PSEG Nuclear LLC
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PSEG Nuclear LLC

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United States Nuclear Regulatory Commission
Document Control Desk
Washington, DC 20555

SEMI-ANNUAL REPORT OF FITNESS FOR DUTY (FFD) PERFORMANCE DATA
SALEM AND HOPE CREEK GENERATING STATIONS
DOCKET NOS. 50-272, 50-311, AND 50-354

Gentlemen:

In accordance with the requirements of 10CFR26.71(d), PSEG Nuclear, LLC hereby forwards the attached Fitness For Duty Performance Data Report for the six-month period ending June 30, 2003.

Should you have any further questions regarding this report, please contact Robin Ritzman at (856) 339-1445.

Sincerely,

Gabor Salamon
Nuclear Safety and Licensing Manager

Attachment (1)

A021

C Mr. H. J. Miller, Administrator - Region I
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USNRC Senior Resident Inspector - HC (X24)

USNRC Senior Resident Inspector - Salem (X24)

Mr. K. Tosch, Manager IV
Bureau of Nuclear Engineering
PO Box 415
Trenton, NJ 08625

FITNESS FOR DUTY PROGRAM
PERFORMANCE DATA
PERSONNEL SUBJECT TO 10CFR26

PSEG Nuclear LLC Company	06/30/2003 6 Month Ending
Salem / Hope Creek Nuclear Plants Location	
Cecilia Homan Contact Name	(856)339-5605 Phone

Cutoffs: Screen/Confirmation (ng/ml) ☒ Appendix A to 10CFR26

Marijuana	50/15	Amphetamine	1000/500	N/A	N/A
Cocaine	300/150	Phencyclidine	25/25	N/A	N/A
Opiates	300/300	Alcohol (%BAC)	0.04%	N/A	N/A

Testing Results	Licensee Employees		Long-Term Contractor Personnel		Short-Term Contractor Personnel	
Average Number with Unescorted Access	1995		127		394	
Categories	# Tested	# Positive	# Tested	# Positive	# Tested	# Positive
Pre-Access	268	0	44	1	547	2
For-Cause Post Accident	0	0	0	0	1	0
For-Cause Observed Behavior	2	1	0	0	6	1
Random	550	2	21	0	112	0
Follow-Up	13	0	0	0	3	0
Other	1	0	0	0	0	0
Total	834	3	65	1	669	3

BREAKDOWN OF CONFIRMED POSITIVE TESTS FOR SPECIFIC SUBSTANCES

	Marijuana	Cocaine	Opiates	Amphetamines	Phencyclidene	Alcohol S / N	Refusal To Test					
Licensee Employee	1	1	0	0	0	0 / 1	0					
Long-Term Contractors	0	1	0	0	0	0 / 0	0					
Short-Term Contractors	0	0	0	0	0	1 / 2	0					
Total	1	2	0	0	0	4	0					

Total Confirmed Positive Tests For All Specific Substances and Refusals to Test: 7

KEY: S = SITE LEVEL ALCOHOL & N = NRC LEVEL ALCOHOL

Marijuana Confirmed Positive Tests

Positives screened between 50 and 100 ng/ml: 1
Positives screened $\geq$100 ng/ml: 0

Random Testing Rate

Random testing is conducted at an annualized rate of 50%. The random testing rate during this six-month reporting period was 27.1% (683 random tests conducted with 2516 workers eligible for testing.)

Summary of Management Actions

Suspensions based on presumptive positives: 0

Reportable events: 0

Appeals/Resolutions

During the time period January 1, 2003 to June 30, 2003 two appeals were resolved. No appeals resulted in the reversal of the original action.

- Two security appeals resulted from access denial based on a security determination of lack of trustworthiness and reliability. Both appeals were filed by pre-employment candidates for the guard force.

Trends 1990 to Present

Rare challenges to the accuracy and validity of Department of Health and Human Services (DHHS) laboratory test results.

Current Reporting Period Observations

During this reporting period, 14% of confirmed positive test results (1 test) were attributed to marijuana use, 29% to cocaine use (2 tests), and 57% to alcohol use (4 tests).

Of the confirmed alcohol positive tests, 25% (1 test) was positive at the site cut off level ($\geq$ 0.02%) and 75% (3 test) were positive at the NRC cut-off level ($\geq$ 0.04%).

During this six-month period, 1 For-Cause (post accident) test yielded a negative test result.

During this six-month period, 8 For-Cause (observed behavior) tests yielded 2 positive test results, resulting in a 25% positive rate in this category.

The random category confirmed positive rate for this six-month period was 0.3% (2 positives/683 individuals tested).

Recommendations

- Eliminate the second breath alcohol test when the first is negative. Data from 1989 to present of breath alcohol testing demonstrates equipment sensitivity of 100% (second alcohol test has never been positive after the first breath test was negative.) Cost savings would be considerable.

- Continue to permit /encourage on-site pre-screening.

- Continue to move toward "interchangeability" and mutual acceptance among related Fitness for Duty programs (NRC, DOT, RSPA).