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REGDOC-2.4.1, Deterministic Safety Analysis

Preface

This regulatory document is part of the CNSC's Safety Analysis series of regulatory documents. The full list of regulatory document series is included at the end of this document and can also be found on the <u>CNSC website</u>.

Regulatory document REGDOC-2.4.1, *Deterministic Safety Analysis*, sets out requirements and guidance for the preparation and presentation of a safety analysis that demonstrates the safety of a nuclear facility. To the extent practicable, this document is technology-neutral. This document provides information on preparing and presenting deterministic safety analysis reports, including the selection of events to be analyzed, acceptance criteria, safety analysis methods, safety analysis documentation, and the review and update of safety analysis.

The document is presented in two parts: Part I applies to nuclear power plants, and Part II addresses small reactor facilities. A small reactor facility contains a reactor with a power level of approximately less than 200 megawatts thermal (MWt), used for research, isotope production, steam generation, electricity production or other applications.

This document supersedes the following regulatory documents: RD-310, *Safety Analysis for Nuclear Power Plants*; GD-310, *Guidance on Safety Analysis for Nuclear Power Plants*; and RD-308, *Deterministic Safety Assessment for Small Reactor Facilities*. REGDOC-2.4.1 includes amendments to reflect lessons learned from the Fukushima nuclear event of March 2011, and to address findings from the CNSC's *Fukushima Task Force Report*, as applicable to RD-310 and RD-308.

REGDOC-2.4.1 is intended to form part of the licensing basis for a regulated facility or activity within the scope of the document. It is intended for inclusion in licences as either part of the conditions and safety and control measures in a licence, or as part of the safety and control measures to be described in a licence application and the documents needed to support that application.

For proposed new facilities: This document will be used to assess new licence applications for reactor facilities.

Guidance contained in this document exists to inform the applicant, to elaborate further on requirements or to provide direction to licensees and applicants on how to meet requirements. It also provides more information about how CNSC staff evaluate specific problems or data during their review of licence applications. Licensees are expected to review and consider guidance; should they choose not to follow it, they should explain how their chosen alternate approach meets regulatory requirements.

For existing facilities: The requirements contained in this document do not apply unless they have been included, in whole or in part, in the licence or licensing basis.

A graded approach, commensurate with risk, may be defined and used when applying the requirements and guidance contained in this regulatory document. The use of a graded approach is not a relaxation of requirements. With a graded approach, the application of requirements is commensurate with the risks and particular characteristics of the facility or activity.

An applicant or licensee may put forward a case to demonstrate that the intent of a requirement is addressed by other means and demonstrated with supportable evidence.

The requirements and guidance in this document are consistent with modern national and international practices addressing issues and elements that control and enhance nuclear safety. In particular, they establish a modern, risk-informed approach to the categorization of accidents – one that considers a full spectrum of possible events, including events of greatest consequence to the public.



Important note: Where referenced in a licence either directly or indirectly (such as through licensee-referenced documents), this document is part of the licensing basis for a regulated facility or activity.

The licensing basis sets the boundary conditions for acceptable performance at a regulated facility or activity and establishes the basis for the CNSC's compliance program for that regulated facility or activity.

Where this document is part of the licensing basis, the word "shall" is used to express a requirement, to be satisfied by the licensee or licence applicant. "Should" is used to express guidance or that which

is advised. "May" is used to express an option or that which is advised or permissible within the limits of this regulatory document. "Can" is used to express possibility or capability.

Nothing contained in this document is to be construed as relieving any licensee from any other pertinent requirements. It is the licensee's responsibility to identify and comply with all applicable regulations and licence conditions.

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1. Introduction

1.1 Purpose

This regulatory document sets out the requirements of the Canadian Nuclear Safety Commission (CNSC) for deterministic safety analysis for nuclear power plants (NPPs) and small reactor facilities.

The document is comprised of two parts:

- Part I Nuclear Power Plants
- Part II Small Reactor Facilities

The purpose of Part I of this regulatory document is to help assure that during the construction, operation or decommissioning of an NPP, adequate safety analyses are completed by, or on behalf of, the applicant or licensee in accordance with the *Nuclear Safety and Control Act* (NSCA) and regulatory requirements.

Guidance is also provided in Part I to ensure that adequate deterministic safety analyses are completed in order to demonstrate the safety of the NPP. This information facilitates the conduct, review and approval of deterministic safety analyses.

Part II applies to small reactor facilities. The document allows the use of a graded approach to determine the scope and depth of deterministic safety analysis for these facilities.

1.2 Scope

This regulatory document sets out the requirements and guidance for deterministic safety analysis for NPPs and small reactor facilities. A small reactor facility is defined as a facility containing a reactor with a power level of less than approximately 200 megawatts thermal (MWt), which is used for research, isotope production, steam generation, electricity production or other applications.

This regulatory document sets out the requirements and technical criteria related to deterministic safety analysis, including the selection of events to be analyzed, acceptance criteria, deterministic safety analysis methods, and safety analysis documentation, review and update, and quality control.

1.3 Relevant legislation

The relevant sections of the *Nuclear Safety and Control Act* (NSCA) and the regulations made under the NSCA to this regulatory document include:

- Subsection 24(4) of the NSCA provides that the Commission may only issue, renew or amend licences if the licensee or the applicant is (a) qualified to carry on the activity that the licence authorizes the licensee to carry on, and (b), in carrying out that activity, make adequate provision for the protection of the environment, the health and safety of persons and the maintenance of national security and measures required to implement international obligations to which Canada has agreed.
- Subsection 24(5) of the NSCA authorizes the Commission to include in a licence any term or condition that the Commission considers necessary for the purposes of the Act.
- Paragraph 3(1)(i) of the General Nuclear Safety and Control Regulations
 stipulates that an application for a licence shall contain, in addition to

- other information, "a description and the results of any test, analysis or calculation performed to substantiate the information included in the application".
- Paragraph 5(f) of the *Class I Nuclear Facilities Regulations* provides that an application for a licence to construct a Class I nuclear facility shall contain, in addition to other information, "a preliminary safety analysis report demonstrating the adequacy of the design of the nuclear facility".
- Paragraph 5(*i*) of the *Class I Nuclear Facilities Regulations* provides that an application for a licence to construct a Class I nuclear facility shall contain, in addition to other information, "the effects on the environment and the health and safety of persons that may result from the construction, operation and decommissioning of the nuclear facility, and the measures that will be taken to prevent or mitigate those effects".
- Paragraph 6(c) of the Class I Nuclear Facilities Regulations provides that an application for a licence to operate a Class I nuclear facility shall contain, in addition to other requirements, information on "a final safety analysis report demonstrating the adequacy of the design of the nuclear facility".
- Paragraph 6(h) of the Class I Nuclear Facilities Regulations stipulates that an application for a licence to operate a Class I nuclear facility shall contain, in addition to other requirements, information on "the effects on the environment and the health and safety of persons that may result from the operation and decommissioning of the nuclear facility, and the measures that will be taken to prevent or mitigate those effects".
- Paragraph 7(f) of the Class I Nuclear Facilities Regulations provides that an application for a licence to decommission a Class I nuclear facility

shall contain, in addition to other requirements, information on "the effects on the environment and the health and safety of persons that may result from the decommissioning, and the measures that will be taken to prevent or mitigate those effects".

• Subsection 13(1) of the *Radiation Protection Regulations* prescribes the effective dose limits to nuclear energy workers and persons who are not nuclear energy workers, including members of the public.

1.4 National and international standards

This regulatory document is consistent with the philosophy and technical content of national and international codes and standards. It is based in part on the following publications:

- CSA Group, N286.7-99, (R2012), Quality Assurance of Analytical, Scientific and Design Computer Programs for Nuclear Power Plants
- International Atomic Energy Agency, IAEA Safety Reports Series No. 55, Safety Analysis for Research Reactors, 2008
- International Atomic Energy Agency, IAEA Safety Standards Series No. NS-R-4, Safety of Research Reactors, 2005
- International Atomic Energy Agency, IAEA Safety Standards Series No. SSG-2, Deterministic Safety Analysis for Nuclear Power Plants Specific Safety Guide, 2012
- International Atomic Energy Agency, IAEA Safety Standards Series No.
 GSR Part 4, Safety Assessment for Facilities and Activities General Safety
 Requirements Part 4, 2009

1.5 Background

An overall safety assessment of the reactor facility design includes hazards analysis, deterministic safety analysis and probabilistic safety assessment (PSA) techniques. This document focuses on the deterministic safety

analysis used in the assessment of event consequences.

This document focuses on deterministic safety analysis. PSA for nuclear power plants is addressed in the regulatory document REGDOC-2.4.2, *Probabilistic Safety Assessment (PSA) for Nuclear Power Plants* (formerly S-294).

Regulatory requirements and guidance for NPPs related to the safe handling of fissionable materials outside the reactor core are provided in the regulatory document RD-327, *Nuclear Criticality Safety*, and its associated guidance document GD-327, *Guidance for Nuclear Criticality Safety*.

Part I: Deterministic Safety Analysis for Nuclear Power Plants

2. Introduction

Part I of this regulatory document sets out the requirements of the CNSC for deterministic safety analysis for nuclear power plants (NPPs).

Guidance provides information on the preparation and presentation of deterministic safety analysis reports, including the selection of events to be analyzed, acceptance criteria, safety analysis methods, safety analysis documentation, and the review and update of safety analysis.

3. Safety Analysis Objectives

Safety analysis is an essential element of a safety assessment. It is an analytical study used to demonstrate how safety requirements are met for a broad range of operating conditions and various initiating events. Safety

analysis involves deterministic and probabilistic analyses in support of the siting, design, commissioning, operation or decommissioning of an NPP.

This document focuses on the deterministic safety analysis used in the evaluation of event consequences. PSA and hazard analysis are outside the scope of this document – the requirements for probabilistic safety assessments for NPPs are provided in regulatory document REGDOC-2.4.2, *Probabilistic Safety Assessment (PSA) for Nuclear Power Plants* (formerly S-294).

The objectives of deterministic analysis are to:

- confirm that the design of an NPP meets design and safety requirements
- 2. derive or confirm operational limits and conditions that are consistent with the design and safety requirements for the NPP
- 3. assist in establishing and validating accident management procedures and guidelines
- 4. assist in demonstrating that safety goals, which may be established to limit the risks posed by the NPP, are met

This document identifies high-level requirements for conducting and presenting a safety analysis, taking into account best national and international practices.

Guidance

Safety assessments are systematic processes to verify that applicable safety requirements are met in all the lifecycle phases of an NPP. These assessments are performed for various aspects of safety, security and safeguards (such as management practices, quality assurance, human

performance, safety culture, training, design adequacy, safety analysis, equipment fitness for service, emergency preparedness, environmental protection, and radiation protection).

A safety assessment includes the performance of a safety analysis, which is an analytical quantitative study performed mainly to demonstrate the safety of an NPP and the adequacy of its design and performance. Deterministic safety analysis, probabilistic safety assessment (PSA) and hazards analysis are three types of safety analyses.

PSA considers the likelihood and consequences of various plant transients and accidents. The primary objectives of the PSA are to help with:

- identifying the sequences of events and their probabilities, which lead to challenges to fundamental safety functions, loss of integrity of key structures, release of radionuclides into the environment and public health effects
- developing a well-balanced NPP design
- assessing the impact of changes to procedures and/or components on the likelihood of core damage

For new NPPs, PSAs support deterministic safety analysis in identifying complementary design features (internationally, these are also called additional safety features) for severe accidents, or actions that operators can take during severe accidents to reduce risk. PSAs complement deterministic safety assessments.

A hazards analysis (such as fire hazard assessment or seismic margin assessment) will demonstrate the ability of the design to effectively respond to credible common-cause events. This analysis is meant to confirm that the NPP design incorporates sufficient diversity and physical

separation to cope with credible common-cause events. It also confirms that credited structures, systems and components (SSCs) are qualified to survive and function during credible common-cause events, as applicable.

3.1 Guidance on roles of deterministic safety analysis

The deterministic safety analysis confirms that the design is capable of meeting the safety analysis requirements listed above, as well as dose acceptance criteria. It also helps demonstrate that safety goals are met, that the design reflects effective defence in depth, and that the plant design and operation are acceptable and robust.

Deterministic safety analysis is used to analyze the behaviour of a plant following a postulated failure of equipment, internal or external event, or operator error. For the analyzed event, the deterministic safety analysis allows prediction and quantification of challenges to the plant's physical barriers, and the performance of plant systems (particularly safety systems), in order to predict failures of barriers to radioactivity releases.

Deterministic safety analysis methods can be applied to a wide range of plant operating modes and events, including normal operation and abnormal operation resulting from equipment failure, operator errors and challenges arising from events like fires, floods or earthquakes.

3.2 Guidance on objectives of deterministic safety analysis

- 1. Confirm that the design of an NPP meets design and safety analysis requirements. This can be achieved by:
 - demonstrating that the plant as built can operate safely, taking the effect of aging into consideration
 - demonstrating that the design can withstand and effectively respond to identified postulated initiating events (PIEs)

- demonstrating that the applicable expectations for defence in depth established in REGDOC-2.5.2, *Design of Reactor Facilities:* Nuclear Power Plants are met
- predicting expected harsh environmental conditions due to anticipated operational occurrences (AOOs), design-basis accidents (DBAs) and beyond-design-basis accidents (BDBAs), including severe accidents
- demonstrating that the provisions for protection against severe accidents are adequate (e.g., performance expectations for containment, biological shielding and re-criticality)
- 2. Derive or confirm operational limits and conditions that are consistent with the design and safety requirements for the NPP. Guidance for this section can be found in CSA N290.15-10, *Requirements for the Safe Operating Envelope of Nuclear Power Plants*, including:
 - safety limits for reactor protection and control
 - safety limits for engineered safety systems
 - o operational limits and reference settings for the control systems
 - procedural constraints for operational control of processes
 - identification of the allowable operating configurations
- 3. Assist in establishing and validating accident management procedures and guidelines. Severe accident management guidelines are an example.
- 4. Assist in demonstrating that safety goals which may be established to limit the risks posed by the NPP are met (see section 4.2.3.3 for details). Deterministic safety analyses are also performed to:
 - assist in confirming or validating the strategies that have been selected to recover the plant from an AOO or DBA
 - assist in developing a strategy for the operator to follow, should the automatic actions and emergency operating procedures fail to

- prevent a severe accident
- confirm that modifications to the design and operation of the NPP have no significant adverse effects on safety
- understand operational transients and plant system response
- predict source term and doses during severe accidents
- support emergency programs

3.3 Guidance on deterministic safety analysis in confirmation of defence in depth

The application of the concept of defence in depth to the design of an NPP should be confirmed, so the design will provide layers of overlapping provisions, such that any failure would be compensated for – or corrected – without causing harm to individuals or the public. Deterministic safety analysis is an important part of this confirmation.

Five levels of defence in depth are defined in REGDOC-2.5.2, *Design of Reactor Facilities: Nuclear Power Plants*. The applicability of deterministic safety analysis to these levels is as follows:

Level 1:

The aim of the first level of defence is to prevent deviations from normal operation, and to prevent failures of SSCs.

Good design and proven engineering practices are used to support firstlevel defence in depth.

Level 2:4. Requirements for Safety Analysis

The aim of the second level of defence is to detect and intercept deviations from normal operation in order to prevent AOOs from escalating to accident conditions, and to return the plant to a state of normal operation.

To support second-level defence in depth, AOOs are analyzed to demonstrate the robustness of the control systems in arresting most AOOs and in preventing damage to all SSCs that are not involved in the initiation of an AOO, to the extent that these SSCs will remain operable following the AOO.

Level 3:4.1 Responsibilities

The aim of the third level of defence is to minimize the consequences of accidents by providing inherent safety features, fail-safe design, additional equipment, and mitigating procedures.

To support third-level defence in depth, DBAs (including AOOs with failed second-level defences) are analyzed to demonstrate the capabilities of the safety systems to mitigate any resulting radiological consequences; i.e., to demonstrate meeting the prescribed dose limits for DBAs (and AOOs with failed second-level defences) and related derived acceptance criteria for protecting fission product release barriers. AOOs and DBAs are also analyzed to assist in developing emergency operating procedures that define actions that should be taken during these events.

Note that the event combination of AOO plus independent failure of second-level defence in depth should be considered a DBA. In such a case, the dose limit applicable to DBAs should apply.

Level 4:The licensee is responsible for ensuring that the safety analysis

The aim of the fourth level of defence is to ensure that radioactive releases caused by severe accidents are kept as low as practicable.

Level 5:meets all regulatory requirements. The licensee shall:

- 1. maintain adequate capability to perform or procure safety analysis
- 2. establish a formal process to assess and update safety analysis, which

The aim of the fifth level of defence is to mitigate the radiological consequences of potential releases of radioactive materials that may result from accident conditions.

In support of fourth- and fifth-level defence in depth, BDBAs are analyzed. This analysis is to provide information in support of design and safety of NPPs, as it relates to severe accidents, such as performance of complementary design features (internationally, these are also called additional safety features) for severe accidents, or actions that operators should take during severe accidents in order to mitigate the consequences. The analysis also assists in the development of severe accident management guidelines.

- takes into account operational experience, research findings and identified safety issues
- 3. establish and apply a formal quality assurance (QA) process that meets the QA standards established for safety analysis in CSA Group N286.7-99, Quality Assurance of Analytical, Scientific and Design Computer Programs for Nuclear Power Plants

Guidance

As stated in this regulatory document, the licensee must maintain adequate capability to perform or procure safety analysis in order to:

- resolve technical issues that arise over the life of the plant
- ensure the safety analysis requirements are met for the safety analysis developed by the operating organization or procured from a third party

A formal process should be established to assess and update the safety analysis to ensure that the safety analysis reflects:

current plant configuration (for existing plants)

- current operating limits and conditions (for existing plants)
- operating experience, including the experience from similar facilities
- results available from experimental research, improved theoretical understanding or new modelling capabilities to assess potential impacts on the conclusions of safety analyses
- human factors considerations, to ensure that credible estimates of human performance are used in the analysis

4.2 Events to be analyzed

4.2.1 Identification of events

The licensee shall use a systematic process to identify events, event sequences, and event combinations ("events" hereafter in this document) that can potentially challenge the safety or control functions of the NPP. The licensee shall also identify events that may lead to fission product releases, including those related to spent fuel pools (also called irradiated fuel bays) and fuel-handling systems. This process shall be based on regulatory requirements and guidance, past licensing precedents, operational experience, engineering judgment, results of deterministic and probabilistic assessments, and any other systematic reviews of the design.

The identification of events will include at-power and shutdown states. The deterministic analysis should also be performed for other states where the reactor is expected to operate for extended periods of time and that are not covered by the at-power and shutdown analysis. Common-cause events affecting multiple reactor units on a site shall be considered. The list of identified events shall be reviewed for completeness during the design and analysis process and modified as necessary.

In addition to events that could challenge the safety or control functions of the NPP, safety analysis shall be performed for normal operation.

Guidance

The safety analysis is performed for a set of events that could lead to challenges related to the NPP's safety or control functions. These include events caused by SSC failures or human error, as well as human-induced or natural common-cause events.

The events considered in safety analysis could be single PIEs, sequences of several consequential events, or combinations of independent events.

The set of events to be considered in safety analysis is identified using a systematic process and by taking into account:

- reviews of the plant design using such methods as hazard and operability analysis, failure mode and effects analysis, and master logic diagrams
- lists of events developed for safety analysis of other NPPs, as applicable
- analysis of operating experience data for similar plants
- any events prescribed for inclusion in safety analysis by regulatory requirements (e.g., REGDOC-2.5.2, Design of Reactor Facilities: Nuclear Power Plants)
- equipment failures, human errors and common-cause events identified iteratively with PSA
- a cut-off frequency for common-cause events that is consistent across all events

The list of identified events should be iteratively reviewed for accuracy and completeness as the plant design and safety analyses proceed. Reviews should also be periodically conducted throughout the NPP lifecycle, to account for new information and requirements.

This regulatory document requires that, when identifying events, all permissible plant operating modes be considered. All operating modes used for extended periods of time should be analyzed. Modes that occur transiently or briefly can be addressed without a specific analysis, as long as it can be shown that existing safety analyses bound the behaviour and consequences of those states.

NPP operating modes include, but are not limited to:

- initial approach to reactor criticality
- reactor start-up from shutdown through criticality to power
- steady-state power operation, including both full and low power
- changes in the reactor power level, including load follow modes (if employed)
- reactor shutting down from power operation
- shutdown in a hot standby mode
- shutdown in a cold shutdown mode
- shutdown in a refuelling mode or maintenance mode that opens major closures in the reactor coolant pressure boundary
- shutdown in other modes or plant configurations with unique temperature, pressure or coolant inventory conditions
- operation of limited duration, with some systems important to safety being unavailable

For events identified by the systematic process used for this purpose, a full range of configurations and operating modes of equipment should be considered in the deterministic safety analysis.

Special plant configurations may occur during major plant modifications such as plant refurbishment, lay-up, or decommissioning. These configurations should be considered, and potential events should be identified and included in the deterministic safety analysis.

4.2.2 Scope of events

The list of events identified for the safety analysis shall include all credible:

- 1. component and system failures or malfunctions
- 2. operator errors
- 3. common-cause internally and externally initiated events, including those affecting multiple reactor units on a site

A cut-off frequency shall be selected so that events with a frequency of occurrence less than the cut-off limit provide only a negligible contribution to the overall risk posed by the NPP. The elimination of such events from the analysis scope shall be justified and the reasons for eliminating them documented.

Guidance

4.2.2.1 Guidance for normal operation

During the design phase, the normal plant operation is analyzed as a separate class of event. This allows sources of radiation or releases of radioactive materials to be assessed in various modes of operation or transition between modes.

For an existing plant, a safety analysis for normal operation may be required if a new operational mode is considered, or if significant design changes (any changes that may alter system characteristics) are implemented.

4.2.2.2 Guidance for failures or malfunctions of structures, systems and components

SSC failures may include failure to operate when required, erroneous operation and partial failures. Events to be considered include:

- failures or malfunctions of active systems, such as pumps, valves, control systems or power supply
- failures of passive systems, such as breaks in the reactor's pressureretaining boundaries, including pipes and rupture discs

4.2.2.3 Guidance for operator errors

As initiating events, operator errors normally produce the same results as events caused by equipment failure. Therefore, they do not need to be considered separately in the models and computer codes for deterministic safety analysis. However, the generic implications of human errors as initiating events should be considered to identify any further potential system failures. As such, if a specific operator error could result in a unique initiating event, it should be included in the list of PIEs for the deterministic safety analysis.

4.2.2.4 Guidance for internally and externally initiated common-cause events

Common-cause events are multiple component failures that can be initiated by internal and external events (these events could be human-induced or naturally occurring).

Internal common-cause events include fires, floods of internal origin, explosions, and equipment failures (such as turbine breakup) that may generate missiles.

External, naturally occurring events (triggers for plant equipment failures) that are considered in deterministic safety analysis include:

- earthquakes
- external fires
- floods/tsunamis occurring outside the site
- biological hazards (for instance, mussels or seaweed affecting cooling water flow and/or temperature)

 extreme weather conditions (temperature, precipitation, high winds, tornadoes etc.)

External initiating events may cause internal and/or external events. For example, an earthquake could lead to plant equipment failures, loss of offsite power, flood, tsunami or fire. External events may cause accidents in one or more of the units where there are multiple units at a site.

Human-induced external events that are considered in deterministic safety analysis include:

- aircraft or missile impacts
- explosions at nearby industrial facilities or transportation systems
- release of toxic or corrosive chemicals from nearby industrial facilities or transportation systems
- electromagnetic interference

4.2.2.5 Guidance for combinations of events

Combinations of events (which may occur either simultaneously or sequentially while restoring the plant to a stable state) should be considered.

Types of combinations include:

- multiple independent failures in equipment important to safety
- failure of a process system and system important to safety
- multiple process system failures
- equipment failures and operator errors
- common-cause events and operator errors

Examples of event combinations include:

 loss of coolant with subsequent loss of station electrical power, including station blackout

- loss of coolant with loss of containment cooling
- small loss-of-coolant accidents (LOCAs) with failure of primary or secondary depressurization
- main steam line break with failure of the operator to initiate a backup cooling system

4.2.2.6 Guidance for grouping of events

Many events will be identified by following the aforementioned guidance, although it may not be practical or necessary to analyze all of these events. The identified events could be grouped into categories based on similarity of the initiating failures, key phenomena, or system and operator responses. Examples of event categories include decrease of the reactor coolant inventory, reactivity and power anomalies, and increase/decrease of heat removal. Since plant responses to an event depend on the design and availability of plant systems, the most suitable classification of events may vary.

In the safety analysis of AOOs and DBAs for Level 3 defence in depth, bounding events should be identified for each applicable acceptance criterion within each category of events. In some cases, one accident scenario in the same category of events may be more severe in terms of one acceptance criterion (for example, containment pressure limit) and another may be more severe in terms of a different acceptance criterion (for example, public doses). All these scenarios should be considered in the safety analysis process as bounding events for different acceptance criteria.

4.2.2.7 Guidance for subdivision of events

An event may be divided into sub-events for consideration in safety analysis, when there are substantial differences between the subdivided events, such as:

- phenomena occurring at the plant in response to the events
- challenges to safety and systems important to safety
- frequencies

For example, LOCAs are commonly sub-divided into small-break LOCAs and large-break LOCAs because of significant differences in phenomena and challenges to the safety system.

An event should not be sub-divided without sufficient justification, for the purpose of reclassifying one of the resulting sub-events from an AOO to a DBA, or from a DBA to a BDBA, or for the purpose of attaining a frequency below the cut-off frequency limits used in PSA.

4.2.2.8 Guidance for cut-off frequency

When beginning to identify events, both those of low frequency (including earthquakes with consequential tsunamis) and those of minor consequences should be included. In defining the scope of events to be analyzed, the deterministic safety analysis should select the same cut-off frequency as that used in the probabilistic analysis for the same facility. This frequency is chosen so the deterministic analysis can be integrated with the probabilistic analysis.

Some events may be excluded from the detailed consideration (for example, because of their negligible contribution to exceeding the safety goals, or because they are bounded by an analyzed event). Such exclusion should be fully justified and the reasons well documented.

4.2.3 Classification of events

The identified events shall be classified, based on the results of probabilistic studies and engineering judgment, into the following three classes of events:

- anticipated operational occurrences: these include all events with frequencies of occurrence equal to or greater than 10-2 per reactor year
- 2. design-basis accidents: these include events with frequencies of occurrence equal to or greater than 10-5 per reactor year, but less than 10-2 per reactor year
- 3. beyond-design-basis accidents: these include events with frequencies of occurrence less than 10-5 per reactor year

Notes:

- In accordance with REGDOC-2.5.2, *Design of Reactor Facilities: Nuclear Power Plants*, the subset of BDBAs considered in the design of a new NPP is referred to as design-extension conditions (DECs).
- DECs do not replace BDBAs in most occurrences in REGDOC-2.4.1, since analysis will consider events of lower frequency than DECs; for example, in searching for cliff-edge effects, or in analyzing bounding events.

Other factors to be considered in the event classification are any relevant regulatory requirements or historical practices. Events with a frequency on the border between two classes of events, or with substantial uncertainty over the predicted event frequency, shall be classified into the higher frequency class.

Credible common-cause events shall also be classified within the AOO, DBA and BDBA classes.

Guidance

Events are classified because each plant state has different safety analysis requirements and acceptance criteria. Safety analysis requirements reflect the level of protection in accordance with the principle of defence in depth.

The normal plant states and accident conditions are considered in the safety analysis. Events are classified as follows:

- AOOs: events that are more complex than the normal operation manoeuvres, with the potential to challenge the safety of the reactor, and which might be reasonably expected to happen during the lifetime of a plant
- **DBAs:** events that are not expected to occur during the lifetime of a plant but, in accordance with the principle of defence in depth, are considered in the design of the NPP; however, certain groups of events with lower frequency may also be included in the plant design basis
- **BDBAs:** events with low probabilities of expected occurrence, which may be more severe than DBAs, and due to multiple failures and/or operator errors may result in safety systems that fail to perform their safety functions, leading to significant core damage, challenges to the integrity of the containment barrier, and, eventually, to the release of radioactive material from the plant

Plant states include operational states (normal operation and AOOs) and accident conditions (DBAs and BDBAs). However, as established in REGDOC-2.5.2, *Design of Reactor Facilities: Nuclear Power Plants*, the design authority establishes the plant design envelope, which is the subset of all plant states considered in the design: normal operation, AOOs, DBAs and DECs (see figure 1).

Figure 1: Plant states

Operational states		Accident conditions		
Normal operation	Anticipated operational occurrences	Design-basis accidents	Beyond-design-basis accidents	
			Design-extension conditions	Practically eliminated conditions
			No severe fuel degradation	Severe accidents
Design basis			Design extension	Not considered as design extension
		Reducing freque	ency of occurrence >	*

Figure 1: Text equivalent

The assessed frequency of occurrence is the basis for event classification, but it is recognized that such assessments may be characterized by significant uncertainty. Therefore, an event with a predicted frequency that is on the threshold between two classes of events, or with substantial uncertainty in the predicted event frequency, is classified into the higher frequency class.

Other factors, such as relevant regulatory requirements or historical practices, may affect the selection of certain events for inclusion. In order to establish an understanding of margins of safety or the robustness of the design, the regulatory authority may request that certain events be analyzed as design-basis accidents, or as representative severe accidents. Past practices and experience may indicate that certain scenarios are more critical and should be analyzed as DBAs.

Some plant operating modes may be used only for short periods of time. Normally, events are classified without regard to the frequency of these operating modes. However, in classifying events, frequency of operating modes may be considered on a case-by-case basis.

Examples of events of different classes based on CANDU experience are provided in Appendix A. These illustrate possible outputs of the event identification and classification process described in section 4.2. This list is

for illustration only, and is not meant to be comprehensive. It should be noted that, in practice, such a list would normally be generated by probabilistic methods. The list will be subject to grouping of events (see section 4.2.2.6). It is expected that only representative or bounding events for each group of events would be analyzed.

4.2.3.1 Guidance for anticipated operational occurrences

Plant design is expected to be sufficiently robust, such that most AOOs would not require the initiation of safety systems to prevent consequential damage to the plant's SSCs. This is part of Level 2 defence in depth, and helps to ensure that events requiring use of safety systems are minimized. The plant control systems are expected to compensate for the event's effects and to maintain the plant in a stable state long enough for an operator to intervene. The operator intervention may include, if deemed necessary, activation of safety systems and plant shutdown according to established procedures. After addressing the initiating event, it should be possible to resume plant operations.

For Level 3 defence in depth, in addition to meeting the above expectations for Level 2 defence in depth, the design is also expected to demonstrate with high confidence that safety systems can mitigate all AOOs without the assistance of plant control systems.

Examples of AOOs include those in table 1, which provides examples for a CANDU reactor and a light-water reactor (LWR). The following list in table 1 is not exhaustive; a complete list would depend on the type of reactor and the design of the plant systems.

Table 1: Examples of anticipated operational occurrences

Event category Anticipated operational occurrences

increase in reactor heat removal	 inadvertent opening of steam relief valves secondary pressure control malfunctions leading to an increase in steam flow rate feedwater system malfunctions leading to an increase in the heat removal rate
decrease in reactor heat removal	 feedwater pump trips reduction in the steam flow rate for various reasons (e.g., control malfunctions, main steam valve closure, turbine trip, loss of external load, loss of power, loss of condenser vacuum)
changes in reactor coolant system flow rate	 trip of one main coolant pump inadvertent isolation of one main coolant system loop (if applicable)
reactivity and power distribution anomalies	 inadvertent single control rod withdrawal neutron poison concentration dilution due to a malfunction in the volume control system wrong placement of a fuel assembly (LWR), or refuelling incorrect channel (CANDU)
increase in reactor coolant inventory	 malfunctions of the chemical and inventory control system
decrease in reactor coolant inventory	 very small LOCA, due to the failure of an instrument line

release of	
radioactive	
material from a	 minor leakage from a radioactive waste system
subsystem or	
component	

4.2.3.2 Guidance for design-basis accidents

The events leading to DBAs are classified based on the estimated frequencies of equipment failures, operator errors or common-cause events. All the events identified as initiators of AOOs should also be considered as potential initiators for DBAs, given the relatively high likelihood of AOOs and the possibility of additional equipment failures or operator errors.

Examples of DBAs include those in table 2, which provides examples for CANDU reactors, pressurized water reactors (PWRs) and other LWRs. The following list in table 2 is not exhaustive. A complete list of DBAs would depend on the type of reactor and actual design.

Table 2: Examples of design-basis accidents

Event category	Design-basis accidents
increase in reactor heat removal	• steam line breaks
decrease in reactor heat removal	feedwater line breaks
changes in reactor coolant system flow rate	 trip of more than one main coolant pump main coolant pump seizure or shaft break fuel channel flow blockage (CANDU)

reactivity and power distribution anomalies	 uncontrolled control rod withdrawal control rod ejection (LWR) boron dilution due to the start-up of an inactive loop (PWR)
increase in reactor coolant inventory	 inadvertent operation of emergency core cooling
decrease in reactor coolant inventory	 a spectrum of possible LOCAs inadvertent opening of the primary system relief valves leaks of primary coolant into the secondary system
release of radioactive material from a subsystem or component	 overheating of, or damage to, used fuel in transit or storage break in a gaseous or liquid waste treatment system

4.2.3.3 Guidance for beyond-design-basis accidents

PSA allows systematic identification of event sequences leading to challenges to the fundamental safety functions. Representative event sequences are then analyzed using deterministic safety analysis techniques to assess the extent of fuel failures, damage to the reactor core, primary heat transport system and containment, and releases of radionuclides. The use of any cut-off limit for the frequency of occurrence of analyzed BDBAs should consider the safety goals established for the plant and be consistent with the safety analysis objectives.

Examples of BDBAs include:

- complete loss of the residual heat removal from the reactor core
- complete loss of electrical power for an extended period

This class of events also includes massive failures of pressure vessels. Some massive failures of pressure vessels can be exempted from the deterministic safety analysis, if it can be demonstrated that these failures are sufficiently unlikely, and if all the following conditions are satisfied:

- the vessel is designed, fabricated, installed, and operated in compliance with the nuclear requirements of the applicable engineering codes and other requirements
- an in-service inspection program is implemented
- operating experience, with vessels of similar design and operating condition, support a low likelihood of failure
- the vessel has adequate restraints to limit propagation of damage to the plant

Note: Although the CANDU heat transport system header is considered a vessel, its failure should be postulated in the safety analysis.

Events that have been excluded from the DBA analysis based on leak-before-break methodology are to be considered in the BDBA sequences. For example, any large LOCA or main steam line break that may have been excluded from the design basis accident set should be considered for the BDBA analysis.

4.3 Acceptance criteria

Acceptance criteria are established to serve as thresholds of safe operation in normal operation, AOOs, DBAs and, to the extent practicable, for BDBAs. The limits and conditions used by plant designers and operators should be supported by adequate experimental evidence, and be consistent with the safety analysis acceptance criteria as described in sections 4.3.1 to 4.3.4.

4.3.1 Normal operation

Analysis for normal operation of the NPP, performed during the design phase, shall demonstrate that:

- 1. Radiological doses to workers and members of the public are within the limits acceptable to the CNSC.
- 2. Releases of radioactive material into the environment fall within the allowable limits for normal operation.

Guidance

The deterministic safety analysis for normal operation should:

- verify the set points of the safety systems, to demonstrate that their initiation would occur only when needed
- verify that process controls and alarms are effective in reducing (or avoiding) the need for safety system actions
- address all NPP conditions under which systems and equipment are operated as expected, with no internal or external challenges, including all the operational configurations for which the NPP was designed to operate in the course of normal operations over its life, both at power and at shutdown

4.3.2 Anticipated operational occurrences and design-basis accidents

Analysis for AOOs and DBAs shall demonstrate that:

- radiological doses to members of the public do not exceed the established limits
- 2. the derived acceptance criteria, established in accordance with section 4.3.4 are met

Guidance

The aim of safety analysis for AOOs and DBAs is to demonstrate the effectiveness of the following key safety functions:

- controlling the reactor power, including shutting down the reactor and maintaining it in a shutdown state
- removing heat from the core
- preserving the integrity of fission product barriers
- preserving component fitness for service for AOOs
- ensuring that the consequences of radioactive releases are below the acceptable limits
- monitoring critical safety parameters

Acceptance criteria for AOOs and DBAs should include:

- acceptance criteria that relate to doses to the public
- derived acceptance criteria that relate to the protection of the defencein-depth physical barriers (see section 4.3.4 and Appendix B for examples)

The committed whole-body dose for average members of the critical groups who are most at risk, at or beyond the site boundary, is calculated in the deterministic safety analysis for a period of 30 days after the analyzed event.

This dose is less than or equal to one of the following dose acceptance criteria:

- 0.5 millisievert for any AOO
- 20 millisieverts for any DBA

These dose limits apply to new NPPs. For existing reactors, the dose limits specified in the operating licences must be met.

Note: New NPPs referenced in this section are effectively those first licensed after the issuance of RD-337, *Design of New Nuclear Power Plants*, in 2008.

To demonstrate that the radiological consequences of an analyzed event do not exceed the limits, the doses should be calculated according to the guidance in section 4.4.4.7.

Acceptance criteria for the class of events with higher frequencies of occurrence should be more stringent than those for the class of events with lower frequencies of occurrence.

To demonstrate compliance with the public dose acceptance criteria for an AOO, the automatic isolation and pressure suppression functions of the containment system should not be credited, since these functions are normally considered part of Level 3 defence in depth. However, the containment passive barrier capability and normally operating containment subsystems could be credited, if they are qualified for the AOO conditions.

Derived acceptance criteria have two components: qualitative and quantitative. Quantitative acceptance criteria should be developed, based on direct physical evidence and well-understood phenomena, and should account for uncertainties.

Regarding the qualitative acceptance criteria (such as the examples provided in Appendix B), the following guides are applied only to AOOs:

• the qualitative acceptance criteria should be satisfied without reliance on the automatic function of the safety systems, for a wide range of AOOs. The plant control systems should normally be able to correct transients and prevent damage to the plant's SSCs

- the control systems should be able to maintain the plant in a stable operating state for a sufficiently long time, to allow the operator to diagnose the event, initiate required actions and, if necessary, shut the reactor down while following the applicable procedures
- even though control systems may be shown to maintain the plant in a safe state following an AOO without the initiation of safety systems (Level 2 defence in depth), it should also be shown with high confidence, for all AOOs, that the safety systems can also mitigate the event without beneficial actions by the control systems (Level 3 defence in depth)

Certain accidents with predicted frequency of occurrence less than 10-5 per reactor year could be used as the design basis event for a safety system. In this case, DBA dose limits should still be met, and the analysis should also consider meeting qualitative acceptance criteria relevant to this particular safety system. The safety system performance margins should be sufficient to ensure that the DBA dose limits are met.

4.3.3 Beyond-design-basis accidents

A safety assessment for BDBAs shall be performed to demonstrate that:

- 1. the NPP as designed meets the requirements for release limits established as the safety goals; a deterministic safety analysis provides consequence data for accident sequences to use in the PSA
- 2. the procedures and equipment put in place to handle the accident management needs are effective, taking into account the availability of cooling water, material and power supplies; consideration can be given to the plant's full design capabilities, including the possible use of safety, non-safety, and temporary systems beyond their originally intended function

Guidance

The deterministic and probabilistic safety assessment should demonstrate that the Level 4 defence in depth prevents or mitigates the consequences of BDBAs (including severe accidents,) as described in REGDOC-2.5.2, *Design of Reactor Facilities: Nuclear Power Plants*. The BDBA deterministic analysis addresses a set of representative sequences, in which the safety systems have malfunctioned and some of the barriers to the release of radioactive material may have failed, or have been bypassed. The accident sequences for analysis should be relevant and representative with respect to the objective of the analysis. In other words, representative BDBAs can be selected among the dominant accident sequences from the probabilistic safety assessment, or by adding safety system failures or incorrect operator responses to the DBA sequences. In general, the results of the PSA studies can be used for this purpose, if they are applicable.

The aim of safety analysis for BDBAs is to:

- evaluate the ability of the design to withstand challenges posed by BDBA and to identify plant vulnerabilities
- assess the effectiveness of those design features which were incorporated in the plant design for the specific purpose to reduce the likelihood and/or mitigate the consequences of BDBAs, (including the assessment of equipment for accident management and instrumentation to monitor the accident)
- evaluate the ability to restore and maintain the safety functions using alternative or diverse systems, procedures and methods, including the use of non-safety-grade equipment
- assist in the development of an accident management program for BDBAs and severe accident conditions
- provide input for offsite emergency planning

For events where there are multiple units at a site, as well as for single-unit events, the capacity of essential cooling and power supplies should be evaluated.

The design for BDBAs is aimed to meet risk criteria such as safety goals related to frequency of severe core damage and significant releases of radioactivity, as assessed by PSA.

Deterministic calculations of the source terms for BDBAs can also be performed in accordance with the aim of the BDBA analysis. These calculations should demonstrate, for example, that:

- containment failure will not occur in the short term following a severe accident (see REGDOC-2.5.2, Design of Reactor Facilities: Nuclear Power Plants)
- the public is provided a level of protection from the consequences of NPP operation, such that there is no significant additional risk to the life and health of individuals

4.3.4 Acceptance criteria for anticipated operational occurrences and design-basis accidents

Qualitative acceptance criteria shall be established for each AOO and DBA to confirm the effectiveness of plant systems in maintaining the integrity of physical barriers against releases of radioactive material. These qualitative acceptance criteria shall satisfy the following general principles:

- avoid the potential for consequential failures resulting from an initiating event
- 2. maintain the structures, systems and components in a configuration that permits the effective removal of residual heat
- 3. prevent development of complex configurations or physical phenomena that cannot be modelled with high confidence

4. be consistent with the design requirements for plant systems, structures and components

To demonstrate that these qualitative acceptance criteria applicable to the analyzed AOO or DBA are met, quantitative derived acceptance criteria shall be identified prior to performing the analysis. Such derived acceptance criteria shall be supported by experimental data.

The results of safety analysis shall meet appropriate derived acceptance criteria with margins sufficient to accommodate uncertainties associated with the analysis.

The analysis shall be performed for the event that poses the most challenges in demonstrating the meeting of derived acceptance criteria (i.e., the limiting event in an event category).

Guidance

In addition to the dose limits in section 4.3.2, the acceptance criteria for AOOs and DBAs also include a set of derived acceptance criteria, such as those examples of qualitative acceptance criteria identified in appendix B.

These acceptance criteria are established by the designer to limit the damage to different defence barriers. Compliance with these requirements ensures that there are physical barriers preserved to limit the release of radioactive material and prevent unacceptable radiological releases following an AOO or DBA. The failure to meet a derived acceptance criterion does not necessarily mean that dose limits will be exceeded. However, if the derived acceptance criteria are met with significant margin, then the dose calculation can be simplified, because fission product releases are expected to be limited.

The derived acceptance criteria are generally more stringent for events with a higher frequency of occurrence. For example, for most AOOs, the actions of the control systems should be able to prevent consequential degradation of any of the physical barriers to the extent that the related SSCs are no longer fit for continued service (including fuel matrix, fuel sheath/fuel cladding, reactor coolant pressure boundary or containment).

More demanding requirements may be set to demonstrate the availability of a margin between the predicted value and the quantitative acceptance criteria, or to simplify an analysis (for example, to avoid having to perform complex modelling). The conditions of applicability for each additional criterion should be clearly identified.

For each of the qualitative acceptance criteria, as illustrated in appendix B, quantitative acceptance criteria (or limits) should be established. These quantitative limits should:

- be applicable to the particular NPP system and accident scenario
- provide a clear boundary between safe states (when failure of an SSC is prevented with high confidence,) and unsafe states (when a failure of an SSC may occur)
- be supported by experimental data
- incorporate margins or safety factors to account for uncertainty in experimental data and relevant models

When there is insufficient data to identify the transition from a safe state to an unsafe state, or to develop accurate models, then the quantitative limit for the corresponding safety requirement should be set at the boundary of the available data, provided that the established limit is conservative.

4.4 Safety analysis methods and assumptions

4.4.1 General

The analysis shall provide the appropriate level of confidence in demonstrating conformity with the acceptance criteria. To achieve the appropriate level of confidence, the safety analysis shall:

- 1. be performed by qualified analysts in accordance with an approved QA process
- 2. apply a systematic analysis method
- 3. use verified data
- 4. use justified assumptions
- 5. use verified and validated models and computer codes
- 6. build in a degree of conservatism
- 7. be subjected to a review process

Guidance

Section 4.4 mainly addresses analysis methods and assumptions for the deterministic safety analysis of AOOs and DBAs for Level 3 defence in depth. Similar analysis methods and assumptions can be applied for Levels 2 and 4 defence in depth (with appropriate levels of conservatism). Certain conservative rules, such as the single-failure criterion, are not applied in Level 2 and Level 4 analyses.

The safety analyst has the option of selecting safety analysis methods and assumptions, as long as the regulatory requirements and expectations are satisfied.

The selection of the safety analysis methods and assumptions should be such that the appropriate level of confidence can be achieved in the analysis results.

4.4.2 Analysis method

The analysis method shall include the following elements:

- 1. identifying the scenarios to be analyzed as required to attain the analysis objectives
- 2. identifying the applicable acceptance criteria, safety requirements, and limits
- 3. identifying the important phenomena of the analyzed event
- 4. selecting the computational methods or computer codes, models, and correlations that have been validated for the intended applications
- 5. defining boundary and initial conditions
- 6. conducting calculations, including:
 - 1. performing sensitivity analysis and identifying, where necessary, margins to cliff-edge effects
 - 2. analyzing the event from the initial steady state up to a predefined long-term stable state, considering the guidance for duration in section 4.4.2.6
- 7. accounting for uncertainties in the analysis data and models
- 8. verifying calculation results for physical and logical consistency
- 9. processing and documenting the results of calculations to demonstrate conformance with the acceptance criteria

Guidance

The basic elements included in the safety analysis method are described in sections 4.4.2.1 to 4.4.2.9. There are three main analysis methods used in the deterministic safety analysis:

- conservative analysis method, such as the method used for Level 3 defence in depth
- best-estimate-plus-evaluation-of-uncertainties method, such as the method used for Level 3 defence in depth
- best-estimate analysis method, such as the method used for Level 2 and Level 4 defence in depth

The first and second methods above are considered as part of the application of conservatism in safety analysis, and are addressed in section 4.4.6. Evaluation of uncertainties is elaborated in section 4.4.2.7.

4.4.2.1 Guidance for identifying the scenarios to be analyzed

The scenario to be analyzed, or the analyzed event, should be defined by including descriptions of the following:

- initial conditions
- the initiating event and any additional events
- expected actions of the plant systems and of the operator, in response to the initiating event
- general description of the anticipated transient
- associated safety concerns
- long term stable state (including cold and depressurized shutdown) at the end of an event

4.4.2.2 Guidance for identifying applicable acceptance criteria

A set of applicable criteria should be identified, including any regulatory requirements. These criteria should address all safety challenges while also demonstrating compliance with the dose acceptance criteria given in section 4.3.2, as well as the derived acceptance criteria adopted by the designer. In addition to these criteria, others may be defined – in order, for example, to simplify the analysis by imposing more restrictive criteria, or to allow intermediate assessments in search of bounding cases.

4.4.2.3 Guidance for identifying important phenomena

Key phenomena, key parameters, and the range of parameter values associated with the analyzed event should be identified. The supporting experimental data should also be provided or referenced, and theoretical understanding should be demonstrated.

If an event is characterized by sufficiently different stages, then key phenomena should be identified for each stage.

The importance of the involved phenomena should be judged against each acceptance criterion, separately. Key parameters are identified for each important phenomenon. These parameters are then ranked for their importance in influencing the applicable acceptance criteria.

Sensitivity analyses can be used, in conjunction with expert judgment, to help identify and rank the parameters by assessing their influence on analysis results for each acceptance criterion. Particular importance should be given to the identification of cliff-edge effects, such as any abrupt changes in phenomena during any stage of the analysis.

The results of experiments should also be used to help identify important parameters, assist in ranking the importance, and to identify if and where abrupt changes occur.

4.4.2.4 Guidance for models and computer codes

Safety analysis is performed using models of the plant systems and physical phenomena.

All the important phenomena, as identified in section 4.4.2.3, should be represented in the models embedded in the computer code used for the calculations.

The models and computer code applicability to the analyzed event should be demonstrated. Models of plant systems should be verified to reflect asbuilt plant condition, taking into account plant states and aging effects (such as pump degradation, steam generator fouling, increased roughness). Severe accidents may have a particular impact on NPPs with multiple units at a site; this emphasizes the need for a model for severe accidents with multiple units at a site. Further guidance is provided in section 4.4.5.

4.4.2.5 Guidance for defining boundary and initial conditions

The analysis should define the data characterizing the plant condition preceding the analyzed event and plant performance during the event – such as, but not limited to:

- plant operating mode
- reactor power
- fuel burnup and burnup distribution
- fuel temperatures
- coolant temperatures and pressures
- trip set points and action set points for mitigating systems
- instrumentation delays and uncertainties
- safety system performance characteristics
- performance of other plant equipment (such as pumps, valves, coolers, boilers, and turbine)
- weather conditions

In the application of such data, the plant operating limits and conditions (OLCs) should be taken into account. The plant condition used as the initial conditions for the analysis may reflect the actual plant condition or (in many cases) reflect the limits selected for enforcement of the OLCs. This would be done so that the analysis can confirm that the selection of an OLC value is effective. Alternatively, the analysis results may be employed to derive a suitable value for use as an operating limit. Care and good judgment are required to ensure that the set of OLCs derived from such safety analyses are consistent with each other.

4.4.2.6 Guidance for conducting calculations

Comprehensive calculations are conducted to assess the plant performance against each applicable acceptance criterion. Sensitivity studies are undertaken to assess the impact on analysis results of key assumptions – for example, in identifying the worst single failures in various systems, or to assess the impact of using simplified models instead of more accurate and sophisticated approaches (requiring significant effort in the calculations). Sensitivity analysis, with systematic variations in computer code input variables or modelling parameters, should confirm that there are no "cliff-edge" effects. A systematic process should be used to identify parameters with small margins to a cliff edge, such as fuel dryout, pressure boundary failure and tank depletion. Where the likelihood is considered to be high and the potential impact large, sensitivity calculations should explore the impact of passing these thresholds.

The duration of the transients considered in the analysis should be sufficient to determine the event consequences. Therefore, the calculations for plant transients are extended beyond the point where the NPP has been brought to shutdown and stable core cooling, as established by some identified means (i.e., to the point where a long-term stable state has been reached and is expected to remain as long as required). The analysis should take into account the capacity and limitations of long-term makeup water and electrical power supplies.

In cases where the various stages of the transient are governed by different phenomena and/or different time scales, different methods and tools can be applied to model the consecutive stages.

4.4.2.7 Guidance for accounting for uncertainties

In the deterministic safety analysis for Level 3 defence in depth, all key uncertainties should be identified and accounted for. The safety analysis for Level 3 should incorporate appropriate uncertainty allowances for the parameters relevant to the analyzed accident scenario. Such uncertainties include modelling and input plant parameters uncertainties.

The modelling-relevant parameters include those used to start the action of a mitigating system and/or those which can have a significant impact in challenging the integrity of a barrier preventing the release of fission products. The modelling uncertainties are associated with the models and correlations, the solution scheme, data libraries and deficiencies of the computer programs.

The code accuracy obtained as the result of validation work should be used as a source for uncertainties of relevant modelling parameters. The code accuracy is defined by the bias and the variability in bias, and should be obtained from the comparison of code predictions with experimental data, station data or other applicable data.

Input plant parameters (also referred to as operational parameters) are those parameters that characterize the state of plant's SSCs or are used to actuate a mitigating system. These are measured using in-reactor instrumentation.

The measurement uncertainties are available from the plant instrumentation and control system documentation or the OLCs. The systematic ("bias") and random uncertainty components ("standard deviation") should be accounted for.

The measurement bias represents an element of measurement uncertainty arising from a systematic error known to cause deviation in a fixed direction. The standard deviation represents an element of measurement

uncertainty which cannot be defined exactly, or which can cause deviation in either direction, but can be estimated on the basis of a probability distribution.

The aforementioned uncertainties should be accounted for accordingly, either in the conservative analysis or in the best-estimate-plus-evaluation-of-uncertainties methodologies.

In the safety analyses for Level 2 and Level 4 defence in depth (where a realistic, best-estimate analysis method may be used) it is not necessary to account for uncertainties to the same extent.

4.4.2.8 Guidance for verification of results

Verification is performed to ensure that the deterministic safety analysis results are:

- correctly extracted from the analysis codes' output
- physically and logically sound
- consistent with experimental data from suitable integral tests, plant recorded data, previous similar safety analyses or simulations with more advanced models
- bounding predictions for each of the safety analysis acceptance criteria

4.4.2.7 Guidance for documentation of results

Results of deterministic safety analysis calculations are documented in such a way as to facilitate their review and understanding. The documentation of safety analysis results should include:

- objective of the analysis
- analysis assumptions and their justification
- plant models and modelling assumptions

- any computer code user options that differ from the options used in code validation
- analysis results in comparison with acceptance criteria
- findings and conclusions from sensitivity and uncertainty analyses

Further guidance is provided in section 4.5.

4.4.3 Analysis data

Assumptions made to simplify the analysis – as well as assumptions concerning the operating mode of the NPP, the availability and performance of the systems, and operator actions – shall be identified and justified.

The boundary and initial conditions used as the analysis input data shall:

- 1. accurately reflect the NPP configuration
- 2. account for the effects of aging of systems, structures and components
- 3. account for various permissible operating modes
- 4. be supported by experimental data, where operational data are not available

Significant uncertainties in analysis data, including those associated with NPP performance, operational measurements, and modelling parameters, shall be identified.

Guidance

This regulatory document requires the safety analysis be based on plant design and complete and accurate as-built information.

Operational historical recorded data (such as thermal power, flow rates, temperature and pressure) should also be included, where applicable. This information should cover plant SSCs, site-specific characteristics and offsite interfaces.

For an NPP in the design phase, the operational data, if needed, should be derived from generic data from operating plants of similar design, or from research or test results. For an operating NPP, the safety analysis should use plant specific operational data.

The safety analysis values for each plant input parameter should be determined based on:

- design specifications
- tolerances
- permissible ranges of variability in operation
- uncertainties in measurement or evaluation for that parameter

The operational data should include:

- information on component and system performance, as measured during operation or tests
- delays in control systems
- biases and drift of instrumentation
- system unavailability due to maintenance or testing

Applicable limits for NPP parameters that are used as initial and boundary conditions should be identified. The NPP parameters assumed in the safety analysis should bound the ranges of parameters allowed by the operating procedures or, in a statistical approach, cover a predetermined high percentile of each range at a predetermined high confidence level.

The following NPP parameters may be used in analysis as input data, and should be specified in the OLCs, as measured or evaluated during plant operation:

- neutronic and thermal powers, including power distribution
- pressures
- temperatures

- flows
- levels
- leakage or bypass of valves, seals, boiler tubes, and containment
- inventory of radioactive materials
- fuel sheath defects
- flux shapes
- isotopic purity of coolant and moderator (where relevant)
- neutron poison concentration
- core burnup and burnup distribution
- instrument tolerances
- instrument time constants and delays
- parameters related to SSC aging (besides accounting for aging effects on other parameters)
- position of rods, valves, dampers, doors, gates
- number of operational components, such as pumps and valves

Note: In the preparation of the data in the list above, there are some parameters (such as core burnup and burnup distribution) that are not measured directly. Core characteristics for all fuel loads should be accounted for. In this example, they are evaluated and extracted from computer simulation for which the accuracy of these tools is supported by station and experimental data. There are generally some inputs to the safety analysis that are derived or inferred from data obtained experimentally.

It should also be noted that the effects of aging include long-term mechanisms causing gradual degradation as well as mechanisms causing rapid degradation. Degradation mechanisms include thermal cycles, deformation, strain, creep, scoring, fatigue, cracking, corrosion and erosion. The allowed aging limits are part of the safety analysis input data.

Uncertainties in plant data should be determined and recorded. These uncertainties should be considered in the uncertainty and sensitivity analyses.

4.4.4 Analysis assumptions

Assumptions made to simplify the analysis, as well as assumptions concerning the operating mode of the nuclear power plant, the availability and performance of the systems, and operator actions, shall be identified and justified.

The analysis of AOO and DBA shall:

- 1. apply the single-failure criterion to all safety systems and their support systems
- 2. account for consequential failures that may occur as a result of the initiating event
- 3. credit actions of systems only when the systems are qualified for the accident conditions, or when their actions could have a detrimental effect on the consequences of the analyzed accident
- 4. account for the possibility of the equipment being taken out of service for maintenance
- 5. show that the plant can be maintained in a stable, cold and depressurized state for a prolonged period
- 6. credit operator actions only when there are:
 - 1. unambiguous indications of the need for such actions
 - 2. adequate procedures and sufficient time to perform the required actions
 - 3. environmental conditions that do not prohibit such actions

For the analysis of a BDBA, it is acceptable to use a more realistic analysis methodology consisting of assumptions that reflect the likely plant configuration, and the expected response of plant systems and operators in the analyzed accident.

Guidance

Assumptions are made in the input data, such as those related to the design and operating parameters, as well as in the physical and numerical models implemented in the computer codes.

Assumptions may be either intentionally realistic or deliberately biased in a conservative direction.

The assumptions generally used for the Level 3 defence-in-depth analysis of AOOs and DBAs are described in sections 4.4.4.1 to 4.4.4.7. It should be noted that some of these assumptions are not necessary in the analysis of AOOs for assessing control system capability (Level 2 defence in depth,) if such an approach can be justified.

For BDBA safety analysis, one objective is to demonstrate the capabilities of SSCs to meet the design requirements specified for BDBA conditions. The analysis should account for the full design capabilities of the plant, including the use of some safety and non-safety systems beyond their originally intended function (to return the potential severe accident to a controlled state, or to mitigate its consequences). The BDBA analysis assumptions on crediting and modelling plant systems and their capability during a BDBA should be consistent with the objectives of the analysis. If credit is taken for use of systems beyond their originally intended function, there should be a reasonable basis to assume they can and will be used as

assumed in analysis. This basis can be obtained from the evaluation of effectiveness of these systems to operate in severe accident conditions, if they are still available.

4.4.4.1 Guidance for single-failure criterion in safety group

The single-failure criterion stipulates that the safety group consisting of a safety system and its support systems should be able to perform its specified functions even if a failure of single component occurs within this group.

Expectations related to the application of the single-failure criterion in design can be found in the CNSC's regulatory document REGDOC-2.5.2, *Design of Reactor Facilities: Nuclear Power Plants*.

The analysis should assume a single failure to occur for each element of a safety group in turn, and identify the worst single failure for each acceptance criterion. In addition to a single failure of a component, the analysis should account for the impact of possible maintenance, testing, inspection or repair on safety group performance.

Safety analysis of AOOs and DBAs for Level 3 defence in depth should apply the single-failure criterion to each safety group.

The single-failure criterion does not need to be applied in the analysis of AOO for Level 2 defence in depth and BDBA.

4.4.4.2 Guidance for consequential failures

The analysis should take into account consequential failures that may occur as a result of an initiating event.

Any failures that occur as a consequence of the initiating event are part of that event and are not considered to be a single failure for the purpose of safety analysis. For example, equipment that is not qualified for specific accident conditions should be assumed to fail unless its normal operation leads to more conservative results.

4.4.4.3 Guidance on credit for actions of systems: Performance of structures, systems and components

Guidance for availability of systems

The operation of systems should be credited only when they are designed or shown to be capable of performing the intended function, and are qualified to withstand all challenges and cross-link effects arising from the accident.

In the safety analysis of an AOO for Level 2 defence in depth, credit may be taken for the operation of process and control systems whose actions could help mitigate the event, as long as the credited systems are not impaired as a consequence of the initiating event. The status of these systems and the values assigned to their parameters need to be justified.

In the safety analysis of AOOs and DBAs for Level 3 defence in depth, no credit should be taken for the operation of the control systems in mitigating the effects of the initiating event. The effects of control system actions should be considered, if these actions would aggravate the transient or delay the actuation of the protection features.

If the operation of non-qualified equipment results in worse event consequences, this will lead to the general assumption that such equipment is operated in a manner that makes the event worse.

Any process equipment that is operating prior to the event is assumed to continue operating, if it is not affected by the initiating event. For example, boiler feed can be assumed to continue until loss of electrical power, for those events which do not produce a harsh environment.

Guidance for partial and total failures

Partial and total failures of equipment should be considered in the analysis of each failure sequence, to identify the worst failure for each acceptance criterion.

Guidance for worst piping failure

Various modes of piping failures should be considered in loss-of-coolant analyses. They include circumferential, guillotine, and longitudinal failures at any location in a system.

For circumferential and guillotine failures, analysis should consider a discharge area up to, and including, twice the cross-sectional area of the piping.

For longitudinal breaks, the analysis should justify the upper limit of the range of postulated break size.

The worst break location, size, and orientation, in the context of posing the most challenges to a safety analysis requirement, should be identified through analysis, including sensitivity analysis, using a conservative break model.

For CANDU reactors, failures of reactor inlet and outlet headers are considered in the same way as piping failures.

Guidance for loss of offsite power

In addition to a single failure and any consequential failures, a loss of offsite power should be assumed, unless a justification is provided.

The loss of offsite power may be assumed to occur either at the initiation of the event or as a consequence of reactor and turbine trip. For example, when loss of Class IV power (CANDU-type reactor) is assumed, the event should be analyzed both with and without the loss of offsite power, and the most limiting results should be used.

4.4.4.4 Guidance for credit for actions of systems: safety system performanceSafety systems should be credited at their minimum allowable performance, in accordance with the OLCs.

Guidance for shutdown means

The deterministic safety analysis should demonstrate the effectiveness of all credited shutdown means by demonstrating that the design meets applicable acceptance criteria (see section 4.3).

This subsection contains different expectations, depending on the reactor's design and inherent characteristics, as described in REGDOC-2.5.2, *Design of Reactor Facilities: Nuclear Power Plants*. Two broad categories of reactors are considered, as follows:

- reactors with inherent safety: designs that demonstrate that any AOO or DBA with failure of the fast-acting shutdown means (anticipated transient without reactor trip type analysis) does not lead to severe core damage and a significant early challenge to containment
- reactors with engineered safety: designs that cannot demonstrate that any AOO or DBA with failure of the fast-acting shutdown means does not lead to severe core damage and a significant early challenge to containment

The following are the applicable acceptance criteria for the two categories of reactors:

Guidance for shutdown means for reactors with inherent safety

For the first shutdown means, which is fast-acting, the analysis should demonstrate that the criteria applicable to the initiating event class (AOO or DBA, as applicable) are met. Operator actions to supplement the fast-acting shutdown means may be credited, provided that the conditions for manual reactor trip are satisfied (see end of this subsection).

For the second shutdown means (that may be manually initiated), the frequency of occurrence of an AOO and the failure frequency of the fast-acting shutdown means may result in a combined frequency that falls in the DBA range, in which case the applicable limits are the DBA dose limits. If the designer can demonstrate a very high reliability for the fast-acting shutdown means, it may be acceptable to use BDBA limits (i.e., the safety goals).

The frequency of a DBA and the failure frequency for the fast-acting shutdown means may result in a combined frequency that falls in the BDBA range, in which case the applicable limits are the safety goals.

Guidance for shutdown means for reactors with engineered safety

The design includes two redundant, fast-acting means of shutdown, both of which should be demonstrated to be equally effective (see REGDOC-2.5.2, *Design of Reactor Facilities: Nuclear Power Plants*). The criteria for both shutdown means will be the same, and will be AOO or DBA criteria, as applicable to the event class.

To help better understand trip parameter expectations, table 3 can be used to determine the performance objectives for the specific event under consideration. Objectives for reactor designs with inherent safety and reactor designs with engineered safety are shown.

Table 3: Performance objectives for the number of trip parameters

	Reactor	Means of	parameter	Is a direct trip	Performance		
design	shutdown (SD)		parameter available?	objective	parameter total		

Reactors with inherent safety	One fast- acting SD means	One direct TP per event	Yes	One direct TP per event	One TP
			No	Two diverse indirect TPs per event	Two TPs
	Second SD means	One direct TP per event	Yes	One direct TP per event	One TPs
			No	Two diverse indirect TPs per event	Two TPs
	One fast- acting SD means	Two TPs per event (at least one direct)	Yes	Two TPs (at least one direct)	Two TPs
Reactors with			No	Two indirect TPs	Two TPs
engineered safety	Second fast-acting SD means	event (at least one	Yes	Two TPs (at least one direct)	Two TPs
			No	Two indirect TPs	Two TPs

Notes:

- 1. For accident scenarios with slow or no power increase, two-parameter trip coverage should be demonstrated if practicable.
- 2. For scenarios where analysis is being performed not to demonstrate trip coverage, but to provide support such as environmental qualification (EQ) room conditions analysis for equipment survivability, a backup trip parameter is demonstrated only if practicable.

A manual reactor trip can be considered to be equivalent to a trip parameter if: the requirements for crediting operator action from the main control room are met (see subsection 4.4.4.5); and the reliability of manual shutdown meets the reliability requirements for an automatic trip.

Guidance for emergency core cooling system

If the emergency core cooling system (ECCS) logic has an injection logic conditioned by the presence of other indicators (i.e., conditioning signal), then the safety analysis should identify and evaluate the consequences of situations where those conditioning signals may be blinded.

If the ECCS activation logic is complex (i.e., several different actions are required for the system to be considered fully activated), then the safety analysis should consider the consequences if some of these actions do not occur – for example, a failure to re-align the ECCS pump suction to the containment sump.

For certain designs, the following considerations should be taken into account:

- the potential for gas entrainment that could result in damage due to the occurrence of water hammer
- the impact on recirculation flows in the presence of filter plugging, debris blockage, heat exchanger blockage, or pump cavitations
- the effect of non-condensable gases on flow and heat transfer

The safety analysis should consider the impact on the effectiveness of the ECCS of the inaction, partial action, and normal functioning of any other systems that supplement or degrade the cooling capability of the ECCS.

Guidance for containment

The deterministic safety analysis should identify and evaluate consequences of situations when the containment isolation instrumentation is blinded. For containment, "blinded" refers to conditions for which a containment isolation actuation set point is approached, but not reached. For example, the containment may be blinded by the inaction, partial action, or normal functioning of other systems that supplement or degrade the containment performance. Containment blinding scenarios are important, because an accident with a potential for radioactivity release may not trigger the activation of containment isolation.

The containment leakage rate assumed in the analysis should be based on containment design leak-tightness requirements, and confirmed by the leakage rate tests.

Guidance for equipment under maintenance

The analysis should account, where applicable, for the possibility of the equipment being taken out of service for maintenance.

4.4.4.5 Guidance for operator action

Specific operator actions required in response to an accident should be identified. Operator actions can be credited in the safety analysis for Level 3 defence in depth only if:

- there is reliable instrumentation designed to provide clear and unambiguous indication of the need to take action
- the power plant has operating procedures that identify the necessary actions, operator training, support personnel, spare parts, and equipment
- environmental conditions do not prevent safe completion of operator actions

Following the first clear and unambiguous indication of the necessity for operator actions, such actions may normally be credited in the safety analysis (Level 3 defence in depth) to be started no sooner than:

- 15 minutes for actions in the main control room
- 30 minutes for actions outside the main control room

Times for operator actions in new nuclear power plants are established in REGDOC-2.5.2, *Design of Reactor Facilities: Nuclear Power Plants*.

Note: New nuclear power plants referenced in this section are those first licensed in 2014 and beyond.

It should be shown by assessment that the specified times are sufficient for the operator to detect and completely diagnose the event, and to carry out the required actions. Such assessment should account for the following:

- time starting from the occurrence of the initiating event to the receipt of the event indication by the operator
- time to carry out the diagnosis
- time required to perform the action
- time for the safety related function to be completed

In certain circumstances, which must be justified, a completion time shorter than 15 minutes for a control room action might be assumed, provided that:

- the operator is exclusively focused on the action in question
- the required action is unique, and does not involve a choice from several options
- the required action is simple and does not involve multiple manipulations

The assessment of the credited human action items should be formally documented. It should include a validation process, which can encompass:

- documented procedures that define specific operator action entry points and actions
- training of personnel on those procedures (training outline, materials, records)
- performing station drills, exercises or control room simulator studies, to confirm that human actions can be completed and to assess response times
- consideration of control room simulator data from training activities
- analysis and assessment of the response times, to provide credible time estimates for safety analysis usage
- validation reports

4.4.4.6 Guidance for modelling assumptions

The assumptions incorporated in the computer codes, or made during code applications, should be such that safety analysis results (whether best-estimate or conservative) remain physically sound.

In performing safety analysis, justifications should be provided for all instances where the assumptions used are different than those used in the validation.

4.4.4.7 Guidance for dose calculations

As mentioned in section 4.3, the committed whole-body dose for average members of the critical groups who are most at risk (at or beyond the site boundary) is calculated in the deterministic safety analysis for a period of 30 days after the analyzed event.

The effective dose should be used in dose calculations, and should include contributions from:

- external radiation from cloud and ground deposits
- inhaled radioactive materials
- skin absorption of tritium

In dose calculations, the worst weather scenario in terms of predicted dose should be assumed. All weather scenarios with probabilities of occurrences higher than 5 percent should be accounted for.

No intervention in the form of decontamination or evacuation should be assumed. Intervention against ingestion of radioactive materials and natural removal processes may be assumed.

Dose calculations should also be conducted for several time intervals, and up to one year after the accident.

4.4.5 Computer codes

Computer codes used in the safety analysis shall be developed, validated, and used in accordance with a quality assurance program that meets the requirements of CSA N286.7-99, *Quality Assurance of Analytical, Scientific, and Design Computer Programs for Nuclear Power Plants*.

Guidance

The use of realistic computer codes in safety analysis is preferable, given that the use of conservative codes may produce misleading or unrealistic results. However, an extensive experimental database should be established to demonstrate the code applicability and to validate the code, thereby providing a basis for confidence in code predictions.

Fully integrated models could give a more accurate representation of the event, and should be used to the extent practicable. These models address all important phenomena within a single code or code package. Sequential

application of single-discipline codes is more likely to misrepresent feedback mechanisms than fully integrated models, and should be avoided unless there is a specific advantage.

The selection of computer codes should consider the code applicability, the extent of code validation, and the ability to adequately represent the physical system.

4.4.5.1 Guidance for computer code applicability

For the safety analysis of an event, the applicability of computer codes used to predict the consequences is established before conducting the analysis. The demonstration of code applicability includes the following steps:

- identification of all phenomena significantly influencing the key output parameters (see section 4.4.2.3)
- confirmation that the code implements adequate models for all key phenomena, and demonstrating that these models have been verified and validated against separate effect tests
- assessing the closure equations and constitutive relationships
- assessing scaling effects; the scalability of the integral effects tests should be assessed to confirm that there is no significant distortion in the database; scaling distortions and their impact on the code assessment should be identified, evaluated and addressed in the safety analysis
- assessing the numerical stability of calculations and temporal and spatial convergence of iterative approximations; the spatial and temporal convergence are achieved when an increase or a reduction in the node or time step sizes (which includes changing the minimum time step, if necessary) does not change simulation results significantly
- addressing any gaps or deficiencies in the code applicability for the analyzed event

The code applicability assessment and relevant knowledge bases are documented in sufficient detail to allow for an independent review.

To model behaviour involving many coupled phenomena, it should be demonstrated that data are transferred through interfaces (i.e., from the calculation of one phenomenon to another) in a manner which adequately captures the physical phenomena and feedback mechanisms.

4.4.5.2 Guidance for code validation and quantification of accuracy

This document requires all computer codes to be validated for their application in safety analysis. The purpose of validation is to provide confidence in the ability of a code for a given application, and also to determine the code accuracy.

The validation should:

- demonstrate the capability and credibility of a computer code for use in specific analysis application
- quantify the accuracy of the code calculations (quantified through comparison of code prediction with experimental data or other known solutions)

The codes used in safety analysis are validated by comparing code predictions with:

- experimental data
- commissioning data and operating data, where available
- solutions to standard or benchmark problems
- closed mathematical solutions
- results of another validated computer program

The comparison of code predictions with solutions to standard problems or closed mathematical solutions for the purposes of validation is acceptable, but they should normally be supplemented with other types of comparisons.

The experimental database used for validation may encompass separate effects, as well as component and integrated tests. Chosen test validation should satisfy the following criteria:

- test data are obtained at physical and geometrical conditions and phenomena that are relevant either to normal operation conditions, or to a postulated accident scenario in the reactor
- tests used for validation are free of distortions due to geometry or other properties, to the extent practicable
- measurement uncertainties are quantified
- systematic errors (bias) are minimized, and their sources are understood
- the integrated tests used for validation should be specific to the reactor, and contain components representative of those used in the NPPs
- data used for model development is independent from data used for computer code validation

Accuracy of code predictions should be provided for the key modelling parameters, and for the plant parameters used to control power generation or to initiate a mitigating system (see section 4.4.2.7).

The bias and variability of bias in the computer code can be obtained from the comparison of code predictions with experimental data. The code models used during validation should be identified and recommended for use in safety analysis, so that the safety analysis is consistent with the validation. Otherwise, the impact of using different models on the simulation results (code accuracy) should be assessed.

Clear recommendations should be made on the use of a code beyond the conditions for which validation has been performed, and all the effects of such extrapolations should be assessed and accounted for.

The effect of the modelling assumptions on the validation results should be assessed, including confirmation that a spatial and temporal convergence of the solution is achieved.

Documentation of the computer tools should be clear and easy to follow, so the uncertainties due to user effects would be negligible. The use of different computer hardware or operating systems should also have negligible effects. Means such as user training and compliance with quality assurance procedures should be clearly stated.

Computer code validation should be performed by qualified persons. Validation reports should be reviewed by qualified persons who had not participated in the validation.

The guidance given above is consistent with and complements the requirements in CSA N286.7-99, *Quality Assurance of Analytical, Scientific, and Design Computer Programs for Nuclear Power Plants*.

4.4.5.3 Guidance for physical representations

Data are also prepared to provide a mathematical representation of the physical components, and how their arrangements are to be represented by the computer simulation. This input data should be prepared in accordance with the following principles:

- a systematic method for representing components and connections should be developed
- the basis for the methodology should be documented; the methods used are usually based on experience in representing experimental facilities and other plants of similar configurations
- the representation should be verified and validated
- in some cases, plant tests (sometimes as commissioning tests) are required to establish the precision of such representations

In general, representations used for plant simulations should be created using the same principles as the representation used for code validation to minimize the related user effects.

4.4.6 Conservatism in analysis

The safety analysis shall build in a degree of conservatism to off-set any uncertainties associated with both NPP initial and boundary conditions and modelling of NPP performance in the analyzed event. This conservatism shall depend on event class and shall be commensurate with the analysis objectives.

Guidance

Safety analysis needs to incorporate a degree of conservatism that is commensurate with the safety analysis objectives and is dependent on the event class. Conservatism in safety analysis is often necessary to cover the potential impact of uncertainties, and may be achieved through judicious application of conservative assumptions and data.

The concept of conservatism is applied to Level 3 defence-in-depth safety analysis. This is to ensure that limiting assumptions are used when knowledge of the physical phenomena is insufficient.

For Level 2 and Level 4 defence in depth, the safety analysis should be carried out using best-estimate assumptions, data and methods. Where this is not possible, a reasonable degree of conservatism (appropriate for the objectives of these levels) should be used, to compensate for the lack of adequate knowledge concerning the physical processes governing these events.

While it is permissible – and sometimes encouraged – to use conservative codes, it is usually preferable to apply realistic (best-estimate) computer codes. Where conservative analysis results are required for Level 3 defence-in-depth (AOO and DBA) analysis, best-estimate computer codes should be used along with the assessment of modelling and input plant parameter uncertainties.

The deterministic safety analysis for AOO and DBA (conservative analysis for Level 3 defence in depth) should:

- apply the single-failure criterion to all safety groups, and ensure that the safety groups are environmentally and seismically qualified
- use minimum allowable performance (as established in the OLCs) for safety groups
- account for consequential failures that may occur as a result of the initiating event
- credit the actions of process and control systems only where the systems are passive and environmentally and seismically qualified for the accident conditions
- include the actions of process and control systems when their actions may have a detrimental effect on the consequences of the analyzed accident
- credit the normally running process systems that are not affected by the analyzed accident

 if operator actions are credited, demonstrate that credible "worst case" operator performance has been considered in the analysis and assessment

Independent selection of all parameters at their conservative values can lead to plant states that are not physically feasible. When this could be the case, it is recommended to select conservatively those key parameters that have the strongest influence on the results in comparison with the acceptance criterion under consideration. The remaining parameters can be specified more consistently in the ensuing calculations. Each calculation should account for the impact of a particular parameter, so that the effects of all parameters can be assessed.

4.5 Safety analysis documentation

The safety analysis documentation shall be comprehensive and sufficiently detailed to allow for a conclusive review. The document shall include:

- 1. the technical basis for the analyzed event and key phenomena and processes
- 2. a description of the analyzed facility, including important systems and their performance, as well as operator actions
- 3. information describing the analysis method and assumptions
- 4. a description of the assessments of code applicability for the analyzed event and computer code uncertainty
- 5. an easily understood description of the results of the analysis, and the drawing of conclusions with respect to conformance with acceptance criteria

Analysis documentation shall facilitate the update of the analysis when new results become available.

Guidance

The review should be an independent review and conducted by suitably qualified experts. In particular, the following elements need to be included in the safety analysis documentation:

- a technical basis that includes:
 - the objective(s) of the analysis
 - a description of the analyzed event, which should include a description of the NPP operating mode, action of SSCs, operator actions and significant phases of the analyzed event (note that other events bounded by the analyzed event should also be identified)
 - a description of safety concerns, challenges to safety, and applicable safety analysis criteria, requirements and numerical limits
 - identification of key phenomena significantly affected by the key parameters for the analyzed event, along with a description of the systematic process used for identification of key parameters
- a description of the analyzed facility, including important systems and their performance, as well as operators actions
- information on the analysis method and assumptions
- information demonstrating the code applicability, including (when available) evidence that codes have been validated against prototypical experiments and assessment of code accuracy, as well as references to the relevant experimental results; demonstration that the analysis assumptions are consistent with the plant operating limits (with evidence from NPP operation and experiments demonstrating the assumed observed variances in operating parameters, and uncertainties in modelling parameters, respectively)
- a description of the results of analysis, including results of sensitivity and uncertainty studies with sufficient detail to show dominant

phenomena; evidence of independent verification of the inputs and the results; evidence of analysis review, including an assessment of the impact (if any) on the plant's operating limits, conditions, manuals, etc.

Safety analysis documentation should be written in a manner that can be easily understood by the station staff controlling the plant's OLCs.

4.6 Review and update of safety analysis

4.6.1 Review of safety analysis results

The licensee shall systematically review the safety analysis results to ensure that they are correct and meet the objectives set for the analysis. The results shall be assessed against the relevant requirements, applicable experimental data, expert judgment, and comparison with similar calculations and sensitivity analyses.

The licensee shall review the analysis results using one or more of the following techniques, depending on the objectives of the analysis:

- 1. supervisory review
- 2. peer review
- 3. independent review by qualified individuals
- 4. independent calculations using alternate tools and methods to the extent practicable

Guidance

Procedures should be developed to determine the extent of the independent review to be applied at each step of the safety analysis.

To review the safety analysis and identify potential deficiencies, reviewers should be familiar with:

- safety standards, analytical methods, and technical and scientific research
- changes in power plant data, design, operating envelope and operating procedures
- information on operating experience from other NPPs

In reviewing the safety analysis, the following review elements should be considered:

- plant design information, supported by layout, system and equipment drawings, and design manuals
- operating limits and permitted operational states
- information about the functional capability of the plant, systems and major items of equipment
- the findings of tests which validate the functional capability
- the results of inspection of components
- site characteristics, such as flood, seismic, meteorological, and hydrological databases
- offsite characteristics, including population densities
- results of similar analyses
- developments in analytical methods and computer codes
- regulatory rules for safety analysis
- safety analysis standards and procedures

The extent and method of the review should be commensurate with:

- the analysis complexity and novelty
- similarity to previously reviewed analyses
- predicted margins to acceptance criteria

For novel and complex analysis, the use of alternative methods should be considered to confirm analysis results. Alternative methods used for confirmation may be simplified, but should be capable of demonstrating that the original analysis results are reasonable.

4.6.2 Update of safety analysis

The safety analysis shall be periodically reviewed and updated to account for changes in NPP configuration, conditions (including those due to aging), operating parameters and procedures, research findings, and advances in knowledge and understanding of physical phenomena, in accordance with CNSC regulatory standard S-99, *Reporting Requirements for Operating Nuclear Power Plants*, or successor documents.

In addition to periodic updates, the safety analysis shall also be updated following the discovery of information that may reveal a hazard that is different in nature, greater in probability, or greater in magnitude than was previously presented to the CNSC in the licensing documents.

Guidance

The periodic update of the safety analysis report should:

- incorporate new information
- address identified new issues
- use current tools and methods
- address the impact of modifications to the design and operating procedures that might happen over the life of the NPP

Updating the safety analysis ensures that it remains valid, while taking into account:

- the actual status of the NPP
- permitted plant configuration and allowable operating conditions

- predicted plant end-of-life state
- changes to analytical methods, safety standards and knowledge that invalidate existing safety analysis

In order to achieve the above objective, the following guidelines can be used in updating safety analyses:

- review safety analysis methods against the applicable standards, and research findings available in Canada and internationally, to identify the elements that should be taken into account
- review the changes made in the NPP data, design, operating envelope, and operating procedure, to identify the elements that need to be updated
- review information on NPP commissioning and operating experience, both in Canada and worldwide, to identify relevant information that should be accounted for
- review the progress in the resolution of previously identified safety analysis issues, to identify the impact on the safety analysis methods and results

4.7 Quality of safety analysis

Safety analysis shall be subject to a comprehensive QA program applied to all activities affecting the quality of the results. The QA program shall identify the management system or quality assurance standards to be applied and shall include documented procedures and instructions for the complete safety analysis process, including, but not limited to:

- 1. collection and verification of NPP data
- 2. verification of the computer input data
- 3. validation of NPP and analytical models
- 4. assessment of simulation results

5. documentation of analysis results

Guidance

All sources of data should be referenced and documented, and the various steps of the process should be recorded and archived, to allow independent checking.

The safety analysis QA program should comply with regulatory requirements, codes and standards, and be consistent with the best international practices.

Part II: Deterministic Safety Analysis for Small Reactor Facilities

5. Introduction

Part II of this regulatory document sets out the requirements of the Canadian Nuclear Safety Commission (CNSC) for deterministic safety analysis for small reactor facilities.

6. Graded Approach

The graded approach is a method in which the stringency of the design measures and analyses applied are commensurate with the level of risk posed by the reactor facility.

The breadth and depth of analyses and magnitude of accepted uncertainties in the safety analyses shall demonstrate that the safety analysis objectives and the requirements in this document are met.

Licensees or applicants may find further guidance on use of the graded approach in International Atomic Energy Agency (IAEA) NS-R-4, *Safety of Research Reactors*.

6.1 Application of the graded approach to safety analysis

The scope, content and detail of the safety analysis for small reactor facilities may not be the same as for power reactors. Different accident scenarios may apply and some scenarios may need only a limited safety analysis. The application of the graded approach to safety analysis shall be commensurate with the level of risk of the reactor facility.

When a graded approach is applied, factors to be considered include:

- 1. reactor power
- 2. reactor safety characteristics
- 3. amount and enrichment of fissile and fissionable material
- 4. fuel design
- 5. type and mass of moderator, reflector and coolant
- 6. utilization of the reactor
- 7. presence of high-energy sources and other radioactive and hazardous sources
- 8. safety design features
- 9. source term
- 10. siting
- 11. proximity to populated areas

7. Safety Analysis

The overall assessment of the reactor facility design includes hazards analysis, deterministic safety analysis and probabilistic safety analysis techniques. This document focuses on deterministic safety analysis.

These analyses identify all radiation sources, in order to evaluate potential radiation doses to reactor facility workers and to the public, and to evaluate potential effects on the environment.

These analyses confirm that the design is capable of meeting the safety requirements, dose acceptance criteria and safety goals. These analyses also contribute to demonstrating that the reactor facility provides defence in depth (as defined in RD-367, *Design of Small Reactor Facilities*).

The safety analyses shall:

- confirm the assumptions and intent of the design for normal operation
 of the reactor facility to establish the operational limits and conditions
 (OLCs) of the reactor facility, to assist in establishing and validating
 accident management procedures and guidelines
- 2. characterize the events that are applicable to the site and reactor facility design (as described in section 8.2)
- 3. analyze and evaluate event sequences that result from failure of structures, systems and components (SSCs)
- 4. compare the results of the safety analyses with design limits and dose acceptance criteria
- 5. confirm the range of conditions and events taken into account in the design basis
- 6. demonstrate that anticipated operational occurrences (AOOs), design-basis accidents (DBAs) and, to the extent practicable, beyond-design-basis accidents (BDBAs) can be managed by automatic response of safety systems in combination with operating procedures

7.1 Deterministic safety analysis objectives

The deterministic safety analysis shall:

- 1. confirm that the design of a reactor facility meets design and safety requirements and the applicable requirements for defence in depth established in RD-367; in particular, the deterministic safety analysis shall:
 - 1. demonstrate Level 2 defence in depth by providing reasonable confidence that control systems acting alone can mitigate a wide range of AOOs without damage to SSCs
 - 2. demonstrate Level 3 defence in depth by providing high confidence that the safety systems acting alone can mitigate all AOOs and DBAs such that the facility meets the dose acceptance criteria established in RD-367
 - 3. assist in demonstrating Level 4 defence in depth by supporting probabilistic safety analysis to demonstrate that facility meets the safety goals established in RD-367
- 2. derive or confirm OLCs that are consistent with the design and safety requirements for the reactor facility
- 3. assist in establishing and validating accident management procedures and guidelines
- 4. confirm that modifications to the design or operation of the reactor facility have no significant adverse impact on safety

8. Requirements for Deterministic Safety Analysis

The following sections outline the detailed requirements of the deterministic safety analysis that must be submitted to the CNSC.

8.1 Responsibilities

The licensee or applicant is responsible for ensuring that the deterministic safety analysis meets the following requirements. The licensee or applicant shall:

- 1. maintain adequate capability to either perform deterministic safety analysis or competently oversee deterministic safety analysis by an external resource
- ensure that a formal process is followed to assess and update a
 deterministic safety analysis, taking into account the impact of design
 modifications, operational experience, research findings and known
 safety issues
- 3. ensure that a documented quality assurance (QA) process is applied in conducting a deterministic safety analysis

8.2 Events to be analyzed

8.2.1 Identifying events

The licensee or applicant shall use a systematic process to identify postulated initiating events (including criticality events), event sequences and event combinations (referred to as "events" hereafter in this document) that can potentially challenge the safety functions of the reactor facility. This process must consider regulatory requirements and guidance, past licensing precedents, operational experience, engineering judgment, results of deterministic analysis and probabilistic safety assessment (PSA), and a systematic review of the design.

The licensee shall also identify events that may lead to fission product releases, including those related to spent fuel pools (also called irradiated fuel bays) and fuel-handling systems.

The identification of events shall account for:

- 1. all operating configurations, such as start-up, at-power operation, shutdown, maintenance, testing, surveillance, and refuelling
- 2. configurations and uses of the reactor facility
- 3. interactions between the reactor and any experimental devices, including:
 - 1. administrative procedures
 - 2. controls
 - 3. additional equipment related to the experimental devices

Common-cause events affecting multiple reactor units on a site, or a reactor unit and related facilities nearby, shall be considered.

The list of identified events shall be reviewed for completeness during the design and deterministic safety analysis process. After construction of a new reactor facility, the list of events shall be verified for the "as-built" state. Subsequent design changes or experiment designs shall also be reviewed and the list of identified events modified as necessary.

8.2.2 Scope of events analyzed

The list of events to be developed for the deterministic safety analysis shall include:

- 1. failures or malfunctions of SSCs
- 2. operator errors
- 3. common-cause failures initiated by internal and external events, including those affecting multiple reactor units on a site

A cut-off frequency shall be selected such that the events with a frequency of occurrence less than the cut-off limit provide only a negligible contribution to the risk. Events of lower frequency than the cut-off limit are

not considered to be credible. The elimination of such events from the deterministic safety analysis scope shall be justified, and the reasons for eliminating them must be documented.

8.2.3 Classification of events

The identified events shall be classified, based on the results of PSA and engineering judgment, into the following three classes of events:

- 1. anticipated operational occurrences (AOOs), which include all events with frequencies of occurrence equal to or greater than 10-2 per reactor year
- 2. design-basis accidents (DBAs), which include all events with frequencies of occurrence equal to or greater than 10-5 per reactor year but less than 10-2 per reactor year. This class of events also includes any events that are used as a design basis for a safety system, regardless of whether the estimated frequencies are less than 10-5 per reactor year.
- 3. beyond-design-basis accidents (BDBAs), which include events with frequencies of occurrence less than 10-5 per reactor year

Events with a frequency near the threshold between two classes of events, or with substantial uncertainty over the predicted event frequency, should be classified into a higher frequency class.

Credible common cause events shall also be classified within the AOO, DBA and BDBA classes.

8.3 Acceptance criteria

8.3.1 Normal operations

Safety analysis for normal operation of the reactor facility shall demonstrate that:

- 1. radiological doses to workers and members of the public are within the limits prescribed in the *Radiation Protection Regulations*
- 2. releases of radioactive materials into the environment are within the regulatory limits

8.3.2 Anticipated operational occurrences and design-basis accidents

Safety analysis for AOOs and DBAs shall demonstrate that:

- 1. radiological doses to members of the public do not exceed the dose acceptance criteria as established in RD-367, *Design of Small Reactor Facilities*
- 2. the applicable safety requirements established in accordance with section 8.3.4 are met, unless otherwise justified

8.3.3 Beyond-design-basis accidents

Safety analysis for BDBAs shall demonstrate that:

- 1. the reactor facility, as designed, is capable of meeting the safety goals as established in RD-367
- 2. the procedures and equipment put in place to take accident management needs into account are effective, considering the availability of cooling water, material and power supplies; consideration can be given to the plant's full design capabilities, including the possible use of safety, non-safety and temporary systems beyond their originally intended function

Note that deterministic safety analysis supports PSA in evaluating the reactor facility against the safety goals.

8.3.4 Application of safety requirements for anticipated operational occurrences and design-basis accidents

Qualitative acceptance criteria shall be established for each AOO and DBA to confirm the effectiveness of reactor facility systems in maintaining the integrity of physical barriers against releases of radioactive material. These qualitative acceptance criteria shall:

- avoid the potential for consequential failures resulting from an initiating event
- 2. maintain the SSCs in a configuration that permits the effective removal of residual heat
- 3. prevent development of complex configurations or physical phenomena that cannot be:
 - 1. modelled with high confidence
 - 2. demonstrated with suitable experiments
 - 3. reliably bound by conservative assumptions
- 4. be consistent with the design requirements for the reactor facility's SSCs

To demonstrate that the safety requirements are met, acceptance criteria for AOOs and DBAs shall be established by the licensee or applicant prior to performing the deterministic safety analysis. Such acceptance criteria shall ensure that the safety functions are met, justified and supported by appropriate evidence.

Examples of acceptance criteria for AOOs and DBAs are provided in appendix C. Licence conditions may contain additional requirements to reflect events resulting from unique reactor facility design or experiments.

The results of a deterministic safety analysis shall meet acceptance criteria, with sufficient margins to accommodate uncertainties associated with the deterministic safety analysis.

The deterministic safety analysis shall include the event that poses the most challenges in meeting the acceptance criteria (i.e., the limiting event in an event category).

8.4 Methods and assumptions for deterministic safety analysis

The deterministic safety analysis must demonstrate that acceptance criteria will be met. To provide adequate confidence in the results, the deterministic safety analysis shall:

- 1. be performed in accordance with a QA process that meets the requirements specified in section 8.7
- 2. be performed by qualified analysts
- 3. apply a systematic deterministic safety analysis method
- 4. use verified and validated models and computer codes
- 5. use justified assumptions
- 6. be subjected to a review process

8.4.1 Method for deterministic safety analysis

The deterministic safety analysis method shall include:

- 1. identifying the scenarios to be analyzed to attain the deterministic safety analysis objectives, including sensitivity cases
- 2. identifying the applicable acceptance criteria and limits
- 3. collecting the information that describes the analyzed reactor facility and its permissible operating modes
- 4. defining the assumptions about the operating state, the availability and performance of reactor facility systems, and the actions of operators
- 5. identifying the important phenomena of the analyzed event
- 6. selecting the computational methods or computer codes, models and correlations that have been validated for the intended applications

- 7. preparing the input data for the deterministic safety analysis
- 8. conducting calculations, including:
 - performing sensitivity analysis and identifying, where necessary, margins to cliff-edge effects
 - 2. analyzing the event from the initial steady state up to a predefined long-term stable state
- 9. verifying the calculation results for physical and logical consistency
- 10. processing and documenting results of the calculations to demonstrate conformance with the acceptance criteria and limits

8.4.2 Assumptions for deterministic safety analysis

Deterministic safety analysis shall be based on complete and accurate reactor facility design and, where available, operational information. Assumptions made to simplify the deterministic safety analysis, as well as assumptions concerning the availability and performance of the systems and operators, shall be identified and justified.

The deterministic safety analysis for AOOs and DBAs (conservative analysis for level 3 defence in depth) shall:

- incorporate the key input modelling parameter uncertainties, the key input plant parameters measurement uncertainties, and the measurement uncertainties for the actuation of mitigating systems; the uncertainties shall be properly estimated, following best national and international practices
- 2. apply the single-failure criterion to all safety, groups and ensure that the safety groups are environmentally qualified
- 3. use minimum allowable performance (as established in the OLCs) for safety groups
- 4. account for consequential failures that may occur as a result of the initiating event

- 5. credit the actions of process and control systems only where the systems are passive and environmentally qualified for the accident conditions
- 6. credit process systems only if they are already running and are not affected by the event
- 7. include the actions of process and control systems when their actions may have a detrimental effect on the consequences of the analyzed accident
- 8. consider the effects of aging on SSCs
- 9. account for the possibility of equipment being taken out of service for maintenance
- 10. show that the plant can be maintained in a stable, cold and depressurized state for a prolonged period
- 11. credit operator actions only when there are:
 - 1. unambiguous indications of the need for such actions
 - 2. adequate procedures and operator training for such actions
 - 3. sufficient time to perform the credited actions
 - 4. environmental conditions that do not prohibit such actions

8.4.3 Computer codes

Computer codes used in the deterministic safety analysis shall be developed, validated and used in accordance with a quality assurance program that meets or exceeds the CSA Group standard CSA-N286.7-99. G-149, Computer Programs Used in Design and Safety Analyses of Nuclear Power Plants and Research Reactors, provides guidance on computer code expectations.

8.4.4 Conservatism in deterministic safety analysis

A degree of conservatism shall be incorporated in the analysis, to demonstrate a level of confidence in conformance with the analysis objectives (established in accordance with section 7.1).

8.5 Deterministic safety analysis documentation

The deterministic safety analysis documentation shall be comprehensive and sufficiently detailed to allow for an independent verification. The documentation shall include:

- 1. the objective of the safety analysis
- 2. the technical basis for each event, and key phenomena and processes
- 3. a description of the analyzed event
- 4. a description of safety concerns, challenges to safety, and applicable safety criteria, requirements and numerical limits
- 5. identification of key phenomena taking place during the analyzed event for each of the identified safety concerns
- 6. demonstration of the code applicability, including evidence that codes have been validated against prototypical experiments and assessment of the code accuracy
- 7. demonstration that the analysis assumptions are consistent with the reactor facility operating limits
- 8. the results of sensitivity analysis and uncertainty analysis
- 9. the data and information to be provided to other programs at the reactor facility
- a summary of significant results and conclusions regarding acceptability

8.6 Review and update of deterministic safety analysis

8.6.1 Review of deterministic safety analysis results

The licensee or applicant shall systematically review the deterministic safety analysis results, to ensure that they are correct and meet the initial objective of the deterministic safety analysis. The results shall be assessed against the relevant CNSC requirements, applicable experimental data, expert judgment, comparison with similar calculations and sensitivity analyses.

The licensee or applicant shall review the deterministic safety analysis results using one or more of the following techniques, depending on the objectives of the deterministic safety analysis:

- 1. supervisory review
- 2. peer review
- 3. independent review by qualified individuals
- 4. independent calculations using alternate tools and methods to the extent practicable

8.6.2 Update of deterministic safety analysis

The deterministic safety analysis shall be periodically reviewed and updated to account for changes in the reactor facility configuration, conditions (including those due to aging), operating parameters and procedures, new research findings, and advances in knowledge. The graded approach applies to the frequency of updates.

In addition to periodic updates, the deterministic safety analysis shall also be updated when there are major design changes, and/or refurbishments or both. It shall also be updated following the discovery of information that may reveal a hazard that is significantly different in nature, greater in probability or greater in magnitude than was previously presented to the CNSC in the licensing documents. Such information includes:

1. changes due to new research findings

2. the occurrence of an event that was not considered in the deterministic safety analysis

8.7 Quality of deterministic safety analysis

Deterministic safety analysis shall be subjected to a comprehensive QA program that is applied to all activities affecting the quality of the results. The QA program shall identify the quality assurance standards to be applied and shall include documented procedures and instructions for the complete deterministic safety analysis process, including, but not limited to:

- 1. collection and verification of reactor facility data
- 2. verification of the computer input data
- 3. validation of codes used in deterministic safety analysis
- 4. assessment of results of simulations
- 5. documentation of deterministic safety analysis results

Appendix A: Outputs of Event Identification and Classification

This table provides grouping of the events into anticipated operational occurrences (AOOs), design-basis accidents (DBAs) and beyond-design-basis accidents (BDBAs), and illustrates the outputs of the event identification and classification process described in section 4.2. This list is for illustration only and is not meant to be comprehensive.

Initiating event	Additional failures	AOO	DBA	BDBA
LOCA inside containment				

 Very small LOCA (leak): heat transport system (HTS) leak inside containment (within the D2O feed pump capacity up to 50 kg/s) 	No additional failures	√		
	No additional failures		V	
	Failure of D2O recovery/D2O feed		√	
Small LOCA:	Failure of Class IV power		√	
• small HTS pipe failure (range of 50-1,000 kg/s)	Failure of containment isolation			\checkmark
 pipe failure at the top of 	Failure of all vault coolers			$\sqrt{}$
pressurizer	Failure of containment			2
 end-fitting failure 	pressure relief valves (PRV)			V
 pressure tube failure with calandria tube intact 	Failure of containment pressure suppression			$\sqrt{}$
 pressure tube/calandria tube failure (in-core 	Failure of filtered containment discharge			$\sqrt{}$
LOCA)	Failure of steam generator (SG) cooldown			\checkmark
	Failure of emergency core cooling system (ECCS)			\checkmark
Transition break LOCA:	No additional failures		V	
• HTS pipe failure (1,000–	Failure of Class IV power		√	
3,000 kg/s)	Failure of containment isolation			$\sqrt{}$
	Failure of all vault coolers			$\sqrt{}$

	• •			
	Failure of containment PRV			$\sqrt{}$
	Failure of containment			2/
	pressure suppression			V
	Failure of filtered			2/
	containment discharge			V
	Failure of SG cooldown			$\sqrt{}$
	Failure of ECCS			
	No additional failures		V	
	Failure of Class IV power		V	
	Failure of containment			2/
	isolation			V
Large-break LOCA • (>3,000 kg/s)	Failure of all vault coolers			
	Failure of containment PRV			$\sqrt{}$
	Failure of containment			
	pressure suppression			V
	Failure of filtered			
	containment discharge			V
	Failure of SG cooldown			
	Failure of ECCS			
LOCA outside containment				
Very small LOCA (leak) outside containment: • HTS instrument tubing rupture outside containment	No additional failures	V		
	Failure of shutdown cooling system (SDCS)		V	
SG tube chronic leak (<50kg/h) with high Iodine- 131 concentration	No additional failures	V		

	No additional failures	$\sqrt{}$		
	Failure of SDCS			
	Failure of condenser steam			
Single SG tube rupture	discharge valves (CSDV)		V	
	Failure of affected SG main		2/	
	steam isolation valves (MSIV)		V	
	Failure of SDCS and CSDV			$\sqrt{}$
Multiple (≤10) SG tube rupture	No additional failures		V	
Multiple (>10) SG tube rupture	No additional failures			V
	No additional failures			
HTS gland seal failure	Failure of SDCS			
HTS bleed line failure	No additional failures			
n is bleed lifte failure	Bleed valve failed open			
HTS feed line failure	No additional failures		V	
THIS reed lifte failure	Bleed valve failed open		1	
Failure to close HTS check valve	No additional failures		1	
Loss of flow				·
Minor flow blockago in one	No additional failures			
Minor flow blockage in one channel	ECCS or containment		1	
CHAIHEI	impairment		V	
Severe flow blockage in one	No additional failures		V	
channel	ECCS or containment			V
CHAINTEI	impairment			V
Stagnation feeder break	No additional failures		V	
	Failure of Class IV power			

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	Failure of containment	1
	isolation	V
	Failure of all vault coolers	V
	Failure of containment PRV	V
	Failure of containment	
	pressure suppression	V
	Failure of filtered	1
	containment discharge	V
	Failure of SG cooldown	
	Failure of ECCS	
Fuelling failures		
	No additional failures	
	Failure of class IV power	
	Failure of containment	2/
	isolation	V
	Failure of all vault coolers	
Fuel ejection from fuelling	Failure of containment PRV	
machine into containment	Failure of containment	1
	pressure suppression	V
	Failure of filtered	1
	containment discharge	V
	Failure of SG cooldown	
	Failure of ECCS	
Feedwater system failures		
Total loss of feedwater	No additional failures	
	Failure of SDCS	

	Failure of steam generator			
	emergency cooling system			
	(SGECS) or emergency			
	secondary water supply			
	system (ESWS)			
Feedwater line failure	No additional failures		V	
upstream of the last check	Failure of SDCS		V	
valve	Failure of SGECS or ESWS			
Feedwater line failure	No additional failures		V	
downstream of the last check	Failure of SDCS			V
valve	Failure of SGECS or ESWS			
Steam supply system failure				
Inadvertent closing of one MSIV	No additional failures	V		
Turbine/generator load	No additional failures	V		
rejection and turbine trip				
Spurious opening of one or more main steam safety valves (MSSVs)	No additional failures	V		
Turbine trip with CSDV unavailable	No additional failures	1		
Large steam pipe failure: • main steam line rupture	No additional failures		$\sqrt{}$	
 main steam balance header failure 	Failure of SDCS			V
	Failure of SGECS or ESWS			V
Reheater drain line failure	No additional failures			
	Failure of SDCS			

	Failure of SGECS or ESWS			
Loss of deaerator pressure				
due to rupture of extraction	No additional failures			
steam line				
Heat transport pump events	5			
HTS pump trip	No additional failures	$\sqrt{}$		
HTS pump seizure	No additional failures			
HTS pump shaft failure	No additional failures		V	
Fuel-handling system failure	es			
	No additional failures		$\sqrt{}$	
Loss of fuelling machine (FM)	Failure of containment			
cooling in transit	isolation			V
	Failure of containment PRVs			$\sqrt{}$
	No additional failures			
	Failure of containment		2/	
Loss of FM coolant on reactor	isolation		V	
LOSS OF FIVE COOLAITE OF FEACTOR	Failure of containment PRV		$\sqrt{}$	
	Failure of filtered		V	
	containment discharge		V	
Bundle crushed with FM	No additional failures	$\sqrt{}$		
latched to reactor	Steam generator tube leak	$\sqrt{}$		
Fuel handling incidents at the	No additional failures	$\sqrt{}$		
irradiated fuel port	Off-gas system not available			
Irradiated fuel bay (ICD)	No additional failures	$\sqrt{}$		
Irradiated fuel bay (IFB) incidents	Loss of bay contaminated		2/	
incluents	exhaust system		V	
Loss of IFB cooling	No additional failures	V		
	Loss of backup cooling		V	

	Loss of bay contaminated exhaust system			
	No additional failures			
Loss of IFB inventory	Loss of bay contaminated			
	exhaust system			V
Electrical failures	-			
	No additional failures	V		
Loss of Class IV power	Failure of Class III power		V	
Loss of unit Class I power	No additional failures	V		
Loss of unit Class II power	No additional failures	V		
Loss of unit emergency power supply (EPS)	No additional failures	V		
Loss of common electrical power	No additional failures	V		
Control failures		,		
Controlling computer failures	No additional failures	V		
Loss of reactivity control	No additional failures	V		
Loss of power reactor regulation	No additional failures	V		
Steam generator (SG) pressure low-spurious opening of atmospheric steam discharge valves (ASDV) and CSDV	No additional failures	V		
Loss of SG level control	No additional failures	V		
Loss of dearator level control	No additional failures	V		
Loss of heat transport				
pressure control: over- pressurization	No additional failures	$\sqrt{}$		
		-		

Loss of heat transport				
pressure control:	No additional failures			
depressurization				
SDCS and shield cooling fail	ures			
Loss of cooling/temperature control	No additional failures	V		
Loss of flow	No additional failures		V	
Piping failure	No additional failures		V	
SDCS heat exchanger tube failure	No additional failures		V	
Shield cooling system loss of	No additional failures		V	
circulation	Failure of SDCS		V	
Total loss of low-pressure service water open system (LPSWOS)	No additional failures	V		
	No additional failures			
Loss of end shield inventory	Failure of SDCS		V	
Loss of shield temperature control	No additional failures	V		
	Failure of SDCS		$\sqrt{}$	
Moderator system failures				
	No additional failures	V		
Loss of LPSWOS	Failure of moderator high- level trip		V	
	Failure of containment isolation		V	
	Failure of PRVs		V	
	Failure of containment filtered discharge		V	

Instrument air system failure	No additional failures		
ESWS failure	No additional failures		
	Failure of ESWS		$\sqrt{}$
	Failure of containment filtered discharge		V
	Failure of PRV		V
Loss of LPSWOS/recirculating cooling water failure	Failure of containment isolation		V
	Failure of moderator high- level trip		V
	No additional failures	V	
Support system failures			
3	Failure of SDCS		
heat exchangers	level trip		$\sqrt{}$
Loss of LPSWOS to moderator	Failure of moderator high-	<u> </u>	
	No additional failures	1	
Loss of cover gas circulation	No additional failures	1	
Loss of cover gas pressure	No additional failures		
Moderator heat exchange tube failure	No additional failures		V
Loss of moderator inventory	Failure of SDCS		√
temperature control low	No additional failures	V	√
Loss of moderator	No additional failures	2/	
Loss of moderator circulation	Failure of SDCS		$\sqrt{}$
	Failure of moderator high level switch		V
	No additional failures		

Loss of condensate flow to deaerators	No additional failures	V	
Common mode triggered e	vents (classification of thes	se events v	vould
depend on the assumed pa	rameters)		
Internal fires	No additional failures	$\sqrt{}$	
Tritium release	No additional failures	\checkmark	$\sqrt{}$
Hydrogen fire	No additional failures	\checkmark	V
Hydrogen explosion	No additional failures	\checkmark	
Design-basis earthquake	No additional failures	$\sqrt{}$	
Turbine breakup	No additional failures	\checkmark	
Flood	No additional failures	$\sqrt{}$	$\sqrt{}$
Design-basis tornado	No additional failures	$\sqrt{}$	
Design-basis rail line blast	No additional failures	$\sqrt{}$	
Toxic/corrosive chemical rail line incident	No additional failures	V	V

Appendix B: Examples of Derived Acceptance Criteria for Nuclear Power Plants

In accordance with this document, section 4.3.4, the licensee is to establish derived acceptance criteria. The examples below are obtained from current Canadian and international practice.

B.1 Anticipated operational occurrences

The overall criteria for an anticipated operational occurrence (AOO) are as follows (see REGDOC-2.5.2, *Design of Reactor Facilities: Nuclear Power Plants*):

the dose acceptance criterion for an AOO is met

 SSCs that are not involved in initiating the event are to remain fit for continued operation

REGDOC-2.5.2, *Design of Reactor Facilities: Nuclear Power Plants*, states expectations that the majority of AOOs will be mitigated by the control systems and will not need the action of the safety systems to prevent damage.

Additionally, all AOOs should be mitigated by the safety systems, with no assistance from the control systems. Only the criteria that show successful mitigation by the safety systems are shown here, in table B.1.

B.2 Design-basis accidents

The overall criteria for a design-basis accident (DBA) are as follows:

- the dose acceptance criterion for a DBA is met
- the event does not progress to more severe conditions

Section 4.3.4 of this document states the following general principles to be met by derived acceptance criteria:

- avoid the potential for consequential failures resulting from an initiating event
- maintain the SSCs in a configuration that permits the effective removal of residual heat
- prevent development of complex configurations or physical phenomena that cannot be modelled with high confidence
- be consistent with the design requirements for the plant's SSCs

Table B.2 provides examples of DBA acceptance criteria.

Table B.1: Examples of acceptance criteria for anticipated operational occurrences for Level 2 defence in depth

Barrier to fission product releases or fundamental safety function	Qualitative acceptance criteria
Fuel matrix	Fit for service
Fuel sheath (fuel cladding)	 No dryout / no departure of nucleate boiling (DNB)
Fuel assembly	 Maintain fuel cooling ability Retain rod-bundle geometry with adequate coolant channels to permit removal of residual heat No impediment to reactor shutdown means due to geometry change (LWR)
Fuel channel (CANDU)	 Fit for service: American Society of Mechanical Engineers (ASME) service level B not exceeded
Primary coolant system (excluding CANDU fuel channel)	 Fit for service: ASME service level B not exceeded
Secondary coolant system	Fit for service: ASME service level B not exceeded
Containment	 Fit for service: ASME service level B not exceeded Leakage remains within design limit leakage

Control of reactivity	 Reactivity controlled by safety system After shutdown, there is no inadvertent return to criticality
Removal of residual heat	Heat removal by safety system effective
Monitoring of conditions	 Fit for service: safety system instrumentation environmentally and seismically qualified
Offsite dose	Within the dose acceptance criteria of REGDOC-2.5.2 for an AOO

Table B.2: Examples of acceptance criteria for design-basis accidents

Barrier to fission product releases or fundamental safety function	Qualitative acceptance criteria
Fuel matrix	No fuel centre line meltingNo fuel breakupNo excessive energy deposition

Fuel sheath (fuel cladding)	 Fuel elements (fuel rods) that exceed the critical heat flux (CHF) or DNB criteria are assumed to rupture and contribute to offsite dose No excessive strain of fuel sheath Fuel elements are to meet applicable limits for: sheath temperature local sheath oxidation oxygen embrittlement of fuel sheath
Fuel assembly	 Maintain fuel coolability Retain rod-bundle geometry or fuel assembly with adequate coolant channels to permit removal of residual heat No impediment to reactor shutdown means due to geometry change (LWR)
Fuel channel (CANDU)	 Fuel channel remains intact Local pressure tube strain below failure threshold Moderator subcooling precludes failure No constrained expansion No fuel sheath melting No fuel centreline melting No fuel breakup No fuel element bowing and/or sagging into pressure tube (PT) contact

Primary coolant system (excluding CANDU fuel channel)	 Pressure boundary remains intact: ASME service level C not exceeded no consequential boiler tube leaks
Secondary coolant system	Pressure boundary remains intact:ASME service level C not exceeded
Calandria and moderator system (not applicable to LWR)	Pressure boundary remains intact:ASME service level C not exceeded
Containment	 Containment conditions remain within design basis: pressure less than design pressure containment leakage remains within design leakage limit environmental qualification (EQ) conditions (temperature, humidity, radioactive doses) on credited SSCs are met no break local effects (missiles, break jets, pipe whip, hydrogen standing flame) that could fail confinement function local hydrogen concentrations below flame acceleration and deflagration to detonation transition criteria combustion loads from slow deflagration less than those that could damage containment SSCs

Control of reactivity	 Reactivity is controlled: no prompt criticality after shutdown, any return to power is limited in extent, and does not lead to exceeding any other derived acceptance criteria 	
Removal of residual heat	 Continuous long term core cooling is possible: core geometry is coolable residual heat is removed from the core heat is transported to ultimate heat sink 	
Monitoring of conditions	 Fit for service: safety system instrumentation environmentally and seismically qualified 	
Offsite dose	Within the dose acceptance criteria of REGDOC-2.5.2 for a DBA	

Appendix C: Appendix C: Examples of Acceptance Criteria for Small Reactor Facilities

Table C.1 provides examples of acceptance criteria for anticipated operational occurrences. Table C.2 provides examples of acceptance criteria for design-basis accidents. Justified exceptions to the criteria shall be considered, provided that the equivalent level of safety is assured and demonstrated.

Table C.1: Acceptance criteria for anticipated operational

occurrences

#	Acceptance criteria	Notes
1	No reliance on safety systems, to the extent practicable	
2	No consequential degradation of fuel condition	 Degradation of fuel condition means that the fuel is no longer fit for continuous use after being subjected to the predicted conditions
3	No consequential degradation of SSCs	All structures, systems and components remain fit for continued service

Table C.2: Acceptance criteria for design-basis accidents

#	Acceptance criteria	Notes
1	No reliance on control systems	 Where control systems make the event more severe, this should be included in the analysis
2	Fuel configuration allows removal of residual heat	
3	No further fuel damage after long- term cooling system re-establishes adequate cooling	
4	No fuel break-up due to rapid energy addition	
5	No consequential failure of safety systems functions	
6	No consequential loss of primary cooling system integrity	

7	Containment and/or confinement remains within design pressure range	
	No consequential hydrogen explosion or deflagration in any system in the reactor facility	
9	Reactor remains subcritical after shutdown	
10	Fuel outside of the reactor core remains subcritical	
11	Spent fuel cooling is maintained	

Abbreviations

ALARA	as low as reasonably achievable
AOO	anticipated operational occurrence
ASDV	atmospheric steam discharge valves
ASME	American Society of Mechanical Engineers
BDBA	beyond-design-basis accident
CSDV	condenser steam discharge valves
CNSC	Canadian Nuclear Safety Commission
CSA	CSA Group (formerly Canadian Standards Association)
DBA	design-basis accident
ECCS	emergency core cooling system
EPS	emergency power supply

ESWS	emergency secondary water supply system
HTS	heat transport system
IAEA	International Atomic Energy Agency
IFB	irradiated fuel bay
LOCA	loss-of-coolant accident
LPSWOS	low-pressure service water open system
LWR	light-water reactor
MSIV	main steam isolation valves
NPP	nuclear power plant
NSCA	Nuclear Safety and Control Act
OLCs	operating limits and conditions
PIE	postulated initiating event
PRV	pressure relief valves
PSA	probabilistic safety assessment
PWR	pressurized water reactor
QA	quality assurance
SD	Shutdown
SDCS	shutdown cooling system
SGECS	steam generator emergency cooling system
SSCs	structures, systems and components
TP	trip parameter

Glossary

acceptance criteria

Specified bounds on the value of a functional indicator or condition indicator used to assess the ability of a structure, system or component to meet its design and safety requirements.

acceptance parameter

A plant parameter that characterizes plant response and has a defined acceptance criterion as a limit for the acceptable range of values.

accident

Any unintended event (including operating errors, equipment failures or other mishaps) the consequences or potential consequences of which are not negligible from the point of view of protection or safety.

Note: For the purposes of this document, accidents include design-basis accidents and beyond-design-basis accidents. Accidents exclude anticipated operational occurrences, which have negligible consequences from the perspective of protection or safety.

anticipated operational occurrence

An operational process deviating from normal operation that is expected to occur once or several times during the operating lifetime of the reactor facility but that – in view of the appropriate design provisions – does not cause significant damage to items important to safety or lead to accident conditions.

best estimate

Unbiased estimate obtained by the use of a mathematical model, calculation method or data to realistically predict behaviour and important parameters.

best-estimate method

A method designed to give realistic results.

beyond-design-basis accident (BDBA)

An accident less frequent than a design-basis-accident. A beyond-design-basis accident may or may not involve core degradation.

bias

Uncertainty arising from a systematic error that is known to cause deviation in a fixed direction.

blinding

Conditions for which an actuation or conditioning signal is approached but not reached, either because of the small magnitude of the initiating event or the actions of other process or safety systems.

bounding event

The event with the smallest predicted margin to a specific acceptance criterion.

Class I nuclear facility

A Class IA or Class IB nuclear facility, as described in the *Class I Nuclear Facilities Regulations*.

cliff-edge effect

A small change of conditions that may lead to a catastrophic increase in the severity of consequences.

Note: Cliff-edge effects can be caused by changes in any of the following: characteristics of the environment; the event; or the plant response.

commissioning

A process of activities intended to demonstrate that installed structures, systems and components perform in accordance with their specifications and design intent before they are put into service.

code accuracy

The degree of closeness of a calculated quantity to its actual value. Comprised of the bias and variability of bias of a computer code that are derived from the comparison of code predictions with experimental data.

common-cause failure

A concurrent failure of two or more structures, systems or components due to a single specific event or cause, such as natural phenomena (earthquakes, tornadoes, floods, etc.), design deficiency, manufacturing flaws, operation and maintenance errors, and human-induced destructive events.

confinement boundary

A continuous boundary without openings or penetrations and that prevents the release of radioactive materials out of the enclosed space.

conservatism

Use of assumptions, based on experience or indirect information, about a phenomena or behaviour of a system being at or near the limit of expectation, which increases safety margins or makes predictions regarding consequences more severe than if best-estimate assumptions had been made.

conservative method

A method deliberately leading to results that are intended to be limiting relative to specified acceptance criteria.

containment

A method or physical structure designed to prevent the release of radioactive substances.

crediting

Assuming the correct operation of a structure, system or component or correct operator action, as part of an analysis.

design basis

The range of conditions and events taken explicitly into account in the design of the facility, according to established criteria, such that the facility can withstand them without exceeding authorized limits by the planned operation of safety systems.

design-basis accident (DBA)

Accident conditions for which a reactor facility is designed according to established design criteria, and for which damage to the fuel and the release of radioactive material are kept within authorized limits.

deterministic safety analysis

An analysis of a reactor facility's response to an event performed using predetermined rules and assumptions (e.g., those concerning the initial facility operational state, availability and performance of the facility systems and operator actions). Deterministic safety analysis can use conservative or best-estimate methods.

dose acceptance criteria

Bounds for radiation doses that are established to protect workers and the public from harm due to the release of radioactive material in normal operation, anticipated operational occurrences and design-basis accidents.

emergency core cooling system (ECCS)

A safety system that transfers heat from the reactor core, following a loss of reactor coolant that exceeds makeup capability.

external event

Events unconnected with the operation of a facility or the conduct of an activity that could have an effect on the safety of the facility or activity.

Note: Typical examples of external events for nuclear facilities include earthquakes, tornadoes, tsunamis and aircraft crashes.

event category

A group of events characterized by the same or similar cause and similarity in the governing phenomena.

fissile material

Material that is capable of sustaining a chain reaction of nuclear fission.

fissionable material

Any material that can undergo nuclear fission.

graded approach

A method or process by which elements such as the level of analysis, the depth of documentation and the scope of actions necessary to comply with requirements are commensurate with:

- the relative risks to health, safety, security, the environment, and the implementation of international obligations to which Canada has agreed
- the particular characteristics of a facility or activity

human error

Mistakes made in the performance of assigned tasks (i.e., some kind of deviation from the current intention and/or from an appropriate route towards some goal). It usually refers to the omission of an action, the selection of an incorrect action for the situation, or the incorrect implementation of an intended action.

human factors

Factors that influence human performance as it relates to the safety of the nuclear power plant or reactor facility, including activities during design, construction, and commissioning, operation, maintenance and decommissioning phases.

human performance

The outcomes of human behaviours, functions and actions in a specified environment, reflecting the ability of workers and management to meet the system's defined performance under the conditions in which the system will be employed.

items important to safety

An item that is part of a safety group and/or whose malfunction failure could lead to radiation exposure

licensing basis

A set of requirements and documents for a regulated facility or activity, comprising:

 the regulatory requirements set out in the applicable laws and regulations

- the conditions and safety and control measures described in the facility's or activity's licence and the documents directly referenced in that licence
- the safety and control measures described in the licence application and the documents needed to support that licence application

measurement uncertainty

The amount by which a measured value may vary from the actual physical value of a parameter at the time of measurement.

modelling uncertainties

Uncertainties associated with the models and correlations embedded in a computer code and that represent the physics of the problem, the solution scheme, data libraries and inherent deficiencies of the computer program.

nuclear power plant (NPP)

Any fission-reactor installation that has been constructed to generate electricity on a commercial scale. A nuclear power plant is a Class IA nuclear facility, as defined in the *Class I Nuclear Facilities Regulations*.

normal operation

Operation of a nuclear power plant or a reactor facility within specified operational limits and conditions, including start-up, power operation, shutting down, shutdown, maintenance, testing and refuelling.

operational limits and conditions

A set of rules setting forth parameter limits and the functional capability and performance levels of equipment and personnel, which are approved by the regulatory body for safe operation of an authorized facility. This set of limits and conditions is monitored by or on behalf of the operator and can be controlled by the operator.

operational mode

A mode of operation that may include start-up, operation at various power levels, shutting down, shutdown, maintenance, testing and refuelling.

plant parameters

Parameters that characterize the state of the plant's structures, systems and components, or that are used to actuate a mitigating system (also referred to as operational parameters).

postulated initiating event (PIE)

An event identified in the design as leading to either an anticipated operational occurrence or accident conditions.

Note: A postulated initiating event is not necessarily an accident itself; rather, it is the event that initiates a sequence that may lead to an anticipated operational occurrence, a design-basis accident or a beyond-design-basis accident, depending on the additional failures that occur.

probabilistic safety assessment (PSA)

A comprehensive and integrated assessment of the safety of the reactor facility. The safety assessment considers the probability, progression and consequences of equipment failures or transient conditions, to derive numerical estimates that provide a consistent measure of the safety of the reactor facility, as follows:

- A level 1 PSA identifies and quantifies the sequences of events that may lead to the loss of core structural integrity and massive fuel failures
- A level 2 PSA starts from the level 1 results, analyzes the containment behaviour, evaluates the radionuclides released from the failed fuel, and quantifies the releases to the environment
- A level 3 PSA starts from the level 2 results, analyzes the distribution of radionuclides in the environment and evaluates the resulting effect on public health

Note: A PSA may also be referred to as a probabilistic risk assessment

reactor facility

Any fission reactor as described in the *Class I Nuclear Facilities Regulations*, including structures, systems and components:

- that are necessary for shutting down the reactor, ensuring that it can be kept in a safe shutdown state
- that may contain radioactive material and which cannot be reliably isolated from the reactor

- whose failure can lead to a limiting accident for the reactor
- that are tightly integrated into the operation of the nuclear facility
- that are needed to maintain security and safeguards

safety analysis

Analysis by means of appropriate analytical tools that establishes and confirms the design basis for the items important to safety, and ensures that the overall reactor facility design is capable of meeting the acceptance criteria for each plant state.

safety assessment

Assessment of all aspects of the siting, design, commissioning, operation or decommissioning of an authorized facility that is relevant to safety.

safety goal

Objective to protect reactor facility staff, the public and the environment from harm, by establishing and maintaining effective defences against the release of the radiological hazards.

safety group

Assembly of structures, systems and components designated to perform all actions required for a particular postulated initiating event, and to ensure that the specified limits for anticipated operational occurrences and design-basis accidents are not exceeded. It may include certain safety and safety support systems, as well as any interacting process system.

safety system

A system provided to ensure the safe shutdown of the reactor or the residual heat removal from the core, or to limit the consequences of anticipated operational occurrences and design-basis accidents.

sensitivity analysis

A quantitative examination of how the behaviour of a system varies with change, (usually in the values of the governing parameters).

shutdown state

A subcritical reactor state with a defined margin to prevent a return to criticality without external actions.

single failure

A failure that results in the loss of capability of a component to perform its intended safety function(s), and any resulting consequential failure(s).

single-failure criterion

The criterion used to determine whether a system is capable of performing its function in the presence of a single failure.

small reactor

A reactor with a power level of less than approximately 200 megawatts thermal (MWt), which is used for research, isotope production, steam generation, electricity production or other applications.

source term

The amount and isotopic composition of material released (or postulated to be released) from a facility.

structures, systems and components (SSCs)

A general term encompassing all of the elements of a facility or activity that contribute to protection and safety.

Note: Structures are the passive elements: buildings, vessels, shielding, etc. A system comprises several components, assembled in such a way as to perform a specific (active) function. A component is a discrete element of a system. Examples are wires, transistors, integrated circuits, motors, relays, solenoids, pipes, fittings, pumps, tanks and valves.

support features of safety systems

The collection of equipment that provides services such as cooling, lubrication and energy supply required by the protection system and the safety actuation systems.

systematic review

A review in which specified and appropriate methods are used to identify, appraise and summarize studies addressing a defined question.

uncertainty analysis

The process of identifying and characterizing the sources of uncertainty in the safety analysis, evaluating their impact on the analysis results, and developing – to the extent practicable – a quantitative measure of this impact.

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CNSC Regulatory Document Series

Facilities and activities within the nuclear sector in Canada are regulated by the Canadian Nuclear Safety Commission (CNSC). In addition to the *Nuclear Safety and Control Act* and associated regulations, there may also be requirements to comply with other regulatory instruments such as regulatory documents or standards.

Effective April 2013, the CNSC's catalogue of existing and planned regulatory documents has been organized under three key categories and twenty-five series, as set out below. Regulatory documents produced by the CNSC fall under one of the following series:

• 1.0 Regulated facilities and activities

- 1.1 Reactor facilities
- 1.2 Class IB facilities
- 1.3 Uranium mines and mills
- 1.4 Class II facilities
- 1.5 Certification of prescribed equipment
- 1.6 Nuclear substances and radiation devices

• 2.0 Safety and control areas

2.1 Management system

- 2.2 Human performance management
- 2.3 Operating performance
- 2.4 Safety analysis
- 2.5 Physical design
- 2.6 Fitness for service
- 2.7 Radiation protection
- 2.8 Conventional health and safety
- 2.9 Environmental protection
- o 2.10 Emergency management and fire protection
- 2.11 Waste management
- 2.12 Security
- 2.13 Safeguards and non-proliferation
- 2.14 Packaging and transport

• 3.0 Other regulatory areas

- 3.1 Reporting requirements
- 3.2 Public and Aboriginal engagement
- 3.3 Financial guarantees
- 3.4 Commission proceedings
- 3.5 Information dissemination

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