

Indiana Michigan
Power Company
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August 2, 2004

AEP:NRC:2201-03
10 CFR 50.4
EA-04-109

Docket No.: 50-315
50-316

U. S. Nuclear Regulatory Commission,
ATTN: Document Control Desk
Mail Stop O-P1-17
Washington, DC 20555-0001

Donald C. Cook Nuclear Plant Units 1 and 2
RESPONSE TO AN APPARENT VIOLATION
IN INSPECTION REPORT NO.
05000315/2004007 (DRS); 05000316/2004007 (DRS); EA-04-109

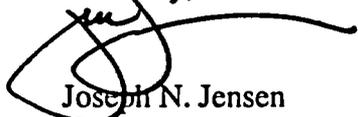
Indiana Michigan Power Company (I&M), the licensee for Donald C. Cook Nuclear Plant (CNP), Units 1 and 2, is submitting the attached response to an Apparent Violation identified in Nuclear Regulatory Commission (NRC) Inspection Report 05000315/2004007 (DRS); 05000316/2004007 (DRS) and Enforcement Action (EA) EA-04-109.

The inspection report identified an apparent violation of 10 CFR 50.9 being considered for escalated enforcement. The final decision of the escalated enforcement is contingent on I&M confirming that the corrective actions described to the Staff have been or are being taken.

Attachment 1 to this letter provides I&M's response to the apparent violation, including the corrective actions and the status of the corrective actions. Attachment 2 describes the commitment contained in this submittal.

If you have any questions or desire additional information, please contact Mr. Toby K. Woods, Compliance Supervisor, at (269) 466-2798.

Sincerely,



Joseph N. Jensen
Site Vice President

JEN/jn

Attachment

JEN
IE14

c: J. L. Caldwell – NRC Region III
K. D. Curry – AEP Ft. Wayne
J. T. King – MPSC
J. G. Lamb – NRC Washington DC
MDEQ – WHMD/HWRPS
NRC Resident Inspector

ATTACHMENT 1 TO AEP:NRC:2201-03

RESPONSE TO AN APPARENT VIOLATION
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Restatement of Apparent Violation:

“D. C. Cook management personnel informed NRC Region III by letter dated March 24, 2004, that one senior reactor operator had a pre-existing medical condition (since 1996) that required the presence of another qualified individual (i.e., “no solo”) when performing licensed duties and requested a “no solo” license restriction for the individual. The letter from the company physician also described a medication the individual was taking for the medical condition. The medical condition described by the physician was considered a disqualifying condition in accordance with American National Standards Institute/American Nuclear Society (ANSI/ANS)-3.4-1983, “American National Standard Medical Certification and Monitoring of Personnel Requiring Operator Licenses for Nuclear Power Plants.” On December 28, 1999, the licensee provided information to the NRC regarding the medical status of the same individual applying for a renewal of the individual’s senior reactor operator license with no recommendation for a “no solo” license. The individual’s license was renewed by the NRC on February 1, 2000, based on the information provided by the licensee on December 28, 1999. Again, the medical condition was considered a disqualifying condition in accordance with ANSI/ANS-3.4-1983, and should have been reported to the NRC on NRC Form 396 for the renewal of the applicant’s license requesting a “no solo” restriction on the individual’s license. Therefore, the information provided to the NRC on December 28, 1999, was material to the NRC licensing action. [Note: The information concerning the individual’s specific medical condition is considered medical privacy information under 10 CFR 2.390(2)(6) and is not specifically discussed here.]

As noted above, Region III received a letter from the D. C. Cook Nuclear Power Plant dated March 24, 2004, requesting a “no solo” license restriction for the individual. Region III received another letter from the D. C. Cook Nuclear Power Plant dated May 20, 2004, notifying the NRC that the recommendation of the “no solo” license condition for the individual not be implemented. The letter stated that upon further review of the individual’s medical records, the company physician determined that the individual met ANSI/ANS-3.4-1983 to work as an operator in a multi-person facility; therefore, no license condition for solo operation was required. The NRC’s medical officer again determined on May 26, 2004, that the operator required a “no solo” restriction to the operator’s license. Since NRC intervention was required to identify the requirement for the operator to have a “no solo” restriction, this apparent violation was considered NRC identified.

Because the issue affected the NRC’s ability to perform its regulatory function, it was evaluated with the traditional enforcement process. The finding was determined to be of low safety significance because the operator had not acted in a solo capacity prior to the license being amended. However, the regulatory significance was important because the incorrect information

was provided under a signed statement to the NRC and impacted a licensing decision for the individual. The issue was preliminarily determined to be an apparent violation of 10 CFR 50.9.”

Admission/Denial of the Apparent Violation:

Indiana Michigan Power Company (I&M) acknowledges the apparent violation described above.

Reasons for the Apparent Violation:

The reason for the apparent violation is that I&M’s procedures and processes were such that I&M relied upon the designated medical review officer for operator license restriction recommendations. This reliance was cultivated by I&M’s interpretation of the ANSI 3.4-1983, “American National Standard Medical Certification and Monitoring of Personnel Requiring Operator Licenses for Nuclear Power Plants,” guidance that the designated medical review officer had the responsibility to evaluate the condition and any compensatory measures used to control the condition to determine the medical qualification of the licensed operator. As a result of the interpretation and reliance, I&M only submitted the NRC Form 396, “Certificate of Medical History by Facility Licensee,” marked to reflect the designated medical review officer’s recommendation without consideration of the physical examination documentation with the license renewal application.

Corrective Actions that Have Been Taken and Results Achieved:

1. I&M prevented activation of the license in question from inactive to active status until the medical issue associated with the license was resolved with the NRC.
2. Detailed discussions have been held with the current designated medical review officer, Operations Training personnel, and Regulatory Affairs personnel to ensure all have a mutual understanding of the reporting requirements outlined in ANSI 3.4-1983. [Complete]
3. An interim compensatory action was taken via a memorandum issued by the Operations Training Manager on June 22, 2004, that identified a new requirement to submit completed physical examination forms and physician recommendation forms to Regulatory Affairs for inclusion with initial or renewal license applications. This interim action will remain in place pending revision of the procedure that governs the process for license applications. [CR 04162065, Action 1 - Complete]
4. An overview of the requirements for reporting changes in medical conditions has been included in an Operations Review class for licensed operator requalification continuing training. The overview was included in the beginning of week crew brief for Period 2903. This overview is captured in the Power Point presentation titled, “Lessons Learned Period 2902”. [CR 04040028, Actions 2, 7, 8, and 10 - Complete]

5. A 100% review (self-assessment) of all operator medical records was performed in February and March of 2004. Additionally, this review will be conducted every two years and has been placed on the Training Department's 5 year Self-Assessment plan, with the next review scheduled for October 2005. [CR 04040028, Action 4 – Complete]
6. The procedure that outlines the requirements for reporting the reassignment, termination, and/or conditions potentially affecting the performance of licensed duties has been revised to include guidance to forward supporting medical evidence with the NRC Form 396 when the designated medical review officer identifies and evaluates a potentially disqualifying condition. [CR 04162065, Action 2 – Complete]
7. The procedure that governs the process of license applications has been revised to require inclusion of recent medical physical examination records with the submittal of NRC Form 398, "Personal Qualification Statement - Licensee." This revision formalizes the interim compensatory action described in Item 3 above. [CR 04162065, Action 3 - Complete]

Corrective Actions that Will Be Taken to Avoid Further Violations:

The corrective actions discussed above and the procedure enhancement described below have been reviewed and deemed adequate to prevent recurrence of the event identified in Enforcement Action EA-04-109.

1. Revise the appropriate procedure to require a discussion with the designated medical review officer during the performance of the biennial self-assessment of medical records. This discussion will review the reporting requirements outlined in ANSI 3.4-1983. [CR 04162065, Action 4 – Due September 10, 2004]

Date Full Compliance Will Be Achieved:

A complete review of medical records for all current license holders was conducted in February and March of 2004. During this review, a concern was raised regarding the medical records for the SRO in question. Subsequent to the current designated medical review officer's review of the medical records, I&M submitted letter AEP:NRC:2574-51 on March 24, 2004, which requested that a no-solo operation restriction be placed on the SRO's license. Full compliance was achieved on April 8, 2004, when the NRC placed a "no-solo" restriction on the license in question.

LIST OF REGULATORY COMMITMENTS

The following table summarizes the actions committed to by Indiana Michigan Power Company (I&M) in this document. Any other actions discussed in this submittal represent intended or planned actions by I&M. They are described to the Nuclear Regulatory Commission (NRC) for information and are not regulatory commitments.

Commitment	Due Date
I&M will revise the appropriate procedure to require a discussion with the designated medical review officer during the performance of the biennial self-assessment of medical records. This discussion will review the reporting requirements outlined in ANSI 3.4-1983.	September 30, 2004