



Department of Energy

Idaho Operations Office
1955 Fremont Avenue
Idaho Falls, ID 83415

August 2, 2005

U.S. Nuclear Regulatory Commission
ATTN: Document Control Desk
Washington, DC 20555-0001

SUBJECT: Licensee Event Report (LER) 05-001-00 for the Fort Saint Vrain Independent Spent Fuel Storage Installation (Docket 72-09) (EM-FMDP-05-040)

Dear Sir or Madam:

The Fort St. Vrain (FSV) Independent Spent Fuel Storage Installation (ISFSI) Physical Protection Plan (PPP) has operability and testing requirements for communications equipment. One of the testing requirements was implemented less frequently than described in the PPP. This deficiency was classified as a violation of Technical Specification 5.4.1, which includes a requirement to provide implementing physical protection procedures. The enclosed LER is being sent pursuant to the Technical Specification 5.6.2 requirement that violations of Administrative Controls in the Technical Specifications are to be reported within 30 days of discovery. The enclosed report contains no safeguards information.

If you have any questions please call me at (208) 526-5655.

Sincerely,

A handwritten signature in black ink, appearing to read "M. D. Gardner", is positioned above the typed name.

Mark D. Gardner
FSV/TMI-2 Facility Director

Enclosure

cc: Director, NMSS
NRC Region IV

IE7.2
NmSS01

Event Report 05-001-00

Facility:	FSV ISFSI
Docket:	72-09
Date:	July 27, 2005

TITLE: Physical Protection Plan Commitment Not Implemented

I. ABSTRACT

The Fort St. Vrain (FSV) Independent Spent Fuel Storage Installation (ISFSI) Physical Protection Plan (PPP) has equipment operability and testing requirements for communications equipment. One of the testing requirements was implemented less frequently than described in the PPP. This deficiency was classified as a violation of Technical Specification 5.4.1, which includes a requirement to provide implementing physical protection procedures. In accordance with Technical Specification 5.6.2, violations of Administrative Controls in the Technical Specifications are to be reported within 30 days of discovery.

Upon discovery of this deficiency, corrective actions were taken to ensure the testing requirements were performed at the correct frequency. The extent of condition (lack of implementation of PPP commitments) was reviewed and no other deficiencies were discovered. The safety and security consequences were evaluated and were determined to be of low significance.

II. DESCRIPTION OF EVENT

CONDITIONS BEFORE THE EVENT

The spent fuel storage facility at FSV was built and licensed by Public Service Company of Colorado (PSCo). The FSV ISFSI was subsequently purchased by the Idaho Operations Office of the Department of Energy (DOE-ID) and an application to transfer the materials license, SNM-2504, from PSCo to DOE-ID was submitted to the Nuclear Regulatory Commission (NRC). Part of the license transfer submittal included a substantial revision to PSCo's security plan, which became DOE-ID's PPP.

Materials License SNM-2504 was transferred to DOE-ID on June 4, 1999 for the FSV Independent Spent Fuel Storage Installation (ISFSI). The approval of this license transfer included the approval of the FSV ISFSI Technical Specifications and the FSV ISFSI Safety Analysis Report (SAR).

DESCRIPTION OF LICENSED MATERIAL

This event was an administrative violation of Technical Specification 5.4.1. There was no damage to the facility and no impact on the condition or handling of licensed material. Therefore, no description of licensed material is needed for this event report.

DESCRIPTION OF EVENT

Materials License included a requirement as License Condition 12 to terminate interim physical protection measures and to follow the approved PPP. On September 30, 1999, DOE-ID informed NRC that the activities needed for DOE-ID to accept the license were complete and the license took effect. The requirement to implement the approved PPP was extended to January 1,

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2000. Upon the termination of interim compensatory measures, TS 5.4.1 was violated because the implementing procedures did not address all of the requirements of the PPP.

METHOD OF DISCOVERY

During a review of the PPP, one of the commitments for communications equipment checks was observed to differ from actual practice. A review of previous revisions of the PPP and its implementing procedures showed that this noncompliance existed since the license condition for the PPP took effect. This discovery occurred on July 6, 2005.

IMMEDIATE ACTIONS TAKEN

1. Notification was made to operations management on July 6, 2005. It was determined that this condition constituted a noncompliance with Technical Specification 5.4.1, which states in part, *"Written procedures shall be established, implemented, and maintained for the following activities: ... physical protection ..."*. This noncompliance with Technical Specification 5.4.1 was determined to be reportable in accordance with Technical Specification 5.6.2, which states in part, *"All instances of noncompliance with the ... or Administrative Controls within these Technical Specifications shall be reported in writing to the NRC Document Control Desk within 30 days of the discovery of non-compliance..."*.
2. Temporary post instructions were provided on July 6, 2005, to ensure communication equipment checks are performed as required by the PPP. Performance of this instruction commenced on July 6, 2005.
3. A deficiency report was initiated on July 7, 2005, to document the problem and to document and track corrective actions.

III. CORRECTIVE ACTIONS TO PREVENT RECURRENCE

CAUSE ANALYSIS

Failure to adequately implement the PPP is a failure of the requirements roll-down process used by DOE-ID to ensure regulatory compliance. In addition to initial requirements roll-down into implementing procedures, the process used by DOE-ID includes periodic assessment of the continued adequacy of the implemented requirements and commitments.

The causal factor associated is the failure of an established management control: Management Problem (A4), Change Management Less Than Adequate (B5); Change Related Documents Not Developed or Revised. The change related documents for this event are both the requirements roll-down document and the implementing procedure.

SAFETY/SECURITY CONSEQUENCES

A review of the checks performed demonstrated that failures of the communication equipment subject to the checks of PPP section 8.3.1.B were not detected in the less frequent checks

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performed. Therefore, during the extended period of less frequent equipment checks, there was no period during which the more frequent equipment checks would have increased the equipment availability, as equipment failure had not occurred. Therefore, the consequences of this noncompliance are determined to be not significant.

PREVIOUS SIMILAR EVENTS

No similar technical specification violation has been reported for DOE-ID's FSV ISFSI or TMI-2 ISFSI.

CORRECTIVE ACTIONS

1. Security management performed an extent of condition assessment to determine whether other instances of inadequate PPP requirements roll-down into implementing procedures exist. That assessment was completed on July 27, 2005. No additional instances were found.
2. Update the implementing procedure to correctly address PPP Section 8.3.1.B. This action is expected to be completed by September 30, 2005.
3. Update the requirements roll-down of the PPP in the commitments matrix and place this matrix on a periodic review schedule. This action is expected to be completed by September 30, 2005.

IV. DATE EXPECTED TO ACHIEVE FULL COMPLIANCE

Full compliance was achieved on July 6, 2005, when the temporary post instructions were provided to correct communication equipment checks. Communication equipment checks have been performed in accordance with those instructions beginning on July 6, 2005.

V. CONTACT FOR FURTHER INFORMATION

For further information, please contact Mark D. Gardner, FSV and TMI-2 Facility Director, at 208-526-5655.