efficiency bulletin

Dec. 2, 2016

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Due: June 2017

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Efficiency Bulletin: 16-34

Streamline Program Health Reporting

Reduce the number of formal engineering programs that require health reports, and streamline the program health monitoring and reporting process itself.

Addressees: **Chief nuclear officers, NEI APCs and INPO APCs**

Issue: **ENG-009, Program Health Reporting**

Background

- This efficiency bulletin streamlines the program health reporting process by reducing the number of formal program health reports and, in most cases, replaces them with key performance indicators (KPI).
- Health reporting and KPIs are traditionally used to communicate health, but other communication methods are also valid.
- Change management considerations have been provided to help with implementation of the recommendations provided in this document.

Summary of Efficiency Opportunity

- Desired end-state—Resource requirements for monitoring program health are reduced without compromising safety and reliability.
- Value proposition (vision of excellence)—The organizational efficiencies will be achieved through elimination and reduction of program health reporting.

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The Nuclear Energy Institute is the nuclear energy industry's policy organization.

This bulletin and additional information about nuclear energy are available at nei.org.

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- Savings are expected from the reduction of the number of program health reports, from typically 60 to 100 per year per site to 4 to 6 per year per site—and possibly fewer if the health area is not yellow or red.

- Why is it important?—Implementation of this efficiency bulletin is an enabler for the organizational changes being developed under ENG-005, Engineering Staffing Changes.

- Industry benchmark value(s)—Maintain or improve industry performance for both safety and reliability as measured by program health KPIs.

- Measure of effectiveness:
    1. The industry performance for safety, reliability and outage performance is maintained at the current level or improved.
    2. Program indicators maintain a positive/acceptable trend.
    3. Long term asset management plans identify and implement required actions to preserve material condition and margin for structures systems and components.
    4. The guiderails are fully established and effective.

Relevant Standards

- Performance Objectives and Criteria (INPO):
    - EN.1, Engineers communicate emerging technical issues and the related potential risks to management and the operations staff as information becomes available, to ensure necessary compensatory and contingency actions are implemented.
    - ER.1, Station managers use a system and component health process to improve equipment performance that promotes high levels of collaboration among Operations, Engineering, Maintenance, and Work Management. The process ensures station managers are informed and include in the decision process.
    - ER.2, System, program, and component health reports document off-normal conditions and the associated risk. These conditions include latent, degraded, and low margin conditions.
    - ER.2, Senior managers periodically review and challenge component and program health reports. These reports are used as input for resource prioritization.
    - ER.2, System, component, and program health reports are used as a communication tool to summarize equipment conditions and needed corrective actions to management.
- INPO 10-005, Principles for Maintaining an Effective Technical Conscience.
- INPO SOER 02-4, Reactor Pressure Vessel Head Degradation at Davis-Besse, Recommendation 3c: Establish a method to ensure that senior management is made aware of significant abnormal condition in a timely manner.

Relevant Regulatory Requirement

- 10 CFR 50.65, Requirements for Monitoring the Effectiveness of Maintenance at Nuclear Power Plants

Guidance

Program health reporting is an efficient means to convey the overall condition of a program to all levels of management. Health reporting can take the form of a health scorecard or the use of key performance indicators (see Attachment 1).

A combination of a tiered approach to health reporting, with the use of KPIs and other communication methods, such as scorecards, can be used to monitor program health.

Selection of programs by tiers acknowledges that not all programs require routine program health reporting/monitoring and direct program engineering support. The following guidance provides a tiered approach:

Tier 1 Programs: These are typically complex programs with potential for high consequence failures. Owners are assigned to Tier 1 programs. Tier 1 programs use standard industry scorecards with indicators in each of the four cornerstones (personnel, infrastructure, implementation and equipment). One example of a Tier 1 program health scorecard is included in Attachment 1.

A. If any of the four programs below should indicate either red or yellow performance, the scorecards will need to clearly identify the drivers for the health color and the actions required to address the program deficiencies:

1. Fire protection - updated twice a year
2. In-service testing - updated twice a year
3. Flow-accelerated corrosion/erosion control - updated after each refueling outage
4. BWRVIP - updated after each refueling outage

B. Programs that address health attributes in other reports:

1. In-service inspection health attributes included in utility-internal post outage report after each refueling outage (includes IWE/IWL, pressure test and augmented inspections required under NEI 03-08)
2. Steam generator health attributes included in utility-internal post outage report after each refueling outage

Tier 2 Programs: These programs also have assigned program owners. Program health is monitored through a set of standard industry KPIs that should be reviewed at least annually or following each refueling outage. One example of KPIs for monitoring Tier 2 program health is included in Attachment 1:

a. Appendix J - Post RFO
b. Snubber - Post RFO
c. Boric acid corrosion control - Annual
d. MOV - Post RFO
e. AOV - Post RFO
f. Buried pipe - Annual
g. Equipment qualification - Annual

Tier 3 Programs: These programs are also managed through station procedures but do not always have an assigned program owner. If no program owner is assigned, a program subject matter expert (point of contact) is typically assigned. Use of KPIs for these programs is at the discretion of the utility:

a. PWR internals (May be included in ISI post outage reports)

Key to Color Codes:

Red: NSIAC initiative – full participation required for viability
Blue: Action expected at all sites, but is not needed for broad industry viability
Green: Utility discretion to implement, consistent with its business environment

b. Coatings
c. Fatigue monitoring
d. License renewal/age management
e. Repair/replacement
f. Welding
g. Circuit breakers

Software Considerations to Further Reduce Administrative Burden

- Computer software and technology can be used to increase the information available to program engineers and streamline the program heath oversight processes. Database warehouses and other CAP-related databases can automatically be pulled into program health metric/KPIs, facilitating near real-time program health reporting while reducing costly duplication of efforts. Regardless of the technology used, a method should be utilized to expedite the collection and maintenance of program health historical data.
- Standard industry program metrics and KPIs have been developed that include spreadsheet formulas that can calculate weighted performance values. This may be used as an alternate to a database warehouse. See Attachment 2 for access to Southern Nuclear File Transfer Protocol (FTP) site for program health metrics/KPIs.

Recommended Industry Actions

- Involvement by responsible industry program groups in monitoring of KPIs effectiveness and uploading the data to common website hosted by Southern Nuclear.

Change Management Considerations

Industry Activities

- Industry webinars to discuss revised program health reporting guidance and unintended consequences. Webinar information can be found at the following site: https://web.inpo.org/Pages/Nuclear-Promise-Issues.aspx.
- Discussion at various industry meetings hosted by INPO (engineering program manager meetings, engineering director forums, and engineering VP/directors meetings).
- Support industry activities for populating Southern Nuclear FTP website for industry best practices.

Company Actions

- Site/fleet process owner to revise governing processes and procedures.
- Issue corporate and sitewide communication on the initiative.
- Engineering management briefs program/component engineers on the new tiered approach and reporting requirements for each tier. Utility management must be kept aware of the health of engineering programs commensurate with their importance.
- Reinforce expectations for a healthy technical conscience specifically that abnormal plant conditions or indications that cannot be readily explained are documented and evaluated to verify the conditions and indications do not challenge operational or design limits that protect plant safety and reliability.
- Obtain alignment from the station senior leadership team on programs in each tier.
- Identify program subject matter expert or point of contact for Tier 3 programs
- Efficiency Bulletin 16-08 previously eliminated the need for a formal margin management program and credited other station processes such as system health and program health for monitoring and managing safety and reliability margins. With the reduction of many program health reports, validate that adequate margins are maintained through other processes such as corrective action, engineering change or plant health committee.

- Schedule standardized self-assessments every five years for the Tier 1 and 2 programs, unless there is a regulatory or performance driver for more frequent assessments.
- Site/fleet leadership define roles and responsibilities for supporting NRC inspections outside engineering—for example, CDBI for EEQ.

Guiderails

Implementation of this bulletin will result in many programs no longer requiring formal program health reports. Many stations adopted program health reporting following the Davis-Besse event and INPO SOER 02-4, Pressure Vessel Head Degradation at Davis-Besse Nuclear Power Plant. Additionally, many of these programs involve components that may be safety-related and impact control room operations and maintenance of license renewal commitments. Consequently, stations should ensure that the following guiderails are in place:

1. Stations need to verify that no credit is being taken for Tier 2 or 3 program health reporting in meeting regulatory or industry commitments, such as 10 CFR 50.65 maintenance rule monitoring, regulatory commitments or license renewal (e.g. buried piping, fatigue management (thermal cycles) and safety related heat exchangers (GL89-13)).
2. Stations need to ensure owners remain clearly assigned/aware of their system health monitoring responsibilities throughout the organizational transformation period.
3. Condition reports should be initiated for any program health reports that are red or yellow and appropriately dispositioned, commensurate with their safety and reliability significance
4. Critical component failures should be trended and periodically analyzed to determine if failure to communicate adverse trends and degrading conditions to station management was a contributing factor.
5. The age of red/yellow programs should be trended to ensure action plans are executed in a timely manner. An improving trend is expected.
6. Plant health committee monitors for unintended consequences, including:
    - increased failure rates and accelerating component degradation
    - large outage scope expansion attributed to ineffective monitoring and scoping of work
    - regulatory noncompliance.
7. Adverse trends associated with programs and components are captured in the corrective action program and acted upon.

Report Your Site's Results

Please report your company's implementation of this improvement opportunity, including the date of completion. Send this information along with your company point of contact to EfficiencyBulletin@NEI.org.

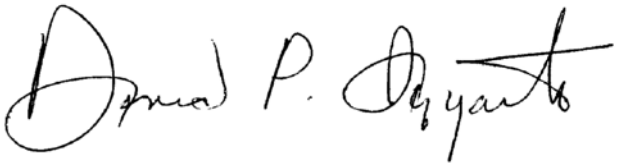
Industry Contacts

- Industry champions for this issue:
    - Rudy Gil, 561-904-5153, rudy.gil@fpl.com
    - Mike Madigan, 205-992-5541, mmadigan@southernco.com
    - Eric Hendrixson, 540-894-2105, ext. 2108, eric.hendrixson@dom.com
- INPO contacts:
    - Sudesh Gambhir, 770-644-8213, gambhirsk@inpo.org
    - Carl Larsen, 770-644-8416, larsencb@inpo.org
    - Ken Robinson, 770-644-8845, robinsonkf@inpo.org
- NEI contact: Bruce Montgomery, 202-739-8128, bsm@nei.org
- On the web: www.nei.org/bulletin1634

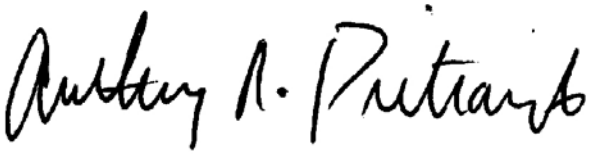
Industry Approval:

Tim O'Connor, CNO Lead

David P. Igyarto, Institute of Nuclear Power Operations



Anthony R. Pietrangelo, Nuclear Energy Institute



Attachment 1- Performance Indicators

An industry working group has developed a set of standard indicators to support program health monitoring and component performance trending. The group has developed four key indicator cornerstones that focus on *Personnel*, *Infrastructure*, *Implementation* and *Equipment Performance*. Additionally, a spreadsheet is available through Southern Nuclear that will simplify the process for collecting and monitoring program health data. A full set of indicators is provided for the Tier 1 programs. In addition, a set of key performance indicators (KPIs) have been developed for the Tier 2 programs to provide an efficient tool that will integrate with corrective action process for identifying performance decline, document off-normal conditions and the associated risk. These conditions include latent organizational issues, and degraded or low margin conditions. The following provides examples of a full set of indicators for the Flow Accelerated Corrosion (FAC) program and KPIs for the Motor Operated Valve (MOV) program. Each site is encouraged to use standard industry indicators consistent with their business model.

FAC Program Health Report

Plant:		To complete, enter the current score. GREEN = 3; WHITE = 2; YELLOW = 1; RED = 0		
Year-Qtr:				
OVERALL PROGRAM PERFORMANCE	Cornerstone / Scoring Criteria	Weight	Current Score	Color
	PROGRAM PERSONNEL	20	100	
	Per-1 Owner Proficiency	40	3 GREEN	GREEN
	Per-2 Bench Strength	25	3 GREEN	
	Per-3 Peer Interaction	20	3 GREEN	
	Per-4 Industry Interaction	15	3 GREEN	
	PROGRAM INFRASTRUCTURE	20	100	
	Inf-1 Program Documentation (and Database) Health	30	3 GREEN	GREEN
	Inf-2 Corrective Action Program (Completion)	15	3 GREEN	
	Inf-3 OE Review	15	3 GREEN	
	Inf-4 Self-Assessments, Benchmarking	15	3 GREEN	
	Inf-5 Long Range Strategy	25	3 GREEN	
	PROGRAM IMPLEMENTATION	30	100	
	Imp-1 Program Inspection Scoping and Planning	35	3 GREEN	GREEN
	Imp-2 Performing Inspections, Repair/Replacements & Data Evaluations	35	3 GREEN	
	Imp-3 Scope Deferral	20	3 GREEN	
	Imp-4 External Stakeholder Findings	10	3 GREEN	
	PROGRAM/EQUIPMENT PERFORMANCE	30	100	
	Eq-1 FAC Failures	50	3 GREEN	GREEN
	Eq-1 Outage/Engineering Impact	40	3 GREEN	
	Eq-1 Erosion Failure Prevention	10	3 GREEN	
	OVERALL PROGRAM PERFORMANCE Green = >90 , White = >75, Yellow = >60, Red = </= 60		100	GREEN
	PROGRAM STATUS SUMMARY:			

	A	B	C	D	E	F	G	H
1	**FAC Program Health Indicators**							
2	**Personnel**		{20% total Score}					
3								
4	**Number**	**Monitored Parameter**	**Current Color, Data**	**Weight**	**Pts.**	**Color**	**Criteria**	**Notes, Instructions**
5								
6	**PER-1**	Owner Proficiency		40	3	Excellent	Owner fully qualified with 3 years OR two outages experience	Experience is assumed to mean at least half the time is spent working on the program. Outage work is assumed to be assigned to the program.
7					2	Acceptable	Owner fully qualified with 1 year OR one outage experience	
8					1	Marginal	Owner not fully qualified or less than 1 year experience and no outage experience	
9					0	Unacceptable	Owner not identified or owner has not started qualification	
10								
11	**PER-2**	Bench Strength		25	3	Excellent	Backup fully qualified and 1 year experience OR one outage experience	See note above.
12					2	Acceptable	Backup fully qualified, but with less than green experience	
13					1	Marginal	Backup identified, but not qualified	
14					0	Unacceptable	Backup not identified	
15								
16	**PER-3**	Peer Interaction		20	3	Excellent	> 87% meeting attendance by primary or backup (rolling 2 year timeframe)	Generally this includes monthly or quarterly peer group phone calls within utility or external to utility with other program owners (with the same program).
17					2	Acceptable	> 75% meeting attendance by primary or backup (rolling 2 year timeframe)	
18					1	Marginal	> 62% meeting attendance by primary or backup (rolling 2 year timeframe)	
19					0	Unacceptable	≤ 62% meeting attendance by primary or backup (rolling 2 year timeframe)	
20								
21	**PER-4**	Industry Interaction		15	3	Excellent	Participated in 2 or more activities in the last 12 months	Indicator goal is for FAC PM interaction with Industry Peers. Outside industry interaction could include: CHUG meeting attendance; participation in another site's self-assessment; an INPO review or assist visit; formal benchmark; program-specific training; or program manager sanctioned activities, etc.
22					2	Acceptable	Participated in 1 activity in the last 12 months	
23					1	Marginal	Participated in 1 or more activities in the last 24 months	
24					0	Unacceptable	No participation in last 24 months	
25								
26								
27			0	100%		>90	>270	
28						>75	> 225	
29						>60	>180	
30						≤60	<100	

FAC Program Health Indicators

Infrastructure {20% total Score}

Number	Monitored Parameter	Current Color, Data	Weight	Pts.	Color	Criteria	Notes, Instructions
INF-1	Program Documentation		30	3	Excellent	No outstanding changes to the program documents that impact program performance; no outstanding enhancement changes greater than one fuel cycle old	Program documents include: Program Notebooks, Procedures, ChecWorks Models, SNM and SSA/SSE Evaluations, postoutage reports, etc. Recently identified pending changes can be over-ridden by management. Example: Procedure revison complete with pending approvals.
				2	Acceptable	1 outstanding change that could impact program performance; no impact to current cycle or next outage	
				1	Marginal	2 to 5 outstanding changes to program documents that could impact program performance; no impact to current cycle or next outage	
				0	Unacceptable	More than 5 outstanding changes to program documents that could impact program performance OR any that could impact current cycle or next outage plans	
INF-2	Corrective Action and CAPR Completion		15	3	Excellent	No CAPRs extended; no CAs extended more than 1 time	
				2	Acceptable	No CAPRs extended; no CAs extended more than 2 times	
				1	Marginal	A CAPR extended 1 time OR a CA extended 3 times	
				0	Unacceptable	A CAPR extended more than 1 time OR a CA extended more than 3 times	
INF-3	OE Review		15	3	Excellent	All OE is in tracking system; OE evaluated within the utility-established timeframe (60 days is typical); corrective actions were generated as needed	OE includes ICES reports, WANO OE, regulator communications (e.g., NRC Information Notice); vendor information letters or technical bulletins (for example, SIL or NSAL), INPO IERs
				2	Acceptable	An OE evaluation was late, but less than 90 days late (corrective actions were generated as needed)	
				1	Marginal	An OE evaluations is late more than 90 days OR an applicable OE was not put in the tracking system (corrective actions were generated as needed)	
				0	Unacceptable	A necessary corrective action was missed during an OE evaluation OR an applicable OE was not evaluated	
INF-4	Self-Assessments, Benchmarking		15	3	Excellent	Performed per utility-specified frequency and all follow-up items are closed; no repeat deficiencies	*If self-assessment or benchmarking is not significantly past due, indicator may be assesssed as YELLOW at program maanger discretion.
				2	Acceptable	Performed per utility-specified frequency and all deficiencies are on track to be be completed without impacting program effectiveness; no repeat	
				1	Marginal	Performed per utility-specified frequency, but 1 or more deficiencies are not on track to be resolved without impacting program effectiveness OR a repeat deficiency	
				0	Unacceptable	Not performed per utility-specified frequency*	
INF-5	Long Range Strategy		25	3	Excellent	A five-year plan is updated within the last year, includes long-range budget, and for near-term items the budget is approved	This indicator includes plans for items requiring significant resources, such as outage support requirements, scheduled assessment, significant program updates, critical infrastructure upgrades, or scheduled component replacements
				2	Acceptable	Plan only goes out three years, but is updated within the last year, including long-range budget, and for near-term items the budget is approved	
				1	Marginal	All items within two cycles requiring significant resources weren't in the long-range plan	
				0	Unacceptable	Near-term items (within one cycle) requiring significant resources weren't in the long-range plan OR no long range plan exists for the program	
		0	100%		>90	>270	
					>75	> 225	
					>60	>180	
					≤60	<100	

FAC Program Health Indicators

Implementation {30% total Score}

Number	Monitored Parameter	Current Color, Data	Weight	Pts.	Color	Criteria	Notes, Instructions
IMP-1	Program Inspection Scoping & Planning		35	3	Excellent	Final outage inspection scope deliverables completed in support of planning milestones; deliverables peer reviewed and optimized	Inspection scope deliverables include items such as work request/work order, location sketches, min wall evals, walk-downs, PJB's, etc. Peer Reviewed and Optimized indicates that the plan has been checked by another FAC PM, approved by management and submitted/reviewed by a challenge board or similar.
				2	Acceptable	Same as green, but some minor program deliverables outstanding	
				1	Marginal	Final inspection scope incomplete in support of scope planning milestone OR program deliverables late OR outage planning milestones in jeopardy	
				0	Unacceptable	Final inspection scope NOT selected in support of outage work planning milestone (outage planning milestone missed)	
IMP-2	Performing Inspections, Repair /Replacements and Data Evaluations (Outage Execution)		35	3	Excellent	Inspections, repair/replacements and data evaluations performed within planned schedule; no scope reduction or deferrals; no examination scope	Timeliness of inspections, repair/replacements and data evaluations; effectiveness of original inspection scope
				2	Acceptable	Inspections, repair/replacements and data evaluations performed within planned schedule; no scope reduction or deferrals; inspection scope expansion	
				1	Marginal	Inspection or repair/replacement deferrals required to meet outage schedule	
				0	Unacceptable	Data evaluations incomplete prior to restart OR outage extended in order to meet/perform inspection or repair/replacement scope	
IMP-3	Scope deferral (after scope freeze cutoff date, prior to outage start)		20	3	Excellent	No FAC inspection or replacement scope deferrals	Deferral of inspection or replacement scope due to Maintenance, Craft, Work Control or other organizations' inability to support FAC Program scope. *Deferrals may require additional inspections to justify the deferral.
				2	Acceptable	Deferrals performed with FAC owner approval (no addition to outage scope)	
				1	Marginal	Deferrals performed with FAC owner approval (additional outage scope required *)	
				0	Unacceptable	Deferrals performed without FAC owner approval	
IMP-4	External Stakeholder Findings		10	3	Excellent	No findings withing the last two years	External findings include regulator findings (e.g., NRC cited or noncited violation), INPO AFIs, INPO Review Visit actionable recommendations, and NOS/QA, NSRB or NEIL findings
				2	Acceptable	A finding within two years where all corrective actions have been taken	
				1	Marginal	A previous finding with one or more open corrective actions	
				0	Unacceptable	A recent finding OR a previous finding with insufficient progress	
		0	100%		>90	>270	Note: Deferrals in IMP-2 are related to outage execution. Deferrals in IMP-3 are related to pre-outage planning. For IMP-2 and 3, Indicators should remain Red for the Reporting Period in which the deferrals occurred.
					>75	> 225	
					>60	>180	
					≤60	<100	

	A	B	C	D	E	F	G	H
1	**FAC Program Health Indicators**							
2	**Equipment**		**{30% total Score}**					
3								
4	**Number**	**Monitored Parameter**	**Current Color, Data**	**Weight**	**Pts.**	**Color**	**Criteria**	**Notes, Instructions**
5								
6	**EQ-1**	FAC Failures		50%	3	Excellent	No component failures attributed to FAC in the current AND previous operating cycle	FAC Component Failure is defined as: 1) A through-wall leak or 2) The inability to meet code requirements resulting in an a) emergent repair/replacement, b) personnel and/or nuclear safety issue or c) > 10% load reduction. The indicator should go RED for any failure in the reporting period. The indicator can change to YELLOW in the following reporting period with an approved action plan.
7					2	Acceptable	No component failures attributed to FAC in the current operating cycle OR recovering from a previous failure (Red/Yellow) with a **Completed**	
8					1	Marginal	Any FAC component failure in the current operating cycle WITH an approved action plan OR open actions for a FAC failure from a previous operating cycle (i.e. failure not addressed in a timely manner)	
9					0	Unacceptable	Any FAC component failure in the current reporting period OR any FAC component failure without an approved action plan	
10								
11	**EQ-2**	Outage/Engineering Impact		40%	3	Excellent	No findings resulting in an unplanned increase in outage or engineering resources (scope increase, tmin violations, emergent	Adversely effects outage schedule, outage scope or engineering resources. Findings can be related to inspections, chemistry, performance, operational issues, etc.
12					2	Acceptable	No findings resulting in an unplanned increase in outage or engineering resources (scope increase, tmin violations, emergent stress reviews) this reporting period	
13					1	Marginal	Scope increase or stress review required during outage due to significant finding this reporting period	
14					0	Unacceptable	Emergent repair/replacement/evaluations adversely affecting outage or engineering resources this period	
15								
16	**EQ-3**	Erosion Failure Prevention*		10%	3	Excellent	No component failures within FAC Program scope due to non-FAC (erosion) mechanisms in the current or previous operating cycle	*Only Applicable to FAC Programs that include "Erosion mechanisms" in their predictive scope, i.e., those systems/lines included in the FAC Program. An erosion component failure is defined as: 1) A through-wall leak or 2) The inability to meet code requirements resulting in an a) emergent repair/replacement, b) personnel and/or nuclear safety issue or c) > 10% load reduction
17					2	Acceptable	No component failures within FAC Program scope due to non-FAC (erosion) mechanisms in the current operating cycle	
18					1	Marginal	Component failure within FAC program scope due to erosion mechanism in the current operating cycle WITH an approved action plan OR open actions to address a failure from a previous operating cycle (i.e. failure not addressed in a timely manner)	
19					0	Unacceptable	Component failure within FAC program scope due to erosion mechanism in the current reporting period OR any erosion component failure without an approved action plan	
20								
21								
22			0	100%		>90	>270	
23						>75	> 225	
24						>60	>180	
25						<60	<100	

MOV KPI Scorecard

Number	Monitored Parameter	Current Color,	Weight	Pts.	Color	Criteria	Notes, Instructions
Personnel							
PER-1	Owner Proficiency		10	3	Excellent	Owner fully qualified with 3 years OR two outages	Experience is assumed to mean at least half th
				2	Acceptable	Owner fully qualified with 1 year OR one outage experience	time is spent working on the program. Outage
				1	Marginal	Owner not fully qualified or less than 1 year experience and no outage experience	work is assumed to be assigned to the program
				0	Unacceptable	Owner not identified or owner has not started qualification	
PER-2	Bench Strength		10	3	Excellent	Backup fully qualified and 1 year experience or one outage experience	See note above.
				2	Acceptable	Backup fully qualified, but with less than green experience	
				1	Marginal	Backup identified, but not qualified	
				0	Unacceptable	Backup not identified	
Implementation							
IMP-1	PM/PVT Deferrals		10	3	Excellent	No late or defered PMs or PVTs.	PM deferrals are counted as deferred in the
				2	Acceptable	≤1% late or defered PM.	reporting perios in which the late date was or
				1	Marginal	≤ 2%late or defered PM.	would be exceeded.
				0	Unacceptable	> 2% late/deffered PM or any PVTs beyond maximum PVT interval.	
IMP-2	MOV Post Test Data Reviews		20	3	Excellent	No identifed margin issues and all post test reviews and trend evaluations (for testing during this reporting period) are complete without changes to test interval.	this issue applies to those MOVs that are included in the sites Design Basis Calculations Margin issues are defined by the station and include MOVs which need corrective actions to restore required safety function OR require increased test frequency.
				2	Acceptable	No identifed margin issues and all post test reviews and trend evaluations (for testing during this reporting period) are on schedule.	
				1	Marginal	Margin issues are identified and corrective actions (action plans) are on schedule OR increased test frequency is scheduled.	
				0	Unacceptable	Margin issues are identified and corrective actions (action plans) are behind schedule OR increased test frequency is not scheduled.	
IMP-3	AOV Maintenance Resources		20	3	Excellent	100% of original scope completed	The extent of scope that was not completed in
				2	Acceptable	< 100%, ≥ 90% of original scope completed	accordance with that defined at the time of
				1	Marginal	< 90%, ≥ 80% of original scope completed	scope freeze.
				0	Unacceptable	< 80% OR scope modification resulted in number or % of completed examinations/tests to be below the minimum regulatory requirements	
Equipment							
EQ-1	Program MOV Functional failures		30	3	Excellent	No functional failure for MOVs within the past 2 years.	A functional fialure is defined as the fialure of a
				2	Acceptable	<1% program MOVs experienced fuctional failures during the previous two years.	MOV to stroke on demade or where an MOV is determined to e3 inoperable during an as-foun
				1	Marginal	<2% program MOVs experienced fuctional failures during	periodic verificaiton test.
				0	Unacceptable	≥ 2% program MOVs experienced fuctional failures during the previous two years.	
		0	100%		>90	>270	
					>75	> 225	
					>60	>180	
					≤60	<100	

Attachment 2
Southern Nuclear FTP site for Program Health Scorecard / KPIs

Below is the link to an FTP site that allows the industry program owners to view and download the controlled versions of Program Engineering Standardized Health Metrics and KPIs

There are several ways to connect to site. The easiest way to connect is https://XTR.southernco.com.

Your ID is: **Program_Engineering** **(Not Case Sensitive)**

We can't put passwords with IDs.
Please contact Michael P. Madigan at 205-992-5541 or Lynda Bartlett at 205-992-5791

Wsftp Pro is another way to connect and can be installed from the Application Catalog on your desktop.

The following secure ftp clients are also supported:

CuteFTP Pro from https://www.globalscape.com/cuteftp.
Secure FTP Command Line from www.glub.com (freeware).