



| | | | |
|---|---|------------------------------|-------------|
| ONR GUIDE | | | |
| Management of Regulatory Issues - Guidance | | | |
| Document Type: | Management of Regulatory Issues | | |
| Unique Document ID and Revision No: | ONR-RI-GD-003 Revision 5 | | |
| Date Issued: | August 2020 | Review Date: | August 2023 |
| Approved by: | Colin Tait | Regulatory Oversight Manager | |
| Record Reference: | CM9 Folder 1.1.3.1014. 2020/236779 | | |
| Revision commentary: | Minor revision update incorporating feedback from B5 Bitesize Training sessions and Delivery Leads, incorporation of the issues level guidance chart, inclusion of examples and, the inclusion of additional guidance relevant to Safeguards. | | |

TABLE OF CONTENTS

| | |
|--|----|
| 1. INTRODUCTION | 2 |
| 2. DEFINITIONS | 3 |
| 3. ISSUE LEVEL..... | 3 |
| 4. RECORDING INFORMATION ON THE RID | 4 |
| 5. ISSUES MANAGEMENT (GOVERNANCE) | 7 |
| 6. RESPONSIBILITIES..... | 10 |
| 7. DATABASE ACCESS..... | 12 |
| 8. REFERENCES | 12 |
| APPENDIX 1: RID DATA ENTRIES – EXAMPLES OF ACCEPTED PRACTICE | 13 |
| APPENDIX 2: REGULATORY ISSUES LEVEL GUIDANCE CHART | 15 |

1. INTRODUCTION

Background

- 1.1 In May 2004, an explosion at the ICL Plastics Factory in Maryhill Glasgow resulted in 9 deaths with a further 33 people injured, 15 of them seriously. This incident was to have significant implications for safety regulators.
- 1.2 The subsequent independent inquiry chaired by Lord Gill concluded that the explosion, caused by the ignition of Liquefied Petroleum Gas (LPG) that had escaped from a poorly maintained and inaccessible section of pipework, was an “avoidable disaster”. Lord Gill also concluded that the Health and Safety Executive (HSE) had “failed in its duty to effectively manage the regulatory issues that led to the explosion”; in particular, he criticised the lack of consistency in the HSE’s approach to the identification and management of regulatory issues and, the failure to use regulatory issues to inform its intervention strategy for the ICL factory. As a consequence, HSE failed to appreciate the significance of the buried pipework (from which the LPG had escaped), failed to pursue follow-up visits promptly and, failed to apply appropriate caution in the acceptance of a compromise that focused on addressing the more easily accessible areas of the LPG system.
- 1.3 As part of ONR’s response to the Gill Report, the Regulatory Issues Database (RID) was created: The RID provides the mechanism to record and monitor progress against the follow-up actions required to address issues identified by ONR inspectors. This is supported by a systematic regulatory issues management process, to be adhered to consistently by all ONR inspectors, irrespective of function or specialism.

Management of Issues within ONR

- 1.4 A regulatory issue can arise at any point during a regulatory activity be it site inspection, permissioning or conducting a formal technical assessment. It is important to note that the identified safety, security or Safeguards shortfall is the licensee/duty holder’s responsibility to address: It is important that, in discussions concerning the raising of a regulatory issue, the duty-holder understands the nature of the shortfall in the context of the regulatory expectation and, the actions necessary to ensure the shortfall is resolved to ONR’s satisfaction.
- 1.5 ONR’s inspectors are required to record and manage all regulatory issues through to closure using the RID. This includes routine issues identified and managed by ONR inspectors, through to high level strategic issues that may have long resolution timescales.
- 1.6 Information entered into the RID by ONR staff should provide a full auditable trail of the issue; this includes the actions placed on licensees/duty holders, reference to any associated enforcement, reference to all relevant correspondence, monitoring of progress including a history of all interactions between ONR and the duty-holder relating to the resolution of this issue (including key decisions and agreements) and the basis for closure. It is important to appreciate that the RID is a key component of ONR’s knowledge management system and should provide a clear cross-reference (sign-posting) to source documentation recorded within CM9 which is ONR’s single, authoritative source of information for compliance with Freedom of Information (Fol) and similar legislation.
- 1.7 The RID provides assurance to the ONR Board, the Senior Leadership Team (SLT) and Regulatory Leadership Team (RLT) that ONR is effectively managing and tracking its regulatory issues and any associated enforcement actions to satisfactory closure. ONR’s management of regulatory issues is monitored via ONR’s regulatory

effectiveness indicators, and compliance with both the regulatory issues process and use of the database are subject to periodic review and audit.

- 1.8 Information held on the RID should be used to demonstrate ONR's regulatory oversight of the nuclear industry and to inform the response to FOI requests and ministerial questions. The RID will also inform the development of ONR's regulatory oversight strategy.
- 1.9 The RID is not to be used to manage ONR business risks or to track strategic aims, large programmes of work or regulatory projects: There are separate arrangements in place to cover these activities.
- 1.10 The regulatory issues management process does not constrain inspectors from using regulatory powers or otherwise responding to matters that require immediate or timely action.

2. DEFINITIONS

Regulatory Issue

- 2.1 A regulatory issue is:

“Any safety or security matter that has the potential to degrade safety or security, challenge regulatory compliance or challenge an agreed regulatory strategy”.

- 2.2 Within this guide the term ‘safety’ relates to all aspects of safety including Health, Conventional, Nuclear, Radiological, Chemo-toxic, Fire and Transport. The term ‘security’ refers to all matters related to Civil Nuclear Security **and** all matters related to Safeguards.

Management Group

- 2.3 Within this guide, the term ‘management group’ is used generically to include any governance forum with assigned responsibility for managing regulatory issues. These include:
 - Regulatory Leadership Team (Regulatory Directorate level governance)
 - Divisional Board
 - Sub-Division Board
 - Delivery Management Group
 - Intervention Management Group
 - Issues Review Group

3. ISSUE LEVEL

- 3.1 ONR uses a graded approach for the management of regulatory issues: the level assigned provides two key functions:
 - To indicate its safety or security significance;
 - To assign an appropriate level of management scrutiny.

- 3.2 The level assigned also reflects the level of oversight ONR expects the issue to receive within the licensee's/duty holder's organisation.

- 3.3 The following guidance is provided to promote consistency of approach across ONR irrespective of specialism or function. Although the inspector will set the level initially,

it is the role of the management group to ensure that an appropriate level is assigned and recorded within the RID.

Assigning an Issue Level

3.4 The issue level is a numerical indicator (Level 1 to 4) where Level 1 is assigned to those issues requiring the highest level of ONR management attention and Level 4 the least. In general, the level assigned to a regulatory issue follows the following guidance:

- **Level 1:** This is the highest level of importance and should be reserved for issues that merit oversight by the Chief Nuclear Inspector (CNI) and Regulatory Leadership Team (RLT). Examples include:
 - The potential cessation of licensee/duty holder operations;
 - Identification of an intolerable risk likely to result in significant public and/or political interest requiring strategic ONR oversight;
 - Failure of the UK to meet international safeguard's obligations that provide a basis for possible escalation or formal sanction by IAEA and/or NCA partners.
- **Level 2:** This level applies to those 'significant' issues that do not merit oversight by the Chief Nuclear Inspector (CNI) but nonetheless merit oversight by the relevant Divisional Director. Examples include:
 - An issue where an Improvement or Enforcement Notice, Specification or Direction (or similar enforcement) might be applied;
 - A matter that justifies the withholding of a permission;
 - A matter associated with an ONR inspection/assessment rating of 'Red' (Demand Improvement), or
 - Significant failure to maintain arrangements for nuclear materials accountancy and control.
- **Level 3:** This level applies to routine regulatory matters that require oversight by the relevant Delivery Lead. This would apply to 'routine' compliance shortfalls resulting in an inspection/assessment rating of 'Amber' (Seek Improvement). Level 3 Issues would ordinarily require an enforcement communication to be sent to the duty-holder.
- **Level 4:** This level applies to those matters identified by inspectors that do not merit proactive management by the Delivery Lead. Typically these are matters arising from ONR interventions that have attracted an ONR inspection/assessment rating of Green (No Formal Action) but where minor shortfalls/improvements have been identified. Level 4 issues do not require an enforcement communication.

3.5 The 'Regulatory Issues Level Guidance Chart' at Appendix 2 provides additional guidance to inspectors when assigning an initial level to a regulatory issue.

3.6 This level assigned to a regulatory issue may be increased (escalated) or reduced (de-escalated) at the discretion of the appropriate management group to reflect licensee/duty holder performance in addressing the issue. This is discussed in more detail under 'Issues Management (Governance)' at Section 5.

4. RECORDING INFORMATION ON THE RID

4.1 To ensure that ONR records the management of regulatory issues to an appropriate quality and consistent with the demonstration of their proper control, the following data entry requirements against each of the RID 'data fields' (tabs) should be met.

[Examples of accepted practice and unacceptable practice are provided at Appendix 1].

Issue Title:

- 4.2 The 'Title' should be a single sentence that conveys clearly and concisely the nature of the issue.
- 4.3 Sufficient keywords should be included to enable discrimination of the issue from other similar issues entered on the RID.
- 4.4 Where practicable, the title should identify the facility or area to which it applies.
- 4.5 Consideration should also be given to wording the title in such a way as to support the broader ONR governance requirement. For example, trending, supporting the review and development of ONR guidance and, supporting the review and development of ONR regulatory strategy.
- 4.6 Note: The 'Issue Title' cannot be changed once saved. It is recommended that the inspector seeks advice from their Delivery Lead if they are uncertain of the expectation.

Issue:

- 4.7 The 'Issue' entry should be kept as short as practicable but provide sufficient information to enable the licensee/duty holder and any fully trained inspector to understand the plant, procedure and people context, the regulatory shortfall and the significance of the matter.
- 4.8 The issue **must** be worded in a way that can be subsequently closed out.
- 4.9 Where practicable, the text should identify the facility or area to which it applies.
- 4.10 Where practicable, it is also considered good practice to include the reference to the source document within CM9 where the issue was raised [for example the associated Intervention Record, Contact Record or Assessment Report].

Actions:

- 4.11 Actions **must** meet the SMART requirement to enable each action to be closed.
- 4.12 The actions **must** collectively provide the evidence to enable the issue to be closed.
- 4.13 It is important to discuss any corrective actions and their timetable with the licensee/duty holder to ensure that they are appropriate and achievable. It is also important to gain assurance of the licensee's/duty holder's commitment to address the actions agreed and to ensure they understand the regulatory implications should they fail to be progressed adequately.
- 4.14 Actions arising from a Level 1, 2 or 3 regulatory issue should be confirmed in writing via the appropriate 'Enforcement communication' (letter or email).
- 4.15 It is permissible to modify or refine the specified actions and/or their associated dates in the RID in light of changing circumstances. In these instances the issue owner **must** ensure that a record is made within the 'Progress History' tab providing the justification for any changes.

4.16 To meet the SMART requirement, actions **must** meet the following criteria:

- **Specific:** The actions must specify the activity that the licensee/duty holder needs to deliver to enable the action to be closed.
- **Measurable:** They need to clearly identify the evidence that is necessary to demonstrate that the required activity has been delivered and enable the action to be closed.
- **Achievable:** The actions placed on the licensee/duty holder must be proportionate to the significance of the issue with regards scope and timescales and, within the capability of the licensee/duty holder to reasonably deliver.
- **Relevant:** The actions must contribute directly to closing the issue and result in the licensee/duty holder achieving the required standards of safety and security [address the shortfall in regulatory expectation].
- **Time-based:** Each action should have an appropriate date by which that action should be closed. Collectively these dates should enable the issue to be closed within the agreed timescale.

Due Date:

4.17 A due date must be allocated to each Issue when it is raised. In the context of the RID this is the date by which the issue owner will have completed their next formal review of the licensee's/duty holder's progress in addressing the actions agreed to close out the issue. As such there are a number of options by which the issue owner can set the due date on the RID:

- A date as soon as practicable after the target date set for the next action due to be closed.
- A date where the issue owner considers a review is warranted to ensure suitable progress is being made by the licensee/duty holder to resolve the issue.
- A date not normally longer than 6 months from the last formal review.

4.18 There may be instances where issues are raised which identify actions that may not be closed out for a significant period of time. In these instances the appropriate management group has the discretion to approve the setting of a due date for review at a periodicity greater than the 6 months limit discussed at paragraph 4.17.

4.19 Due date must not be confused with the date the issue is due to be resolved. This date is subject to change and can be identified from the agreed action plan at the 'Actions' tab.

Progress History:

4.20 The 'Progress History' tab provides a record of all activities and decisions associated with the regulatory oversight of the issue. This should be updated on a regular basis, for example following progress review meetings with the licensee/duty holder, following receipt of written updates, or to record decisions made by the management group. These updates must make reference to the relevant records (eg. Intervention Records, Contact Records, Assessment Reports, minutes of meetings) or other correspondence held on CM9.

4.21 The 'Progress History' tab should also be used to record the reason for changes to the due date, actions list (including changes to target dates) and the 'Progress RAG Status' (discussed later at paragraphs 5.13 to 5.16).

4.22 The 'Actions' tab should not be used for recording progress.

- 4.23 If an issue stalls or becomes difficult to manage, the issue owner should bring the issue to the attention of the relevant Delivery Lead as soon as practicable.
- 4.24 The information provided within the 'Progress History' Tab provides the audit trail of ONR's oversight of the regulatory issue which may be called upon in any subsequent investigation or via an FOI request. Consequently data entered and saved within this tab cannot be changed once saved.

TRIM (CM9) References:

- 4.25 The entries made on the RID should provide a complete auditable record of the issue. Issue owners must use the 'TRIM Refs' tab to record any significant correspondence and other relevant information, such as IRs and CRs, that report interactions between ONR and the licensee/duty holder.
- 4.26 Actions associated with Level 1, 2 and 3 issues are ONR enforcement actions; the associated enforcement communication (email or letter) must be referenced in the RID issue entry. Appropriate CM9 references must also be entered when ONR enforcement powers (e.g. notice, specification) have been used.

Basis of Issue Closure:

- 4.27 To demonstrate a complete auditable record of the management of the regulatory issue from being raised through to closure, the basis against which the issue has been closed must be recorded in the RID.
- 4.28 This entry should be as short as practicable but give sufficient information to enable any other warranted inspector to understand the justification for closing the issue and include reference to any evidence supporting the basis for closure.

5. ISSUES MANAGEMENT (GOVERNANCE)

Progress Review

- 5.1 All issues must be regularly reviewed through the appropriate management group's governance arrangements. The reviews should be conducted in accordance with the responsibilities of the individual management group and apply the management hierarchy set out in paragraph 3.4. For issues at Level 3 and above, the reviews should seek to:
- Agree the issue's title and scope.
 - Agree that the issue has been assigned the right level.
 - Advise on the adequacy and appropriateness of the action plan to resolve the issue within a reasonable timescale.
 - Confirm at appropriate intervals (and at least quarterly) that the issue is being appropriately managed and that relevant interactions and evidence are being recorded within the RID.
 - Confirm the 'ONR Progress RAG' Status.
 - Agree to the closure of issues where the action plan has been completed.
- 5.2 In addition, Sub-Divisional management groups must have arrangements for monitoring the adequate management of Level 4 issues falling within their remits; it is expected that these reviews are undertaken on an at least quarterly basis.
- 5.3 In addition to the regular review of progress by issue owners with licensee/duty holder staff, Delivery Leads should make arrangements for regular engagement with the

licensee/duty holder, at an appropriate level, to review overall performance in progressing and closing regulatory issues.

- 5.4 It will be for each management group to decide which protective security marking should be applied to their regulatory issues and how these should be recorded. Care should be taken to ensure that the cumulative content of the information does not warrant a higher security marking for the issue (or the RID extract), particularly as information is added during the lifetime of the issue. Where inclusion of an issue would cause the database to require a protective marking above OFFICIAL, the entry should be made using oblique language.

Changing the level assigned to a regulatory issue

- 5.5 There may be circumstances where slippage in progress towards closure of an issue reaches a point where greater regulatory attention is warranted (see paragraph 3.6). In such circumstances the relevant management group may increase the 'Issue Level' in order to leverage improvement by raising the visibility of the issue within ONR and the licensee/duty holder organisation. When the level assigned to an issue is raised, the licensee/duty holder must be informed by the relevant enforcement communication commensurate with new level.
- 5.6 It is also at the discretion of the relevant management group to lower 'Issue Levels'. This applies when an issue has been partially resolved or where emergent information indicates that the issue is not as important as first thought. This is particularly relevant to long term significant safety issues where the improvement activities undertaken by the licensee/duty holder demonstrate:
- An improved understanding of the technical issues associated with the regulatory issue;
 - The licensee/duty holder is demonstrably progressing to a position of improved compliance with the regulatory expectation;
 - There is a demonstrable reduction in the risk gap.
- 5.7 A commentary to explain changes to the 'Issue Level' is to be provided in the RID 'Progress History' tab.

RAG Indicators

- 5.8 The RID provides a set of Red/Amber/Green (RAG) Indicators to support the management of regulatory issues within ONR. There are three types of RAG indicators used within the RID:
- Time (automatically assigned)
 - Progress - ONR view
 - Progress – Licensee/Duty holder view

RAG Indicator – Time:

- 5.9 The RID will automatically apply a 'Time RAG' status, which will be based on the date entered into the 'Due Date' field. This indicates how soon the next review date will be reached. The due date is used as an ONR management indicator to check that issue owners are managing issues effectively (see paragraph 4.17). Consequently, the 'Time RAG' should not reach Red.
- 5.10 The 'Time RAG Indicator' must not be confused with the 'Progress RAG Indicator' as a means of demonstrating licensee/duty holder performance in addressing regulatory issues. Consequently the 'Time RAG' should never be kept at 'Red' as a means of putting pressure on the licensee/duty holder.

5.11 'Time RAG' status definitions are provided at Table 1.

RAG Indicators - Progress (ONR and Licensee/Duty holder):

5.12 The 'ONR Progress RAG' indicates how ONR perceive the licensee's/duty holder's performance in addressing the close out of each issue. The issue owner is responsible for allocating an initial RAG status when first entering data onto the RID and for updating the RAG status following each formal review of progress with the licensee/duty holder or, following the receipt of new information.

5.13 The 'Licensee/Duty holder RAG' provides the means by which the licensee/duty holder can record their own perception of their progress in addressing the satisfactory close out of the issue. This information is recorded in the RID by ONR using information supplied by the licensee/duty holder. Where there is a discrepancy between the 'ONR and the Licensee/Duty holder RAG' status, the issue should be reviewed and investigated by the Delivery Lead.

5.14 'The Progress RAG' indicators should be used by management groups to manage the issue's progress to closure and to indicate when corrective action or escalation may be necessary. For issues at Level 3 or above, the RAG indicators are to be reviewed and updated at each management group meeting by the issue owner. A commentary to explain changes to RAG indicators is to be provided in the RID 'Progress History' tab.

5.15 'Progress RAG' status definitions are provided at Table 2.

Table 1: RAG Status Definitions – Time

| Definition for RAG Status | RAG Status |
|---|--|
| Due Date Set - Progressing as Anticipated More than 3 months to run until the Due Date. | Green  |
| Due Date Approaching Less than 3 months to go until the Due Date. | Amber  |
| Overdue The Issue has reached or passed its Due Date without being reviewed or closed. | Red  |

Table 2: RAG Status Definitions – Progress [ONR and Licensee/Duty Holder]

| Definition for RAG Status | RAG Status |
|--|--|
| Progressing Satisfactorily Issue management and control is adequate, the closure of the Issue is progressing in line with the agreed action plan. | Green  |
| Under Threat Weaknesses are observed in the management and control of the Issue. Improvements need to be made to ensure the Issue is closed on time. | Amber  |
| Unsatisfactory Issue management and control are inadequate to an extent that the Issue will not (likely) be closed on time. | Red  |

Division/Sub-Division Specific Arrangements

- 5.16 Provision has been made in the RID for ONR Division or Sub-Division specific information to be entered. Where this is the case, local instructions should be provided by Delivery Leads to supplement this guide.
- 5.17 A bespoke process is in place in New Reactors Division for managing Regulatory Queries, Observations and Issues arising from the GDA process. This process is separate from the RID.

6. RESPONSIBILITIES

- 6.1 This section provides an overview of the responsibilities associated with the management and oversight of regulatory issues.

Inspector (Issue owner):

- 6.2 All regulatory issues have a designated inspector as owner. In general this will be the inspector who identifies and raises the issue: Ownership may be passed to another inspector if they are considered the most appropriate person to oversee the resolution of the issue. [For example, an issue raised by a specialist inspector during an assessment may be owned by the relevant project inspector due to their regular interactions on site]. The issue owner is responsible for:
- Identifying potential issues during the course of inspections, assessments or other interventions and agreeing the need for some form of remedial or corrective action(s) with the licensee/duty holder.
 - Proposing an initial 'level' to be assigned to the regulatory issue based on their assessment of the significance of the 'shortfall' and the level of oversight within ONR.
 - Entering the details of issues raised onto the RID.
 - Drawing proposed new Level 1, 2 and 3 issues to the attention of the Delivery Lead, for endorsement at the appropriate management group forum (see paragraph 6.3).
 - Agreeing an action plan with the licensee/duty holder that will address the issue within an appropriate timescale [closure date].
 - Setting an appropriate due date for the next formal review of progress with the licensee/ duty holder.
 - Lead discussions with licensees/duty holders at an appropriate level and frequency to:
 - share information held on the RID;
 - monitor progress;
 - determine an appropriate ONR RAG status progress indicator;
 - obtain licensee/duty holder comments where views on progress differ.
 - Ensuring that progress is recorded on the RID by updating the 'progress history' tab issue progress statement and ensuring that the due date is managed;
 - Recording any change made to the action plan and the justification for that change.
 - Reporting progress to Delivery Leads/DMGs, making recommendations for escalation/de-escalation as appropriate and updating RID entries if changes are agreed.
 - Closing the issue when suitable evidence has been obtained that the issue has been satisfactorily addressed [for issues at Level 3 or above, agreement to close the issue will need to be endorsed by the appropriate management group].

- 6.3 In the case of proposed Level 1, 2 or 3 issues arising from routine inspections, Delivery Lead endorsement is implicit in their sign off of the associated Intervention Record.

Delivery Lead:

- 6.4 The Delivery Lead is responsible for:
- Establishing suitable governance arrangements for regulatory issues, including the endorsement of the initial 'level' proposed by the inspector.
 - The oversight of enforcement communications relevant to Level 1-3 issues.
 - Overseeing the quality of the data entered into the RID.
 - Regularly reviewing due dates and assessing whether sufficient justification has been recorded where action plans have changed.
 - Reporting to the Divisional Director on progress with Level 1 and 2 issues.
 - Engaging with licensee/duty holders on their performance in closing regulatory issues.
 - Ensuring the management of regulatory issues fully aligns with relevant regulatory strategies.

Divisional Director:

- 6.5 The Divisional Director is responsible for:
- Ensuring the right level of oversight is maintained by Delivery Leads/DMGs.
 - Overseeing the management of Level 1 and 2 issues and reviewing the regulatory response proposed by Delivery Leads/DMGs.
 - Contributing to RLT's oversight of Level 1 issues (including those owned by other Divisions) and advising the CNI.

Chief Nuclear Inspector:

- 6.6 The CNI is responsible for overseeing the management of Level 1 issues at RLT meetings.

Administrative Support:

- 6.7 Where there is such a role within a Sub-Division: Administrative support teams are responsible for the day-to-day administration of the database including:
- Inspectors' database training.
 - Update issues as requested with the permission of the issues owner.
 - Transfer issues between inspectors (provided both the inspectors consent).
 - Search the database and print off data as requested, either as hardcopy or electronically.
 - Assist in system audits.
 - Creation and maintenance of Inspector user accounts.
 - Provide statistical information and graphical output for senior management and Governance meetings.
 - Maintain dropdown lists.
 - Where actioned by DMG governance arrangements, review database and proactively remind inspectors of requirements to manage and update their issues.

Licensee/Duty Holder:

- 6.8 The licensee/duty holder is accountable for completing the actions required to close out a regulatory issue within the agreed timescale.

- 6.9 Inspectors should satisfy themselves that the licensee/duty holder has the necessary arrangements in place to progress regulatory issues and that they receive the necessary management oversight commensurate to the level assigned.

7. DATABASE ACCESS

- 7.1 The Regulatory Issues Database (RID) can be accessed via the following link:

<http://hsefilemaker12/onr-issues/ONR-Issues-System.html>

- 7.2 ONR staff should contact Divisional Delivery Support (DDS) to have an account created and a temporary password allocated. Upon logging-in for the first time, users are requested to change the temporary password immediately. This login and password is retained and used each time access is required.
- 7.3 Guidance on how to use the Regulatory Issues Database can be found in the following user guides.
- ONR-RI-GD-001 – Regulatory Issues Database User Guide – For Inspectors
 - ONR-RI-GD-002 – Regulatory Issues Database User Guide – For Business Support Teams

8. REFERENCES

- 8.1 ONR-ENF-GD-006 (Revision 3): Enforcement - [CM9 Reference: 2020/92759]
- 8.2 ONR-INSP-GD-064 (Revision 4): General Inspection Guide - [CM9 Reference: 2020/208151]
- 8.3 ONR-TAST-GD-096 (Revision 0): Guidance on Mechanics of Assessment - [CM9 Reference: 2019/335774]

APPENDIX 1: RID DATA ENTRIES – EXAMPLES OF ACCEPTED PRACTICE

Below are a series of examples of what represents acceptable and unacceptable practice for recording data within the followings 'fields' in the RID:

Issue Title:

Acceptable:

- Shortfalls in ABC's corporate arrangements for the engineering substantiation of EC&I based safety systems.
- Legionella risk posed by the Y15 Cooling Tower on the ABC Site.
- ABC's Corporate arrangements for the examination, maintenance, inspection and testing of safety systems do not meet the requirements of LC28(1).
- ABC has no documented process for the conduct of Security Vulnerability Assessments.

Unacceptable:

- Fire Dampers.
- LLETP.

Issue Tab:

Acceptable:

- During an SBI conducted at ABC on 6 Aug 20, it was identified that the site has significant stocks of reject fuel and components with no route for their disposal [ONR-DDD-IR-20-321 refers].
- A routine inspection of operational records conducted at ABC on 7 Apr 20 identified that the quality of records did not meet the requirements of LC25(1). Specifically records inspected exhibited missing signatures, missing data entries and data entries crossed out and overwritten without supporting annotation or signature [ONR-DDD-20-123 refers].

Unacceptable:

- The condition of the crane has been identified to be in need of refurbishment.

Action Tab:

Acceptable:

- ABC to carry out a review of the substantiation of D4.1/SM/8 in the WTC and issue a report to ONR by 15 Sep 20 stating their opinion regarding its adequacy as a safety mechanism.
- ABC to review and update their asbestos management arrangements to meet legislative/ACOP requirements by 30 Mar 20.

Unacceptable:

- [BLANK].
- ABC should improve their arrangements for considering external hazards in safety submissions.

Basis for Closure Tab:

Acceptable:

- ABC has implemented appropriate improvements to address the shortfalls covered by this issue. The ONR carried out an inspection on 27 Mar 20 and

concluded that each of the ten agreed actions had been adequately addressed [ONR-DDD-IR-20-101 refers].

The DDD DMG agreed to close this issue on 25 Apr 20 [minutes of meeting at CM9: 2020/123456].

Unacceptable:

- The duty holder has now confirmed work is complete and this can now be closed.
- Following completion of Action 5.

Progress History Tab

Example of an acceptable series of 'progress history' entries:

23/07/2019 11:56:42 - Formal review of progress carried out on 11 Jul 19 with the Head of Maintenance and Engineering Support [ONR-DDD-IR-19-111 refers]. I reviewed the outcomes of an independent internal audit conducted in May 19. This identified that there has been an improvement in the number of satisfactory work orders from 80.9% in Jan 19 to 85.4% in May 19 however the overall evaluation from the internal audit remains at 'Seek Improvement'. Overall I am satisfied that ABC remains on track to close out this regulatory issue during the LC28 inspection scheduled for Dec 19.

30/07/2018 09:16:08 - Formal review of progress conducted on 9 Jul 18 [ONR-DDD-IR-18-123 at CM9:2018/123456 refers]. The technical director (TD) presented the improvement plan implemented to address the concerns raised by this issue [ABC document DMD/162/TD/001]. ONR are satisfied that this plan captures the core elements expected of an improvement programme. The TD also presented the results of the internal demand audit conducted against site maintenance records [ABC document DMD/162] and the schedule of random checks conducted by the site's maintenance authority [ABC document DMD/162/TD/002]. The results demonstrate an increasing trend in compliance however they continue to identify issues similar to those identified during the LC28 inspection. We agreed that ABC continues to make satisfactory progress to address the actions agreed against this issue and have rated progress as Green.

Example of an unacceptable series of 'progress history' entries:

31/03/2017 09:21:46 - Licensee/duty holder contact changed to Jane Doe

09/09/2016 09:26:20 - Due date changed to 28 July 17 as requested by John Smith

02/12/2015 16:15:22 - Ownership of issue transferred from David Jones to Susan Brow

28/09/2015 10:21:05 - Ownership of issue transferred from Bill Williams to David Jones

APPENDIX 2: REGULATORY ISSUES LEVEL GUIDANCE CHART

| Issue Level | ONR Oversight [Governance] | EMM Expectation ¹ | Operational Impact | Inspection ² / Assessment ³ Rating | Potential impact on ONR's Reputation |
|-------------|--|--|--|--|---|
| 1 | Chief Nuclear Inspector [Regulatory Management Team] | Improvement Notice, Direction, Specification or Enforcement Notice | Potential cessation of operations Direction to cease Construction | Red [Demand Improvement] | Major threat Failure of the UK to meet international safeguard's obligations that provide a basis for possible escalation or formal sanction by IAEA and/or NCA partners |
| 2 | Divisional Director [Divisional Board] | Improvement Notice, Direction, Specification or Enforcement Notice Enforcement Letter | Withholding of a Permission | Red [Demand Improvement] | Moderate threat |
| 3 | Delivery Lead [Sub-Division Board/ DMG] | Enforcement Letter Regulatory Advice | Minor restrictions on operations | Amber [Seek Improvement] | Minor threat |
| 4 | Inspector | Regulatory Advice | N/A | Green [Minor shortcomings identified] | Negligible threat |

Supplementary Guidance:

- 1: ONR-ENF-GD-006 (Revision 3): Enforcement – CM9 Reference: 2020/92759
- 2: ONR-INSP-GD-064 (Revision 4): General Inspection Guide - CM9 Reference: 2020/208151
- 3: ONR-TAST-GD-096 (Revision 0): Guidance on Mechanics of Assessment - CM9 Reference: 2019/335774