding Subject	Find Status	Comments
3.5	3.5.2.1 thru 3.5.2.7	OPTR96A001	<u>TRAINING & QUALIFICATION PROGRAM</u> Based on the audit implementation requirements of ROA area 3.5.2.1, 3.5.2.2, 3.5.2.3, 3.5.2.4 and 3.5.2.7 meet the ROA. No new findings were issued. Implementation requirements 3.5.2.6 and 3.5.2.5 are being tracked with completion expected in '98.	9/23/96	None	No findings identified	N/A	Appraisal derived from Internal Audit Report OPTR96A001
3.6	3.6.2.1 through 3.6.2.9	Unnumbered	<u>QUALITY ASSURANCE</u> No ROA deficiencies were identified.	7/29/96	None	No findings identified	N/A	Appraisal report prepared by PPRC utilizing an out side consultant. Twelve recommendation were submitted.
3.7	3.7.2.1 3.7.2.2 3.7.2.3 3.7.2.4	OPMA95A02	<u>MAINTENANCE</u> The audit concluded the maintenance program is in compliance with OR 3.7 of the ROA.	11/15/95	None	No findings identified	N/A	Appraisal derived from Internal Audit Report No. OPMA95A02
3.8	3.8.2.1 thru 3.8.2.23	OPRP96A01	<u>RADIATION PROTECTION PROGRAM, SYSTEMS, DESIGNS, & PERMITS</u> While the audit found the PORTS program effective 4 findings were identified.	12/27/95	1	Line management's implementation of radiation protection requirements has been found to be ineffective.	Closed	Appraisal derived from Internal Audit Report No. OPRP96A01. Finding No. 1 is against Implementation requirement 3.8.2.2
					2	A yearly internal assessment program is not being conducted	Closed	Finding No. 2 is against Implementation requirement 3.8.2.8
					3	Leak rate and integrity testing and report generation of sealed radiation sources is not being met.	Closed	Finding No. 3 is against Implementation requirement 3.8.2.16
					4	Detail instructions for proper protection, storage and disposition of records is not being met	Closed	Finding No. 4 is against Implementation requirement 3.8.2.22 The audit report stated the maintenance program is not in compliance with IRs 3.8.2.2, 3.8.2.8, 3.8.2.10, 3.8.2.11, 3.8.2.13, 3.8.2.16, and 3.8.2.22.
3.9	3.9.2.1 through 3.9.2.12	OPNS96A001	<u>NUCLEAR CRITICALITY SAFETY</u> The audit found PORTS in compliance with 7 of the 12 IR of ROA Section 3.9. Five new findings were issued to ensure compliance with the ROA. The absence of compliance does not compromise safety or adversely impact plant operations	4/4/96	1	Nuclear criticality engineers are not conducting surveillances in accordance with their procedure.	Closed	Appraisal is derived from Internal Audit Report No. OPNS96A001. Finding No. 1 is against Implementation requirement 3.9.2.8

USEC INTERNAL APPRAISAL FINDINGS STATUS REPORT

PORTS INTERNAL APPRAISALS/AUDITS CONDUCTED AND RESULTS

(Internal Appraisals Conducted and Reports Issued From July 1, 1993 Up Through March 2, 1997)

ROA RO	ROA IRs Evaluated	PGDP Appraisal No.	Appraisal Subject/ Appraisal Summary	Date Issued	Find No.	Finding Subject	Find Status	Comments
					2	The Nuclear Criticality Group is not providing assurance that facility custodians and manager perform and document monthly NCS surveys.	Closed	Finding No. 2 is against Implementation requirement 3.9.2.8
					3	PORTS does not meet written procedures requirement to govern NCS operations per ANSI 8.5	Closed	PORTS is not in compliance with 3.9.2.5, no findings were issued, NSU project will correct also applies to IR 3.9.2.6
					4	PORTS records are insufficient to document CAAS response time	Closed	Finding No. 4 is against Implementation requirement 3.9.2.11
					5	NCS records are not properly maintained	Closed	
3.10	3.10.2.1 thru 3.10.2.19	OPFS96A001	<u>FIRE PROTECTION</u> The audit determined that while there is an effective fire protection program being implemented deficiencies do exist. Three findings and 2 problem reports have been issued as a result of the audit.	10/21/96	1	Fire protection records are not being generated, handled, stored, and controlled in accordance with plant requirements	XXXX	Appraisal derived from Internal Audit Report No. OPFS96A001 Repeat finding from 9/95 audit
					2	The sprinkler valve permit program is not fully effective in documenting and controlling alignment of valves.	Open	Finding No. 2 is against Implementation requirement 3.10.2.6 PR-PTS-96-6988
					3	Management's planned enhancements to the fire protection training program have not yet been realized.	Open	Finding No. 3 is against Implementation requirement 3.10.2.8 Aux. Fire brigade training expired, training modules have not been updated. PR-PTS-96-6989
3.11	3.11.2.1 3.11.2.2 3.11.2.3 3.11.2.4	OPEC96A001	<u>ENVIRONMENTAL PROTECTION</u> There were no new findings against the ROA resulting from this audit. PORTS Environmental Protection Program is in compliance with the ROA	7/30/96	None	No findings identified	N/A	Appraisal derived from Internal Audit Report No. OPEC96A001. Seven findings on environmental program effectiveness

USEC INTERNAL APPRAISAL FINDINGS STATUS REPORT

PORTS INTERNAL APPRAISALS/AUDITS CONDUCTED AND RESULTS

(Internal Appraisals Conducted and Reports Issued From July 1, 1993 Up Through March 2, 1997)

ROA RO	ROA IRs Evaluated	PGDP Appraisal No.	Appraisal Subject/ Appraisal Summary	Date Issued	Find No.	Finding Subject	Find Status	Comments
3.12	3.12.2.1 thru 3.12.2.9	OPNM96A001	<u>NUCLEAR MATERIAL SAFEGUARDS</u> There were no new findings against the ROA resulting from this audit. This audit determined that the PGDP Nuclear Material Safeguards Program is in compliance with the ROA.	6/24/96	None	No findings identified	N/A	PORTS does have a program in place that technically addresses all requirements. The administrative controls for requirements 3.12.2.1 and 3.12.2.3 are very loose and if continued to persist, will cause these areas to become noncompliant or compromise the integrity of the ROA initiatives.
3.13	3.13.2.1 thru 3.13.2.15	OPEP96A01	<u>EMERGENCY PREPAREDNESS</u> This audit confirmed the existing PORTS EMP is not yet in full compliance with the ROA.	10/18/96	1	Steps and criteria for the activation of the alternate EOC are not proceduralized	XXXX	Appraisal derived from Internal Audit Report No. OPEP96A01
3.14	3.14.2.1 thru 3.14.2.8	OPPK96A001	<u>PACKAGING AND TRANSPORTATION NUCLEAR MATERIALS</u> The audit team determined that PORTS is in compliance with ROA Section 3.14 requirements.	5/17/96	None	No findings identified	N/A	Appraisal derived from Internal Audit Report No. OPPK96A001
3.15	3.15.2.1 thru 3.15.2.6	OPTS96A01	<u>SAMPLING & ANALYSIS</u> The audit found PORTS is in compliance with 5 of the 6 Implementation requirements of the ROA.	3/18/96	1	Laboratory analytical activities are not performed to documented and approved procedures.	Compl.	Appraisal derived from the Internal Audit Report No. OPTS96A01. Finding No. 1 is against Implementation Requirement 3.15.2.1
					2	Program documentation does not specify frequency of Q/C blind and double blind samples.	Closed	Finding No. 2 is against Implementation requirement 3.15.2.1 PR-PTS-96-1640
3.16	3.16.2.1 3.16.2.2 3.16.2.3 3.16.2.4 3.16.2.5 3.16.2.6	OPWM96A001	<u>WASTE MANAGEMENT PROGRAM</u> Based on the internal audit the conclusion was that PORTS is not fully in compliance with two of the six implementation requirements. (3.16.2.2 & 3.16.2.3) The Waste Management Program is actively directing activities to achieve safe storage, treatment, and disposal of wastes.	7/15/96	1	Several hundred fluorescent light bulbs approved for release to an off site treatment, storage, and disposal facility for recycling did not have total surface (fixed) contamination readings.	XXXX	This appraisal report was developed based on Internal Audit Report No. OPWM96A001. SCAQ (PR-PTS-96-1793)
					2	There are insufficient controls in the system for surveying and maintaining sanitary waste dumpsters and removing sanitary trash.	XXXX	

USEC INTERNAL APPRAISAL FINDINGS STATUS REPORT

PORTS INTERNAL APPRAISALS/AUDITS CONDUCTED AND RESULTS

(Internal Appraisals Conducted and Reports Issued From July 1, 1993 Up Through March 2, 1997)

ROA RO	ROA IRs Evaluated	PGDP Appraisal No.	Appraisal Subject/ Appraisal Summary	Date Issued	Find No.	Finding Subject	Find Status	Comments
					3	Process lube oil systems and discharges are not being operated and maintained respectively so as to minimize the generation of low level radioactive waste (LLRW) or LLRW with detectable polychlorinated biphenyls (PCBs)	XXXX	
3.18	3.18.2.1a through 3.18.2.1g	OPSC96A001	<u>SECURITY</u> The audit team concluded that the overall effectiveness of the Security is good. PORTS is not in full compliance with ROA implementation requirements 3.18.2.1a, 3.18.2.1c, 3.18.2.1f, 3.18.2.2c	9/25/96	1	Procedures that implement the Security Program are out of date and don't reflect current operations.	Closed	Appraisal derived from Internal Audit Report No. OPSS96A001 Finding No. 1 is against Implementation requirement 3.18.2.1a/3.2.2.1 SCAQ PR-PTS-96-5591/PR-QA-96-5591
	3.18.2.2a through 3.18.2.2j				2	A formalized training program for personnel with responsibility for security requirements has not been developed	Closed	Finding No. 2 is against Implementation requirement 3.18.2.1c
	3.18.2.3a through 3.18.2.3g				3	A performance testing program mandated by ROA has not been developed with the Security Group.	Closed	Finding No. 3 is against Implementation requirement 3.18.2.1f. IRMS item no. UX96I7241, PR-QA-96-5590
					4	Absence of understanding on access control and search requirements by Protection Force personnel.	Open	Finding No. 4 is against Implementation requirement 3.18.2.2a SCAQ PR-PTS-96-5589/PR-QA-96-5589
					5	Periodic inventories for high security keys are not being conducted	Open	Finding No. 5 is against Implementation requirement 3.18.2.2c SCAQ PR-PTS-96-5126
3.19	3.19.2.1 3.19.2.2	OPSH96A001	<u>CHEMICAL SAFETY</u> The audit found the plant in compliance with the two implementation requirements of ROA Section 3.19.	2/7/96	None	No findings identified	N/A	Appraisal derived from Internal Audit Report No. OPSH96A001. A performance based assessment performed at the same time identified 6 new findings.
3.19	NA	OPIS96A001	<u>SAFETY</u> This audit determined that IH and 5 program area generally address the intent of OSHA standards set forth in 29 CFR 1910	9/18/96	1	PORTS has not implemented the requirements of 29 CFR 1910.1030	XXXX	Appraisal derived from Internal Audit Report No. OPIS96A001 18 recommendations were submitted in the audit for IH&S reinforcement and improvement.

USEC INTERNAL APPRAISAL FINDINGS STATUS REPORT

PORTS INTERNAL APPRAISALS/AUDITS CONDUCTED AND RESULTS

(Internal Appraisals Conducted and Reports Issued From July 1, 1993 Up Through March 2, 1997)

ROA RO	ROA IRs Evaluated	PGDP Appraisal No.	Appraisal Subject/ Appraisal Summary	Date Issued	Find No.	Finding Subject	Find Status	Comments
USEC Internal Appraisals/Audits Conducted in FY 1997								
3.4	3.4.2.1 & 3.6.2.7	OPMA96001	<u>PROCUREMENT & MATERIAL CONTROL PROGRAM</u> The audit determined that procurement and material control processes were being conducted in an effective manner. It was also determined that PORTS is in compliance with the regulatory requirements.	12/12/96	None	No findings identified	N/A	Appraisal derived from Internal Audit Report No. OPMA96001
3.7	3.7.2.1 through 3.7.2.4	OPGP96A001	<u>MAINTENANCE</u> The results of this audit revealed the Maintenance Program has implemented changes. However, performance deficiencies observed indicate management must apply more rigor in assessing and correcting performance deficiencies.	12/12/96	1	Tags are not being administered and controlled in process bldgs. In accordance with plant procedures and corrective actions are not being implemented in a timely manner.	XXXX	Appraisal derived from Internal Audit Report No. OPGP96A001
					2	Maintenance and Operations management failed to implement their designated responsibilities for maintaining control of general good house keeping practices.	XXXX	
					3	M&TE usage is not properly controlled nor uniformly implemented.	XXXX	
					4	M&TE usage is not properly tracked for calibration.	XXXX	
					5	M&TE records are not protected, stored or transmitted to records management.	XXXX	
					6	Out of tolerance reports are not being investigated and closed in a timely manner.	XXXX	
					7	Calibration program and M&TE control and calibration procedures do not provide adequate guidance for processing out-of-tolerance reports.	XXXX	

USEC INTERNAL APPRAISAL FINDINGS STATUS REPORT

PORTS INTERNAL APPRAISALS/AUDITS CONDUCTED AND RESULTS

(Internal Appraisals Conducted and Reports Issued From July 1, 1993 Up Through March 2, 1997)

ROA RO	ROA IRs Evaluated	PGDP Appraisal No.	Appraisal Subject/ Appraisal Summary	Date Issued	Find No.	Finding Subject	Find Status	Comments
					8	Management is not correcting known environmental out-fall monitoring instrumentation deficiencies in a timely manner.	XXXX	
					9	Management is not following the procedural guideline for "Request for Maintenance Services", "Work Control Process"	XXXX	
					10	Calibration program self assessments are not being performed.	XXXX	
					11	Management is not correcting known calibration deficiencies.	XXXX	
					12	Management failed to identify and correct calibration problem deficiencies previously identified.	XXXX	
3.19	3.19.2.1 3.19.2.2	OPCH97A001	<u>CHEMICAL SAFETY</u> The audit looked at SAR requirements and OSHA standards. One finding was reported.	1/14/97	1	The plant has failed to implement an effective Hazard Communications Program.	XXXX	

ENFORCEMENT/MANAGEMENT CONFERENCE BACKGROUND

ROA Enforcement and Management Conferences Conducted as a Result of Degraded PORTS Activities
(July 1, 1993 through March 2, 1997)

ENFORCEMENT CONFERENCES

1) 1994 ENFORCEMENT CONFERENCE (EA-70-7001/94-006)

PURPOSE: *A number of violations had been identified at PGDP that were indicative of a breakdown in USEC Management Controls. DOE's position at this conference was that USECs lack of direct management control over its Contractor [Lockheed Martin Utility Services, Inc. (LMUS)] was a major factor contributing to certain of the programmatic breakdowns observed by DOE.*

TOPICAL AREAS DISCUSSED ON APRIL 28, 1994:

- Repetitive failure to follow radiation protection & operations procedures.
- Repetitive failure to appropriately categorize and to report occurrences to DOE in a timely manner.

RESULT OF CONFERENCE:

- USEC made specific commitments in 13 topical areas in a letter to DOE dated May 16, 1994.
 - One commitment was formally submitted to DOE as an example, but then subsequently dropped (Performance Indicators). This resulted in a Notice of Deviation being issued to USEC as 70-7001/96-07-03.
 - Two long-term commitments were subsequently relaxed to "as required" (Sweep Teams and Crew Briefings), and one commitment had all but stopped once the OSR/TSR Transitions began (Drills).

USEC COMMITMENTS MADE BY TOPICAL AREA (See DOE:ROA TI 3.2/01 for Details):

- Crew Briefings
- Drill Program
- Plant Management Communications
- Sweep Teams
- Increased Control of Operations with Potential for UF₆ Release

ENFORCEMENT/MANAGEMENT CONFERENCE BACKGROUND

ROA Enforcement and Management Conferences Conducted as a Result of Degraded PORTS Activities
(July 1, 1993 through March 2, 1997)

- Procedures Upgrade
- Formal USEC Policies
- Culture Change Initiative
- Performance Measures
- Improvement of Management Controls
- Clarification of Reporting Requirements
- Issue USEC Interpretation of Categorization and Reporting Criteria
- Lessons Learned Discussion for the PSSs

DOE TO NRC TRANSITION STATUS:

No NRC action required. All lessee commitments were verified as completed and closed in DOE Inspection Reports 70-7001/95-16 and 70-7001/96-08.

2) 1995 ENFORCEMENT CONFERENCE (70-7001/94-12)

PURPOSE: *A number of violations had occurred at PGDP and PORTS that was indicative of continued weakness in the area of procedure adherence. DOE's position at this conference was that USEC's previous identification and implementation of corrective actions to address the root cause of these issues had been inadequate to prevent their recurrence.*

TOPICAL AREAS DISCUSSED ON APRIL 26, 1995:

- Procedure adherence violations had been Identified at PGDP involving fire protection activities.
- Use of a straddle carrier to move a liquid UF₆ cylinder at PORTS.

RESULT OF CONFERENCE (PORTS):

- DOE issued a Notice of Violation (70-7002/94-12-03) on April 10, 1995 and imposed a \$20,000.00 civil penalty which was reduced to \$10,000.00 as a result of USEC taking prompt corrective action and meaningful attention in correcting the root causes of the violation.

ENFORCEMENT/MANAGEMENT CONFERENCE BACKGROUND

ROA Enforcement and Management Conferences Conducted as a Result of Degraded PORTS Activities (July 1, 1993 through March 2, 1997)

- USEC responded to the NOV on June 23, 1995 and admitted to the NOV as stated. Six (6) corrective actions were committed.

USEC COMMITMENTS MADE:

- The operator responsible for the liquid cylinder movement was immediately coached and counseled.
- On January 11, 1994, the PORTS Manager of Nuclear Regulatory Affairs held a special briefing with DOE's RO Manager during the previously scheduled Regulatory Issues Meeting. The briefing included the sequence of events, the root and contributing causes, and the status of management actions to date.
- All personnel who were involved in handling or administration of liquid cylinders received a crew briefing that included the sequence of events, the root and contributing causes, the lessons learned and the additional administrative control requirements being implemented.
- USEC undertook three actions intended to improve the availability of scales. Those actions were a) increasing scale calibration tolerance to +/- 6 lbs., b) increasing the maintenance frequency of accountability scales, and c) re-establishing Production Control as the coordinator for all UF₆ cylinder evolutions.
- The Plant Manager directed the scope of the investigation to be expanded to include all UF₆ handling operations to determine if the reported event was a precursor to a more significant problem.
- Management re-evaluated the benefits of having one central organization controlling the movement of cylinders. NMC&A now requests all cylinder transfers through Production Control.

DOE TO NRC TRANSITION STATUS:

No NRC action required. All lessee commitments were verified as completed and closed in DOE Inspection Report 70-7002/95-07.

ENFORCEMENT/MANAGEMENT CONFERENCE BACKGROUND

ROA Enforcement and Management Conferences Conducted as a Result of Degraded PORTS Activities (July 1, 1993 through March 2, 1997)

3) **1997 ENFORCEMENT CONFERENCE** (DOE Letters dated December 27, 1996 involving DOE Inspection Reports 70-7002/96-08 and 70-7002/96-11)

PURPOSE: *To discuss recent improper liquid UF₆ cylinder handling activities at PORTS as described in DOE Inspection Reports 70-7002/96-08 and 70-7002/96-11.*

TOPICAL AREAS DISCUSSED ON January 15, 1997:

- Assessment of events described in DOE apparent violation 70-7002/96-08-03, *Traffic Diverted Adjacent to Cooling UF₆ Cylinder Railcars.*
- Assessment of events described in DOE apparent violations 70-7002/96-11-01, *Failure to Follow Established Management Controls in Moving Liquid UF₆ Cylinders,* and 70-7002/96-11-02, *Movement of a Liquid UF₆ Cylinder with a Straddle Carrier Prior to OSR-Required 5-Day Cooldown Completed.*
- Assessment of previous liquid UF₆ handling events and previous corrective actions taken to prevent recurrence.

RESULT OF CONFERENCE:

- DOE issued a two Notices of Violation (70-7002/96-08-03 and 70-7002/96-11-02) on January 19, 1997 and imposed a \$20,000.00 civil penalty for each violation cited, or \$40,000.00 total.
- USEC responded to the NOV's on February 14, 1997 and admitted to the NOV's as stated. Five (5) corrective actions were identified as having been immediately taken to correct the situation involving NOV 70-7002/96-08-03. An additional 11 corrective actions are planned to be taken to prevent recurrence of the problem, all of which, will be completed by May 13, 1997.

Nine (9) corrective actions were identified as having been immediately taken to correct the situation involving NOV 70-7002/96-11-02. An additional 5 corrective actions are planned to be taken to prevent recurrence of the problem, all of which, will be completed by March 1, 1997.

ENFORCEMENT/MANAGEMENT CONFERENCE BACKGROUND

ROA Enforcement and Management Conferences Conducted as a Result of Degraded PORTS Activities (July 1, 1993 through March 2, 1997)

USEC COMMITMENTS MADE (NOV 70-7002/96-08-03):

- All work planners will be trained by April 30, 1997, on the need to thoroughly evaluate jobs when planning.
- Plant Shift Superintendents (PSSs) will be trained to have more of a questioning attitude about the "big picture" when changes occur and guide the activity into an established work control process. This action is to be completed by February 28, 1997.
- PSSs, planners, and Operations personnel will receive lessons learned training on this event by April 30, 1997.
- FSAR Section 4.2.7.3 requirements will be flowed down into procedure XP2-TE-TE2240, *Operation of Railcar Mover*, by February 14, 1997.
- Procedure XP3-CO-UH2077, *Management of Liquid UF₆ Cylinders During Solidification*, is currently under development and will be issued by February 14, 1997. This procedure will include controls for the placement of cooling cylinder railcars in designated liquid UF₆ cooling areas and protective barriers to be implemented to prohibit vehicular traffic in these areas.
- Organizational, Group, Sectional, and Front Line Managers will be trained on the use of procedures, vice policies, to direct work activities by February 28, 1997.
- Action associated with the DOE Compliance Plan to flowdown the Application SAR (Issue 30 for PORTS and 27 for PGDP) will proceed as committed in the Compliance Plan.
- USEC will establish the following administrative controls by February 14, 1997: (1) clearly demarcate cylinders containing UF₆, and (2) prevent vehicular traffic from coming in close proximity to cooling UF₆ cylinders.
- USEC will develop a proceduralized process for Planners such that the 10 CFR 76.68 screening process is considered whenever work activities are evaluated that are not covered by procedures or work instructions. This action will be completed by May 13, 1997.

USEC COMMITMENTS MADE (NOV 70-7002/96-11-02):

- Procedures and practices for UF₆ cylinder handling and movement will be reviewed and integrated per the results of the event investigation. This action will be completed by February 14, 1997.

ENFORCEMENT/MANAGEMENT CONFERENCE BACKGROUND

ROA Enforcement and Management Conferences Conducted as a Result of Degraded PORTS Activities (July 1, 1993 through March 2, 1997)

- Modify the management system to prevent TR generation until the cylinder cooling period is satisfied. This action will be completed by February 14, 1997.
- The control of liquid UF₆ cylinders is being revised to require the use of a physical device and the Lockout/Tagout (LOTO) program in lieu of the administrative controls now employed, i.e., caution tags. This action will be completed by February 14, 1997.
- USEC will establish a position for oversight and assessment of UF₆ cylinder handling at *PORTS*. *This position will report to the Nuclear Safety Manager.* This action will be completed by March 1, 1997.
- USEC will train Operations personnel (including UMHS) on the "Lessons Learned" from this event by April 14, 1997.

DOE TO NRC TRANSITION STATUS:

Of the 16 corrective actions stated by the lessee were required to resolve NOV 70-7002/96-08-03, eight (8) have been verified as having been completed by DOE. Those corrective actions remaining open include: 1, 2, 3, 6, 7, 8, 10, and 11. These open actions have been documented in DOE Inspection Report 70-7002/97-03. These remaining open actions will be transferred to NRC to follow-up on under their inspection program.

Of the 14 corrective actions stated by the lessee were required to resolve NOV 70-7002/96-11-02, twelve (12) have been verified as having been completed by DOE. The two remaining open corrective actions include: 8 and 14. These open actions have been documented in DOE Inspection Report 70-7002/97-03. These remaining open actions will be transferred to NRC to follow-up on under their inspection program.

ENFORCEMENT/MANAGEMENT CONFERENCE BACKGROUND

ROA Enforcement and Management Conferences Conducted as a Result of Degraded PORTS Activities
(July 1, 1993 through March 2, 1997)

MANAGEMENT CONFERENCES

1) 1996 MANAGEMENT CONFERENCE (70-7003/96-001)

PURPOSE: *To discuss USEC apparent failures to improve both its operational management controls at the GDPs and meet its commitments to improve specific programs within its management controls.*

TOPICAL AREAS DISCUSSED ON MAY 9, 1996:

- USEC assessment and status of its management controls established to assure safe operation of the GDPs.
- USEC description of specific improvements made to strengthen its management controls associated with procedural controls, corrective action recurrence controls, and preservation of the GDP Authorization Basis documents.

RESULT OF CONFERENCE:

- USEC made 5 commitments in the area of procedural controls, 6 in the area of corrective actions, and 4 in the area of Authorization Basis document maintenance in a letter to DOE dated June 14, 1996.

USEC COMMITMENTS MADE BY TOPICAL AREA:

a) **PROCEDURE ADEQUACY AND USE**

- (1) A procedural process for identifying regulatory commitments and to ensure they are appropriately incorporated into policies and procedures was to be established and implemented by June 7, 1996.
- (2) Continued procedures upgrades are to be completed as defined in the Procedures Upgrade Program (PUP) consistent with the schedule identified in the DOE Compliance Plan.
- (3) Organizational roles and responsibilities are to be flowed-down to committed position descriptions as described in the DOE Compliance Plan.

ENFORCEMENT/MANAGEMENT CONFERENCE BACKGROUND

ROA Enforcement and Management Conferences Conducted as a Result of Degraded PORTS Activities (July 1, 1993 through March 2, 1997)

- (4) Near-term improvement initiatives were to be completed by December 31, 1996:
- Train hourly operations and maintenance personnel on procedure use and adherence.
 - Train managers and others involved in the procedure process on procedure use, development, and control.
 - Reevaluate procedures during TSR flow-down for the proper use category.
 - Review the technical adequacy of all procedures past their periodic review dates.

- (5) USEC was to revise its QOOP (Quality of Operations Plan) initiative on Conduct of Operations by July 15, 1996.

b) CORRECTIVE ACTIONS

- (1) Where feasible, all procedures that constitute the corrective action process were to be revised and consolidated by August 31, 1996.
- (2) Select managers and other key individuals were to be trained in root cause analysis and corrective action plan (CAP) development by September 30, 1996.
- (3) Corrective action performance indicators were to be developed and provided to management starting August 1996.
- (4) The MAAT (PGDP) and CARB (PORTS) were to perform a review of all open SCAQ (Significant Conditions Adverse to Quality) CAPs by September 30, 1996. SCAQ CAPs were to be revised, as necessary, by the functional managers responsible for the CAPs by September 30, 1996.
- (5) Monthly surveillances of selected CAPs were to be conducted to monitor improvements in effectiveness beginning August 1996 and ending no earlier than January 1997.
- (6) Previously planned audits of the corrective action process were to be conducted to monitor the effectiveness of corrective action process improvements by October 1996.

c) MAINTENANCE OF AND ADHERENCE TO AUTHORIZATION BASIS

- (1) The procedural infrastructure in identifying and dispositioning "as-found" conditions were to be reviewed to develop appropriate changes by September 30, 1996.

ENFORCEMENT/MANAGEMENT CONFERENCE BACKGROUND

ROA Enforcement and Management Conferences Conducted as a Result of Degraded PORTS Activities (July 1, 1993 through March 2, 1997)

- (2) Procedures were to be revised and personnel responsible for dispositioning and reviewing as-found items were to be trained by September 30, 1996.
- (3) The as-found conditions identified through the SAR (Safety Analysis Report) preparations were to be dispositioned as described in USECs response to the DOE Order to Take Action at PORTS and the existing schedule identified in PGDPs Problem Report issued to document its NRC SAR to DOE FSAR differences.
- (4) Specific indicators to monitor compliance and performance trends associated with as found conditions were to be developed by July 31, 1996.

DOE TO NRC TRANSITION STATUS:

No NRC action required. All lessee commitments were verified as completed and closed in DOE Inspection Reports 70-7001/96-08 and 70-7001/97-02.

2) 1996 MANAGEMENT CONFERENCE (EA-70-7002/96-0001)

PURPOSE: *For DOE to gather information upon which to base an interim conclusion as to whether there is reasonable assurance that UF₆ cylinder handling operations at the Portsmouth facility can be performed safely and in accordance with requirements and approved plans and procedures.*

TOPICAL AREAS DISCUSSED ON December 19, 1996:

- USEC assessment as to the cause and safety significance of moving UF₆ cylinder 161726 to the X-745 B Lot by straddle carrier which is a violation of OSR Part K, Section 2.3.6.
- USEC was to describe any information that would help DOE determine the safety status of UF₆ cylinder handling operations at the Portsmouth facility.

ENFORCEMENT/MANAGEMENT CONFERENCE BACKGROUND

ROA Enforcement and Management Conferences Conducted as a Result of Degraded PORTS Activities (July 1, 1993 through March 2, 1997)

RESULT OF CONFERENCE:

DOE issued a letter dated December 19, 1996 (EA-70-7002/96-003) that provided DOE's interim approval to allow resumption of UF₆ cylinder movement for USEC operations by means other than the OSR specified use of rail car to the overhead crane area and by overhead crane to the cooldown area. The interim approval, which was effective immediately and was to remain in effect until 4:00 p.m. (EST) on January 9, 1997, contained the following requirements:

- PORTS procedure XP4-TE-TE2320TMP, will be applicable to any and all cylinders containing UF₆ material that requires solidification prior to movement.
- PORTS procedure XP4-TE-TE2320TMP, will be revised to require that the sign off by mobile equipment operator and the management representative, indicating a cylinder is ready for movement, must be performed "face to face" at the cylinder's location.
- The UF₆ cylinder handling oversight team established in Dale Allen's Memorandum dated December 18, 1996 (Document No. POEF-001-96-388), will remain in effect during this period of interim approval and will be dedicated to this effort.

This approval was later extended to 4:00 p.m. (EST) on February 14, 1997 in accordance with the provisions of DOE Letter EA-70-7002/97-0004, and then to 4:00 p.m. (EST) on February 21, 1997 in accordance with EA-70-7002/97-0005.

DOE TO NRC TRANSITION STATUS:

No NRC action required. All subsequent PORTS liquid UF₆ handling operations are to be in accordance with its TSRs/OSRs. See also DOE Enforcement Conference No. 3, detailed earlier in this Section of this report.

OPEN PORTS DOE COMPLIANCE PLAN OF ACTION ITEMS

DOE Compliance Plan (Rev. 4) Plan of Actions (POA) that Remain Open and Require NRC Closure
(Based on DOE CPI Verifications Completed as of February 14, 1997)

Compliance Plan Subject	Issue No.	Status	Total POAs	No. Closed	Specific Corrective Actions Remaining Open
Transition from DOE Regulation to NRC Regulation	1	Open	3	0	X01.01, X01.02, X01.03
Update the Application Safety Analysis Report	2	Open	11	1	X02.02, X02.03a, X02.03b, X02.03c, X02.04, X02.05a, X02.05b, X02.05c, X02.05d, X02.06
Autoclave Upgrades	3	Open	17	2	X03.01a, X03.01b, X03.01c, X03.02a, X03.02b, X03.02c, X03.03, X03.04, X03.05, X03.06, X03.07, X03.08, X03.09, X03.11, X03.12
X-705 Evaporator Heat Exchanger Modifications	4	Closed	2	2	
X-705 Isolation Valve Testing	5	Closed	1	1	
X-705 Microfiltration Influent pH Shutdown System Replacement	6	Closed	3	3	
HEPA Filter Systems Testing	7	Open	2	0	X07.01a, X07.01b
Nuclear Criticality Safety Approval Documents	8	Open	3	0	X08.01, X08.02, X08.03
Nuclear Criticality Safety Approval Implementation	9	Open	7	0	X09.01a, X09.01b, X09.01c, X09.02, X09.03, X09.04, X09.05
Nuclear Criticality Safety Training for Managers	10	Closed	2	2	
Exceptions for Criticality Accident Alarm System	11	Open	2	0	X11.01, X11.02
Radiation Protection Procedures	12	Closed	2	2	
Posting of Radioactive Materials	13	Open	3	2	X13.03
NVLAP Certification	14	Closed	1	1	
Fire Protection Compensatory Measures	15	Closed	1	1	
Fire Protection Sprinkler Testing	16	Closed	1	1	
Fire Protection Procedures and Hot Work Permit Program	17	Open	3	0	X17.01a, X17.01b, X17.01c
Emergency Packets	18	Open	2	1	X18.02
Packaging and Transportation	19	Open	1	0	X19.01

OPEN PORTS DOE COMPLIANCE PLAN OF ACTION ITEMS

DOE Compliance Plan (Rev. 4) Plan of Actions (POA) that Remain Open and Require NRC Closure
(Based on DOE CPI Verifications Completed as of February 14, 1997)

Compliance Plan Subject	Issue No.	Status	Total POAs	No. Closed	Specific Corrective Actions Remaining Open
DOE Chemical Safety and Third-Party Use of Hazardous Chemicals	20	Closed	4	4	
Management Controls	21	Open	3	0	X21.01a, X21.02a, X21.02b
Safety Committees	22	Closed	1	1	
Plant Changes and Configuration Management	23	Open	15	5	X23.01a, X23.01b, X23.01c, X23.01d, X23.02b, X23.02c, X23.04c, X23.05a, X23.05b, X23.06
Maintenance Program	24	Open	22	3	X24.01, X24.03a, X24.03b, X24.03c, X24.04a, X24.04b, X24.04c, X24.05a, X24.05b, X24.05c, X24.06c, X24.07, X24.08a, X24.08b, X24.08c, X24.09a, X24.09b, X24.09c, X24.10
Operations Program	25	Open	3	0	X25.01, X25.02, X25.03
Systems Approach to Training	26	Open	5	1	X26.01, X26.03, X26.04, X26.05
Assessments	27	Closed	1	1	
Event Investigations and Reporting Program	28	Open	3	2	X28.01c
Records Management and Document Control Program	29	Open	16	9	X29.01a.4, X29.01b, X29.01c, X29.0d.2, X29.02a.4, X29.02a.5, X29.02b
Procedures Program	30	Open	12	3	X30.08, X30.09a, X30.09b, X30.09c, X30.09d, X30.10, X30.11, X30.12, X30.13
Q List	31	Deleted			
Quality Assurance Program Implementation	32	Open	4	2	X32.02b, X32.02c
Emergency Plan Support Documents	33	Closed	1	1	
Training for Emergency Preparedness	34	Open	3	2	X34.01b
Quality Control Program for Low-Level Waste Disposal	35	Closed	1	1	
Depleted Uranium Management Plan	36	Closed	2	2	
Administrative Controls on Overtime	37	Open	4	3	X37.02a
Decommissioning Funding Program	38	Open	1	0	X38.01

OPEN PORTS DOE COMPLIANCE PLAN OF ACTION ITEMS

DOE Compliance Plan (Rev. 4) Plan of Actions (POA) that Remain Open and Require NRC Closure
(Based on DOE CPI Verifications Completed as of February 14, 1997)

Compliance Plan Subject	Issue No.	Status	Total POAs	No. Closed	Specific Corrective Actions Remaining Open
Chemical Safety Mechanical Integrity Program	39	Open	1	0	X39.01
Operational/Safety System Trip Redundancy	40	Closed	1	1	
Codes and Standards	41	Closed	1	1	
UF6 Leak Detector Sensitivity Testing	42	Open	1	0	X42.01
10 CFR 21 Implementing Procedures	43	Deleted	*****	*****	
Criticality Accident Alarms for Nearby Buildings	44	Open	2	0	X44.01a, X44.01b
Materials Control and Accountability Manuals and Procedures	A.1	Open	24	13	XA1.02, XA1.06, XA1.07, XA1.08, XA1.09, XA1.10, XA1.11, XA1.14, XA1.19, XA1.20, XA1.22
Receipts Based on Measured Values	A.2	Open	3	1	XA2.02, XA2.03
NMC&A Independent Assessments	A.3	Deleted	*****	*****	
Possession of Uranium Enriched to Greater Than 10% U-235	A.4	Open	20	12	XA4.01, XA4.10, XA4.14, XA4.16, XA4.17, XA4.18, XA4.19, XA4.20
DOE Materials Stored in Leased Space	A.5	Open	2	1	XA5.01
TOTALS			223	88	

OPEN PORTS DOE FSAR/SER ITEMS - LEASED SPACES

DOE Safety Evaluation Report (SER) Findings that are Open
[Issues that Require Resolution Prior to the next Annual DOE Safety Analysis Report (SAR) Update]

FSAR Chapter	DOE Comment No.	Description	Corrective Action Required	Resolution Dated	Status
3	X-3-EA-1	Potential for EG's to be exceeded	Commit to revise SAR	ASAP	
3	X-3-EA-3	Lack of chemical EG'S	Commit to revise SAR	ASAP	
3	X-3-EA-12	Key reference documents, e.g., PSOs, are not issued	Commit to revise SAR	ASAP	
3	X-3-EA-13	Dispersion models not empirically validated	Commit to revise SAR	ASAP	
	X-3-EA-14	Inadequate justification of EBE for natural phenomena			
3	X-3-EA-36 X-3-EA-54	Large fire event analysis discrepancies	Commit to revise SAR	ASAP	
3	X-3-EA-47 X-3-EA-52 X-3-EA-53	Cylinder or pigtail failure outside autoclave exceeds EG'S	Commit to revise SAR	ASAP	
3	X-3-EA-60	Hazardous chemical releases exceed ERPG-2 guidelines	Commit to revise SAR	ASAP	
3	X-3-EA-66 X-3-EA-67	EG's could be exceeded during earthquake event	Commit to revise SAR	ASAP	
3	X-3-EA-70	Controls for criticality accidents not identified	Commit to revise SAR	ASAP	
4	X-4-EA-27	Hand switches for remote feed isolation system do not exist at the building exits as assumed in the analysis	Obtain DOE commitment to install these switches	Per Compliance Plan	
	X-4-EA-29	The remote transfer isolation system does meet functional requirements	Obtain DOE commitment to modify this system		
6	X-6-EA-1	Criticality analysis is not complete	Commit to revise SAR	ASAP	
6	X-6-EA-11	Criticality-related TSRs are not identified	Commit to revise SAR	ASAP	
6	X-6-EA-15	Three operations do not meet double contingency	Commit to revise SAR	ASAP	

OPEN PORTS DOE FSAR/SER ITEMS - LEASED SPACES

DOE Safety Evaluation Report (SER) Findings that are Open
[Issues that Require Resolution Prior to the next Annual DOE Safety Analysis Report (SAR) Update]

FSAR Chapter	DOE Comment No.	Description	Corrective Action Required	Resolution Dated	Status
10	X-10-EA-1 X-10-EA-2 X-10-EA-3 X-10-EA-7 X-10-EA-33	Inadequate description of key features for initial testing program	Commit to revise SAR	ASAP	
10	X-10-EA-1 X-10-EA-2 X-10-EA-3 X-10-EA-13 X-10-EA-21 X-10-EA-34 X-10-EA-36	Inadequate description of key features for in-service surveillance program	Commit to revise SAR	ASAP	
10	X-10-EA-1 through X-10-EA-38	Inadequate description of key features for planned, preventive, and corrective maintenance programs	Commit to revise SAR	ASAP	
11	X-11-EA-17	Specific DOE exemption from permitted evacuation times should be referenced	Commit to revise SAR	ASAP	
12	X-12-EB-4	Feedback methodology not described for the procedures program	Commit to revise SAR	ASAP	
14	X-14-EB-3	Categorization of SCCs into Q, AQ, or NS QA categories not described	Commit to revise SAR	ASAP	
15	X-15-EB-22	No description of population evacuation times and routes	Commit to revise SAR	ASAP	

PENDING USEC/DOE PORTS TRANSITION ISSUES

DOE/USEC Shared Site Issues Requiring Formal Mechanisms for Interface and Control (Issues Remaining Unresolved)

Transition Topic	USEC/DOE Agreement	Planned Actions	Completion Status
Transition from OSRs to TSRs	<p>USEC/LMUS is converting OSRs into TSRs and will implement them in a phased manner prior to NRC assuming regulatory oversight at PGDP. DOE will evaluate and approve the TSR transition requests as they are received. Transition Requirements (TRS) may be added to modify the TSRs to keep the TSRs in compliance with the previous provisions of the OSRS. TRS are interim requirements and will be deleted after NRC assumes regulatory oversight at PGDP. The DOE SSRs will continue to provide DOE regulatory oversight of the OSRs/TSRs to USEC until March 3, 1997.</p> <p>For DOE Operations, DOE is required to revise/upgrade its existing OSRs or create TSRs to be consistent with 10 CFR 830.320. Procedures will have to be revised accordingly.</p>	<p>The following TSR issuances are contingent upon USEC resolving DOE review comments, and submitting packages of adequate detail and justification.</p> <ul style="list-style-type: none"> • Decontamination Facility (X-705) • Feed and Product Withdrawal (X-342, X-343, and X-344) • Cascade Operations (X-326, X-330, X-333) <ul style="list-style-type: none"> - ERP, LAW and Tails Withdrawal - X-330 and X-333 Cold Recovery - X-326, X-330, and X-333 Cascade 	<p>The following actions have been completed:</p> <ul style="list-style-type: none"> • 08/06/96 (Implemented) • 11/07/96 (Implemented) • DOE Approved 02/03/97 • DOE Approved 02/11/97 • Scheduled for Approval 02/14/97
FSAR Upgrade	<p>DOE will provide a detailed review of the new PGDP Safety Analysis Report (SAR) being prepared to replace the previously issued 1985 Final Safety Analysis Report (FSAR), as amended. DOE will review the new SAR to ensure it complies with DOE requirements for both the leased and non-leased portions of the facility. The review will be documented in a DOE Safety Evaluation Report (SER).</p> <p>DOE budgetary requirements remain open.</p>	<ul style="list-style-type: none"> • SAR • SER • SAR Submittal to USEC 	<ul style="list-style-type: none"> • LMES submitted upgraded SAR to DOE on 01/14/97. • SER issued on 02/03/97 as DOE/OR/02-1560/V1. Open Lease items can be found in Attachment M. • SAR submitted to USEC on 02/14/97.

PENDING USEC/DOE PORTS TRANSITION ISSUES

DOE/USEC Shared Site Issues Requiring Formal Mechanisms for Interface and Control (Issues Remaining Unresolved)

Transition Topic	USEC/DOE Agreement	Planned Actions	Completion Status
Usage of Common Areas	<p>The Lease Agreement between USEC and DOE establishes the leased and non-leased areas. Section 3.1 of the Agreement defines the lease of real property for each plant. Included with the leased areas are areas where both USEC and DOE activities are performed, and are known as "common areas."</p> <p>The Lease Agreement establishes that USEC's occupation and use shall include the use of easements, rights of way, appurtenances, utility lines, corridors, common walls, pipes, parking areas, service roads, railway lines, loading facilities, sidewalks, and avenues of ingress, egress, and access points. Similarly, DOE has access to the leased premises and the common areas. Additional clarification was necessary to ensure that there is no confusion regarding the appropriate regulation of work activities performed in the common areas.</p>	USEC and DOE are to negotiate the methodology for documenting the agreement reached.	Methodology to be identified by 03/03/97.
IAEA Agreement	DOE and USEC will cooperate with the NRC in the development, review, and revision of Subsidiary Agreements and Facility Attachments for DOE and USEC activities at Paducah which are applicable to the safeguards requirements of the International Atomic Energy Agency (IAEA).	DOE Headquarters is handling this matter. Ongoing meetings and discussions concerning IAEA are being held. DOE/ORO Security and Safeguards personnel are monitoring these meetings.	Ongoing
UCNI	DOE is developing guidelines with consultation and technical support from USEC for the identification of Unclassified Controlled Nuclear Information (UCNI) at Paducah. The guidelines developed from these meetings will be provided to the NRC.	DOE Headquarters is handling this matter. A policy is being formulated in the ongoing meetings and discussions. DOE/ORO Security and Safeguards personnel are monitoring these meetings.	Ongoing

PENDING USEC/DOE PORTS TRANSITION ISSUES

DOE/USEC Shared Site Issues Requiring Formal Mechanisms for Interface and Control (Issues Remaining Unresolved)

Transition Topic	USEC/DOE Agreement	Planned Actions	Completion Status
Liaison Activities with NRC	<p>Part of this activity was created as a result of the concurrent SAR evaluations being performed by both DOE and NRC. DOE of the LMES prepared Upgrade SAR (to DOE's 1985 FSAR, as amended), and NRC of the USEC submitted Application SAR. Communication must be established to ensure DOE's and NRC's conclusions regarding the adequacy of the final combined PGDP SAR are comparable.</p> <p>Additionally, the NRC Resident Inspectors and NRC Headquarters personnel responsible for the GDPs will need a contact point and resource regarding the DOE Regulatory Oversight activities which have taken place over the past three years.</p>	<p>SAR activities</p> <p>Contact resources</p>	<p>Completed 12/31/96</p> <p>Ongoing</p>
DOE Budget Liabilities	As the scopes and schedules for the interface topics are finalized, DOE budget liabilities will be identified. DOE cost reports are routinely reported to DOE upper management.	<p>Provide periodic cost validation reports to upper DOE Management:</p> <ul style="list-style-type: none"> • Monthly Progress Reports • Quarterly Summary Reports 	<p>Examples of the identified periodic cost reports, include:</p> <ul style="list-style-type: none"> • EF/M-20, <i>Cost Validation Progress Report</i>, dated 01/09/97 (e.g., Monthly Report). • EF/S-20, <i>Validation of Nuclear Safety Upgrade Costs Summary</i>, dated 01/15/97 (e.g., Quarterly Report).

PENDING USEC/DOE PORTS TRANSITION ISSUES

DOE/USEC Shared Site Issues Requiring Formal Mechanisms for Interface and Control (Issues Remaining Unresolved)

Transition Topic	USEC/DOE Agreement	Planned Actions	Completion Status
Storage of DOE Material in Leased Spaces	DOE and USEC have established an agreement to accommodate the storage of DOE materials in the cascade buildings at Paducah. The original plan was to leave the material in the leased spaces as provided in the Lease Agreement. Due to NRC concern over inventory and characterization issues, NRC has directed DOE that the material cannot be stored in the leased spaces. DOE/USEC established an agreement that defined the responsibilities and controls necessary to allow the material to remain in place, but in formerly leased areas and under DOE control.	Formalize DOE/USEC Agreement via the following actions: <ul style="list-style-type: none"> • Formalize DOE/USEC agreement. • Revise Exhibit A of the Lease Agreement • Issue implementing procedures. • Demarcate new DOE areas within the leased spaces. • Identify areas as DOE Material Storage Areas (DMSA). 	<p>The DOE/USEC agreement for the storage of DOE materials in formerly leased areas was signed on May 28, 1996.</p> <p>The change package to Exhibit A of the lease has been approved by DOE and USEC.</p> <p>LMUS issued UE2-EW-WM1030 on 11/30/96.</p> <p>LMUS demarcated the location and boundaries of DOE storage areas and returned the areas to DOE on 12/30/96.</p> <p>LMES is to issue a DOE Stored Material procedure by 03/01/97.</p> <p>LMUS is to complete DMSA activities as defined in the Lease Change Package by 03/03/97.</p>
Unresolved GDP Administrative Control Issues	<p>Negotiations are continuing between DOE and USEC involving the following issues:</p> <ul style="list-style-type: none"> • Safety Analysis Report Ownership and Maintenance • Configuration Management Ownership and Maintenance • DOE-Owned Privacy Records Storage, Control, and Access • Quality Assurance Plan Interface Requirements • Problem Reporting System Interface Requirements • Commitment Tracking/Corrective Action Interface Requirements • Dual Standards Exception Requests • Scheduling of Joint Activities for Emergency Management • USQD Program Endorsement and Requirements • Records Retention and Shared Reports • Document Control Interface Requirements 	All items are currently under review	<p>Submittal of the plan for completion of the Dual Standards issue was submitted to DOE on 01/31/97.</p> <p>All other items under review.</p>

OPEN PORTS DOE INSPECTION ITEMS

ROA Inspection Items that Remain Open and Cannot be Linked to Compliance Plan Issues
(Inspection Reports Issued Up to and Including 70-7001/97-03)

ROA Inspection Item	Type	Inspection Report(s) that Discusses the Item	ROA Inspection Item Subject	Reason Item Remains Open
94-13-07	NOV	94-13, 95-01, 97-03	<p>Failure of the lessee to establish the necessary QA controls for document control and records management. Four general areas were cited that demonstrated the extent of the problem:</p> <ul style="list-style-type: none"> - Procedure Development Forms (PDFs) were not found maintained with the original procedures that were issued for use. - Distribution of approved Engineering Drawings were not controlled not of the correct revision. - Distribution of the Engineering Specifications used for procurement and receipt inspection of safety system components, was not controlled. - POEF-2065, <i>Portsmouth Records Manual</i>, did not contain a complete and current listing of all quality-related records identified as such by the current plant procedures. 	<p>Although a DOE Compliance Plan Issue has been written on this item (DOE CPI No. 29, "Records Management and Document Control Program"), the inspectors considered the lessee's identified root cause for the violation was not fully addressed by the CPI or in corrective actions taken by the lessee. The lessee stated the root cause for the violation was, ... <i>poor programmatic definition and insufficient detail in the controlling procedures for records management and document control</i>. Inspector review of the revised Records Management (UE2-TO-RM1031) and Document Control (UE2-HR-RM1031) procedures did not identify specifics on the control of software records and documents. Therefore, the inspectors considered the item still open.</p>
95-18-03	NOV	95-18, 96-03, 97-03	<p>Failure of the lessee to identify quality problem failures to determine cause, implement recurrence controls, determine the extent of problem, or assure appropriate corrective actions were implemented.</p>	<p>Based upon the historical nature of the lessee's inability to fully identify and correct the full scope of its problems, even after two DOE Enforcement Conferences and one Management Conference, this item remains open until the lessee can determine if its new corrective action process established in August 1996, is working or not.</p>
95-18-06	NOV	95-18, 97-03	<p>Failure of the lessee to properly issue, use, and revise procedures to prescribe processes, specify requirements, and establish designs for items that can impact public health and safety.</p>	<p>Basis to be issued in DOE Inspection Report 70-7002/97-03.</p>
96-07-01	NOD	96-07, 97-03	<p>Failure of the lessee to revise its procedure UE2-TO-CF1032, <i>Configuration Management Program</i>, to define its "At-Risk" process for modifications.</p>	<p>The lessee was not required to respond to DOE before regulatory oversight for the GDPs was assumed by NRC.</p>
96-08-01	NOV	96-08, 97-03	<p>Failure of the lessee to follow procedures important to nuclear safety. Five (5) examples were cited, of which 3 examples involved the handling of cylinders containing UF₆ while in a liquid state. The remaining two examples involved inadequate reviews by the plant Operations Review Committee (PORC).</p>	<p>Lessee corrective actions will not be completed until 3/31/97. Corrective action follow-up verification was accomplished on the resolution of example 1, which was closed. Examples 2, 3, 4, and 5 remain open.</p>

OPEN PORTS DOE INSPECTION ITEMS

ROA Inspection Items that Remain Open and Cannot be Linked to Compliance Plan Issues (Inspection Reports Issued Up to and Including 70-7001/97-03)

ROA Inspection Item	Type	Inspection Report(s) that Discusses the Item	ROA Inspection Item Subject	Reason Item Remains Open
96-08-02	NCV	96-08, 97-03	Failure of the lessee failed to identify contamination present on the completed Radiological Work Permit (RWP) paperwork prior to its being stored in an area that did not have radiological controls in place.	Lessee corrective actions will not be completed until 3/14/97. No corrective action verifications were performed on the lessee's response.
96-08-03	NOV	96-08, 97-03	Failure of the lessee to evaluate the impact on traffic flow while the repair of a valve was taking place at 20 th Street and Pike Avenue.	Lessee corrective actions will not be completed until 4/30/97. Eight (8) out of 16 corrective actions were verified for closure. Eight (8) remain open. These include corrective actions: 1, 2, 3, 6, 7, 8, 10, and 11.
96-08-04	NCV	96-08, 97-03	Failure of the lessee to maintain PORC-approved documents (POEF-831-96-1274, X-745B Cylinder Cooling Railcar, and calculation EN-X-SA-96-001, X-745B Cylinder Cooling Railcar Impact).	<p>The lessee denied this violation occurred as stated. The lessee believed the document retention was the responsibility of the line organization, on an as-required basis, by the specific procedure controlling the generation of that document type. In addition, the lessee stated the documents had been re-approved by the PORC and received the General Manager's (GM) approval.</p> <p>The inspectors did not agree with the lessee's response and noted that PORC did not re-review these documents. Instead, the PORC Chairman resigned the documents because the originals were believed lost. Therefore, the basis for denial was rejected.</p>
96-08-05	NOD	96-08, 97-03	Failure of the lessee to revise procedures and train the appropriate personnel on dispositioning "as-found" conditions by September 30, 1996 as previously committed to DOE as a May 9, 1996 Management Conference response.	<p>The lessee denied this violation occurred as stated. The lessee's basis for this denial was that by issuing a Memorandum (POEF-820-96-016) on the same subject, had the same authority until the procedure could be issued.</p> <p>The inspectors considered the denial insufficient to withdraw the item. Further, the use of memoranda to direct work has been a cited violation that has occurred several times in the past (see also 70-7002/96-10-01).</p>
96-09-01	NOV	96-09, 97-03	Failure of the lessee to minimize the amount of radioactive waste oil containing greater than 50 ppm Polychlorinated Biphenyl (PCB) compounds (PCB/R).	Lessee corrective actions will not be completed until 06/30/97. No corrective action verifications were performed other than to evaluate current PCB/R trends which indicates, empirically, that the corrective action steps taken to date have been effective.
96-11-01	NOV	96-11, 97-03	Failure of the lessee to follow procedures in the handling of liquid UF ₆ cylinders.	Lessee corrective actions will not be completed until 04/25/97.
96-11-02	NOV	96-11, 97-03	Failure of the lessee to comply with the 5 day cooldown period required by the OSRs before a cylinder containing liquid UF ₆ can be moved.	Lessee corrective actions will not be completed until 4/14/97. Twelve (12) out of 14 corrective actions were verified for closure. Two (2) remain open: corrective actions 8 and 14.

PORTS DOE INSPECTION ITEM CLOSURES BASED ON DOE CPIs

ROA Inspection Items that were Closed Via Linkage to Compliance Plan Issues (CPI)
(Inspection Reports Issued Up to and Including 70-7001/97-03)

DOE Inspection Item	Type	Related DOE CPI	Closure Report	ROA Inspection Item Subject	CPI Linkage Basis
QVI.4B	IFI	30	97-03	Failure of the lessee management to ensure the correct field use of procedures is occurring.	USEC has initiated several programs in an attempt to make its plant personnel more aware of the need to follow procedures. Until the Procedures Upgrade effort is completed, those procedures required to be used "in hand" or which require technical revision will remain inadequate. Further follow-up on this item was transferred to DOE CPI No. 30, "Procedures Program," to avoid redundant inspection and reporting.
QVI.7B	IFI	26	97-03	Failure of management to institute a formal maintenance training program.	Training Department Administrative Guidelines (TDAG) have been issued to support the maintenance training efforts in the areas of Instrumentation and Control, Electrical, and Mechanical Maintenance. However, changes are still planned to these programs. Further follow-up on this item was transferred to DOE CPI No. 26, "Systems Approach to Training," to avoid redundant inspection and reporting.
QVI.11	IFI	21, 23	97-03	Failure of management to provide sufficient attention to potential purchase, stocking, installation, and/or use of counterfeit or misrepresented parts in safety-grade and/or other systems at PORTS.	USEC management has instituted a 10 CFR Part 21 program which requires regulated entities who purchase safety system components as commercial grade items to appropriate dedicate these items prior to their use. Since safety system and augmented safety system components are still being identified at the piece-part level, this item is being transferred to the closure of DOE CPI No. 21, "Management Controls," and DOE CPI No. 23, "Plant Changes and Configuration Management," to avoid redundant inspection and reporting.
QVI.12A	IFI	32	97-03	Failure of the lessee to take interim corrective action measures until the PORTS NQA-1 Program is put into place.	USEC management has committed to the NRC to put an NQA-1 Program in place at PORTS. Satisfactory implementation of this program under DOE CPI No. 32, "Quality Assurance Program Implementation," will satisfactorily resolve this issue. Therefore to avoid redundant inspection and reporting follow-up on this item, this item is being transferred to the closure of this DOE CPI.
QVI.15	IFI	24	97-03	Failure of management to establish a fully functional management control program that addresses applicable elements for maintenance work control.	USEC has established a nuclear safety upgrade project to develop and implement a computer-based maintenance management system which will not be completed until December 1997. Therefore to avoid redundant inspection and reporting follow-up on this item, this item is being transferred to the closure of DOE CPI No. "Maintenance Program."
94-13-02	NOV	23, 30	97-03	Failure of lessee to follow document control procedures. Six examples were cited that demonstrated the issue was programmatic, involving procedure adequacy, control and use, configuration control, and quality control.	Corrective actions identified by the lessee to resolve this violation involved, in part, to the Nuclear Safety Upgrade Projects for Configuration Management, and procedures. Since these corrective actions are similar in nature to the Plan of Action (POA) items prescribed to resolve these upgrades in accordance with DOE CPI No. 23, "Plant Changes and Configuration Management," and DOE CPI No. 30, "Procedures Program," further follow-up on this issue was transferred to these CPIs to avoid redundant inspection and reporting.

PORTS DOE INSPECTION ITEM CLOSURES BASED ON DOE CPIs

ROA Inspection Items that were Closed Via Linkage to Compliance Plan Issues (CPI)
(Inspection Reports Issued Up to and Including 70-7001/97-03)

DOE Inspection Item	Type	Related DOE CPI	Closure Report	ROA Inspection Item Subject	CPI Linkage Basis
94-13-05	IFI	32	97-01	Failure of the lessee to fully implement its Quality Assurance Program as defined in UEO-221, <i>Quality Program Plan for Uranium Enrichment</i> (UE-QPP). Although USEC took an exception to implementing the QAP due to a pre-existing condition with the ROA, an inspector follow-up was initiated to track USEC's progress in completing its implementation of the UE-QPP.	USEC abandoned the UE-QPP and opted to go with a new QAP which was added to its Application to the NRC. Flowdown of this document was committed in the application. Therefore, to avoid redundant inspection and reporting, this item was administratively linked to DOE CPI No. 32, "Quality Assurance Program Implementation."
94-14-05	NOV	24, 30	97-03	Failure of the lessee to identify "as found" during the performance of maintenance and surveillance activities, which could potentially involve an Unreviewed Safety Question.	USEC admitted to the violation, and committed, among other corrective actions, to upgrade their surveillance and maintenance procedures under the NSU Projects. USEC later connected the closure of this item to DOE CPI No. 24, "Maintenance Program," and DOE CPI No. 30, "Procedures Program." Therefore, further follow-up on these committed corrective actions was administratively transferred to these CPIs to avoid redundant inspection and reporting.
94-14-07	NOV	26	96-01	Failure of line management to define its training needs and to assure that training was completed and proficiency demonstrated.	USEC admitted to the violation, and committed, among other corrective actions, to upgrade its training program under the NSU Projects. USEC later connected the closure of this item to DOE CPI No. 26, "Systems Approach to Training." Therefore, to avoid redundant inspection and reporting, this item was administratively linked to this DOE CPI and closed.
94-16-10	NOV	8, 9	97-03	Failure of the operations to report to management process conditions that affected Nuclear Criticality Safety (NCS) controls, so that they could be documented and investigated promptly. Seven examples were cited.	USEC refuted several observations, but those it agreed with, committed to the issue by actions already covered in the NSU Projects. The inspectors considered they specifics of the corrective actions to be similar the POAs defined in DOE CPI No. 8, "NCSA Documents," and DOE CPI No. 9, "NCSA Implementation." This item was then administratively linked to the closure of these two DOE CPIs and closed in 97-03.
94-17-01	NCV	A.1	97-03	Failure of the lessee to review for adequacy, its NMC&A procedures within the 3-year period required by UEO-210, <i>Procedure Management Guidelines</i> .	USEC admitted to this violation and stated the root cause was the lack of a system to track procedures to ensure they are reviewed within their required review frequency. USEC stated it would identify all NMC&A required procedures by 02/28/95, develop a schedule by 06/01/95, and tied the completion to the Procedure NSU Project. The inspectors noted that the needed NMC&A procedures were identified in DOE CPI No. A.1, "Materials Control and Accountability Manuals and Procedures." Therefore, to avoid redundant inspection and reporting, the inspectors administratively linked the closure of 94-17-01 to this DOE CPI and closed it in 97-03.
95-03-03	URI	19	96-06	Failure of lessee to inspect its cranes and lifting devices used for handling cylinders containing liquid UF ₆ .	The inspectors identified that the resolution of this problem can be found with DOE CPI No. 19, "Packaging and Transportation." As a result, the 95-03-03 was administratively linked to the closure of this DOE CPI and closed in 96-06.

PORTS DOE INSPECTION ITEM CLOSURES BASED ON DOE CPIs

ROA Inspection Items that were Closed Via Linkage to Compliance Plan Issues (CPI)
(Inspection Reports Issued Up to and Including 70-7001/97-03)

DOE Inspection Item	Type	Related DOE CPI	Closure Report	ROA Inspection Item Subject	CPI Linkage Basis
95-10-01	NCV	24	96-07	Failure of lessee to document its acceptance test results for two gages on form UE-502 as part of its Instrument Calibration Program.	Part of the lessee's identified corrective action was the completion of DOE CPI No. 24, "Maintenance Program." Therefore, to avoid redundant inspection and reporting, this item was administratively linked to DOE CPI No. 27 and closed.
94-18-08	NOV	17	96-06	Failure of the lessee to demonstrate a strong management commitment to the Fire Protection Program. Eight (8) examples were given that demonstrated this deficiency.	Part of the lessee's identified corrective action was the completion of DOE CPI No. 17, "Fire Protection Procedures and Hot Work Program." Therefore, to avoid redundant inspection and reporting, this item was administratively linked to DOE CPI No. 17 and closed.
TI-3.2/ Commit #4B	IFI	30	95-18	As part of the April 28, 1994 DOE Enforcement Conference, the lessee committed to incorporate the lessons learned from its procedure sweep teams into the NSU Project involving procedures upgrades.	Originally the Procedures Upgrade Program was scheduled to be completed in June 1996. Since then, the schedule for this effort has slipped until late 1997. To complete the verification of this action, this item's closure was transferred to DOE CPI No. 30, "Procedures Program."
TI-3.2/ Commit #6	IFI	30	95-18	As part of the April 28, 1994 DOE Enforcement Conference, the lessee committed to allocate \$14.5M to accelerate the schedule to complete the upgrade of nearly 1700 procedures.	Originally the Procedures Upgrade Program was scheduled to be completed in June 1996. Since then, the schedule for this effort has slipped until late 1997. To complete the verification of this action, this item's closure was transferred to DOE CPI No. 30, "Procedures Program."
EA-96-01/ Commit 2.1.2	IFI	30	97-03	As part of the May 9, 1996 DOE Management Conference, the lessee committed to complete its upgrade of site procedures in accordance with the schedule contained in the DOE Compliance Plan.	Since the completion of the Procedures Upgrade Program is currently not scheduled to conclude until late 1997, the closure verification for this action was transferred to DOE CPI No. 30, "Procedures Program."
EA-96-01/ Commit 2.1.3	IFI	21	97-03	As part of the May 9, 1996 DOE Management Conference, the lessee committed to flow down the organizational roles and responsibilities provided in Section 6.1 of its Application to the NRC for a CoC to committed position descriptions the lessee intends to maintain. Further, the lessee committed to review and revise these position descriptions, if necessary, at the conclusion of the procedures upgrade effort as specified in the DOE Compliance Plan.	The lessee's commitment to flowdown the organizational roles and responsibilities defined in Section 6.1 of its Application to the NRC is contained in DOE CPI No. 21, "Management Controls," as POA No. 2.

OPEN JCOs THAT HAVE MODIFIED PLANT OPERATIONAL PRACTICES

PORTS Potential USQ List and Associated JCOs (JCOs Open as of February 28, 1997)

Potential USQ Condition Description	Effective Date/ Compensatory Actions Taken	Status
X-326 Uranium Enrichment and Purge Cascades - OSR Part B/NCSA Requirement Discrepancies	<p>JCO Effective Date: 05/28/96. This JCO will stay in effect until transition to the TSRs.</p> <p>Required Compensatory Measures: Continued operations justified based on compliance with approved NCSA/E requirements.</p>	This concern was mapped with the OSR to NCSAs and procedures. Therefore, this JCO will terminate upon transition.
Cascade Coolant System High Pressure Relief System	<p>JCO Effective Date: 05/20/94. This JCO will stay in effect until transition to the TSRs.</p> <p>Required Compensatory Measures: There are no compensatory actions required for this JCO. However, LAW rupture discs cannot be replaced with rupture setpoints greater than allowed by ASME Code.</p>	The requirements to resolve this JCO are contained in the NRC TSR. USEC letter to DOE dated 02/26/96 documented this concern would go away upon transition to the NRC TSRs
Criticality Accident Alarm System	<p>JCO Effective Date: 04/18/96 (Addendum 05/17/96). This JCO will stay in effect until implementation of a long term corrective action plan.</p> <p>Required Compensatory Measures: Building postings and continuous radio monitoring for entry of unslaved buildings, as appropriate, based on the distance from clustered facilities and the audibility of the alarm horns or plant Public Address System, as per the JCO.</p>	<ol style="list-style-type: none"> DOE CPI No. 44 "Criticality Alarms for Nearby Buildings," addresses this concern. DOE CPIs are not suppose to be written against the TSR. DOE CPI No. 44 was written against SAR Section 5.2. NRC CER addresses both the TSR and Section 5.2, and concludes the NCS Program is acceptable. USEC is now in the process of writing a letter to obtain clarification that DOE CPI No. 44, JCO will cover PORTS until this issue is resolved. On 02/14/97, USEC submitted a letter to NRC to present its understanding related to certain requirements imposed by the TSRs and the DOE Compliance Plan (CP) for the CAAS. This letter requested NRC's concurrence with USEC's understanding of the provision of the CP and TSR.
Flourine Generation System	<p>JCO Effective Date: 01/19/96. This JCO will stay in effect until transition.</p> <p>Required Compensatory Measures: (1) Lockout/Tagout controls are restricting mobile equipment access to the facility; (2) Maintenance work restrictions while the flourine generation system is in operation; and (3) No modifications shall be made in the cell/trap room flourine supply or to the physical layout of the room allowing mobile equipment to the south wall without DOE approval (DOE Letter dated July 19, 1996)</p>	<ol style="list-style-type: none"> USQD (POEF-831-96-1020, Rev. 1) was sent to DOE on 06/18/96 identifying the FSAR changes. DOE Letter dated 07/19/96 approved the changes identified in the USQD identified in item 1. A RAC was started to make changes to the Application/SAR. The RAC is expected to be ready for signatures on 02/26/97. The SME has the draft RAC and a PCR must be completed. The existing USQD can be used with the PCR.

OPEN JCOs THAT HAVE MODIFIED PLANT OPERATIONAL PRACTICES

PORTS Potential USQ List and Associated JCOs (JCOs Open as of February 28, 1997)

Potential USQ Condition Description	Effective Date/ Compensatory Actions Taken	Status
Cell Treatment and Freon Coolant System Pressures	<p>JCO Effective Date: 01/15/96. This JCO will stay in effect from 1700 hours until 02/21/97 at 1700 hours.</p> <p>Required Compensatory Measures: The JCO was for cell treatment and freon coolant system pressures, as specified in POEF-831-96-1260, Rev. 1, will remain valid. DOE has extended approval, which was granted on 10/08/96 to continue to operate under this JCO until 02/21/97 at 1700 hours.</p>	<ol style="list-style-type: none"> 1. Safety documentation was sent to DOE for review and approval. 2. DOE's response stated that documentation must be sent to NRC for review and approval before they would approve the changes. 3. The 10 CFR 76.68 evaluation performed on the change stated a USQD does not exist, therefore, per 76.68, NRC's approval is not required. 4. To resolve this issue, a conference call was held 02/11/97 with the NRC, USEC/HQ, and PORTS to determine if a certification amendment request would be needed. The meeting concluded that as a minimum, the SAR and the TSR Bases statement would need to be revised, but NRC would need to go back and determine if the LCO would require revision. 5. NRC subsequently agreed that the only changes that were needed was a change to the TSR Bases and SAR. A RAC and PCR are being prepared and it appears that the USQD prepared for the other cell treatment changes will cover the additional changes. 6. On 02/20/97, DOE requested that FSAR changes be submitted for their review and approval. DOE is to issue a letter granting an extension of the JCO until 03/03/97. USEC will submit the FSAR change to DOE. USEC/HQ has approved the RAC and the change package is scheduled for PORC on 02/21/97.

DOE Regulatory Oversight Program

Functional Matrix Organization Structure

Figure 1

PORTS REGULATORY OVERSIGHT PROGRAM - MAP (Milestones, Activities, and Personnel)

Figure 2

TIMELINE OF DOE ROA INSPECTIONS CONDUCTED

(Inspection Types Conducted During SSR Inspection Period)

Figure 3

Special
 Functional
 SSR
 DOE/HQ
 Walkthroughs

TIMELINE OF DOE INSPECTION REPORTS ISSUED

(Inspection Reports Issued During SSR Inspection Period)

Figure 4

CUMULATIVE PROFILE OF DOE INSPECTION FINDINGS ISSUED (Inspection Findings Issued During SSR Inspection Period)

Figure 5A

—+— Net Open - - - Cumulative Open ··· Cumulative Closed

Figure 5B

□ Net Open ▨ Cumulative Open ▤ Cumulative Closed

DIFFERENTIAL PROFILE OF DOE INSPECTION FINDINGS ISSUED (Inspection Findings Issued During SSR Inspection Period)

Figure 6A

— Net Open No. Open No. Closed

Figure 6B

No. Open No. Closed

TIMELINE OF DOE INSPECTION FINDINGS BY FINDING TYPE

(Inspection Findings Issued During SSR Inspection Period)

Figure 7

Inspector Followup Items Unresolved Items Non-Cited Violations
Deviations Violations

CLOSURE PLAN FOR WORKOFF OF OPEN DOE INSPECTION ITEMS

Figure 8A

— Planned [Total Open Items Beginning 12/1/95 - Projected SSR Inspection Effort (Closures - New Items)]
 - - - Realized [Total Open Items at Beginning of Each SSR Inspection Period - Issued Report Identified Items (Closures - New Items)]

SSR Inspection Report Period No.	SSR Inspection Period Date	Reports Issued	Issued Open Items at Start of Period	Planned (Beginning 12/1/95)			Realized (Actual)			Issued Accum Open	Issued Accum Closed
				Open	Closed	Net Change	New	Closed	Net Change		
96-01	12/01/95 - 01/15/96	95-09	121*	2	12	111	2	12	111	212	101
96-02	01/16/96 - 02/29/96	95-17, 95-18	111	8	33	86	8	33	86	220	134
96-03	03/01/96 - 04/15/96	95-10, 96-01	86	3	30	59	3	28	61	223	162
96-04	04/16/96 - 05/31/96	96-02, 96-09	61	0	16	43	1	7	55	224	169
96-05	06/01/96 - 07/15/96		55	0	6	37	0	0	55	224	169
96-06	07/16/96 - 08/31/96	96-03	55	0	8	29	1	5	51	225	174
96-07	09/01/96 - 10/15/96	96-04, 96-10	51	0	6	23	4	2	53	229	176
96-08	10/16/96 - 11/30/96	EA-96-01, 96-05	53	0	8	15	15	4	64	244	180
97-01	12/01/96 - 01/10/97	96-06, 96-08, 96-11	64	0	9	6	9	8	65	253	188
97-02	01/11/97 - 03/03/97	96-07, 97-01, 97-02	65	0	0	6	1	10	56	254	198
	03/04/97 - 03/31/97	97-03	56	0	0	6	0	44	12	254	242

* Number includes 10 items requiring CA verification from the DOE QVI, 3 items from PORTS-93-01 (DOE/HQ ES&H Assessment of X-326/X-705 HEU Suspension), and 13 items from TI-3.2/01 (1994 EnPmt Conf).

+ There has been 13 inspection items that have had their closure administratively linked to the closure of DOE Compliance Plan Items (CPI). Therefore, closure of the related DOE CPI's will also close these items.

CLOSURE PLAN FOR WORKOFF OF OPEN DOE INSPECTION ITEMS

(Overall Inspection Finding Growth and SSR Workoff Plan)

Figure 8B

Actual Planned

DOE INSPECTION FINDINGS ISSUED BY ROA FUNCTIONAL AREA

(DOE Finding Types Identified Per ROA Functional Area)

Figure 9

Inspector Followup Items
 Unresolved Items
 Non-Cited Violations
 Deviations
 Violations

NUMBER OF DOE INSPECTIONS CONDUCTED BY ROA FUNCTIONAL AREA **(DOE ROA Inspection Types Conducted Per ROA Functional Area)**

Figure 10

Special
 Functional
 SSR

TIMELINE OF DOE INSPECTIONS CONDUCTED BY ROA FUNCTIONAL AREA

(Based Upon DOE Inspection Report Data Issued Each SSR Inspection Period)

Figure 11

ROA FUNCTIONAL AREAs HAVING OPEN DOE INSPECTION FINDINGS (DOE Finding Types Identified Per ROA Functional Area)

Figure 12

Inspector Followup Items
 Unresolved Items
 Non-Cited Violations
 Deviations
 Violations