Office for Nuclear Regulation

ONR GUIDE			
Guidance for Intervention Planning and Reporting			
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1. INTRODUCTION

1.1 ONR's expectations for the development and reporting/recording of planned regulatory interventions on nuclear licensed sites and other dutyholders are defined in this document and reflected in the applicable HOW2 processes.

1.2 This document provides guidance to all ONR staff with responsibilities in some/all parts of the regulatory intervention process, i.e., from planning, through reporting and recording, to assist in achieving compliance with ONR's expectations for the development and delivery of planned regulatory interventions.

2. PURPOSE AND SCOPE

Oversight

2.1 All regulatory Intervention Plans should derive from to the associated programme strategy and be subject to programme board(s) oversight. Programme Directors delegate responsibility for development and oversight of interventions to Sub-Programme Boards (SPBs) led by Delivery Leads who are tasked to ensure that the regulatory activity of all inspectors is integrated and co-ordinated in a proportionate and targeted way.

Alignment with Intervention Strategies and Plans

2.2 The regulatory activity of all inspectors must align with the relevant programme strategy. In turn, the programme strategies must align with ONR's regulatory priorities stated in the Annual Plan. Programme strategies and Intervention Plans should include all intervention activity. They should provide a summary of the regulatory issues that ONR intends to address (including compliance) in the year to which they relate, what ONR is seeking to achieve and how it intends to achieve its objectives for the year. Every Inspector should be able to establish where and how their regulatory intervention activity fits into the relevant Intervention Plan. If this not the case then it is possible that either the proposed intervention is out with programme intentions, or that intervention planning and programme oversight are insufficiently developed. Active participation of Inspectors in programme management, and communication within delivery teams is key to the development of effective intervention strategies and plans. These will, in turn, feed into the relevant programme strategies and operating plans which will be used to support the ONR prioritisation process.

2.3 Programme Strategies and Intervention Plans should consider available intelligence to inform inspection priorities. This includes Leadership and Management for Safety Reviews carried out in accordance with NS-TAST-GD-093. The decision as to which licensees will be reviewed in a given year should be made by the appropriate Delivery Lead in consultation with the LMfS inspector and the LMfS Professional Lead.

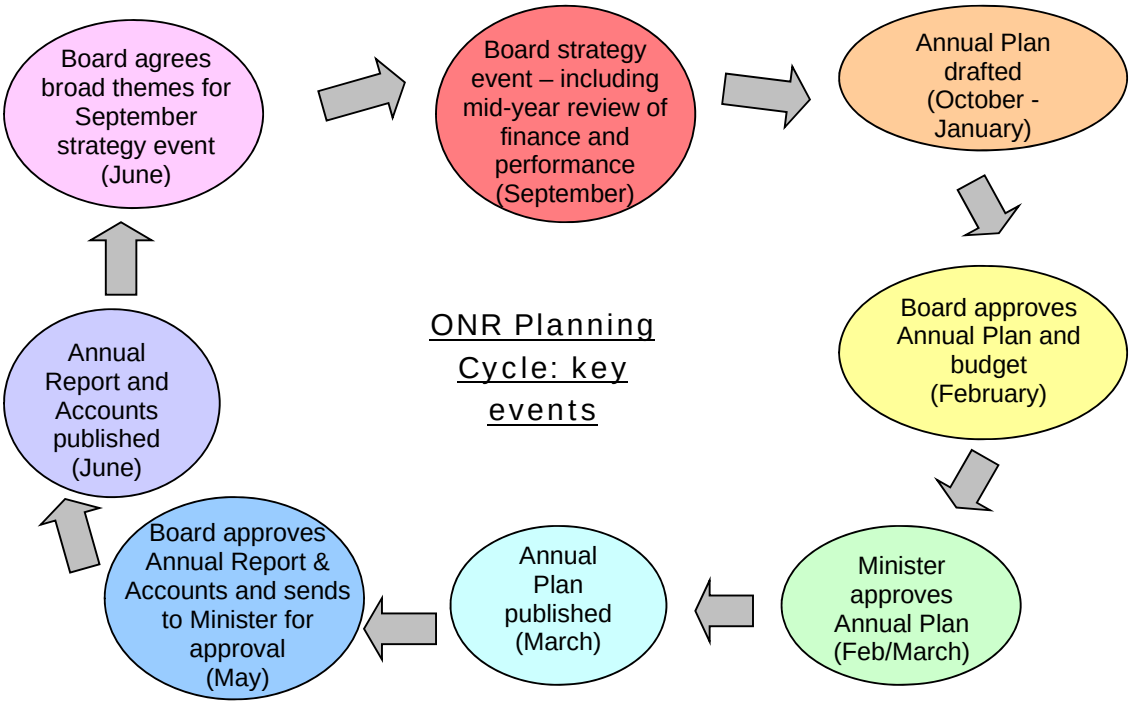


Diagram 1: ONR Planning Cycle

Resource Allocation

2.4 The ONR Executive and the ONR Programme Directors determine the overall resource allocation priorities. Resource Managers and Delivery Leads are expected to ensure that resources are allocated to optimum effect; the authorities of key staff are defined in HOW2. Decisions on resource allocation will be made under the ONR programme management arrangements. Each programme will estimate the resource required to deliver its proposed strategy and submit a bid to the programme management process (see HOW2). Once resources have been allocated, it will be the Programme Director and Delivery Leads' responsibility to deliver against the supported strategy and priority objectives.

3. LICENCE COMPLIANCE INSPECTIONS

3.1 One of the strategic objectives of ONR is to undertake a coordinated programme of safety related inspections on Nuclear Site Licence Holders in relation to their arrangements for compliance with relevant statutory provisions of:

- The Energy Act 2013
- The Health and Safety at Work etc Act 1974 (HSW Act).

3.2 The Nuclear Installations Act 1965 (NIA65) is a key Relevant Statutory Provision of the Energy Act. It provides for a nuclear site licence to be granted to a named corporate body to install or operate specified nuclear installations in a defined location. NIA65 requires ONR to attach to each nuclear site licence such conditions as it considers necessary or desirable in the interests of safety or with respect to the handling, treatment and disposal of nuclear matter. Inspection of licence condition compliance at nuclear licensed sites forms a significant part of ONR's activities.

3.3 Each programme/sub-programme should set out in their strategy the amount of compliance inspection that will be undertaken at their site/sites. **There is a minimum expectation that all nuclear licensed sites will be subject to inspection such that each LC is inspected at least once every 5 years.** Above this minimum level, the amount of compliance inspection and the licence conditions inspected should be proportionate to the hazard/risk from any particular site.

3.4 It is recognised; however, for some low hazard sites that it may not be appropriate to inspect all of the licence conditions over the five year period since a number of these may not be relevant. This should be defined in the relevant programme strategy.

3.5 Normally the amount of effort for a typical licence compliance inspection at a higher hazard site would be in the order of ½ day. However it is recognised that there may be a requirement for more or less inspection time to allow for an adequate LC inspection depending on the LC under inspection and the nature of the site, hence at some lower hazard sites this time may be reduced. As part of licence compliance inspection, there will be a requirement for an inspection of the adequacy of the licensee's arrangements as well as their implementation. However, for well developed arrangements more benefit would be derived by focussing the inspection on implementation. The rating against the licence condition is a combined judgement of the adequacy of the arrangements and their implementation.

3.6 The 5 year inspection plan which demonstrates how the minimum 5 yearly coverage is achieved should be reflected in the applicable programme strategy.

4. SYSTEM BASED INSPECTIONS (SBIs)

Identifying Safety Systems and Structures

4.1 System based inspections (SBIs) are an essential element of ONR's overall intervention on a nuclear site and consist of a series of inspections which are intended to establish that the basic elements of a site/facility safety case as implemented in Safety Systems and Structures are fit for purpose and that they will fulfil their safety functional requirements.

4.2 For each operational programme within ONR, the governance arrangements set out in appendix 5 must ensure that Intervention Plans, which are in-line with programme and sub-programme strategies, adequately cover SBIs.

4.3 The overarching aim is to ensure that all identified Safety Systems and Structures on a site will be inspected twice during the nominal ten year timescale associated with a Periodic Safety Review. Therefore, the SBI inspection programme for each site/facility is such that all the key elements implementing the safety case are checked every 5 years. Having identified the key systems/structures for the site or facility, the inspections should be transposed onto a 5 year plan in an appropriate sequence and aligning with, for example, plant outages as necessary. This 5 year plan needs to be developed and retained by the programme and it is likely that this would need to be included within the sub-programme strategy eg. Programmes may wish to use the Intervention Plan template as the basis of this plan for the forthcoming years.

4.4 SBIs are mandatory and therefore 100% of the inspections planned to be undertaken each year must be completed. An ONR Key Performance Indicator (KPI) captures this outturn, which reinforces, and raises the visibility, of the need for programmes to achieve this figure. Separately, the results of these inspections will be used annually by ONR to formulate an initial view about the safety performance of the site/facility but this view will be supplemented by other interventions and assessments carried out during the year.

4.5 Whilst it is recognised that a SBI approach is appropriate for all nuclear licensed sites, there will be considerable variation between, for example, the number and type of Safety Systems and Structures for an operational reactor site and an intermediate level waste store. Additionally, the approach taken to identify the key Safety Systems and Structures associated with a SBI on a multi-facility site is different to that required for an 'island' reactor site.

4.6 For a nuclear power plant there will be around 30 such systems whereas for a simple radioactive waste store there may only be 2 or 3. See Appendix 2 for an example of Civil Nuclear Reactor Programmes SSS list for an Operating Reactor site.

4.7 The creation or alteration of new site, facility codes or Safety System and Structure identifiers needs to be controlled to ensure consistency across ONR. Therefore the creation of new site or facility codes or SSS identifiers will require approval of the sub-programme board and the master list retained in the sub-programme strategy. It is essential that the Head of Performance is supplied with this list and any updates.

4.8 Typically, for a SBI on an operational reactor or complex nuclear chemical plant it will need about two to three days site-time to carry out a meaningful inspection with an expectation that this will be undertaken by inspectors of appropriate disciplines. The site inspector will normally (but doesn't have to be) part of the team. So, for example, for the gas circulator system on an AGR power station the team may be the site inspector, plus mechanical and electrical specialists. The specialist support may also come from a Technical Support Contractor (TSC).

4.9 For simpler SBIs it may be sufficient to plan for around a day on site undertaking inspections and may only require a single inspector.

4.10 The relevant years SBIs from the 5 year plan should then form the basis of the annual intervention plan for that site/facility along with the other compliance inspections and interventions.

4.11 SBI inspections should be coordinated, where possible, across several facilities within a programme to allow inter-facility comparisons to be made (if that would be beneficial) and in order to be as efficient and effective as possible. In addition, the site visits should be coordinated with other necessary planned visits to achieve maximum efficiency and deliver value for money.

Undertaking the Inspections

4.12 The inspections are designed to determine whether the Safety Systems and Structures (SSS) being inspected are able to fulfil their safety duties (safety functional requirements) adequately, in line with the safety case.

4.13 To carry out a SBI it is important to check the SSS against six licence condition arrangements (10, 23, 24, 27, 28 & 34). It is essential that this is not a check of the arrangements that the licensee has put in place for each of the licence conditions, rather the adequacy of their implementation in relation to a particular SSS. It is also important therefore that the inspection team has identified beforehand the relevant matters from the safety case that will allow them to determine whether the SSS will adequately meet its safety functional requirements. The inspectors are required to form an overall judgement as to whether the SSS adequately fulfils the requirements of the safety case.

4.14 Having done this for the first time it is essential to keep this information in TRIM so that when this SSS is re-inspected (nominally 5 years later) the work does not have to be completely re-done but can be reviewed to check that it is still valid. It will be

appropriate for individual sub-programmes to maintain this information centrally along with the 5 year plan.

4.15 The licence conditions that will be inspected are given below.

Licence Condition	Purpose	Notes
LC 10 Training	To ensure that the operators and maintainers are adequately trained in the operation/maintenance of the SSS	
LC23 Operating Rules	To ensure that the limits and conditions identified in the safety case are properly implemented.	
LC24 Operating Instructions	To ensure that the operators and maintainers of the SSS have adequate written instructions relating to ensuring compliance with the limits and conditions above	
LC27 Safety Mechanisms, Devices and Circuits	To ensure that if there are safety mechanisms as part of the SSS they are properly connected and in good working order	
LC28 Examination, Maintenance, Inspection and Testing	To ensure that the SSS is being adequately maintained	
LC34 Leakage and Escape	To ensure that the SSS is not leaking radioactive materials, liquids, sludges, gases etc	Whilst this licence condition refers to radioactive materials, where there is flammable material (such as hydrogen or hydraulic oils etc) involved in the SSS being inspected or located adjacent to it, the inspector should check that this does not present an unacceptable internal hazard (e.g. fire) to the SSS or other safety related plant.

4.16 The ONR inspector's experience and judgment is crucial in coming to a decision whether the Safety System or Structure will fulfil the requirements of the safety case.

4.17 During the course of the inspections, it is likely that minor deficiencies will be noted, for example a document being beyond its review date, or an operators training being out of date. Such shortcomings should be recorded and followed up later during routine inspections to the degree that their significance warrants. However, the overriding purpose of the inspections is to determine whether the SSS is capable of fulfilling its safety functional requirements. It is quite possible therefore to find several deficiencies but still judge that the SSS meets the requirements. So in the case of an operator's training being formally out of date, if in the inspector's judgement, the operator is still

suitably skilled, knowledgeable and experienced then the requirements of the LC10 element of the system should be considered to have been met and the training issue taken up later as necessary.

4.18 Note that in some cases it is not appropriate to inspect a SSS against all six licence conditions. For example, if a system does not contain radioactive materials, then it will not be necessary to check against LC34 and; therefore, the Intervention Record must record that it was not applicable on this occasion and provide an appropriate justification.

4.19 However, it is essential that the inspector makes a judgement whether the Safety System or Structure fulfils its safety function and adequately implements the safety case. This must be formally recorded on the intervention plan, since as stated earlier, this judgement forms the basis of the ONR Key Performance Indicator and the expectation is that 100% of the planned interventions will be completed. It is not acceptable for an inspector to record this judgment as being 'not applicable' since only a confirmation that it meets the requirements ('yes') or does not meet the requirements ('no') are permitted.

4.20 Feedback from the SBI process has identified that early planning and clear deliverables are essential to achieve a high quality inspection. This is, of course, true of all inspection, but of greater significance for SBIs because of the team approach. The planning and delivery phases developed and tested during TSC supported SBI inspections are shown in Appendix 3. This approach should be applied for all SBIs where more than one inspector, or an inspector plus TSC is needed to deliver the appropriate breadth and depth of inspection.

Planning for other Site Inspection Activities

4.21 To ensure that other routine regulatory activities are undertaken appropriately it is important to include them into the intervention plans. These activities should not be rated, although it is possible for regulatory issues to be identified following these interventions. Other site inspection activities are as follows:

- 100 – Ionising Radiations Regulations (IRR), including HASS
- 101 – Joint Inspection with Other Government Departments (OGD) where the OGD is taking the lead.
- 102 – Review ONR Issues database (including PSR Issues) with licensee, to confirm progress and RAG status
- 103 – Attendance at site stakeholder or local liaison meetings
- 104 – Interactions covering Leadership and Management for Safety topics such as governance and safety culture
- 105 – REPPIR / EPCC – attendance at emergency planning meetings, participation in level 2 and 3 exercises. This should not include Level 1 exercises - these should be planned, rated and recorded under LC11.
- 106 – Attendance at Safety Representatives forums or meetings
- 107 – Attendance at the Annual Review of Safety
- 108 – Attendance at meetings with the Licensees' Internal Regulators

5. NUCLEAR SITE SECURITY PLAN COMPLIANCE INSPECTIONS

Security System Inspections

5.1 Nuclear Site Security Plan (NSSP) compliance inspections are an essential element of ONR's overall intervention strategy on a nuclear site. They consist of a series of inspections which are intended to establish that the elements of a Nuclear Security Case (NSC) and Integrated Protection Solution (IPS) are compliant with the NSSP, fit for purpose, and will fulfil their security functional requirements in support of achieving the associated security objective.

5.2 For each operational programme, the appropriate management intervention groups must ensure that intervention plans are in-line with programme and sub-programme strategies and adequately cover the NSSP.

5.3 The overarching aim is to ensure that all aspects of the NSSP will be inspected over an agreed period depending on the categorisation of the site. Inspections should be transposed onto a five year plan in an appropriate sequence and aligning with, for example, security improvement schedule project completion dates.

5.4 These inspections are mandatory and therefore 100% of the NSSP compliance inspections planned to be undertaken each year must be completed. An ONR Key Performance Indicator (KPI) captures this outturn, which reinforces, and raises the visibility, of the need for programmes to achieve this figure. Separately, the results of these inspections will be used by inspectors when assessing a site's annual security performance. This view will be supplemented by additional evidence gained from other areas such as, inter alia, reactive inspection activity, security event data and security performance indicators. A separate process document is in place that articulates how this evidence is collated and analysed in support of developing the intervention strategy for the following year.

5.5 Whilst it is recognised that all nuclear premises have an approved NSSP, there will be considerable variation between, for example the complexity and number of security systems for an operational reactor site versus a Category IV site undergoing decommissioning.

Identifying Security Systems (SyS)

5.6 The NSSP is divided into two sections, the NSC and the IPS. The combined effect of these parts is aimed at demonstrating that the security regime of the site or facility meets the security objectives described in the National Objectives, Requirements and Model Standards document.

5.7 The NSC is intended to demonstrate that the dutyholder has taken into account all relevant issues when planning the security of their site. It should identify threats to the site/facilities based on relevant malicious capabilities given in the Nuclear Industries Malicious Capability Planning Assumption (NIMCA) document and the risk these pose. Key protective security assets, the capability and resilience of security equipment, the competence of those specifying, installing, operating and maintaining the security system, and of those providing a response to relevant malicious capabilities given in the NIMCA should be described together with analysis on how they meet relevant security objectives.

5.8 The IPS details the physical, technical, personnel and associated security measures and procedures for the dutyholder’s security regime. It describes the integrated security arrangements for a site and/or specific plant, and provides written evidence of respective security standards in place, or to be provided, and details of any supporting contingency plans. It is in this section that specific Security Systems (SyS) are

identified. Their inspection is to be completed within the agreed period over the course of the five year inspection cycle.

Undertaking the Inspection

5.9 The System Based Inspections (SBI) are designed to determine whether the security system or structure under scrutiny enables the relevant security objective(s) to be achieved. In order to do this, inspectors check the SyS against the IPS and its role within the NSC. It is therefore important that inspectors identify beforehand the relevant matters from the NSC that will allow them to determine whether the security system or structure will meet its security functional requirements.

5.10 Having done this for the first time, it is sensible to record and keep this information so that when the SyS is re-inspected, the work does not have to be completely redone. Rather elements can be revisited to ensure the SyS remains fit for purpose.

5.11 Inspection of the SyS should confirm that:

- functionality and specification is in accordance with the IPS
- the testing and maintenance regime is adequate
- operators and maintainers have adequate written instructions
- operators and maintainers are adequately SQEP
- there is effective integration with other SySs required to meet the security objective

5.12 During the course of the inspections, it is possible that minor deficiencies will be noted, such as for example a document being beyond its review date, operator training being out of date, or a test overdue. These should be recorded and followed up later during routine inspections to the degree that their significance warrants. However, the main purpose of the inspections is to determine whether the SyS is capable of fulfilling the security functional requirements attributed to it in the NSSP. It is possible, therefore, to find several deficiencies, but still judge that the SyS meets the requirements of the NSSP. For example, if some aspect of testing is formally overdue, the SyS may still be considered fit for purpose, if the inspector judges that still meets the functional requirement specified in the NSSP. The deficiency can then be dealt with later as necessary.

5.13 In some cases it is not appropriate to inspect a SyS against all the aspects detailed above. For example the structure of a nuclear material store wall, would not need to be inspected against testing and maintenance or operator training. However, it is important for the inspector to form judgement that the SyS fulfils its security function and for this to be formally recorded on the Intervention Record and notified to PDS. As stated earlier, this judgement forms the basis of the ONR Key Performance Indicator and the expectation is that 100% of the planned inspections will be completed.

Non-System Based Inspections

5.14 Whilst SyS based inspections form a vital part of intervention activity, they do not provide complete oversight of a site's security regime. For example, one of the most important factors in achieving excellent security performance is the development and maintenance of a robust security culture. Other important non-system based inspections include, inter alia, personnel security, incident management and command and control. How the site manages these non-system based aspects is detailed in the NSSP (NSC and IPS) and inspectors' plans should incorporate them within their inspection activity to ensure they are covered, as appropriate, over a five year period.

However, as with SyS based inspections, the appropriate management intervention groups must ensure that intervention plans are in-line with programme and sub-programme strategies, which may dictate the breadth and scope of inspection activity, allowing targeting to areas or topics of greatest concern.

5.15 Lastly, inspectors should also aim to review fitness for purpose of the NSSP itself and supporting documentation such as Vital Area Identification, Vulnerability Assessments and Counter-Terrorism contingency plans.

6. THE ANNUAL INTERVENTION PLAN TEMPLATE

6.1 For site intervention planning (nuclear safety, nuclear security, nuclear transport and conventional safety), a common template has been adopted across all programmes to ensure consistency and to improve efficiency within ONR. For the purposes of consistent data entry, no other variations will be accepted from the agreed format. (See Appendix 1).

6.2 Programmes will be able to suggest future changes to the intervention plan template and these will be considered before moving to any agreed revision. This includes creation of new intervention codes such as additional 100 series items, this will require approval of the Operational Inspection Specialism Lead. Once approved, new codes can only be added to the template by the Head of Performance.

6.3 For intervention plans associated with nuclear licensed sites it is the nuclear safety site inspector who is responsible for delivery of all nuclear safety inspection and coordinating the delivery of the integrated intervention plan. The security, conventional health & safety, EIADR, safeguards and transport inspections will be the responsibility of the nominated individual for each associated inspection.

7. CROSS PROGRAMME INSPECTIONS

Security

7.1 Safety and security inspectors are to consult on preparation of the annual intervention plan. This is to ensure that any synergies can be exploited. For example, an inspection of the site perimeter can cover protective security and site licence condition 2. Some dutyholders, particularly where they are smaller and staff have responsibilities covering multiple disciplines, may have limited resource to facilitate a concurrent inspection covering different aspects of safety and security. It is therefore also important that the intervention plan is managed to avoid possible resource burdens on dutyholders. Lastly, inspectors should liaise to ensure that the plan is deconflicted to minimise the impact of other concurrent activity such as exercises or plant outages.

7.2 Note that ONR's security vires does not extend to Defence sites.

Transport System Inspections

7.3 For the purposes of the IAEA Regulations for the Safe Transport of Radioactive Material (TS-R-1) upon which GB regulatory requirements are based, 'transport' comprises all operations and conditions associated with and involved in the movement of radioactive material; these include the design, manufacture, maintenance and repair of packaging, and the preparation, consigning, loading, carriage including in-transit storage, unloading and receipt at the final destination of loads of radioactive material and packages.

7.4 Transport Compliance Inspections are not based on Licence Conditions but may be grouped into the following topic areas:

- Compliance with transport regulatory requirements (including classification; packaging; consignment; emergency arrangements; radiological protection; and carriage)
- Compliance with dutyholder management system requirements
- Incorporation and deployment of safety controls into dutyholders' arrangements

7.5 In relation to the incorporation and deployment of safety controls into dutyholders' arrangements, we look for objective evidence that safety controls required by the transport safety case are deployed in practice. Since the transport regulations adopt a graded approach to safety (where the package performance standards are graded and commensurate with the radiological hazard potential of the contents), not all safety cases require competent authority approval. Transport compliance inspections are informed by risk and are used to verify incorporation and deployment of safety controls in dutyholders' arrangements for both those packages which require competent authority approval; and those which do not. However not all dutyholders' arrangements are inspected on an annual basis.

Undertaking the Transport Inspection

7.6 The inspections are designed to determine whether the transport requirements are being meet by the dutyholder. In order to do this, inspectors check the dutyholder systems against the relevant legislation. It is therefore important that inspectors identify beforehand the relevant type of company being inspected and inspect accordingly. A Quality management system inspection of a Package Designer for a ‘nuclear flask’ is more onerous than a small courier transporting ‘excepted packages’. Each of the Inspection processes is defined on HOW2.

Conventional Health and Safety Team

7.7 Inspectors of the ONR Conventional Health and Safety Team (CHST) oversee the regulation of conventional health and safety legislation across all licensed and authorised nuclear sites, with the exception of construction and COMAH, which are the subject of ONR HSE collaboration. The CHST also carry out reactive investigations of reportable incidents: fatal and other accidents, reportable diseases and dangerous occurrences; and pursue health and safety concerns raised externally and within ONR. The annual CHST workplan reflects HSE FOD’s in-year priorities, for example the Legionella national inspection intervention. In addition the team provide specialist conventional health and safety input to the GDA and nuclear new build Sub Programmes. The CHST operational intervention strategy seeks to maximise strategic and operational synergies with other ONR Programmes.

Fire Safety

7.8 ONR Fire Safety Inspectors enforce the provisions of the Regulatory Reform (Fire Safety) Order 2005 and Fire (Scotland) Act 2005, which applies to all buildings and plant on nuclear Licensed Sites and requires the dutyholder to make adequate provisions for life safety from fire. A risk based intervention programme prioritising high life risk, high fire risk buildings is undertaken to confirm compliance with legislation and to ensure that the licensees have appropriate management and procedural arrangements in place. Audits focus on selected themes which are informed by operational intelligence which include site specific issues and generic areas of interest that apply across the nuclear industry. Interventions can also include process fire safety issues made at the request of other ONR Inspectors; these may include examination of fire protective systems and equipment or assessment of emergency response capability.

Safeguards

7.9 The primary safeguards 'regulators' are the international safeguards inspectorates of the International Atomic Energy Agency (IAEA) and the European Commission (Euratom), and it is their independent verification and conclusions on which the safeguards regime depends. This means that ONR's safeguards role differs from its role in regulating nuclear safety, security and transport. The safeguards inspections shown in these plans are performed by Euratom (and in some cases the IAEA). ONR does not determine their scheduling or findings, but ONR Safeguards works with the safeguards inspectorates and the UK organisations being inspected, including monitoring inspection activities and outcomes and being in a position to intervene if necessary with Euratom, the IAEA and/or the UK organisations concerned to help ensure that safeguards obligations for the UK are met in a proportionate manner and are suitably aligned with other domestic regulatory requirements.

Additional Requirements

7.10 As a general inspection protocol, we expect all ONR inspectors planning to visit a site to inform the Nominated Site Safety Inspector.

7.11 We expect all inspectors planning a rateable compliance inspection to enter this on the plan at least 3 months in advance and in consultation with the Nominated Site Safety Inspector (to avoid resource clashes).

7.12 The Nuclear Site Safety Inspector should review the issues database entries for the licensed site on a quarterly basis with the Licensee to allow this to be reviewed in good time for the Sub-Programme Regulatory Review Meeting update.

7.13 The Nominated Site Safety Inspector will meet the Safety Representatives annually, as a minimum.

7.14 For all inspections, the General Inspection Guide (ONR-INSP-GD-064) should be used; guidance in the ONR Inspection Rating Guide is to be used when judging the rating and for determining the appropriate follow up action.

8. GOVERNANCE AND APPROVAL OF THE PLAN

8.1 Approval and monitoring of the Intervention Plan will be via the Sub-Programme Boards (SPBs) and oversight by the Programme Regulatory Review Board (RRM). All annual Intervention Plans will be formally approved by the relevant SPB by the 1st April each year.

8.2 The role of the SPBs is to ensure that the agreed annual Intervention Plan aligns with the sub-programme strategy and that there is clear line of site to the higher level ONR strategies/plans.

8.3 The Programme Regulatory Review Board will check progress with the programme/sub-programme strategies. Progress with the associated Intervention Plans (IPs) may be reported to allow adjustments to plans and resources as necessary; however, the intervention plan is primarily monitored by the SPB.

8.4 Regulatory review is an important element of the delivery process. Its purpose is to determine whether sufficient progress is being made against appropriate targets and to make any adjustments to plans that appear to be necessary, together with associated resourcing changes. The review process is a fundamental element of programme performance management.

8.5 Reviews are carried out at different management levels but the process is generally the same at each level. At the SPB level, they should consider:

- Use of appropriate internally and externally sourced information relating to:
  - Regulatory Issues
  - Compliance Inspections
  - Systems Inspections
  - Permissioning Inspections
  - OEF
  - Corporate Interventions
  - Stakeholder Intelligence
  - Regulatory Intelligence (Advice Notes)
  - Programme Objectives
- Identification of the current status of the dutyholder - where are they now, strengths and weaknesses.
- Assessment of progress with extant delivery plans, and confirmation or otherwise of the relevance of current aims and objectives.
- Use of information on effectiveness of interventions and identification of alternative approaches where the need for this is indicated. This can include seeking explanations for better or worse than expected performance. Successful and unsuccessful interventions can both usefully inform future strategy.
- Agreement to overall priorities and objectives for the forthcoming planning period and the interventions intended to realize objectives, including those with dutyholders and stakeholders other than site licensees.
- Identification of any need for resourcing adjustments.

8.6 Furthermore SPBs should ensure that Intervention Plans are informed by and link to any strategies or guidance developed by SPBs and ideally will also be informed by longer term strategies set out for the site in question. This guidance is not prescriptive in this area other than to suggest that all intervention plans should be informed by and link to a longer term strategy. The Intervention Plan only gives a snapshot of intentions for the planned year, it does not give the longer term explanation of what those plans are intended to achieve as this will detailed in the appropriate sub-programme/programme strategy and associated Integrated Intervention Strategies.

9. INTERVENTION RECORDS - RECORDING INTERVENTION OUTCOMES

General

9.1 Intervention Records are used to record the outcomes of an intervention. They are generated by the inspector leading the inspection – if a team, or by the inspector who undertook the inspection.

9.2 The record is used to capture key information arising during the inspection and to record the arrangements, facilities and equipment inspected and how they were sampled.

9.3 The intervention outcomes in terms of compliance ratings and SBI judgements are identified on the record and captured by the Programme Delivery Support (PDS) onto the annual facility IIS plan to allow feedback and intelligence to be captured and

reviewed as part of the planning and re-baselining processes. Guidance on rating can be found on HOW2 in the section on Planning and Conducting Interventions (as a link from the Guidance Button).

9.4 The record of the arrangements sampled, the ratings and the judgements are used to ensure over time that a comprehensive picture is built for the facility and licensee/dutyholder. This allows the programmes to target resources to higher priority (poorer performing) facilities and aspects or themes of facility or licensee performance.

9.5 The Executive Summary of most Intervention Records is published on the ONR website as part of the openness and transparency agenda. The full IR is also potentially disclosable under FOI/EIR and should be written as such. In all cases, although the IR can be read by a wide audience, the focus is on recording outcomes on the topics sampled to ensure that the facility performance is monitored.

System Based Inspections (SBI)

9.6 The PDS in each of ONR's Programmes are responsible for recording the inspection rating recorded during each inspection. Head of Performance are responsible for exporting the data to track the relevant Key Performance Indicator.

9.7 To ensure that system/structure inspections are correctly reported to ONR's Finance, Planning & Performance team, there is a need for inspectors to ensure that inspections are correctly reported within the Intervention Records. The requirements for recording these interventions are outlined in the following examples to indicate acceptable and unacceptable entries; however, as a minimum the licensed nuclear site, the identified site Inspector, the relevant system and the month reported in the Intervention Record (not a Contact Record) should all be consistent with the relevant intervention plan.

EXAMPLE 1: ACCEPTABLE SBI (Table A)

Example (1) In recording the outcome of the system inspection the following input would be acceptable.

(i) all entries have been made in the rating column, i.e. even though a licence condition has not been inspected the box has been identified as being not applicable (n/a)

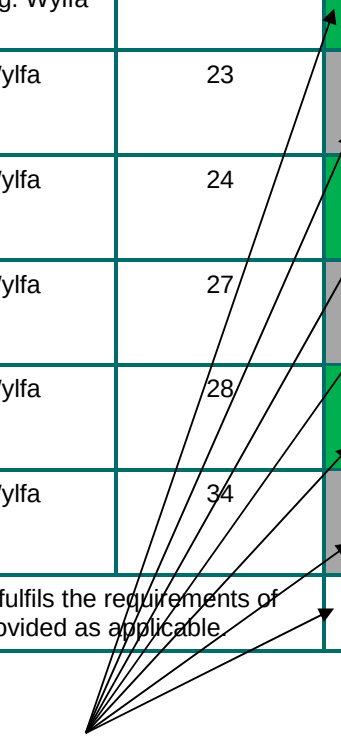
(ii) an overall judgement that the system/structure meets the requirements of the safety case has been made (yes or no).

How Ratings would look on the Front of the Intervention Record

(A) SYSTEM / STRUCTURES BASED INSPECTION RATINGS

Complete this section only where a System / Structures Based Inspection takes place. If Licence Condition not applicable, enter "n/a"

Record Section	System / Structures Based Inspection Details	Plan Name	Licence Condition (LC)	Rating	P/RUP*
Paragraph Number eg. 2.2	Provide details of System Inspected eg: Pressure Vessel Cooling Water System	Insert Site Plan Name eg. Wylfa	10	**Green**	P
Paragraph Number eg. 2.2	Provide details of System Inspected eg: Pressure Vessel Cooling Water System	Wylfa	23	**N/A**	P
Paragraph Number eg. 2.2	Provide details of System Inspected eg: Pressure Vessel Cooling Water System	Wylfa	24	**Green**	P
Paragraph Number eg. 2.2	Provide details of System Inspected eg: Pressure Vessel Cooling Water System	Wylfa	27	**N/A**	P
Paragraph Number eg. 2.2	Provide details of System Inspected eg: Pressure Vessel Cooling Water System	Wylfa	28	**Green**	P
Paragraph Number eg. 2.2	Provide details of System Inspected eg: Pressure Vessel Cooling Water System	Wylfa	34	**N/A**	P
Overall judgement that the System / Structure adequately fulfils the requirements of the safety case. Please delete “Yes” or "No" in the box provided as applicable.				**YES**	~~**NO**~~



EXAMPLE 2: UNACCEPTABLE SBI (Table A)

How Ratings would look on the Front of the Intervention Record

(A) SYSTEM / STRUCTURES BASED INSPECTION RATINGS

Complete this section only where a System / Structures Based Inspection takes place. If Licence Condition not applicable, enter "n/a"

Record Section	System / Structures Based Inspection Details	Plan Name	Licence Condition (LC)	Rating	P/RUP*
Paragraph Number eg. 2.2	Provide details of System Inspected eg: Pressure Vessel Cooling Water System	Insert Site Plan Name eg. Wylfa	10	**Green**	P
Paragraph Number eg. 2.2	Provide details of System Inspected eg: Pressure Vessel Cooling Water System	Wylfa	23		P
Paragraph Number eg. 2.2	Provide details of System Inspected eg: Pressure Vessel Cooling Water System	Wylfa	24	**Green**	P
Paragraph Number eg. 2.2	Provide details of System Inspected eg: Pressure Vessel Cooling Water System	Wylfa	27	**N/A**	P
Paragraph Number eg. 2.2	Provide details of System Inspected eg: Pressure Vessel Cooling Water System	Wylfa	28		P
Paragraph Number eg. 2.2	Provide details of System Inspected eg: Pressure Vessel Cooling Water System	Wylfa	34		P
Overall judgement that the System / Structure adequately fulfils the requirements of the safety case. Please delete “Yes” or "No" in the box provided as applicable.				**YES**	**NO**

Wrong

9.8 Example (2) In recording the outcome of the system inspection the following input would be unacceptable.

(i) all entries have not been made in the rating column,

(ii) an overall judgement that the system/structure meets the requirements of the safety case has not been made (yes or no). It is essential that the inspector completes this overall judgement box since failure to complete this will result in the safety inspection being recorded as not being done.

EXAMPLE 3: ACCEPTABLE ENTRIES (Table A)

	System/Structure Inspections	Rating		Rating		Rating
10	Training	Green		Amber		Green
23	Operating Rules	Green		Green		N/A
24	Operating Instructions	Green		N/A		N/A
27	Safety Mechanisms, Devices and Circuits	Green		Green		Red
28	Exam, Insp, Maint & Testing	Green		Green		Green
34	Leakage & Escape of Radioactive Material and Radwaste	Green		N/A		N/A
Jment	Safety Case Judgement (Yes/No)	Yes		No		No
		↑		↑		↑
		Right		Right		Right

EXAMPLE 4: UNACCEPTABLE ENTRIES (Table A)

	System/Structure Inspections	Rating		Rating		Rating
10	Training	Green		Amber		Green
23	Operating Rules	Green		Green		N/A
24	Operating Instructions	Green				N/A
27	Safety Mechanisms, Devices and Circuits	Green				
28	Exam, Insp, Maint & Testing	Green				
34	Leakage & Escape of Radioactive Material and Radwaste	Green				
Jment	Safety Case Judgement (Yes/No)			No		
		↑		↑		↑
		Wrong		Wrong		Wrong

Security Inspections

9.9 To ensure that security inspections are correctly recorded there is a need for inspectors to ensure that Intervention Record ratings are submitted to PDS. PDS are responsible for maintaining the IIS database and reporting to the Corporate Programme Management Office to allow the necessary checks on data and KPIs to be carried out.

Recording Interventions and Other Site Interactions

9.10 Routine compliance inspections should be recorded in the Intervention Ratings section of the standard Intervention Record template as follows:

- Record Section – Self Explanatory
    - Brief description of the relevant law e.g NI Act, REPPIR, NISR
- Intervention Details – Brief description of intervention e.g. Licence Compliance Inspection (including arrangements and/or implementation of arrangements)
- Brief description of relevant ONR guidance e.g TIG, TAG, Guidance notes.
- Plan Name – Plan name as per the agreed site/facility lists

- Licence / Series / IIS Code – Self explanatory for LCs IIS codes are to be recorded for non LC inspections, on the plan these would be 100 series.
- CNS will use the 300 series for their inspections.
- RMT will use the 400 series inspections.
- Ratings - The text supporting the rating should provide sufficient evidence to justify the rating.
- P or RUP – See detailed definitions on planned and reactive unplanned inspections contained within this guidance (section 12).

9.11 The example below shows a completed intervention ratings table illustrating some of the likely combinations which could be recorded.

EXAMPLE 5: INTERVENTION RATINGS (Table B)

INTERVENTION RATINGS
Complete this section only where applicable, e.g. for a compliance inspection or assessment where the dutyholder's arrangements are being rated. If not applicable, enter "n/a".

Record Section	Intervention Details	Plan Name	Licence Condition / Series / IIS Code	Rating	P or RUP
2.1	Planned inspection	Heysham 1	LC7	Green	P
2.2	Planned inspection	Heysham 1	LC14	Green	P
2.3	Annual Review of Safety	Heysham 1	107	n/a	P

Ratings AMBER or RED

9.12 If an inspection results in a rating of Amber or Red it is expected that the inspector will record one or more Regulatory Issues at Level 3 or above to address the shortfall within the Intervention Record and on the Issues database. The remedial work required from the licensee would obviously be expected to be proportionate to the shortfall observed and consistent with the Programme's regulatory strategy. Full details of the potential ONR Response are detailed in the ONR Inspection Rating Guide for consideration by the inspector. The expectation is that for an Amber, ONR will seek improvement and for a Red, ONR will demand improvement.

Ratings GREEN

9.13 If an inspection results in a rating of Green, the inspector may still identify topics for further improvement and offer observations or advice to the duty holder. If the inspector and the dutyholder agree that the observations or advice should be tracked, then the dutyholder should do this utilising their own system. For issues that the inspector wishes to track (eg a minor shortfall in compliance), then a Level 4 issue is to be raised in the Issues Database.

Use of Intervention Records covering Multiple Visits

9.14 Generally a single Intervention Record should cover no more than a single visit to site (which may be spread out over several days). It is considered acceptable to use a single Intervention Record where there has been a short break in a planned inspection due to circumstances such domestic issues, car breakdown, site events etc, (< 1 week) however it is not considered acceptable for a single Intervention Record to be used to record multiple interventions over a period of weeks.

10. MULTI-FACILITY SITES

10.1 Sites generally fall into two broad categories, those which are considered and inspected as a site in their own right such as power station sites i.e. Heysham 1, Sizewell B etc and multi-facility sites.

10.2 Multi-facility sites are those sites which due to operational inspection requirements are broken down into smaller facility/functional areas. For example Sellafield being split into Waste Vitrification Plants, THORP, Solid Waste, etc.

10.3 When planning inspections at multiple facility sites, it is important to ensure consistency in the naming of facility or functional areas, which the site has been split into. A list of facility or functional areas should be retained within the programme/sub-programme and this must be provided to Head of Performance.

10.4 When carrying out inspections at multi-facility sites, in order to rate each separate facility/area, the amount of inspection should be similar in size and scope to a normal licence compliance inspection at that site/facility (typically around ½ day for higher hazards sites).

10.5 An example of a multi-facility site Intervention Plan is provided below.

Office for Nuclear Regulation

EXAMPLE 6: MULTI-FACILITY INTERVENTION PLAN

	Sellafield Programme	*Infrastructure & WEDD*																													
	Site Inspection Plan 2014 to 2015																														
	Month	April		May		June		July		August		September		October		November		December		January		February		March							
	Planned (P)	P		P		P		P		P		P		P		P		P		P		P		P							
	Facility/System identifier, Inspector (I)	Identifier	I	Identifier	I	Identifier	I	Identifier	I	Identifier	I	Identifier	I	Identifier	I	Identifier	I	Identifier	I	Identifier	I	Identifier	I	Identifier	I						
	Licence Conditions																														
2	Marking of the site boundary																														
3	Restriction on dealing with the site	PP5/WVP	JC																												
4	Restrictions on nuclear matter on the site																														
5	Consignment of nuclear matter																														
6	Documents, records, authorities and certificates					PP5/HLWP	JC																								
7	Incidents on the site																														
8	Warning notices																														
9	Instructions to persons on the site																														
10	Training																														
11	Emergency Arrangements																														
12	Duly authorised and other suitably qualified and experienced persons																														
13	Nuclear safety committee																														
14	Safety documentation																														
15	Periodic review																														
16	Site plans, designs and specifications																														
17	Management systems																														
18	Radiological protection																														
19	Construction or installation of new plant																														
20	Modification to design of plant under construction																														
21	Commissioning																														

Examples of Mulit-Facilities

N.B. This plan is the Sellafield WEDD plan, but inspections are at High Level Waste Plants and Waste Vitrification Plant.

11. LEVEL 1 EMERGENCY EXERCISES – LC11

11.1 All Level 1 exercises and CTXs should be evaluated and a formal ONR Inspection Rating (against LC11 for Level 1s) recorded in an associated Intervention Record. This Intervention Record may reference out to formal letters detailing observations and improvement points but should include justification on the basis for the rating. All Level 1 exercises and CTXs should be included as planned compliance inspections on the annual Intervention Plan.

11.2 Exercise review meetings present a valuable opportunity to review and assess the development of a site's emergency arrangements, including CT arrangements. It must be remembered; however, that in order to rate an exercise review meeting against LC11, NSSP or CT contingency plan compliance, the inspection must be similar in size and scope to a normal licence compliance inspection at that site/facility (typically around ½ day for higher hazards sites).

12. PLANNED INSPECTIONS vs. REACTIVE UNPLANNED (RUP)

12.1 ONR's inspection strategies should be based on planned inspection. It is recognised however that there will routinely be a need for ONR inspectors to react to emergent issues or events. The time allocated to reactive inspections should be considered when developing a site's annual Intervention Plan as the reactive workload between similar sites can be expected to vary significantly based on the site's event history etc and allowance for such should be made in the annual planning cycle.

Planned Inspections

12.2 Planned inspections are those inspections which have been included on the approved annual Intervention Plan, including those inspections which have been subsequently added via the normal re-baselining process.

Reactive Unplanned Inspections

12.3 Reactive Unplanned inspections are those inspections which by definition were not on the annual Intervention Plan. Reactive Unplanned inspections generally result from such things as emergent issues, events or investigations etc. Inspectors should use discretion when deciding how to react to emergent issues. Consideration should be given to prioritisation between emergent issues and planned inspection if any planned work is to be deferred or cancelled. Consideration should also be given to the timing of any ONR intervention that could pre-empt the licensee's due process of investigation and reporting of events. In this case, information gathering may be appropriate, and a more detailed follow-up "planned" inspection may be scheduled for a later date.

12.4 Reactive Unplanned inspections should be added to the Intervention Record and marked as "RUP" – "Reactive Unplanned". Reactive Unplanned inspections should be rated only if the effort expended is similar in size and scope to a normal compliance inspection at that site/facility (typically around ½ day for higher hazards sites).

Announced vs Unannounced Inspections

12.5 Both planned and reactive inspections may be announced or unannounced. The majority of all ONR inspections will be planned and announced. This approach ensures the correct dutyholder or licensee staff are available and documents and records are accessible, enabling the inspection to be completed in an efficient manner. Most

reactive inspections will also be announced, again because it ensures the correct people and records are available when the inspection is made.

12.6 All sites *may* be subject to unannounced inspection, either planned or reactive, but reactive unannounced inspection is unusual and should be agreed between the inspector (or inspection team leader) and the Delivery Lead or Programme Director, and a clear record made of why a reactive unannounced inspection is appropriate.

12.7 To ensure a graded approach is applied, for higher hazard sites, one planned unannounced nuclear safety inspection should be undertaken each year. The exact number and type of sites subject to planned unannounced inspection will be determined by the programmes, noting that due to security and access controls, some sites may be excluded as justified by the programme. For a site with multiple high hazard facilities, more than one planned unannounced inspection is expected. Most lower hazard sites will still be subject to planned unannounced inspection, but at a lower frequency, some may not be appropriate at all. Exact criteria for which sites and what topics are most suitable for planned unannounced inspection cannot be specified, but examples are provided in Appendix 4.

12.8 Unannounced inspections do not have to be undertaken out of normal business hours, but they can be effective if they are out of hours. In such cases, inspectors should ensure they have considered all relevant risks to their personal safety and discussed their mitigation and management with their Delivery Lead.

12.9 Most licensee and dutyholder sites will be subject to at least one planned unannounced security inspection each year. This is appropriate because the readiness of security measures is an important element of their effectiveness.

12.10 Adding and recording planned unannounced inspections on the IIS plan - which in most programmes is shared with the licensee - clearly risks disclosing the inspection. To ensure such inspections remain unannounced, specific system codes will be applied to ensure they are not evident on any plan shared with the licensee.

Incidents on Site – LC7 Inspections

12.11 If during a planned LC7 inspection any issue is highlighted that indicates shortfalls in the licensee's compliance against another licence condition, then any inspection against that licence condition should not be rated unless the inspection is similar in size and scope to a normal licence compliance inspection at that site/facility (typically around ½ day for higher hazards sites). Any additional licence condition inspection carried out during the planned LC7 inspection must be recorded as "Reactive Unplanned" on the subsequent Intervention Record.

12.12 If however the inspector decides to plan in a specific inspection on the highlighted licence condition at a later date via the normal rebaselining process then this would be considered a normal "planned" inspection and is generally ONR's preferred approach.

13. WHEN NOT TO USE INTERVENTION RECORDS

13.1 There are occasions when it is important to capture a record of a regulatory exchange or an intervention, but it may not be appropriate to use the standard Intervention Record. This will normally be the case for a single contact where no rating is necessary or required, and may involve contact with someone other than a representative of a dutyholder or licensee. In some instances, ONR inspectors attend site over a number of days and during the course of such visits may engage in regulatory exchanges or information gathering exercises that do not need to be rated. In some instances, it is not necessary to raise several Contact Records, but instead details of exchanges could be included in one Contact Record.

13.2 A clear summary of the contact should be given based upon the evidence gathered and information exchanged. Any recommendation, including whether further regulatory action is needed, should also be clearly stated, if applicable.

13.3 The Contact Record can also identify issues raised as a result of the Contact; normally the issues will be recorded against dutyholders present. This issue could be raised due to a potential regulatory non-compliance, now or in the future.

13.4 Examples of instances where Contact Records can be used are:-

- For significant meetings or telephone/video conversation with stakeholders including licensees, supply chain, OGDs, NGOs, TSCs, Universities or other research organisations etc.
- For notes of technical workshops in the UK.
- As a record of our response to a simulated emergency or other event where we are interacting with other organisations e.g. the CNI and support team in the NEBR.

14. RE-BASELINING and RESCHEDULING of INTERVENTION PLANS

Site Intervention Plan Re-baseline & Rescheduling

14.1 At the end of each financial quarter interval (June, September & December), ONR Finance, Performance & Planning Team will circulate a calling note to all programmes enabling inspectors to re-baseline their plans if required. PDS (Programme Delivery Support) will circulate the latest site Intervention Plan to the assigned site inspector and Delivery Lead in order to re-baseline. Once the inspector and Delivery Lead have agreed the associated changes PDS will update the ONR intervention database and email the plan to the FPP (Performance Manager) with justification in order to track performance against the KPI(s) – 95% of all inspections achieved compared to plan & 100% of all planned SBIs achieved compared to plan. Baseline changes and justification reasons will be documented by the FPP (Performance Manager) and an entry will be placed on the ONR informal change control register.

Re-Baseline & Rescheduling rules

- Licence Condition Inspections which have not been achieved at the end of a financial quarter end are past and will be reported as unachieved inspections by the Finance, Planning & Performance team in order to track performance against the KPI – 95% of all inspections achieved to plan.
- SBIs which have not been achieved at the end of a financial quarter end are past and will be reported as unachieved system inspections by the Finance, Planning & Performance team in order to track performance against the KPI – 100% of all inspections achieved compared to plan.
- Missed inspections can be re-scheduled into future months to enable the full year inspection plan to be achieved, however re-schedules beyond quarter end will be reported unachieved to plan at the point they're missed.
- At the end of each quarter end (June, September & December) Licence Condition and SBI inspections can be rescheduled/deleted or added into future months, however justification is required. Approval by the associated Delivery Lead is mandatory.
- KPI performance is monitored monthly by the Finance, Planning & Performance team and reported to the Programmes via Monthly Highlight Reports.

- KPI performance is reported quarterly to the ONR governance boards at the required timescales, providing reasons for inspections not achieved as compared to plan.

Re-baselining timescales

14.2 Timescales for submitting re-baseline/rescheduled plans to Finance, Planning & Performance team will be 4 calendar weeks after the financial quarter end.

15. RESPONSIBILITIES

Nominated Site Safety Inspector / Intervention Plan Co-ordinator

15.1 The Nominated Site Safety Inspector (or Lead Inspector for multi-Inspector sites) has responsibility for establishing the Intervention Plan for sites and then co-ordinating activity relating to its delivery, as advised by the SPB. This will require co-operation by all those involved. Assigning this role is not intended to put the Nominated Inspector/Lead Inspector in a controlling position but simply reflects the fact that someone has to do this task, that the Nominated Inspector/Lead Inspector is the best placed person to do it, and that sites expect and benefit from being able to refer to a single point of contact on site interventions. The Nominated Site Safety Inspector is specifically not responsible for the delivery of the whole Intervention Plan.

Programme Delivery Support

15.2 All Intervention Plans must be in place by 31 March for the forthcoming planning year; therefore, the PDS will be responsible for the collation of all the relevant site Intervention Plans for the programme, after agreement has been made by the Sub Programme Board or associated programme governance group. The PDS will enter each of the site Intervention Plans onto the ONR Inspection Database (IIS) for the full Financial Year ahead. Upon completion they will generate a Site Report from the IIS and save in the relevant Trim Folder associated for the site. PDS will then issue the site report to the inspector for agreement that this is consistent with the submitted Intervention Record. On completion PDS will submit all of the initial site Intervention Plans to the Finance, Planning & Performance team (FPP). On receipt, FPP will then finalise each of the plans as the baseline for the associated site/programme for the financial year. These baseline plans will be used by the FPP to track programme performance against the KPI – 95% of all inspections achieved compared to plan and 100% of all planned system based methodology inspections achieved compared to plan. The Nuclear Site Safety inspector for the associated Intervention Plan is accountable for ensuring that the information held remains valid throughout the planning year.

15.3 Inspection ratings must be entered onto the relevant site Intervention Plan by the PDS. The PDS will enter the ratings provided within Boxes A, B or C of the Intervention Record, PDS will do this as soon as the IR is approved and distributed. It is important that this is done at the earliest opportunity i.e. within 1 day of receipt of the finalised IR.

15.4 Only inspection ratings included on Intervention Records will be (normally) acceptable for the purpose of updating the Intervention Plan. Contact Records are not acceptable for this purpose. Furthermore, the relevant site inspector identified on the Intervention Plan must be consulted before entering inspection rating data from any inspector not planned to undertake the inspection.

15.5 If the Intervention Record states the Inspection was planned then the PDS will check the site baseline Intervention Plan to check whether it is assigned - if it is they will enter as planned onto the inspection database. If it isn't assigned on the plan then it will be entered as RUP (reactive/unplanned). Any inspections displayed on the IR record as

RUP will be entered onto the inspection database as RUP. Once all of the ratings have been entered from the IR onto the site Intervention Plan the PDS will generate a site inspection report and email this to the IR author and site inspector as confirmation that the IR and ratings have been entered onto the site Intervention Plan. These reports will be saved into a designated Trim Folder with the date updated so the inspector can access as and when required.

15.6 FPP will use this information to track programme performance against the KPI(s).

15.7 PDS will consult the site inspector accountable for the plan to ensure the information is recorded appropriately and in-line with ONR guidance.

15.8 PDS will work closely with the FPP (Performance Manager) to highlight any issues with the site Intervention Plans and Intervention Records.

15.9 The PDS will provide monthly updates of the Intervention Plans to the relevant inspectors to ensure that the information remains current – any missed inspections should be identified and a reason captured on the Inspection database. PDS will be responsible for co-ordinating this into the inspection database so as the FPP can align with monthly performance reporting to programmes. The NSSI for the associated Intervention Plan will be accountable for the information held.

15.10 Programme Delivery Support (PDS) are responsible for the tracking of each Intervention Record (IR) from start to finish. The PDS will issue the inspector a Sequential Number from the programmes Unique Sequential Numbering Spreadsheet tracking the date of the inspection and the date of issue of the number (which should be before the inspection takes place).

15.11 On submission of the IR to the PDS, PDS will update the spreadsheet with the date of return and TRIM the IR within the designated TRIM Folder. The PDS will submit the trimmed IR to the relevant Delivery Lead for approval, tracking the date sent. Once the Delivery Lead has approved the IR and sent back to PDS, PDS will update the spreadsheet with the date of return. PDS will distribute the IR and update the relevant Site Intervention Plan upon IR return which will enable the tracking of the KPI(s) – 95% of all regulatory records completed to time/inspections achieved compared to plan.

15.12 It is important to note that the KPI will not be met until the record has been distributed and the Intervention Plan has been updated. PDS will ensure that the Intervention Plan is updated with the associated inspection ratings upon distribution of the IR. Progress will be monitored by the Programme(s) PDS Nominated Delivery Lead.

15.13 The author of the IR and the approver of the record remain accountable for the regulatory record KPI. The NSSI for the associated Intervention Plan will be accountable for the information held on the plan.

Cross-Programme Inspectors

15.14 It is the responsibility of cross-programme inspectors to supply FPP with a copy of their ONR wide Intervention Plan in the prescribed format. This will allow FPP to update the individual site/facility plans with the cross-programme intervention details. Where the NSSI or lead inspector identifies intervention clashes or opportunities to streamline intervention activities cross-programme inspectors should negotiate a suitable revised intervention plan, which fulfils all parties' requirements.

16. APPENDIX 1: ANNUAL INTERVENTION PLAN TEMPLATE

	ONR Programme Name	Site/Area Name																									
	Site Inspection Plan 2014 to 2015																										
	Month	April		May		June		July		August		September		October		November		December		January		February		March	
	Planned (P)	P		P		P		P		P		P		P		P		P		P		P		P	
	Facility/System identifier, Inspector (I)	Identifier	I	Identifier	I	Identifier	I	Identifier	I	Identifier	I	Identifier	I	Identifier	I	Identifier	I	Identifier	I	Identifier	I	Identifier	I	Identifier	I
	System/Structure Inspections																								
10	Training																								
23	Operating rules																								
24	Operating instructions																								
27	Safety mechanisms, devices and circuits																								
28	Examination, inspection, maintenance and testing																								
34	Leakage and escape of radioactive material and radioactive waste																								
Jment	Safety Case Judgement (Yes/No)																								
	Licence Conditions																								
2	Marking of the site boundary																								
3	Restriction on dealing with the site																								
4	Restrictions on nuclear matter on the site																								
5	Consignment of nuclear matter																								
6	Documents, records, authorities and certificates																								
7	Incidents on the site																								
8	Warning notices																								
9	Instructions to persons on the site																								
10	Training																								
11	Emergency Arrangements																								
12	Duly authorised and other suitably qualified and experienced persons																								
13	Nuclear safety committee																								
14	Safety documentation																								
15	Periodic review																								
16	Site plans, designs and specifications																								
17	Management systems																								
18	Radiological protection																								
19	Construction or installation of new plant																								
20	Modification to design of plant under construction																								
21	Commissioning																								
22	Modification or experiment on existing plant																								
23	Operating rules																								
24	Operating instructions																								
25	Operational records																								
26	Control and supervision of operations																								
27	Safety mechanisms, devices and circuits																								
28	Examination, inspection, maintenance and testing																								
29	Duty to carry out tests, inspections and examinations																								
30	Periodic shutdown																								
31	Shutdown of specified operations																								
32	Accumulation of radioactive waste																								
33	Disposal of radioactive waste																								
34	Leakage and escape of radioactive material and radioactive waste																								
35	Decommissioning																								
36	Organisational capability																								
	Other Areas of Work																								
100	IRRs -Ionising Radiation Regs (Includes HASS)																								
101	Joint Inspection with OGD																								
102	Review ONR Issues database with licensees																								
103	LLC / LCLC / SSG																								
104	Leadership and Management for Safety																								
105	REPPIR/EPCC																								
106	Safety Representatives																								
107	Annual Review Safety																								
108	Licensee Internal Regulators																								
	Nuclear Security - CNS Programme Input Only																								
300	Counter Terrorist Exercise (CNS Programme Only)																								
301	Security Contingency Plans (CNS Programme Only)																								
302	Inspection Approved Carrier (CNS Programme Only)																								
303	Inspection Information Security (CNS Programme Only)																								
304	Inspection Personnel Security (CNS Programme Only)																								
305	Inspection Site Protection (CNS Programme Only)																								
	Nuclear Transport - Transport Programme Input Only																								
400	Management Systems (Transport)																								
401	Compliance Nuclear (Transport)																								
402	Compliance Large Non-Nuclear (Transport)																								
403	Compliance Industrial (Transport)																								
404	Compliance Medical (Transport)																								
405	Compliance Carrier (Transport)																								
	Conventional Safety - CS Input Only																								
500	Health & Safety at Work Act																								
501	CDM - FOD CD Strategy																								
502	HID Delivery (COMAH, Explosives etc.)																								
	Fire Team																								
510	Fire Audits																								
	EIADR Team																								
520	EIADR																								
	Safeguards																								
600	Euratom/IAEA																								

17. APPENDIX 2: SAFETY SYSTEM or STRUCTURE LIST EXAMPLE – Civil Nuclear Reactors - Operating Reactors - Advanced Gas Reactors

No	Safety System Grouping
SBI01	Civil – Buildings, Site Infra, Sea Defences, Flooding
SBI02	Control and Instrumentation
SBI03	Boiler Feed
SBI04	Auxiliary Cooling (inc Pressure Vessel Cooling System)
SBI05	Seawater Systems
SBI06	Electrical – Emergency Generation
SBI07	Electrical – No Break Supplies
SBI08	Electrical – Short Break Supplies
SBI09	Electrical – Transformers, Grid Systems and Main Electrical System
SBI10	Emergency Equipment (AIC, ECC, etc…)
SBI11	Fire Detection, Suppression, Barriers, Doors and Dampers
SBI12	Fuelling Machine
SBI13	Decay Store
SBI14	Ponds and Flasks
SBI15	Fuel Assemblies
SBI16	IFDF & Maintenance Facilities (including PUSB)
SBI17	Gas Circulators
SBI18	Instrument Air and Turbine Overspeed Protection Systems
SBI19	H&V Systems
SBI20	Liquid Radwaste
SBI21	Solid and Gaseous Radwaste
SBI22	CO2 Storage and Distribution
SBI23	CO2 Processing and Blowdown (including Bypass Gas Plant, Auxiliary Boilers and O2/COS Injection)
SBI26	Reactor Post-trip Systems
SBI27	Reactor Safety Systems (Trip Parameters)
SBI28	Shutdown Systems - Control Rod System
SBI29	Shutdown Systems – Diverse

18. APPENDIX 3: INDICATIVE PROGRAMME FOR SYSTEM BASED INSPECTIONS (SBI)

Point in Time	Activities Expected
X – 8 Weeks	ONR to confirm actual date of the SBI and details of the system to be inspected.
X – 6 Weeks	TSC to forward the details of the Technical Specialist for agreement by ONR **TSC Deliverable 1 (D1)**
X – 4 Weeks	ONR & TSC hold pre inspection scoping meeting in ONR offices. ONR provide TSC with the inputs required for undertaking the preparation phase (further detail below).
X – 3 Weeks	TSC provide ONR with proposed Technical Input to the SBI Plan for the intervention. **TSC Deliverable 2 (D2)** ONR will seek clarification if necessary
X – 2 Weeks	ONR distribute the SBI Plan
X	**Date of Inspection**
X + 5 Days	TSC deliver proposed draft wording for the SBI input to the Intervention Record to ONR **TSC Deliverable 3 (D3)**
X + 8 Weeks	TSC return all material related to the SBI to ONR. Where this is not required TSC confirm destruction of the material. **TSC Deliverable 4 (D4)**

Safety case information to be provided by ONR at pre – inspection planning meeting

The information may vary depending on the site and the specific safety case, but will typically include:

- Provision of the key elements of the safety case to ensure clarity in inspection scope including the identification of relevant safety functions.
- Consideration of any known areas of operational experience.
- Identification of any specific areas that ONR is aware merit inspection.
- Any relevant earlier SBI Intervention Records

Summary of TSC Deliverables

D1 Details of Technical Specialist, to include:

- Name
- Full Copy of Current CV
- Positive confirmation of that no conflict of interest exists associated with the specialists selected to support the inspection.
- Site Access Details (NI No, DoB etc).

D2 Proposed technical input to the ONR SBI Plan.
This will comprise a document that provides the following

- Identification of the key technical areas that merit inspection (determination of inspection scope
- Identification of the safety functions
- Safety case claims relating to system performance (LC 23, 27 and 28) and identification of relevant Operating Rules, Safety Mechanisms, Devices and Circuits, EIMT schedules etc
- Safety case claims relating to availability and reliability (LC 23, 27 and 28 related) and identification of relevant Operating Rules, Safety Mechanisms, Devices and Circuits, EIMT schedules etc
- Safety case claims on Operator Actions (LC 10 and 24 related) and identification of training requirements and Operating Instructions
- Identification of the barriers required to contain radioactive material and radioactive waste (LC34 related).
- Areas of plant to be subject to physical plant inspection.

D3 Proposed draft wording for the SBI for inclusion into the ONR Site Inspector Intervention Record. This will be produced using the ONR template for Intervention Records and marked as 'Draft for ONR Use Only'. The ONR Site Inspector will own this record, edit/change/use the information contained within it as they wish, and sign as author.

D4 Return of all material or destruction. TSC will confirm in writing to ONR return of all material to ONR or confirmation to ONR that all material relating to the inspection has been destroyed.

19. APPENDIX 4: UNANNOUNCED INSPECTION EXAMPLES

The table below gives examples of when a planned unannounced inspection is valid

Topic	Appropriate	Not appropriate
Timing	On a separate day to the agenda issued to site for the planned inspection. Eg. For a planned 3 day inspection Tuesday to Thursday, an unannounced inspection would be on Monday or Friday (in normal hours)	A short “add-on” to a day already planned to be on site. E.g. For a planned 3 day inspection, Tuesday to Thursday, it would not be a recorded as planned unannounced to stay after 5pm for a few hours beyond the timed inspection on the agenda sent to site.
Timing	An out of hours inspection not on the agenda of a planned inspection. E.g. Returning to site after 7pm, or arriving at site at 05:00	
Timing	A separate day or out of hours alongside a planned inspection	A one-off visit to site solely to complete unannounced inspection (inefficient)
Duration	Typically 3-4 hours of inspection	Less than 2 hours
Planning	A plan for the inspection will be drawn up, but not shared	No plan prepared, inspection determined on the day based on experience/topics of interest to inspector
Planning	Inspection planned for ONR inspectors only	No joint inspections with other external or internal regulators or TSCs – to ensure inspection is demonstrably unannounced.
Notice	Site informed unannounced inspection will occur during the year	Site given notice of “unannounced” inspection at the next visit/month, or of content
Content	Implementation of arrangements	Inspection of arrangements (because correct staff not normally available or prepared, therefore inefficient).
Content	Following a job (select a job/task from the work pack, job card issue, briefing, conduct, review, closure)	
Content	Inspect shift handover	
Content	Observe and interview out of hours staff (e.g. cleaners, other workers) for control and supervision, setting to work, work control	Unplanned general “chats” with available staff
Report	Normal Intervention Record, setting out purpose, objectives, activity, findings, and IF APPROPRIATE, rating	No account in intervention record.
Record	Entered on IIS plan in advance, tick or rating to confirm complete	Entered in arrears – otherwise it is reactive/unplanned

20. APPENDIX 5: INTERVENTION GOVERNANCE & OVERSIGHT ARRANGEMENTS

	Operational Programmes			FPP		Assurance	
Governance/Oversight (indicative frequency)	**Chaired/Led by**	**Responsibilities & scope etc.**	**Outputs**	**Used by**	**For**	**Used by**	**For**
Programme Board (monthly)	Programme Director (Deputy Chief Inspector)	Business Delivery KPIs Milestones (Business & High level programme) Resources (re-prioritising within resource allocation as required) Budgets	Programme Strategy[1] Resource Spreadsheet[2] Justification[3] Highlight report (Monthly)[4] Effectiveness report (Quarterly)[5]	yes yes yes yes yes	Annual Operating Plan	no no no no yes	
Programme Regulatory Review Board (quarterly)	Programme Director (Deputy Chief Inspector)	Regulatory Strategy Issues/Risks Regulatory Effectiveness Change to strategy Review Intelligence data (OEF etc.)	Potentially revise Programme Strategy Potentially revise Resource Spreadsheet[6] Potentially revise Sub-programme Integrated Intervention Strategy (IIS)[7]				
Sub-Programme Board[8] (quarterly)	Delivery Lead (Superintending Inspector)	Sub-programme scope and strategy review Intervention Plans & milestones Assessment plans Sub-programme risks and issues Delegated responsibility for management of resources and change control	Sub-programme Integrated Intervention Strategy (IIS)[9] Sub-programme scoping documents (to include milestones)[10] Progress towards Programme milestones (high-level) and specific milestones from sub-programme Oversight of delivery against site specific milestones contained within sub-programme strategies Information for programme level boards				
Delivery Management Group[11] (monthly)	Nominated Site Inspector, or Lead Principal Inspector	Review progress against plans Review reactive work and impact on programme Change control on resources	Intervention Plans[12] Area/Site/Portfolio Plans Work Scope Definition Documents				

[1] Provides long term direction informing Annual /Operating Plan

[2] Budgets, advises Professional Leads of resource demands profiles

[3] Basis for letter of delegation of budgets to Programme Directors

[4] Monthly CEO Report to the Board, provides CNI with overview of Programme performance, enables tracking of delivery against KPIs, feeds into Balanced Scorecard and Finance, Performance and Assurance Report

[5] Forms part of the Finance, Performance and Assurance Report to the Board

[6] Budgets, advises Professional Leads of resource demands profiles

[7] Integrated Intervention Strategy identifies the [sub] programme's regulatory priorities, typically over a three year period, to include inspection, permissioning milestones, cross cutting activities and other Regulators (EA/SEPA/ DNSR) etc.

[8] Sub-programme Boards is the ONR term which replaces Intervention Management Groups (IMGs), Sub-programme Regulatory Review Meetings (RRMs) etc.

[9] Integrated Intervention Strategy identifies the [sub] programme's regulatory priorities, typically over a three year period, to include inspection, permissioning milestones, cross cutting activities and other Regulators (EA/SEPA/ DNSR) etc.

[10] Provides objectives and milestones for inclusion in the Operating Plan. Scoping is carried out at sub-programme level, there is no Programme 'scope document'. The programme in the Operating Plan is the totality of the sub-programme scopes.

[11] DMG's may be required by some programmes and are a sub-group of the sub-programme board of the appropriate management oversight of work

[12] Intervention Strategies cover all work. Intervention Plans are produced in accordance with this document and cover nuclear safety, security, transport & conventional safety interventions etc. for a nuclear licensed site and identify System Based Inspections and Licence Compliance inspections etc.