



UNITED STATES
NUCLEAR REGULATORY COMMISSION

REGION II
ATLANTA FEDERAL CENTER
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ATLANTA, GEORGIA 30303-3415

October 17, 1997

Regional Office Instruction No. 1030, Revision 9

PROCESSING ALLEGATIONS, COMPLAINTS, AND CONCERNS

A. Purpose:

To establish Regional Office procedures for the proper processing, control, and disposition of allegations, complaints, and concerns received by any Region II staff member involving Nuclear Regulatory Commission (NRC) licensed facilities or activities.

This revision implements the requirements of Management Directive (MD) 8.8, "Management of Allegations," and includes the following substantive changes: Section 1.5.3, scheduling and arranging the Allegation Review Board (ARB) agenda; Section 1.5.4, preparing for the ARB; Section 1.6.5.7, setting time requirements for licensee responses; Section 1.5.4.5, completeness of ARB minutes; Section 1.8.4, review and approval of allegation closure documentation; Section 1.9, allegation correspondence; Section 2, standard letters; and Section 3, warning cover sheets for allegation material.

B. Discussion:

Allegations, complaints, and concerns (hereinafter referred to as allegations) pertaining to NRC licensed facilities and activities may be received in a wide variety of forms and under varying circumstances. It is imperative that allegations be recognized as such by Region II staff members and that this information be processed in a professional, prompt, and consistent manner. Region II staff members are required to maintain a high level of sensitivity to allegations paying particular attention to any public health and safety aspects of allegations.

An allegation is a declaration, statement, or assertion of impropriety or inadequacy associated with NRC-regulated activities, the validity of which has not been established. This term includes all concerns identified by sources such as individuals or organizations, and technical audit efforts from Federal, State, or local government offices regarding activities at a licensee's site. Excluded from this definition are inadequacies provided to NRC staff by licensee managers acting in their official capacity, matters being handled by more formal processes such as 10 CFR 2.206 petitions, misconduct by NRC employees or NRC contractors; non-radiological occupational health and safety issues; and matters involving law enforcement and other Government agencies.

Region II staff members who receive an allegation must understand that it is absolutely essential to protect the identity of the individual providing the information in an allegation and that every effort must be made to preclude the inadvertent or premature disclosure of the

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documentation within five working days of receipt of the information through their supervisor to the Region II Senior Allegation Coordinator (SAC) so that appropriate allegation processing action can be initiated.

E. Contact:

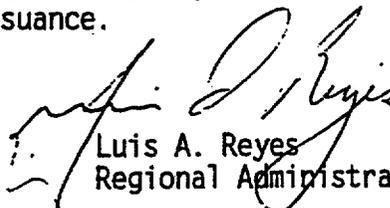
Questions or comments regarding this Instruction should be directed to the Director, EICS, at extension 24421.

F. References:

1. Regional Office Instruction (ROI) 1004, "Notification to the Office of Investigations of Potential Wrongdoing"
2. MD 8.8, "Management of Allegations"
3. MD 9.2, "Office of the Inspector General"
4. ROI 1801, Revision 2, "Handling of Allegations of Improper Actions by NRC Employees or Contractors"
5. ROI 1040, "Assistance to the Office of Investigations"
6. Field Policy Manual (NUREG/BR-0075), No. 1 - "Coordination with FBI," and No. 13 - "Witnessing Unsafe Situations"
7. Allegation Guidance Memorandum (AGM) 96-01, Revision 1, "Additional Measures to Protect the Identity of Allegers and Confidential Sources"
8. AGM 96-02, "Assuring the Technical Adequacy of the Basis for Closing an Allegation"
9. NRC Policy and Guidance Procedure 002, Revision 1, August 1997, "NRC/FEMA Staff Procedure for Responding to Offsite EP Issues Raised by Members of the Public"

G. Effective Date:

This Instruction supersedes ROI 1030, Revision 8, dated August 5, 1996, and is effective upon issuance.


Luis A. Reyes
Regional Administrator

Enclosures: (See Page 4)

RECEIVING AND PROCESSING ALLEGATIONS

1.1 Incoming Allegations

1.1.1 Telephone Calls or Visits by Allegers to the Regional Office

Any Region II staff member within the Regional Office who receives a telephone call from a concerned individual (hereinafter referred to as an alieger) who wishes to make an allegation, express a concern, or register a complaint shall transfer the caller to the Senior Allegation Coordinator (SAC). Likewise, if an alieger comes to the Regional Office to personally discuss an allegation, the alieger is to be referred to the SAC who will conduct an interview with the alieger. Technical staff members within the Regional Office who are unable to contact the SAC, the Director, Enforcement and Investigation Coordination Staff (EICS), or a member of EICS to meet the alieger or take a telephone call shall handle the matter themselves and obtain as much information as possible regarding the allegation. Administrative staff members who cannot locate the SAC or a member of EICS, shall locate a technical staff supervisor or manager, and refer the alieger to that person.

1.1.2 Allegations Received in the Region II Mail

Allegations received in the mail normally are handwritten or typed on plain paper (no letterhead), while official correspondence is usually on letterhead stationary. Therefore, unless it is otherwise obvious, administrative personnel who open and screen mail will forward all incoming correspondence which appears to contain an allegation to the Director, EICS. Both the letter and envelope will be delivered and no copies of such documents/correspondence will be made. Any Regional staff member who receives documents or correspondence, including internal NRC memoranda, which contain allegations, shall forward the documents to the Director, EICS.

1.1.3 Allegations Received During the Course of an Inspection

If an allegation is received by an inspector in the field, the inspector should document the allegation and transmit all acquired information and documentation to the SAC for processing. The inspector should also encourage the alieger to contact the SAC directly for status of their concern and provide the alieger with the Region II "800" telephone

- Nature and details of allegation; and
- Alleger's preference for method and time of contact.

Additional guidance regarding the acquisition of allegation information is provided in Enclosure 4 to this Instruction.

- 1.2.4 If the allegor persists in not providing personal identification, fully document the allegation and advise the allegor that he or she may contact the SAC in 30 working days for information on the status of any actions being taken related to the information provided.
- 1.2.5 If the allegor does not object to being contacted again, the allegor should be informed that the SAC will be contacting them to acknowledge receipt of the allegation within 30 days. The allegor also should be advised of the NRC policy on identity protection and that they will be notified of the NRC findings at the completion of the appropriate review.
- 1.2.6 Region II staff members shall, as soon as possible after contact with an allegor or receiving an allegation, notify their supervisor that they have made contact with an allegor and that they have received an allegation. The supervisor shall ensure that the SAC is promptly notified of the allegation.

1.3 Documenting Allegations

- 1.3.1 It is important to obtain as much information as possible from the allegor concerning the allegation. In addition to the basic information (e.g., who, what, when, where, why, and how), attempts should be made to develop and clarify the information so that the issue is relatively well defined. Every allegation received, regardless of the source, method of communication involved, or apparent substance, must be documented and evaluated.
- 1.3.2 A standardized Allegation Report form (included as Enclosure 5) should be utilized to document all allegations where practicable. A memorandum format may also be used.
- 1.3.3 The importance of obtaining all possible details concerning an allegation cannot be overemphasized. Evaluation of the allegation as well as the proposed course of action that will be initiated to resolve the allegation will be based on this initial information. In some instances, the information may be so substantial, technically complex, or

date, time, location, and circumstances surrounding the contact with the alleger including identification of other persons present during the contact. Each succeeding paragraph shall document all information associated with a particular allegation. The NRC staff member documenting the allegation should take care to document the allegation precisely as stated by the alleger. The purpose of this is to clearly record exactly what the allegation was so as to ensure appropriate follow up.

If information is received from more than one alleger, consideration should be given to reporting the information from each alleger in separate Allegation Reports or memoranda to ensure clarity and separation. If separate memoranda are not used, then the details should be separated so that the specific facts of the allegation can be readily attributed to each individual alleger. If the individual receiving and documenting the allegation adds any personal views, comments, analysis or evaluation to clarify the information received, those comments should be clearly identified as such in a separate paragraph at the end of the Allegation Report. Judgement should be used in the documentation of any personal comments or observations as the Allegation Report is subject to release under the provisions of the Freedom of Information Act.

1.4.4

The SAC is responsible for reviewing all information received in conjunction with an allegation and ensuring that appropriate Region II staff are promptly and fully briefed. If the information contained in the Allegation Report is determined to be insufficient to permit follow up, the SAC may recontact the alleger to obtain additional information, or advise the receiving staff member, after appropriate coordination with the staff member's supervision, that additional information is required and request the staff member to obtain the information from the alleger. When an allegation involves issues outside of the SAC's area of technical expertise, arrangements shall be made to have an appropriate technical staff member present during the conversation or interview with the alleger to assist in fully developing the technical issues of the allegation.

1.4.5

The SAC will provide an information copy of all Allegation Reports to the Director, OI Field Office, Region II.

1.4.6

Normally, the receipt of allegations shall not be addressed in Preliminary Notifications (PN) or Daily Reports (DR). If, however, such entries are deemed appropriate, the

organization in the capacity of an NRC licensee;

- Allegations referred to the Office of the Inspector General (OIG); and
- Allegations referred to the Occupational Safety and Health Administration (OSHA).

1.5.1.4 All Department of Labor (DOL) cases and Office of Investigations (OI) cases opened in Region II will be assigned an allegation number and entered into the AMS for tracking purposes.

1.5.1.5 Multiple allegations of employee discrimination (as defined in the Energy Reorganization Act) may be maintained under the same allegation number if the allegations are less than 90 days apart and they involve the same supervisor or manager or the allegor is claiming a continuing pattern of discrimination by management in general.

However, for technical allegations, a new case file should be opened. This is to preclude revision of the "receipt date" of previously opened allegations in the AMS.

If an allegation has already been reviewed by an ARB, a new allegation number will be assigned to any subsequent allegations received from the same allegor. Allegations are required to be reviewed by an ARB within 30 days of receipt of the allegation. If an allegor provides additional new concerns within 29 days of receipt of the original concerns they are to be included with the original concerns and reviewed by an ARB at the same time if possible.

1.5.2

The SAC will maintain a Region II allegation case file, retrievable by the allegation number, for each allegation received. The file will include all correspondence, memoranda to file, documentation of interviews, and summaries of telephone conversations, discussions, and meetings. The SAC is responsible for maintaining a case chronology in the allegation case file which identifies all documents received and filed in the case file as well as all actions associated with the allegation case file.

- Concerns requiring immediate regulatory action
- Feedback to the allegor
- Technical issues
- Wrongdoing concerns and recommended OI prioritization
- Potential for chilling effects
- Referrals to other entities
- Office of General Counsel positions
- Actions necessary to resolve and close the allegation
- Basis for another ARB

1.5.4.3 Allegations of wrongdoing, including employee discrimination, will be reviewed by the ARB and processed in accordance with ROI 1004, "Notification to the Office of Investigations of Potential Wrongdoing."

1.5.4.4 The ARB should be reconvened if supplemental information is obtained which changes or affects the safety significance of the allegation. In addition, allegations that are open for more than six months should be reviewed by an ARB at four month intervals (except DOL and OI cases in which no outstanding technical issues remain open). These timeliness reviews may also be accomplished through regularly scheduled allegation timeliness meetings as directed by senior regional management.

1.5.4.5 The SAC is responsible for preparing the ARB minutes; however, the ARB Chairman, with the assistance of the SAC as required, is responsible for ensuring that the actions assigned and that the bases for those actions are complete, accurate and technically adequate. The ARB Chairman is required to review and approve all ARB minutes during the ARB. The ARB Chairman should also ensure that ARB minutes prepared by the SAC at the ARB meeting are complete and include, as a minimum, the following information:

- Allegation number and description
- Date of ARB and participants
- Affected licensee
- Safety significance and basis

- Advisement related to filing a written complaint of employee discrimination with DOL under Section 211 of the Energy Reorganization Act;
- Discussion related to the potential for the allegation to be referred to other entities, to include the licensee, for resolution;
- Initial feedback on NRC actions; and,
- Method for contacting the SAC

1.5.8

For allegations involving employee discrimination as a result of identifying safety concerns, the allogger shall be specifically advised that if he or she is discriminated against by their employer for reporting nuclear safety concerns to their employer or to the NRC, they have 180 days from the date of the alleged act of discrimination to file a written complaint with the DOL under the provisions of Section 211 of the Energy Reorganization Act. The allogger should be informed that the DOL, not the NRC, provides the process for obtaining a personal remedy and relief. Further, the allogger shall also be informed that although the NRC may investigate the allegation prior to its resolution by DOL, the NRC may choose to wait for the results of the DOL investigation which will be monitored by the NRC. In addition, the allogger is to be informed that if he/she files a written complaint of discrimination with DOL, that they should provide a copy of that written complaint to the SAC.

1.5.8.1 Allegers making allegations of employee discrimination for which OI has not initiated an investigation should be recontacted by the SAC before the expiration of the 180 day tolling period to determine if the allogger has filed a complaint with DOL.

1.5.8.2. When an allegation of employee discrimination is initially received as a DOL complaint, the SAC will review the complaint to determine if there are any safety concerns that need to be addressed. The complaint will be entered into the AMS and will be presented at an ARB. The SAC will provide a copy of the written DOL complaint to OI. The SAC shall also contact the allogger to determine if the allogger has safety concerns that were not included in the written DOL complaint.

- The basis of the allegation is information received from a Federal agency that does not approve of the information being released in a referral.

1.6.2 Except in cases where there is an immediate threat to the health and safety of the public (including licensee employees), allegations will not be discussed with the licensee until after the ARB has reviewed and evaluated the allegation and authorized the referral.

1.6.3 Any allegation not meeting the criteria specified in Section 1.6.1 above shall be evaluated by the ARB for referral to the licensee using the following guidance:

- Could the release of information bring harm to the allegor or confidential source?
- Has the allegor or confidential source voiced valid objections to the release of the allegation to the licensee?
- What is the licensee's history of allegations against it and past record in dealing with allegations, including the likelihood that the licensee will effectively investigate, document, and resolve the allegation?
- Has the allegor or confidential source already taken this concern to the licensee with unsatisfactory results? If the answer is "yes," the concern is within NRC's jurisdiction, and the allegor objects to the referral, the concern normally should not be referred to the licensee.
- Are resources available within the region to resolve the allegation?

1.6.4 Before referring the allegation outside NRC, the allegor should be contacted and informed of the planned referral. Ideally, this should be done when the initial information is received from the allegor. The allegor should be informed that the allegation could be referred outside the NRC for resolution including a referral to the licensee. The allegor should be asked if he/she has any objections to such a referral. This does not mean that the NRC requires permission from the allegor to make a referral. If an objection is expressed by the allegor, the basis for the objection will be fully developed and documented in the

- 1.6.5.4 The letter referring an allegation to a licensee does not go in the Public Document Room. A copy of the licensee referral letter is filed in the allegation case file.
- 1.6.5.5 The licensee referral letter instructs the licensee to send their response to the Director, EICS. They should not send a copy to the document control desk.
- 1.6.5.6 The cover letter and enclosures must be marked "Contains Information Not For Public Disclosure."
- 1.6.5.7 A determination should be made by the ARB as to what would constitute a reasonable amount of time for the licensee to respond. Consideration must include an estimation of the amount of work involved in responding to the referral and the nature of the referral. Referral letters should provide the licensee with the option to contact the Region should the length of time for the requested response create an unwarranted burden. The authority to adjust the response time is to be coordinated with the appropriate ARB Chairman prior to approval by the Branch Chief. Any adjustment to the required response time shall be documented in a memorandum to the allegation case file.

1.6.6 NRC Independent Verification

The NRC should ensure that the licensee's response to a referred allegation is adequate. The overall scope and depth of independent verification by the NRC should be based on factors such as, but not limited to, a licensee's prior performance related to resolution of referred allegations, the degree of independence of the licensee's staff's evaluation, safety significance of the matter, and level of licensee management potentially involved in the matter. The following examples should be used in determining the adequacy of a licensee's response:

- 1.6.6.1 Was the evaluation conducted by a licensee entity independent of the organization in which the alleged event took place?

- 1.7.1.1 Allegations against an Agreement State licensee shall be forwarded to the Division of Nuclear Materials Safety (DNMS) for coordination and referral to the appropriate State agency.
- 1.7.1.2 The Director, DNMS, is responsible for ensuring a review and assessment of the adequacy of the State agency's resolution response to a referred allegation.
- 1.7.1.3 Referred allegations will be closed following receipt of acceptable documentation from the State and subsequent notification to the alleger.
- 1.7.1.4 The Director, DNMS, will forward allegations made against an Agreement State official to the Director, Office of State Programs, for disposition.
- 1.7.1.5 Consistent with Section 1.6.4 above, the SAC will inform the alleger of the NRC's intent to refer the allegation to the appropriate State agency for resolution.
- 1.7.1.6 In cases where employee discrimination is alleged against an Agreement State licensee, the Director, DNMS, will refer the allegation to the Agreement State for follow up only if the alleger agrees to be identified to the Agreement State. The Director, DNMS, will coordinate the proposed referral with the SAC, who will inform the alleger that the NRC does not have jurisdiction to investigate employee discrimination by an Agreement State licensee and unless they agree to be identified to the State, no investigation will occur. The SAC will also inform the alleger that it is not possible to investigate employee discrimination if the alleger does not agree to the release of their identity to the appropriate State agency. If the alleger does not agree to the disclosure of their identity to the State, the allegation will not be forwarded to the State. If the alleger does not agree to have their identity disclosed to the State, the SAC will inform the alleger that the concern will be considered closed because of the inability to pursue action in

no regulatory oversight, that agency will not be requested to provide a response or the results of their review of the allegation. The SAC will coordinate with the Director, DNMS, to ensure that a letter is sent to the allegor advising the allegor of the referral, the agency to which the allegation was referred and a point of contact for the allegor within the referral agency.

- 1.7.2.5 Notification of Federal, State, and local law enforcement agencies, to include the type and amount of information provided to them, is the responsibility of the Director; OI Field Office, when possible criminal activity or other nationally significant information is included in the allegation.
- 1.7.2.6 The Director, DNMS, will ensure that allegations against an Agreement State licensee that fall within the purview of other Federal agencies are referred to the appropriate agency and concurrently transmitted to the appropriate Agreement State.
- 1.7.2.7 Allegations involving suspected improper conduct by NRC employees will be forwarded to the Deputy Regional Administrator (DRA) for referral to the OIG in accordance with ROI 1801, "Handling of Allegations of Improper Actions by NRC Employees or Contractors." The SAC will provide all associated documents to the DRA for retention. Subsequent contact with the allegor regarding the issue should be referred directly to the OIG.
- 1.7.2.8 The Director, DNMS, is responsible for ensuring that the allegor is promptly notified when an allegation has been referred to another government agency and when the allegation is closed by the NRC.
- 1.7.2.9 The Director, DRS will ensure that the resolution of allegations involving offsite emergency preparedness issues for commercial nuclear power facilities is coordinated with the Emergency Preparedness and Radiation Protection Branch, Division of Reactor Program Management.

- 1.8.4 The basis for closing an allegation must be reviewed and concurred in by the responsible technical Branch Chief. The Branch Chief's concurrence may be documented in an E-mail or a memo from the Branch Chief to the SAC providing the basis for closure, through concurrence in the closure letter, or, in those cases where the Branch Chief issues the closure letter, his or her signature. Such documentation should be included in the allegation case file.
- 1.8.5 If available, electronic versions of inspection reports and AERs should be provided to the SAC in addition to the normal copy. This will facilitate updating the AMS.
- 1.8.6 Allegation resolution documentation is used to officially close an allegation case file and shall be included in the allegation case file; however, allegation case files will remain open pending resolution of DOL, OI and related enforcement actions.
- 1.8.7 Allegation documentation should be handled with extreme care to preserve the fundamental principle of assuring the identity protection of individuals who bring safety concerns to the NRC. AERs that are prepared by the staff could contain information that may compromise the identity of an allegor. Therefore, the staff shall be sensitive to the requirement for proper controls and safeguards for such documents, to include personal computer disks, electronic mail and reproduction.
- 1.8.8 Proposed language for letters to allegors when OI returns a potential wrongdoing issue to the staff because of a lack of resources or low investigative priority, including employee discrimination, is included in Enclosure 7. This language may be revised to fit the particular set of circumstances but should always include a statement that the particular circumstances were reviewed, that there are constraints on NRC investigatory resources, and that other cases of higher priority are being pursued.

1.9 Allegation Correspondence

- 1.9.1 All allegation correspondence that identifies an allegor must be protected in blue folders with an appropriate warning label.
- 1.9.2 Allegation case files that contain the identity of a confidential source are to be stored by EICS in a secure

- 1.9.9 No copies or distribution of acknowledgement and closure letters to alleged are to be made except one copy to EICS for the allegation case file. The allegation case file is the official NRC record for the allegation. No copies are to be retained. The Branch Chief is permitted to retain a "sanitized copy" of the correspondence that does not contain the identity of the alleged or any other information that could identify the alleged. All documentation retained is subject to potential release under a Freedom of Information Act (FOIA) request.
- 1.9.10 After the allegation correspondence is mailed, EICS is to be provided with a copy that includes the enclosures. Provide the SAC an e-mail version of the documents. Do not retain any copies of e-mail or other correspondence that identifies an alleged or confidential source.

1.10 Allegation Program Audits

- 1.10.1 The SAC is responsible for maintaining the current status of allegations in the AMS by ensuring that all open allegations are reviewed and updated, as necessary, on a monthly basis. In addition, within 30 days following case closure, the SAC shall perform an audit of the allegation case file and AMS to ensure completeness and accuracy of all material in the allegation case file.
- 1.10.2 The Region II Allegation Management Program is subject to periodic audits by the Agency Allegation Advisor (AAA). The AAA audit review will include the handling, documenting, tracking, and resolution of allegations; a review of Region II procedures and instructions related to allegation management; allegation case file administrative maintenance; ARB activities; related staff training; and, other items of interest at the discretion of the AAA.

1.11 Allegation Records

- 1.11.1 The SAC is responsible for maintaining allegation case files and related documentation. Allegation case files are generally restricted for access to the staff except on a "need-to-know" basis. In addition, EICS shall maintain a document check-out system to record individual access to allegation case files. Allegation case files may be signed out by Region II staff members for period not to exceed five days. The individual staff member is responsible for the

PROTECTING IDENTITY

2.1 Background

A fundamental premise supporting the NRC's information gathering process is a recognition of the need to protect the identity of individuals providing the information. Inherent in the principle of identity protection is the belief that no one will refrain from reporting information if they have assurance that their identity will not be disclosed. The responsibility to protect the identity of individuals providing information from retaliatory action by their employers and coworkers begins with the initial contact between the individual and NRC.

While Public Law 95-601 makes it unlawful for employers to take retaliatory actions against employees reporting information to the NRC and provides the means for the employees to obtain legal remedies, the legal process can be very lengthy; so much so, that employees could be reluctant to provide information for fear of being out of work for an extended period of time while going through the legal process.

2.2 Identity Protection

If an individual is concerned about identity protection, the staff member involved should explain that the NRC protects the identity of individuals who provide information by not revealing their identity to their employer. However, individuals to whom the NRC has not granted confidentiality by written agreement should be informed of the following:

1. In resolving technical issues, the NRC intends to take all reasonable efforts not to disclose the identity of an alleged outside the agency unless:
 - a. The alleged clearly indicated no objection to being identified.
 - b. Disclosure is necessary because of an overriding safety issue.
 - c. Disclosure is necessary pursuant to an order of a court or NRC adjudicatory authority or to inform Congress or State or Federal agencies in furtherance of NRC responsibilities under law or public trust.
 - d. Disclosure is necessary in furtherance of a wrongdoing investigation (e.g., allegations involving record falsification, willful or deliberate violations, or other

position is to neither confirm nor deny the validity of such guesses and decline to discuss the matter further. Any attempts by a licensee or any other unauthorized individual to learn the name of an alleged will be reported to the Director, EICS.

2.3 Confidentiality

Confidentiality is the protection of data which could directly, indirectly or otherwise identify an alleged or other individual by name and/or the fact that a confidential source provided such information to the NRC. The NRC only grants confidentiality in very special circumstances to acquire information related to activities within its jurisdiction. However, it is NRC policy not to divulge to others the identity of an individual who has been granted confidentiality, either during or subsequent to an inquiry based on the information provided to NRC. Within Region II, confidentiality is considered so important that a need-to-know rule will be vigorously implemented and followed by all Region II personnel.

2.3.1 The Regional Administrator is the regional authority for granting confidentiality and this authority has been re delegated to designated Region II staff members. The current letter authorizing individual Region II staff members to grant confidentiality is on file in the Office of the Regional Administrator. This letter and its enclosure should be reviewed if additional information regarding confidentiality is required.

2.3.2 Region II staff members authorized to grant confidentiality must be thoroughly familiar with the NRC "Statement of Policy on Confidentiality," dated November 25, 1985, which is appended to the delegation letter discussed above. The Regional Administrator will be briefed as soon as possible before any grant of confidentiality is made to an alleged. If the Regional Administrator is unavailable, the Deputy Regional Administrator will be briefed. If it is not practicable to brief either the Regional or Deputy Regional Administrator, they should be briefed as soon as practicable following the grant of confidentiality.

2.3.3 Inspectors or other Region II staff members involved with an alleged who requests confidentiality should contact the SAC. If the SAC is not available, contact the Director, EICS, or a senior Region II staff member who has been authorized to grant confidentiality.

- 2.3.9 The granting official may withdraw confidentiality following receipt of a written request from the allegor.
- 2.3.10 : The SAC is responsible for maintaining records of the status of confidential sources and signed confidentiality agreements.

2.4 Anonymous Allegers

There are instances when an allegor will not provide his or her identity even after identity protection and confidentiality have been explained. The following points should be explained if an anonymous allegor will not reveal their identity:

- The Region II staff member taking the call may not have the technical expertise to evaluate the information provided to determine if it is sufficient to permit adequate follow up or if it is within the regulatory jurisdiction of the NRC; therefore, it may be necessary to contact the allegor for additional information at a later date.
- It is Region II policy to keep the allegor informed of the final resolution on an allegation within the jurisdiction of the NRC. In cases where an allegation is not within the regulatory jurisdiction of the NRC, it is Region II policy to notify the individual of the responsible agency to which the matter has been referred.

After the above points have been explained to the allegor and the allegor persists in not revealing their identity, document the allegation in as much detail as possible. Advise the individual to contact the SAC collect at (404) 562-4424 or 1-800-577-8510 as soon as possible to provide any additional information that may be necessary for the appropriate resolution of this matter.

Once an allegor provides their identity or if the receiving NRC representative is aware of the allegor's identity, the allegor will be afforded identity protection, and can no longer be treated as anonymous, even if the allegor requests anonymity.

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point to their attention if I desire similar treatment for the information provided to them.

I also understand that the NRC will revoke my grant of confidentiality if I take, or have taken, any action so inconsistent with the grant of confidentiality that the action overrides the purpose behind the confidentiality, such as (1) disclosing publicly information that reveals my status as a confidential source or (2) intentionally providing false information to the NRC. The NRC will attempt to notify me of its intent to revoke confidentiality and provide me an opportunity to explain why this action should not be taken.

Other Conditions: (if any)

I have read and fully understand the contents of this agreement. I agree with its provisions.

Date

Name
Address

Agreed to on behalf of the U.S. Nuclear Regulatory Commission.

Date

Signature

Name:

Title:

2. Record location as accurately as possible in order for someone else to be able to verify.

WHAT IS THE REQUIREMENT/VIOLATION?

1. Does the individual know the requirement and what is being violated?
2. Is the problem being described by the allegor actually a personal opinion related to the way things should be done?

WHEN DID IT OCCUR?

1. Specific dates and times determine the procedures in effect at that time.
2. Specific time frames can provide support for the circumstances and facts surrounding the issue.

WHO IS INVOLVED/WITNESSED?

1. Other individuals lend credibility to information and they should be fully identified.
2. The involvement of others becomes a critical factor when dealing with confidentiality.

HOW/WHY DID IT OCCUR?

1. The development of information for this question involves the individual's interpret action of the events.
2. This question can indicate wrongdoing, falsification, or possible harassment and intimidation.
3. Develop the sequence of events/process.
4. Often it's not what happened that is a problem but how it happened and how it was done that is the problem.
5. What is the allegor's interpretation of the cause of the problem.

WHAT EVIDENCE CAN BE EXAMINED?

1. This question should be viewed as if you had to follow up this matter.

5. You must act in a professional manner.
6. You must not compromise a potential OI investigation. Only pursue the technical issues. If you suspect a potential OI issue, contact your supervisor and RII/SAC.
7. You must not reveal the identity of an alleged.
8. Do not agree to meet with an alleged off site. If such a request is made, call your supervisor and RII/SAC for guidance.
9. Except when an allegation is received during an on-site inspection and refers to work in progress, you should contact your supervisor and the RII/SAC and await ARB review prior to performing follow up actions.
10. If an alleged requests confidentiality, inform the alleged that the NRC does not reveal the identity of alleged to their employer. Generally, this statement will satisfy the alleged. However, if the alleged specifically requests confidentiality, inform the alleged that his/her confidentiality request will be reviewed by staff personnel authorized to grant confidentiality.
11. Do not withhold or protect the identity of an alleged who requested to remain anonymous if you know the identity of the alleged.
12. Advise alleged of the 180 day DOL reporting requirement for employee discrimination complaints.
13. Inform alleged that there are limits to their identity and that they are not considered confidential sources. You do not have to read alleged the limits, but tell alleged that there are limits on the NRC's ability to protect their identity and that we will also provide a written description of the protection measures NRC takes and the limits of that protection.

ACKNOWLEDGMENT LETTER

Alleger's Name
Address

SUBJECT: ALLEGATION NO. RII-1997-A-0000

Dear Mr./Mrs./Ms. _____:

This letter refers to your (letter, phone conversation, meeting, interview, etc.) with _____ on/dated _____ in which you expressed concerns related to (name of facility). You were concerned about (brief general description such as security, maintenance, operator qualifications, etc.).

Enclosure 1 to this letter documents your concern(s) as we understand it/them. We have initiated actions to examine the facts and circumstances of your concern(s). If we have misunderstood or mischaracterized your concern(s) as described in the enclosure, please contact me so that we can assure that (it is/they are) adequately addressed prior to the completion of our review.

FOR REFERRALS TO LICENSEES:

In addition, per your conversation with (NRC employee's name), we understand that you do not object to having your concern(s) referred to the licensee. Your concern(s) is/are being referred to the licensee, however your identity and position are not being provided. We will review and evaluate the licensee's activities and response and inform you of the final disposition of this/these matters.

ALTERNATE LANGUAGE:

In addition, we intend to refer your concern(s) to the licensee with your identity and position withheld. We will review and evaluate the licensee's activities and response, and inform you of the final disposition. If you have any objection to this approach you must contact our office within 14 days upon receipt of this letter so that we can discuss this matter further.

REFERRALS TO AGREEMENT STATES:

Because the NRC does not have jurisdiction over the activity(ies) in the State of _____ that are discussed in your concern(s), we are referring your concern(s) to the State of _____. Because you have requested that your name and address not be provided to the state, we will request that the state respond to the NRC. Upon receipt of the state's response, we will mail you a copy.

CERTIFIED MAIL NO. XXX XXX XXX
RETURN RECEIPT REQUESTED (Note: Should be on bottom of first page only)

FOR LETTERS TO ALLEGERS W/O CONFIDENTIALITY

Finally, you are not considered a confidential source unless an explicit request of confidentiality has been formally granted in writing.

USE THIS PARAGRAPH IN PLACE OF THE PREVIOUS UNDERLINED SENTENCE IF THE NRC DOES HAVE A SIGNED CONFIDENTIALITY AGREEMENT WITH THE ALLEGER

With respect to the Confidentiality Agreement you signed, I assure you that we will honor the Agreement. I would like to point out that licensees can and sometimes do surmise the identity of individuals who provide information to us because of the nature of the information or other factors beyond our control. In such cases, our policy is to neither confirm nor deny the licensee's assumption.

FOR ALLEGATIONS REGARDING IMPROPER ACTIONS BY THE STAFF

With respect to your concern(s) regarding alleged improper actions by the NRC staff, these matters have been referred to the NRC Office of the Inspector General (OIG), and if you should have any questions or other comments on these matters, you should contact the OIG directly, toll-free, at 1-800-233-3497.

USE IF ADDITIONAL INFORMATION IS NEEDED FROM THE ALLEGER

In reviewing your concern(s), we have determined that we need additional information from you before we can proceed with our inquiry into your concerns. (If accurate, use-We have attempted to contact you by telephone without success and) I would appreciate your calling me toll-free at _____ as soon as possible so that we can discuss this matter further.

USE IF ADDITIONAL INFORMATION WAS PROMISED BUT NOT RECEIVED:

Based on your telephone conversation with (NRC employee) on (date) it was understood that you would provide additional information. I would appreciate your contacting me toll-free at (phone number) at your earliest convenience so that we may proceed with our inquiry into this matter. If I am not available at the time of your call, please ask for (NRC employee) or leave a message so I can return your call.

FOR GENERIC CONCERNS:

The staff has determined that the concern(s) you raised may impact a number of facilities and is considered generic. Because the resolution of your concern(s) will require a review of multiple facilities and may require a review of or changes to NRC policy, the time necessary to resolve your concern(s) may be extended. However, please be assured that the NRC will take appropriate and necessary action to maintain public health and safety.

Regional Office Instruction
No. 1030, Revision 9

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FORMAT FOR THE ATTACHMENT PAGE

Concern 1.
(Describe the alleged concern.)

Concern 2.
(Describe the alleged concern.)

CLOSEOUT LETTER TO THE ALLEGER

Alleger's Name
and Address

SUBJECT: ALLEGATION NO. RII-1997-A-0000

Dear Mr./Mrs./Ms. _____:

GENERAL LETTER

This is in reference to my (date), letter which indicated that we would initiate action to review your concerns related to (issue(s)). The NRC has completed its follow up in response to the concern(s) you brought to our attention on _____. The attachment to this letter lists your concern(s) and describes how the NRC resolved the concern(s) you raised.

SUBSTITUTE THE FOLLOWING PARAGRAPH IN CASES WHERE THE ALLEGER HAS FAILED TO PROVIDE ADDITIONAL INFORMATION, AS NEEDED OR REQUESTED

This refers to our letter to you dated _____, in which we requested that you contact us to provide additional information regarding your concern(s) related to _____ at (site/facility). (If additional phone or personal contact was/were conducted, refer to them here.)

Since you have not contacted us to provide the additional information we requested, the NRC plans no further action regarding this matter. We have, however, alerted our inspectors to your general concerns so that they can pay particular attention to those areas during their routine inspections.

USE IF NRC ACTION IS COMPLETE AND INVOLVED 2.790 INFORMATION, IN WHOLE OR IN PART AND INCLUDE ON ATTACHMENT PAGE

(However,) your (other) concern(s) dealt with (physical security matters, proprietary information, personal privacy matters about another individual, medical records, etc.) and the details are exempt from disclosure to either you or the public, so we are unable to provide you with a copy of our report. (Make a statement as to whether or not the concern was substantiated, unsubstantiated, or partially substantiated, without providing specific details of the findings.)

CERTIFIED MAIL NO. XXX XXX XXX

RETURN RECEIPT REQUESTED (NOTE: This should only be on the of first page.)

FORMAT FOR THE ATTACHMENT PAGE

ALLEGATION EVALUATION REPORT

ALLEGATION RII-1997-A-0000

ALLEGED FAILURE TO PERFORM RADIATION SURVEYS

TURKEY POINT NUCLEAR PLANT

DOCKET NOS. 50-250 AND 50-251

ALLEGATION:

Make a statement of the allegation and the facility associated with the allegation. Example:

The allegor stated that he/she had a concern related to health physics practices at the Turkey Point Nuclear Plant. The allegor was concerned that surveys were not being performed by qualified health physics personnel due to the strike which caused the licensee to use maintenance personnel to perform health physics activities.

DISCUSSION:

What did you verify? Discussions, observations, review of records, etc. Example:

Through discussions, observations and review of records, the inspector was able to verify that the licensee utilized maintenance personnel to perform some health physics activities. Surveys were performed by maintenance personnel but they received training and were under the direct supervision of senior health physics personnel.

CONCLUSION:

1. Based on the information provided we were able to substantiate or unable to substantiate the allegation because.
2. There were or were no violations or deviations of regulatory requirements.
3. Allegations can be substantiated and not be a violation of NRC requirements.
4. Do not discredit the allegor because an allegation was not substantiated.
5. Remember, you are writing this enclosure to the allegor.

LICENSEE REFERRAL LETTER

July 14, 1997

Florida Power and Light Company
ATTN: Mr. T. F. Plunkett
President - Nuclear Division
P. O. Box 14000
Juno Beach, FL 33408-0420

SUBJECT: ALLEGATION NOS. RII-1997-A-0120 AND RII-1997-A-0121

Dear Mr. Plunkett:

The Nuclear Regulatory Commission (NRC) recently received information concerning activities at your St. Lucie facility. A description of the concerns is enclosed.

We request that you conduct inspections and/or investigations as appropriate to prove or disprove the concerns and that you inform us within XX days of the date of this letter of the resolution of this matter and make the records of your completed action available for NRC inspection.

NRC's evaluation of your response will include a determination that: 1) the individual conducting the investigation was independent of the organization affected by the concern, 2) the evaluator was competent in the specific functional area, 3) the evaluation was of sufficient depth and scope to substantively address the concern, 4) appropriate root causes and generic implications were considered if the concerns were substantiated, and 5) the corrective actions, if necessary, were comprehensive.

Please send your response to Ms. Anne T. Boland, Director, Enforcement and Investigations Coordination Staff, Region II. Please do not submit your response to the Document Control Desk. If your response contains personal privacy, proprietary, or safeguards information, such information shall be contained in a separate attachment, appropriately marked, so that it will not be subject to public disclosure. The affidavit required by 10 CFR 2.790(b) must accompany your response if proprietary information is included.

Should you be unable to complete your review within the time requested due to other operational priorities, please contact me so we can discuss the matter and make other appropriate arrangements.

The enclosure to this letter must be controlled as sensitive information and distribution limited to personnel with a legitimate "need-to-know."

ENCLOSURE CONTAINS INFORMATION
NOT FOR PUBLIC DISCLOSURE

Enclosure 7

INFORMATION SUMMARY
FLORIDA POWER AND LIGHT COMPANY
ST. LUCIE NUCLEAR PLANT
RII-1997-A-0120
RII-1997-A-0121

Region II received information related to _____ practices at the St. Lucie Nuclear Plant. Allegedly, _____

Allegedly, the _____ on _____ had entered containment to perform work and if a fire were to occur, responding to it properly would be difficult because containment was difficult to get out of. Allegedly, there once was a Night Order that stated that the Fire Team members could not enter the containment.

*****USE BLUE PAPER*****

---- WARNING ----

**SENSITIVE
ALLEGATION MATERIAL**

**THE ATTACHED DOCUMENT CONTAINS MATERIAL WHICH MAY
RELATE TO AN OFFICIAL NRC INQUIRY OR INVESTIGATION WHICH
MAY BE EXEMPT FROM PUBLIC DISCLOSURE PURSUANT TO ONE OR
MORE PARTS OF TITLE 10, CODE OF FEDERAL REGULATIONS**

**OFFICIAL USE ONLY
SPECIAL HANDLING
REQUIRED**

***SHRED THIS DOCUMENT
WHEN NO LONGER NEEDED***

**PLEASE TAKE THE NECESSARY STEPS TO PRECLUDE UNAUTHORIZED
ACCESS TO THIS DOCUMENT. ACCESS TO INFORMATION CONTAINED
HEREIN IS LIMITED TO REGION II STAFF AS REQUIRED FOR BRIEFING
AND RESOLUTION ACTION. DISCLOSURE OF INFORMATION TO
UNAUTHORIZED PERSONS IS PROHIBITED**

ATTACHMENT 2