

PMComanchePekNPEm Resource

From: Monarque, Stephen
Sent: Thursday, February 25, 2010 9:00 AM
To: ComanchePeakCOL Resource
Subject: FW: Responses to RAIs 125, 129-132 - SUNSI review needs to be done
Attachments: TXNB-10010 RAIs 125, 129-132.pdf

From: John.Conly@luminant.com [mailto:John.Conly@luminant.com]
Sent: Monday, February 22, 2010 5:34 PM
To: rjb@nei.org; david.beshear@txu.com; Biggins, James; rbird1@luminant.com; mike.blevins@luminant.com; Dennis.Buschbaum@luminant.com; russell_bywater@mnes-us.com; JCaldwell@luminant.com; Ronald.Carver@luminant.com; cp34update@certrec.com; Ciocco, Jeff; Timothy.Clouser@luminant.com; Collins, Elmo; John.Conly@luminant.com; Carolyn.Cosentino@luminant.com; brock.degeyter@energyfutureholdings.com; nancy.douglas@txu.com; Eric.Evans@luminant.com; Rafael.Flores@luminant.com; sfrantz@morganlewis.com; Goldin, Laura; Hamzehee, Hossein; kazuya_hayashi@mnes-us.com; masaya_hoshi@mnes-us.com; mutsumi_ishida@mnes-us.com; Johnson, Michael; Kallan, Paul; masahiko_kaneda@mnes-us.com; kak@nei.org; Allan.Koenig@luminant.com; Kramer, John; mlucas3@luminant.com; Fred.Madden@luminant.com; Matthews, David; tmatthews@morganlewis.com; Monarque, Stephen; Ashley.Monts@luminant.com; Bill.Moore@luminant.com; masanori_onozuka@mnes-us.com; ck_paulson@mnes-us.com; Plisco, Loren; Robert.Reible@luminant.com; jrund@morganlewis.com; jeff.simmons@energyfutureholdings.com; Singal, Balwant; nan_sirirat@mnes-us.com; Takacs, Michael; joseph_tapia@mnes-us.com; Tindell, Brian; Bruce.Turner@luminant.com; Vrahoretis, Susan; Ward, William; Matthew.Weeks@luminant.com; Willingham, Michael; Donald.Woodlan@luminant.com; diane_yeager@mnes-us.com
Cc: James.Hill2@luminant.com
Subject: Responses to RAIs 125, 129-132

Luminant has submitted the attached responses to the NRC for RAIs 125, 129, 130, 131, and 132. If there are any questions regarding the responses, please contact me or contact Don Woodlan (254-897-6887, Donald.Woodlan@luminant.com).

Thanks,

John Conly

Luminant
COLA Project Manager
(254) 897-5256

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Email Number: 1441

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From: Monarque, Stephen

Created By: Stephen.Monarque@nrc.gov

Recipients:
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Luminant

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CP-201000243
Log # TXNB-10010

Ref. # 10 CFR 52

February 22, 2010

U. S. Nuclear Regulatory Commission
Document Control Desk
Washington, DC 20555
ATTN: David B. Matthews, Director
Division of New Reactor Licensing

SUBJECT: COMANCHE PEAK NUCLEAR POWER PLANT, UNITS 3 AND 4
DOCKET NUMBERS 52-034 AND 52-035
RESPONSES TO REQUESTS FOR ADDITIONAL INFORMATION NO. 3968, 4209,
4243, 4244, AND 4245

Dear Sir:

Luminant Generation Company LLC (Luminant) submits herein responses to Requests for Additional Information No. 3968, 4209, 4243, 4244, and 4245 for the Combined License Application for Comanche Peak Nuclear Power Plant Units 3 and 4. The affected Final Safety Analysis Report pages are included with the responses.

Should you have any questions regarding these responses, please contact Don Woodlan (254-897-6887, Donald.Woodlan@luminant.com) or me.

There are no commitments in this letter.

I state under penalty of perjury that the foregoing is true and correct.

Executed on February 22, 2010.

Sincerely,

Luminant Generation Company LLC

Rafael Flores

- Attachments:**
1. Response to Request for Additional Information No. 3968 (CP RAI #125)
 2. Response to Request for Additional Information No. 4209 (CP RAI #129)
 3. Response to Request for Additional Information No. 4243 (CP RAI #130)
 4. Response to Request for Additional Information No. 4244 (CP RAI #131)
 5. Response to Request for Additional Information No. 4245 (CP RAI #132)

Electronic distribution w/all Attachments

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U. S. Nuclear Regulatory Commission
CP-201000243
TXNB-10010
2/22/2010

Attachment 1

Response to Request for Additional Information No. 3968 (CP RAI #125)

RESPONSE TO REQUEST FOR ADDITIONAL INFORMATION

Comanche Peak, Units 3 and 4

Luminant Generation Company LLC

Docket Nos. 52-034 and 52-035

RAI NO.: 3968 (CP RAI #125)

SRP SECTION: 06.04 - Control Room Habitability System

QUESTIONS for Containment and Ventilation Branch 1 (AP1000/EPR Projects) (SPCV)

DATE OF RAI ISSUE: 1/4/2010

QUESTION NO.: 06.04-7

The refrigerants used for refrigeration and HVAC cooling systems throughout Comanche Peak Units 3 and 4 have not been evaluated with respect to the guidance of Regulatory Guide (RG) 1.78, "Evaluating the Habitability of a Nuclear Power Plant Control Room During a Postulated Hazardous Chemical Release," for toxic gas analyses for the control room envelope. Neither COL application FSAR subsection 2.2.3.1.3.2 "Source Evaluation" discusses refrigerants nor Table 2.214 "Toxic Chemicals that do not Meet the Regulatory Guide 1.78 Screening Criteria (a)" list refrigerants. The US-APWR DCD does not capture the particular refrigerants used throughout the US-APWR plant.

From Section 6.4.7 of the US-APWR DCD, Revision 2:

COL 6.4(1) states "The COL Applicant is responsible to provide details of specific toxic chemicals of mobile and stationary sources within the requirements of RG 1.78 (Ref 6.4-4) and evaluate the control room habitability based on the recommendation of RG 1.78 (Ref 6.4-4)."

Please provide a RG 1.78 evaluation in the FSAR for the refrigerants to be used at Comanche Peak Units 3 and 4.

ANSWER:

A RG 1.78 evaluation of a postulated refrigerant release was conservatively performed by assuming the entire refrigerant inventory of a non-essential chiller unit is discharged directly into the Main Control Room, displacing an equivalent volume of control room air. The non-essential chiller unit, which is larger than an essential chiller unit, is assumed to contain 2120 lbs of refrigerant R-134a based on information provided by a potential equipment supplier. R-134a has a low acute inhalation toxicity. The IDLH concentration is lower than the concentration at which an asphyxiation hazard exists. However, using the OSHA oxygen limit in an evaluation of a very conservative release scenario is appropriate and consistent with RG 1.78 guidance for asphyxiation hazards. The resulting post-discharge oxygen level remains above the OSHA 29 CFR 1915.12(a)(2) confined space oxygen concentration lower limit of 19.5% by volume and the ANSI/ASHRAE Standard 15 Table 1 Quantity of Refrigerant per Occupied

Space limit of "80% of the cardiac sensitization level." Using the conservative assumptions stated above, the quantity of R-134a at which the oxygen concentration lower limit of 19.5% by volume would be reached is 2570 lbs, thus effectively allowing a greater than 21% margin for R-134a quantity in chiller selection.

Notwithstanding the RG 1.78 evaluation, there are several design features associated with essential and non-essential chiller units which would preclude the chiller refrigerant from becoming a control room habitability concern. These design considerations were addressed in, and DCD Subsection 6.4.4.2 and Subsection 9.2.7 have been modified by, the responses to DCD RAI No. 49 Question 06.04-19 and RAI No. 338 Question 06.04-6 (attached). CPNPP Units 3 and 4 FSAR Revision 1 incorporated these changes by reference.

The refrigerant sources nearest the control room envelope of sufficient quantity to be considered a potential personnel safety concern are in the Power Source Building (essential chillers) and in the Auxiliary Building (non-essential chillers). Both the essential and non-essential chillers are remote from the Main Control Room. There are also several structural barriers between the chiller units and the Main Control Room, which would impede refrigerant flow toward the Main Control Room Envelope and its supply air inlets. Tight-fitting doors are provided in the chiller unit rooms to minimize the possibility of released refrigerant travel between these areas. The rooms containing the chiller units are designed in accordance with ANSI/ASHRAE Standard 15, "Safety Standard for Refrigeration Systems." Each chiller room has a refrigerant detector and a dedicated ventilation purge system. The chillers are also designed in accordance with ANSI/ASHRAE Standard 15. The refrigeration system is protected by a pressure-relief device to safely relief pressure buildup due to a fire or other abnormal conditions and the relief discharge is piped to the outside of the building. The pressure relief and the dedicated ventilation purge system for the chiller rooms are designed to prevent refrigerant re-entry into any building, especially the Main Control Room, thereby eliminating an asphyxiation hazard associated with the refrigerant.

FSAR Table 2.2-214 has been revised to include the refrigerant of essential and non-essential chiller units.

Impact on R-COLA

See attached marked-up FSAR Revision 1 pages 2.2-43 and 2.2-44.

Impact on S-COLA

None.

Impact on DCD

None.

Attachments

1. MHI response to DCD RAI No. 49, Question 06.04-19, submitted on September 16, 2008 (ML082670703) (3 pages)
2. MHI response to DCD RAI No. 338, Question 06.04-6, submitted on June 17, 2009 (ML091700682) (4 pages)



MITSUBISHI HEAVY INDUSTRIES, LTD.
16-5, KONAN 2-CHOME, MINATO-KU
TOKYO, JAPAN

September 16, 2008

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

Attention: Mr. Jeffrey A. Ciocco,

Docket No. 52-021
MHI Ref: UAP-HF-08181

Subject: MHI's Responses to US-APWR DCD RAI No.49 Revision 0

Reference: 1) "Request for Additional Information No. 49 Revision 0, SRP Section: 06.04, Application Section: 6.4," dated August 19, 2008.

With this letter, Mitsubishi Heavy Industries, Ltd. ("MHI") transmits to the U.S. Nuclear Regulatory Commission ("NRC") a document entitled "Responses to Request for Additional Information No.49 Revision 0."

Enclosed are the responses to 24 RAIs contained within Reference 1.

Please contact Dr. C. Keith Paulson, Senior Technical Manager, Mitsubishi Nuclear Energy Systems, Inc. if the NRC has questions concerning any aspect of the submittals. His contact information is below.

Sincerely,

Yoshiaki Ogata,
General Manager- APWR Promoting Department
Mitsubishi Heavy Industries, LTD.

Enclosure:

1. Responses to Request for Additional Information No.49 Revision 0

CC: J. A. Ciocco
C. K. Paulson

Contact Information

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DOBI
NRO

RESPONSE TO REQUEST FOR ADDITIONAL INFORMATION

09/16/2008

US-APWR Design Certification

Mitsubishi Heavy Industries

Docket No. 52-021

RAI NO.: NO.49 REVISION 0
SRP SECTION: 06.04 – CONTROL ROOM HABITABILITY SYSTEM
APPLICATION SECTION: 06.04 HABITABILITY SYSTEMS
DATE OF RAI ISSUE: 08/19/2008

QUESTION NO. : 06.04-19

SRP 6.4 Section III.5.C.i Review Procedures/ Relative Location of Source and Control Room contains the following words "...the organization responsible for ventilation and air filtration for its toxic gas estimates for use in the control room habitability analysis. There are three basic categories: Radioactive sources, toxic gases such as chlorine, and gases with the potential for being released inside confined areas adjacent to the control room."

Chillers that use the new HCFC and HFC refrigerants are of particular concern. The new refrigerants can be more toxic and have some safety behavioral concerns that the old CFC refrigerants did not have. In the event of a large release of the new refrigerants as a result of operator error or chiller refrigerant pressure boundary leak incident, the danger to personnel due to potential asphyxiation from air displaced by the refrigerant, refrigerant toxicity, and potential chemical reactions can be devastating (e.g., HCFC and HFC refrigerants breakdown when exposed to heat and can create hydrofluoric and hydrochloric acid fumes when combined with water, burning the refrigerant in and open flame or arc can create deadly gas comparable to phosgene, etc.). The design of chiller equipment and their rooms require the capability to rapidly vent gas and fumes out of the room/plant and away from potential pathways to the CRE and CRE air intakes, preclude operator errors, prevent external damage to the chiller refrigerant boundary, provide refrigerant leak detectors and alarms, and address other areas of concern due to the use of new refrigerants during the analysis and design procedures.

With respect to the existing US APWR design and with respect to gases (e.g. fire fighting materials, CO₂, chiller refrigerants, etc.) with the potential for being released inside confined areas adjacent to the control room envelope, the staff requests that the DC applicant provide additional information as to whether the existing design will house any sources of gases in the areas adjacent to the CRE.

ANSWER:

There is no asphyxiation hazard associated with the control room atmosphere due to a potential release of refrigerants in areas adjacent to the control room, because of the remote location and structural barriers between the refrigerant and the control room air inlets. Essential chiller units are located on B1F in the Power Source Building. The non-essential chiller units are located on 3F in the Auxiliary Building. There are no refrigeration units used in the control room equipment.

Impact on DCD

DCD Subsection 6.4.4.2 will be revised to discuss asphyxiation hazard in the area adjacent to CRE in DCD revision 2.

The last sentence of first paragraph Subsection 6.4.4.2 is as follows:

The designated storage areas of hazardous chemicals as recommended by RG 1.78 are sited at distances greater than 330 feet from the MCR or the fresh air inlets shown in Figures 6.4-5 and 6.4-6. **There is no asphyxiation hazard associated with the MCR atmosphere in areas adjacent to the CRE.**

Impact on COLA

There is no impact on the COLA.

Impact on PRA

There is no impact on the PRA.


MITSUBISHI HEAVY INDUSTRIES, LTD.
16-5, KONAN 2-CHOME, MINATO-KU
TOKYO, JAPAN

June 17, 2009

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

Attention: Mr. Jeffrey A. Ciocco

Docket No. 52-021
MHI Ref: UAP-HF-09316

Subject: MHI's Responses to US-APWR DCD RAI No.338-2325 Revision 1

References: 1) "Request for Additional Information No.338-2325 Revision 1, SRP Section: 06.04 – Control Room Habitability System, Application Section: DCD Tier 2 Section 6.4" dated April 20, 2009.

With this letter, Mitsubishi Heavy Industries, Ltd. ("MHI") transmits to the U.S. Nuclear Regulatory Commission ("NRC") a document entitled "Responses to Request for Additional Information No.338-2325 Revision 1".

Enclosed are the responses to 5 RAIs contained within Reference 1.

Please contact Dr. C. Keith Paulson, Senior Technical Manager, Mitsubishi Nuclear Energy Systems, Inc. if the NRC has questions concerning any aspect of the submittals. His contact information is below.

Sincerely,



Yoshiki Ogata,
General Manager- APWR Promoting Department
Mitsubishi Heavy Industries, LTD.

Enclosure:

1. Responses to Request for Additional Information No. 338-2325, Revision 1

CC: J. A. Ciocco
C. K. Paulson

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DOSI
NRC

RESPONSE TO REQUEST FOR ADDITIONAL INFORMATION

06/17/2009

**US-APWR Design Certification
Mitsubishi Heavy Industries
Docket No. 52-021**

RAI NO.: NO.338-2325 REVISION 1
SRP SECTION: 06.04 – Control Room Habitability System
APPLICATION SECTION: DCD Tier 2 Section 6.4
DATE OF RAI ISSUE: 04/20/2009

QUESTION NO. : 06.04-6

The staff finds the applicant's response for RAI #49/Question No. 06.04-19 as credible but the overall response as incomplete.

The staff notes that a review of the entire DCD Rev. 1 document found the use of the word "refrigerant" in only three locations. DCD revision page 9.2-28 and 9.2-30 address the ability of the chiller refrigerant compressor and the chilled water pump casings to withstand the penetration by internally generated missiles. In Table 1.9.4-3 on Page 1.9-421 there was a concern discussed about the vane openness control to adjust flow rate of the refrigerant gas which became fully closed when an automatic stop test was performed. As the staff noted in the original Question No. 06-04-19, chillers that use the new HCFC and HFC refrigerants are of particular concern. The new refrigerants can be more toxic and have some safety behavioral concerns that the old CFC refrigerants did not have. In the event of a large release of the new refrigerants as a result of operator error or chiller refrigerant pressure boundary leak incident, the danger to personnel due to potential asphyxiation from air displaced by the refrigerant, refrigerant toxicity, and potential chemical reactions can be devastating (e.g., HCFC and HFC refrigerants breakdown when exposed to heat and can create hydrofluoric and hydrochloric acid fumes when combined with water, burning the refrigerant in and open flame or arc can create deadly gas comparable to phosgene, etc.). The design of chiller equipment and their rooms require the capability to rapidly vent gas and fumes out of the room/plant and away from potential pathways to the CRE and CRE air intakes, preclude operator errors, prevent external damage to the chiller refrigerant boundary, provide refrigerant leak detectors and alarms, and address other areas of concern due to the use of new refrigerants during the analysis and design procedures.

The US APWR DCD needs to recognize and establish concern in the text especially for the non-essential and essential chillers and potential pathways for refrigerant release and the consequences for those release events. There are potential pathways for refrigerants from the adjacent buildings that house the non-essential and essential chillers through door openings stairwells, elevator shaft, etc. between the Power Source and Auxiliary buildings and from other pathways within the reactor building that lead directly to the MCR. The applicant needs to examine for other potential onsite pathways to the MCR and other safety-related facilities at the plant site. An example of a potential pathway to the MCR for a massive refrigerant release from one or more of the non-essential chillers at the 50'-2" level of the Auxiliary Building is as follows: The newer refrigerants are heavier than air, so the release could go along the floor from one or more of the 4 non-essential chiller(s) through the adjacent doorway and into the 50'-2" level of the Reactor Building and down the elevator shaft (Figure 1.2-8) or down the adjacent stairwell into the 25'-2" level and into the doorway to the Reactor Building and then down the corridor to the MCR entrance doorways (Figure 1.2-6).

The MCR is less likely to be exposed to refrigerants from the essential chillers because they are located much lower in the bottom of the Power Source Building basement (-26'-4" elevation). However, the location of the essential chillers makes them more vulnerable to both internal and external flooding (Refer to Question No. 06.04-8 discussed earlier). This is another issue that should be addressed in the chilled water systems section of the DCD, although it is of concern to the Habitability System and Control Room as well. There are numerous ways to handle this release by means of design at the chillers and chiller locations, so it would become a non-issue.

Based on concern about the impact of refrigerant releases to the MCR and other safety-related facilities, the staff requests that the applicant conduct further review and analysis to address all the issues captured above. Also, the staff recommends that a COL item be established to assure that the detail designer and constructor of the plant will factor refrigerant releases into the detail design, operation and maintenance of the plant to protect the MCR and other safety-related facilities.

ANSWER:

The Equipment Room, in the Auxiliary Building containing the Non-Essential chiller units shall be designed in accordance with ANSI/ASHRAE Standard 15, "Safety Standard for Refrigeration Systems". This standard, specifically section 8.11, requires a dedicated Ventilation Purge system capable of exhausting air from the Equipment rooms. The Ventilation Purge system is used to exhaust any accumulation of refrigerant due to leaks or a line rupture of the system. Fresh air is supplied to replace the air being exhausted. The outside inlet air openings shall be positioned to prevent the reentry of exhausted air. Air supply and exhaust ducts to the equipment room shall serve no other area. Each equipment room shall contain a refrigerant detector and the dedicated Ventilation Purge system.

Doors between the Auxiliary Building and the Reactor Building that lead to the control room shall have weather stripping around them and sweeps at the threshold; these will minimize air passing around the door. This same door arrangement will be at the control room doors.

The chillers are also designed in accordance with ANSI/ASHRAE Standard 15. ANSI/ASHRAE Standard 15 required that the refrigerating system is protected by a pressure-relief device to safely relieve pressure buildup due to fire or other abnormal conditions and are piped to the outside of the building.

MHI will revise the DCD Tier 2 to include the dedicated Ventilation Purge system for the Non-Essential Chiller unit equipment room in case of refrigerant leaks. The DCD will be also revised to reflect that the chillers are designed as discussed above.

Impact on DCD

1. Add the following sentences to DCD Subsection 9.2.7.2-1 and 9.2.7.2-2 at the end of each section.

"The chillers are protected by a pressure-relief device to safely relieve pressure and are piped to outside of the building in accordance with ANSI/ASHRAE Standard 15. And the chiller mechanical equipment rooms meet ANSI/ASHRAE Standard 15, so that are equipped with refrigerant leak detectors and actuate a dedicated ventilation system."

2. Revise last sentence of the first paragraph DCD Subsection 6.4.4.2 as follows:

"The designated storage areas of hazardous chemicals as recommended by RG 1.78 are sited at distances greater than 330 feet from the MCR or the fresh air inlets shown in Figures 6.4-5 and 6.4-6. There is no asphyxiation hazard associated with the MCR atmosphere in areas adjacent to the CRE.

The pressure-relief protection of the chiller refrigerant is described in Chapter 9, Subsection 9.2.7.”

Impact on COLA

There is no impact on the COLA.

Impact on PRA

There is no impact on the PRA.

**Comanche Peak Nuclear Power Plant, Units 3 & 4
COL Application
Part 2, FSAR**

CP COL 2.2(1)

**Table 2.2-214
Toxic Chemicals that do not Meet the Regulatory Guide 1.78
Screening Criteria^(a)**

Hazardous Chemical Location	Chemicals	Quantity	Distance to the Nearest Units 3 and 4 MCR Inlet	IDLH	Calculated Maximum Concentration in Control Room
Roadway FM 56	Chlorine	42,500 lb	1.4 mi	1.0E+01 ppm	5.7 ppm
DeCordova SES	Sodium hydroxide	15,294 lb	3.7 mi ^(b)	10 mg/m ³	Not Analyzed ^(c)
	Sulfuric acid	45,981 lb		15 mg/m ³	1.9E-4 mg/m ³
Wolf Hollow 1, LP	Sodium hydroxide	19,118 lb	3.9 mi	10 mg/m ³	Not Analyzed ^(c)
	Sulfuric acid	57,477 lb		15 mg/m ³	2.0E-4 mg/m ³
Sunoco Pipeline, LP	Hydrogen sulfide	1716 lb	0.33 mi	1.0E+02 ppm	4.17 ppm
CPNPP Units 1 and 2, Waste Management Bldg.	Sulfuric acid	1250 gal (19,159 lb)	733 ft	15 mg/m ³	1.75E-03 mg/m ³
CPNPP Units 1 and 2, Bulk Gas Storage	Liquefied petroleum gas	4000 gal	1400 ft	2.10E+03 ppm	3.63E+01 ppm
	Carbon dioxide	6000 lb		4.0E+04 ppm	1.46E+01 ppm
CPNPP Units 3 and 4, Water Treatment Chemicals	Morpholine	10,000 gal	<300 ft	1.4E+03 ppm	3.49E-01 ppm
	Dimethylamine, 40%	5000 gal	<300 ft	5.00E+02 ppm	1.65E+01 ppm
	Hydrazine	1000 gal	<300 ft	5.0E+01 ppm	9.29E-02 ppm
	Ammonia	1000 gal	<300 ft	3.0E+02 ppm	2.70E+01 ppm
	Sulfuric acid	10,000 gal	<1200 ft	15 mg/m ³	6.19E-03 mg/m ³
<u>CPNPP Units 3 and 4, Chiller Refrigeration</u>	<u>Refrigerant (R-134a used as typical)</u>	<u>< 2570 lbs at a vapor density of 9.369 lbs/m³</u>	<u>104 ft ^(d)</u> <u>123 ft ^(e)</u>	<u>Asphyxiant</u>	<u>(f)</u>

RCOL2_02.0
2.03-1

RCOL2_06.0
4-7

Comanche Peak Nuclear Power Plant, Units 3 & 4
COL Application
Part 2, FSAR

-
- a) These chemicals do not meet the Regulatory Guide 1.78 screening criteria. They are further evaluated for control room habitability in Section 6.4.
 - b) Evaluations were completed using 3.7 miles. Actual distance is 9.35 miles, as shown in **Subsection 2.2.2.2.8**. Therefore, the results of these evaluations are conservative.
 - c) This chemical does not readily disperse; therefore, it was not analyzed.
 - d) Straight line from the closest essential chiller unit to the control room door entrance.
 - e) Straight line from the closest non-essential chiller unit to the control room door entrance.
 - f) Resulting oxygen concentration for entire refrigerant quantity added to control room is greater than the OSHA 29 CFR1915.12(a)(2) confined space lower limit of 19.5%.

RCOL2_06.0
4-7

Attachment 2

Response to Request for Additional Information No. 4209 (CP RAI #129)

RESPONSE TO REQUEST FOR ADDITIONAL INFORMATION

Comanche Peak, Units 3 and 4
Luminant Generation Company LLC
Docket Nos. 52-034 and 52-035

RAI NO.: 4209 (CP RAI #129)

**SRP SECTION: 14.02.01 - Generic Guidelines for Extended Power Uprate Testing Programs
08/2006**

QUESTIONS for Health Physics Branch (CHPB)

DATE OF RAI ISSUE: 1/17/2010

QUESTION NO.: 14.02.01-1

In RAI No. 3593 (CP RAI # 86), Question 14.02-14, the NRC staff asked the applicant to change the combined license (COL) final safety analysis report (FSAR) to reflect the use of consensus standards as part of the bases for determining the method of calibrating portable radiation protection (RP) instrumentation, and the RP laboratory instrumentation. Regulatory Guide 1.206, Section C.I.12.5.2.1 "Equipment and Instrumentation" notes that the Applicant is to describe the calibration methods for portable and laboratory technical equipment and instrumentation.

NRC Information Notice No. 93-30: "NRC Requirements for Evaluation of Wipe Test Results; Calibration of Count Rate Survey Instruments" notes that the licensee must demonstrate that the instrument is calibrated to make measurements and sufficiently sensitive to meet the applicable regulatory requirements in 10 CFR Parts 20. Calibration information can be found in the instrument manufacturer's guidance, however, the licensee, not the instrument manufacturer, is responsible for demonstrating that the instrument and method used are sensitive enough to meet NRC regulatory requirements.

In response to the NRC staff's RAI # 86, the applicant noted that the radiation protection program described in COLA FSAR Section 12.5 references NEI 07-03A, which in turn references the appropriate consensus standards. It is not clear which consensus standards the Applicant will utilize to define the calibration methods for the following types of RP instrumentation and standards:

- Portable radiation survey instruments
- Laboratory Proportional detectors
- Laboratory scintillation detectors
- High Resolution Gamma spectroscopy systems
- Whole Body counting systems
- Portal radiation monitors
- Portable Continuous Air Monitoring
- Personnel Contamination Monitors
- Personnel Electronic dosimeters
- Portable RP Instrument calibration facility sources and standards

Therefore, the applicant is requested to update and revise COL FSAR Section 14.2.12.1.112 to reflect that the applicant will use of consensus standards, in addition to vendor recommendations, as part of the guidance for determining the method of calibration of portable and laboratory radiation protection instrumentation, or describe an alternate approach and the associated justification.

ANSWER:

NEI 07-03A Revision 0, Section 12.5, Paragraph 1.c (page 1) is incorporated by reference in FSAR Section 12.5 and states the following:

1. Prior to initial receipt of by-product, source, or special nuclear materials (excluding Exempt Quantities as described in 10 CFR 30.18), and thereafter, when such radioactive materials are possessed under this license, the following radiation protection program elements will be in place...
- c. Instrumentation and Equipment – Adequate types and quantities of instrumentation and equipment will be selected, maintained, and used to provide for the appropriate detection capabilities, ranges, sensitivities, and accuracies to conduct radiation surveys and monitoring (in accordance with 10 CFR 20.1501 and 20.1502) for the types and levels of radiation anticipated for the non-exempt sources possessed under this license.

Standard commercial grade equipment will be applied to the site-specific personnel monitors and radiation survey instruments, as well as laboratory equipment used to measure radiation levels and radioactivity concentrations. This equipment is routinely maintained and replaced during the life of the plant as part of the radiation protection program. The preoperational test abstract for this equipment was provided in FSAR Subsection 14.2.12.1.112, based on the examples provided in RG 1.68 Appendix A.1.k(2) and k(3). Luminant considers that the performance testing of this radiation protection instrumentation during calibration is not required to be part of the preoperational test program because it is controlled by the radiation protection program and implemented prior to initial receipt of non-exempt quantities of radioactive material. The justification not to include such testing in the preoperational test program is that testing the equipment does not directly conform to the selection criteria of RG 1.68 or the test objectives described in FSAR Subsection 14.2.1. DCD Table 14A-1 (Sheet 11 of 21) was revised in DCD Revision 2 (attached) to clarify that this testing is performed as part of the radiation protection program, not the preoperational test program. FSAR Subsection 14.2.12.1.112 has been deleted and FSAR Table 14A-201 has been revised for consistency, to reflect testing the personnel monitors, survey instruments and laboratory equipment is part of the radiation protection program. This approach is consistent with other applicant's response to RAIs related to similar equipment [e.g., Dominion's response to North Anna 3 RAI No. 17 Question 14.02-5 dated August 28, 2008 (ML082450015)].

Revision 0 of NEI 07-03A includes the commitment that the radiation protection program will ensure compliance with the provisions of 10 CFR Parts 19, 20, 50, and 71 and will be consistent with the guidance in RG 8.4, 8.6, 8.28 and with the consolidated guidance in NUREG-1736, which includes 3.20.1501(b), Instrument Calibration. This template implicitly includes consensus standards as they are endorsed in the regulatory guidance documents to which NEI 07-03A is committed. NEI 07-03A is incorporated by reference in FSAR Section 12.5 and implementation of the radiation protection program is a license condition as identified in FSAR Table 13.4-201 (sheet 3 of 6).

Luminant prepared new FSAR Table 12.5-202 in order to more clearly and completely identify the consensus standards utilized to define the calibration methods for each item listed in this question.

Luminant will use the consensus standards listed in this new table in addition to vendor recommendations as part of the guidance for determining the method of calibration of the listed instrumentation.

Impact on R-COLA

See attached marked-up FSAR Revision 1 pages 1.9-16, 12.5-1, 12.5-5, 14.2-5, and 14A-2.

Impact on S-COLA

None.

Impact on DCD

None.

Attachment

DCD Revision 2 page 14A-11

**Table 14A-1
Conformance Matrix of RG 1.68 Appendix A Guidance Versus Typical Test
Abstracts (Sheet 11 of 21)**

RG 1.68 Appendix A	Section Number	Typical Test
1.j.(24)	14.2.12.1.18	Reactor Trip System and ESF System Logic Preoperational Test
1.j.(25)	14.2.12.1.18	Reactor Trip System and ESF System Logic Preoperational Test Factory test and software life cycle program assure the function of the system and the quality of the software. The installation of the controlled software is to be checked in construction tests as specified in B. prerequisites so that this test is not performed as a preoperational test.
1.k.(1)	14.2.12.1.78	Process and Effluent Radiological Monitoring System, Area Radiation Monitoring System and Airborne Radioactivity Monitoring System Preoperational Test
1.k.(2)	-	Not applicable The test program will be developed under the operational radiation protection program specified in Section 12.5 by the COL licensee.
1.k.(3)	-	Not applicable The test program will be developed under the operational radiation protection program specified in Section 12.5 by the COL licensee.
1.k.(4)	14.2.12.1.79	High-Efficiency Particulate Air Filters and Charcoal Absorbers Preoperational Test
1.l.(1)	14.2.12.1.80	Liquid Waste Management System Preoperational Test
1.l.(2)	14.2.12.1.81	Gaseous Waste Management System Preoperational Test
1.l.(3)	14.2.12.1.82	Solid Waste Management System Preoperational Test
1.l.(4)	14.2.12.1.83	Steam Generator Blowdown System Preoperational Test
1.l.(5)	14.2.12.1.32	Main Condenser Evacuation System Preoperational Test

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CP COL 1.9(1)

Table 1.9-202

Comanche Peak Nuclear Power Plant Units 3 & 4 Conformance with Division 4 Regulatory Guides

RG Number	RG Title	Revision/Date	COLA/FSAR Status	Corresponding Chapter/Section	
4.7	General Site Suitability Criteria for Nuclear Power Stations	Revision 2 April 1998	Conformance	2.1 2.4.12 2.4.13 2.5.5	
4.15	Quality Assurance for Radiological Monitoring Programs (Inception through Normal Operations to License Termination) – Effluent Streams and the Environment	Revision 2 July 2007	Conformance with exceptions (QA requirements meet existing active radiological monitoring program for CPNPP Units 1 and 2.)	11.5 <u>12.5</u>	RCOL2_14.0 2.01-1
<u>4.21</u>	<u>Minimization of Contamination and Radioactive Waste Generation: Life-Cycle Planning</u>	<u>June 2008</u>	<u>Conformance</u>	<u>9.3.4.2.6.26</u> <u>11.2.3.1</u> <u>11.2.3.4</u> <u>11.4.1.4</u> <u>12.1.3</u> <u>12.3.1.1.1.2</u>	

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12.5 OPERATIONAL RADIATION PROTECTION PROGRAM

This section of the referenced DCD is incorporated by reference with the following departures and/or supplements.

CP COL 12.1(5) Replace the contents in **DCD Section 12.5** with the following.

NEI 07-03A, Generic FSAR Template Guidance for Radiation Protection Program Description, Revision 0, is incorporated by reference. Site specific information in radiation protection program will be implemented in accordance with the milestones listed in **Table 13.4-201**, by utilizing of NEI 07-03A, and NEI 07-08, Generic FSAR Template Guidance for Ensuring that Occupational Radiation Exposures are as Low as is Reasonably Achievable (ALARA), Revision 3, ~~in combination with existing or modified CPNPP Units 1 and 2 site program information.~~

RCOL2_12.0
5-3

Revise the contents of NEI 07-03A, with the following.

Add the following information after the first paragraph in Subsection 12.5.3.2 of NEI 07-03A.

RCOL2_12.0
3-12.04-3

The selection and calibration of this instrumentation and equipment is based on relevant industry standards such as ANSI N42.17A-1989, as it relates to the accuracy and overall performance of portable survey instrumentation, and ANSI N323A-1997, as it relates to the calibration and maintenance of portable radiation survey instruments. Table 12.5-202 provides a list of personnel monitors, radiation survey instruments and laboratory equipment, with reference to consensus standards containing guidance for their calibration. Luminant will use the listed consensus standards in addition to vendor recommendations as part of the guidance for determining the method of calibration of the listed instrumentation.

RCOL2_14.0
2.01-1

CP COL 12.2(2) Add the following information after the second paragraph in Subsection 12.5.3.3
CP COL 12.3(1) of NEI 07-03A.
CP COL 12.3(5)

In case the National Institute for Occupational Safety and Health/Mine Safety and Health Administration certified equipments are not used, equipments are used to be compliance with 10 CFR 20.1703(b) and 20.1705.

Add the following information prior to the last paragraph in Subsection 12.5.4.1 of NEI 07-03A.

RCOL2_12.0
5-4

Calibration of portable and non-portable radiation protection equipment is normally performed onsite by station personnel, although, calibration by a

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Table 12.5-202
Calibration Guidance for Personnel Monitors, Radiation
Survey Instruments and Laboratory Equipment

RCOL2_14.0
2.01-1

<u>Instrumentation Type</u>	<u>Consensus Standard</u>
<u>Portable radiation survey instruments</u>	<u>ANSI N323A</u> <u>ANSI N323B for Near Background</u>
<u>Laboratory proportional detectors</u>	<u>Regulatory Guide 4.15 and applicable sections of</u> <u>NUREG-1576</u>
<u>Laboratory scintillation detectors</u>	<u>Regulatory Guide 4.15 and applicable sections of</u> <u>NUREG-1576</u>
<u>High resolution gamma spectroscopy</u> <u>systems</u>	<u>Regulatory Guide 4.15 and applicable sections of</u> <u>NUREG-1576</u>
<u>Whole body counting systems (stationary)</u>	<u>ANSI N323D</u>
<u>Portal radiation monitors (stationary)</u>	<u>ANSI N323D</u>
<u>Portable continuous air monitoring</u>	<u>ANSI N323C</u>
<u>Personnel contamination monitors</u>	<u>ANSI N323B</u>
<u>Personnel electronic dosimeter</u>	<u>ANSI N323B</u>
<u>Portable RP instrument calibration facility</u> <u>sources and standards</u>	<u>Regulatory Guide 4.15 and applicable sections of</u> <u>NUREG-1576</u>

Note: ANSI N323 provides basic calibration guidance for radiation detection instrumentation.

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~~STD COL 14.2(10)~~ **14.2.12.1.112 Personnel Monitors and Radiation Survey Instruments Preoperational Test** Not used.

RCOL2_14.0
2.01-1

~~A. Objective~~

- ~~1. To demonstrate the operation, indication, and alarm functions of radiological personnel monitors and radiation survey instruments.~~

RCOL2_14.0
2-12

~~B. Prerequisites~~

- ~~1. Required construction testing is completed.~~
- ~~2. Test instrumentation is available and calibrated.~~
- ~~3. Required support systems are available.~~
- ~~4. Indicators, power supplies, and sensors have been calibrated as required in accordance with vendor instructions.~~

RCOL2_14.0
2-9

RCOL2_14.0
2-13

RCOL2_14.0
2-14

~~C. Test Method~~

- ~~1. Performance of each monitor and survey unit is observed and recorded during individual component tests for each unit during calibration using standard radiation sources, including verification of all alarms, annunciators, and indicators, operation of bypass, interlock, permissive, self test and loss of power functions, as applicable.~~

~~D. Acceptance Criterion~~

- ~~1. Component and, where applicable, integrated testing demonstrates that each monitor or survey unit operates as specified by vendor technical information and plant procedures, including the following, as applicable:
 - ~~i. Alarms, annunciators, and indicators.~~
 - ~~ii. Bypass, interlock, permissive, self test, and loss of power functions.~~~~

RCOL2_14.0
2-9

RCOL2_14.0
2-13

RCOL2_14.0
2-14

CP COL 14.2(10) **14.2.12.1.113 Ultimate Heat Sink (UHS) System Preoperational Test**

A. Objectives

1. To demonstrate operation of the UHS cooling towers and associated fans, essential service water (ESW) pumps, and UHS transfer pumps.

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Table 14A-201

**Conformance Matrix of RG 1.68 Appendix A Guidance versus
Added Test Abstracts in the FSAR**

	RG 1.68 Appendix A	Section Number	Typical Test
CP COL(10)	1.h.(7)	14.2.12.1.114	UHS ESW Pump House Ventilation System Preoperational Test
CP COL(10)	1.h.(10)	14.2.12.1.113	Ultimate Heat Sink (UHS) Preoperational Test
STD COL(10)	1.k.(2), <u>1.k(3)</u>	<u>Not applicable.</u> 14.2.12.1.112	Personnel Monitors and Radiation Survey Instruments - <u>tested as part of the Radiation Protection Program described in Section 12.5</u>
CP COL(10)	1.n.(14) (a)	14.2.12.1.114	UHS ESW Pump House Ventilation System Preoperational Test

RCOL2_14.0
2.01-1

U. S. Nuclear Regulatory Commission
CP-201000243
TXNB-10010
2/22/2010

Attachment 3

Response to Request for Additional Information No. 4243 (CP RAI #130)

RESPONSE TO REQUEST FOR ADDITIONAL INFORMATION

**Comanche Peak Units 3 and 4
Luminant Generation Company LLC
Docket No. 52-034 and 52-035**

RAI NO.: 4243 (CP RAI #130)

SRP SECTION: NONE – No SRP Section

QUESTIONS for Integrated Security Coordination and Policy Branch (NSIR/DSP/ISCPB)

DATE OF RAI ISSUE: 1/17/2010

QUESTION NO.: NONE-1

Under 10 CFR 52.79(a)(44), the Applicant's FSAR must contain a description of the fitness for duty (FFD) program required by 10 CFR Part 26 and its implementation. How does the Applicant intend to update its FFD program for the construction phase? NEI 06-06 provides examples of the FFD program that is required and, if this guidance is endorsed by the NRC, will provide an acceptable method of complying with the NRC's regulations. If the NRC endorses NEI 06-06, how does the Applicant intend to update its FFD program for the construction phase to comply with NEI 06-06? If future revisions to NEI 06-06 are endorsed by the NRC, how does the Applicant intend to update its FFD program for the construction phase to comply with certain clarifications, additions, and exceptions in these future, endorsed revisions, as necessary?"

ANSWER:

NEI 06-06, Revision 5 (ML091730415) is under review by the NRC. Luminant will use this version to develop the Fitness for Duty Program (FFD) for the construction phase. Luminant will review and revise the existing FFD program (STA-910) as necessary to ensure that it complies with the NRC-endorsed version of NEI 06-06. Any future NRC-endorsed revisions to NEI 06-06 will be reviewed by Luminant and if the revision results in substantive changes to the most recent docketed construction FFD program description, Luminant will amend the application to reflect the changes.

Impact on R-COLA

See attached marked-up FSAR Revision 1 pages 13.7-1 and 13.7-2.

Impact on S-COLA

None.

Impact on DCD

None.

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13.7 FITNESS FOR DUTY

This section of the referenced DCD is incorporated by reference with the following departures and/or supplements.

STD COL 13.7(1) Replace the contents of **DCD Section 13.7** with the following.

The ~~f~~Fitness for ~~d~~Duty (~~FFD~~) ~~p~~Program is implemented and maintained in ~~multiple~~two phases dependent on the activities, duties, or access afforded to certain individuals at the construction site. In general, two different FFD programs will be implemented: ~~the~~ a construction ~~phase~~FFD program and ~~the~~ an operations ~~g~~phaseFFD program. The construction and operation FFD phases programs are ~~illustrated~~implemented as indicated in *Table 13.4-201*.

RCOL2_
NONE-1

The construction ~~phase~~FFD program is consistent with NEI 06-06 (Reference 13.7-201). ~~The operating phase fitness for duty program will comply with in 10-CFR-26-NEI-06-06 applies to persons constructing or directing the construction of safety- and security-related structures systems, or components performed onsite where the new reactor will be installed and operated. Management and oversight personnel, as further described in NEI 06-06, and security personnel prior to the receipt of special nuclear material in the form of fuel assemblies (with certain exceptions) will be subject to the operation FFD program that meets the requirements of 10 CFR Part 26, Subparts A through H, N and O. Following the receipt of special nuclear material onsite in the form of fuel assemblies, security personnel as described in 10 CFR 26.4(a)(5) will meet the requirements of the operations FFD program. The construction FFD program for those subject to Subpart K (as described by NEI 06-06 and 10 CFR Part 26) will be reviewed and revised as necessary should substantial revisions occur to either NEI 06-06 following NRC endorsement or the requirements of 10 CFR Part 26.~~

The operations FFD program is consistent with all subparts of 10 CFR Part 26, except Subpart K. There is no intention to deviate or take exception to the requirements of 10 CFR Part 26.

The following site-specific information is provided:

- 10 CFR Part 26, Subpart F, Licensee Testing Facilities is not applicable because CPNPP does not have a Licensee Testing Facility.
- 10 CFR Part 26, Subpart G, "Laboratories Certified by the Department of Health and Human Services," is not applicable because CPNPP does not have a Laboratory Certified by the Department of Health and Human Services.
- The existing Luminant FFD program (Reference 13.7-202) will be revised to apply to all four units and to address the specific items identified in NEI 06-06, i.e., add definitions and references

**Comanche Peak Nuclear Power Plant, Units 3 & 4
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regarding Construction Site and Construction Workers, Excluded Workers, etc. It is anticipated that all of the processes for collection, review and record keeping will be consistent with the existing program.

RCOL2_
NONE-1

13.7.1 Combined License Information

Replace the content of **DCD Subsection 13.7.1** with the following.

STD COL 13.7(1) **13.7(1)** *Operating and construction plant fitness-for-duty programs*
*This COL item is addressed in **Section 13.7**.*

13.7.2 References

Add the following reference after the last reference in **DCD Subsection 13.7.2**.

13.7-201 Nuclear Energy Institute, (NEI), NEI-06-06, "Fitness for Duty Program Guidance for New Nuclear Power Plant Construction Sites," ~~NEI-06-06,~~ Revision 5, ~~February~~August 2009, (ML091730415).

RCOL2_
NONE-1

RCOL2_
NONE-1

13.7-202 Comanche Peak Nuclear Power Plant Procedure STA-910, "Fitness for Duty Program," Revision II, December 2009.

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CP-201000243
TXNB-10010
2/22/2010

Attachment 4

Response to Request for Additional Information No. 4244 (CP RAI #131)

RESPONSE TO REQUEST FOR ADDITIONAL INFORMATION

**Comanche Peak Units 3 and 4
Luminant Generation Company LLC
Docket No. 52-034 and 52-035**

RAI NO.: 4244 (CP RAI #131)

SRP SECTION: NONE – No SRP Section

QUESTIONS for Integrated Security Coordination and Policy Branch (NSIR/DSP/ISCPB)

DATE OF RAI ISSUE: 1/19/2010

QUESTION NO.: NONE-2

Under 10 CFR 52.79(a)(44), the Applicant's FSAR must contain a description of the fitness for duty (FFD) program required by 10 CFR Part 26 and its implementation. Describe how the COL Application, FSAR, Part 2, Table 13.4-201, item 20, (Sheet 6 of 6), comports with 10 CFR 26, Sections 26.3 and 26.4, and guidance in NRC's letter to the Nuclear Energy Institute dated December 2, 2009, entitled "Status of U.S. Nuclear Regulatory Commission Review and Endorsement of NEI 06-06, 'Fitness for Duty Program Guidance for New Nuclear Power Plant Construction Sites.'" For example, provide site-specific information to clearly and sufficiently describe your FFD program in terms of the scope and level of detail to allow as reasonable an assurance of finding of acceptability. This information may include, but is not limited to any condition in which the Applicant intends to deviate from or take exception to the requirements of 10 CFR Part 26, as further described in NEI 06-06 or as endorsed by the NRC.

ANSWER:

FSAR Table 13.4-201 Item 20 has been revised to provide more description of the Fitness for Duty Program required by 10 CFR 26 using the guidance in the NRC letter to NEI dated December 2, 2009. There is no intention to deviate or take exception to the requirements of 10 CFR 26.

In addition, the operating Comanche Peak Nuclear Power Plant (CPNPP) Units 1 and 2 (Dockets 50-445 and 50-446) have a fully-developed FFD program (STA-910) that meets the requirements of 10 CFR 26 and will be used with NEI 06-06 as approved by the NRC to develop and implement the Units 3 and 4 FFD programs for the construction phase and the operation phase. The policy statement for the Units 1 and 2 FFD program, Nuclear Policy Statement 123 and the implementing procedure STA-910, "Fitness for Duty Program," are attached. Together they represent a typical CPNPP FFD program implementation and will be modified as necessary to incorporate NEI 06-06 as approved by the NRC.

Examples of potential changes could include adding definitions and references for Construction Site and Construction Workers and clarifying excluded workers if necessary. The processes for selection, review and documentation are expected to remain the same as the current operational program.

Impact on R-COLA

See attached marked-up FSAR Revision 1 pages 13.4-8 and 13.4-9

Impact on S-COLA

None.

Impact on DCD

None.

Attachments

1. Nuclear Policy Statement 123, "Fitness for Duty"
2. Station Administrative Procedure STA-910, "Fitness for Duty Program," Rev. 11, December 2009

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Part 2, FSAR**

STD COL 13.4(1)

Table 13.4-201 (Sheet 7 of 8)

Operational Programs Required by NRC Regulation and Program Implementation

Item	Program Title	Program Source (Required By)	FSAR (SRP) Section	Implementation	
				Milestone	Requirement
19.	Initial Test Program	10 CFR 50.34 10 CFR 52.79(a)(28)	14.2	Prior to the first construction test for the Construction Test Program Prior to the first preoperational test for the Preoperational Test Program Prior to Initial fuel loading for the Startup Test Program	License Condition
20.	Fitness for Duty Program	10 CFR Part 26			
	Construction Mgt & Oversight personnel	10 CFR Part 26 A-H, N and O	13.7	Prior to on-site construction of safety or security related SSCs.	License Condition
	Construction Workers & First Line Supv.	10 CFR 26 Subpart K	13.7	Prior to on-site construction of safety or security related SSCs.	License Condition
	Operations Phase Program	10 CFR 26	13.7	Prior to fuel receipt	License Condition
	<u>FFD Program for Construction (workers and first-line supervisors)</u>	<u>10 CFR 26.4(f)</u>	<u>13.7</u>	<u>Prior to onsite construction of safety or security related SSCs</u>	<u>10 CFR 26, Subpart K, or 10 CFR 26, Subparts A-H, N, and O</u>
	<u>FFD Program for Construction (management and oversight personnel)</u>	<u>10 CFR 26.4(e)</u>	<u>13.7</u>	<u>Prior to onsite construction of safety or security related SSCs</u>	<u>10 CFR 26, Subparts A-H, N, and O</u>

RCOL2_
NONE-2

**Comanche Peak Nuclear Power Plant, Units 3 & 4
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STD COL 13.4(1)

Table 13.4-201 (Sheet 8 of 8)

Operational Programs Required by NRC Regulation and Program Implementation

Item	Program Title	Program Source (Required By)	FSAR (SRP) Section	Implementation	
				Milestone	Requirement
	<u>FFD Program for Security Personnel</u>	<u>10 CFR 26.4(e)(1)</u> <u>10 CFR 26.4(a)(5)</u>	<u>13.7</u>	<u>Prior to fuel assemblies being received on site</u> <u>Prior to the earlier of:</u> <u>Licensee's receipt of fuel assemblies onsite or</u> <u>Establishment of a protected area or</u> <u>The 10 CFR 52.103(g) finding</u>	<u>10 CFR 26, Subparts A-H, N, and O</u> <u>10 CFR 26, Subparts A-H, N, and O, with Subpart I</u>
	<u>FFD Program for FFD Program Personnel</u>	<u>10 CFR 26.4(g)</u>	<u>13.7</u>	<u>Prior to initiating 10 CFR 26 construction activities</u>	<u>10 CFR 26, Subparts A, B, D-H, N, O, and possibly C</u>
	<u>FFD Program for persons required to physically report to the TSC or EOF</u>	<u>10 CFR 26.4(c)</u>	<u>13.7</u>	<u>Prior to the conduct of the first full-participating emergency preparedness exercise under 10 CFR 50, App. E, Section F.2.a</u>	<u>10 CFR 26, Subparts A-H, N, and O, except for §§ 26.205-209</u>
	<u>FFD Program for Operation</u>	<u>10 CFR 26.4(a) and (b)</u>	<u>13.7</u>	<u>Prior to the earlier of:</u> <u>Licensee's receipt of fuel assemblies onsite or</u> <u>Establishment of a protected area or</u> <u>The 10 CFR 52.103(g) finding</u>	<u>10 CFR 26, Subparts A-H, N, and O, except for individuals listed in § 26.4(b), who are not subject to §§ 26.205-209</u>

RCOL2_
NONE-2

NUCLEAR POLICY STATEMENT

123

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CHANGES ARE NOT INDICATED

LATEST CHANGE NOTICE EFFECTIVE DATE _____ / _____

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NUCLEAR POLICY STATEMENT

FITNESS FOR DUTY

SCOPE / APPLICATION

The Comanche Peak Nuclear Power Plant (CPNPP) Fitness for Duty Program (FFDP) applies to all personnel who are granted Unescorted Access to the Protected Area, or who physically report to the Emergency Operation Facility (EOF), or who are associated with the administration of the FFDP at CPNPP.

The primary responsibility for the development and implementation of the Fitness for Duty Program lies with the Manager, Nuclear Security. This position is also responsible for maintaining this policy statement current.

PURPOSE

Operation of a nuclear facility creates an obligation to public safety and duty on the part of Luminant Power to provide a safe work environment, and to uphold the public trust and confidence in the company and its personnel. It is the goal of the CPNPP FFDP to maintain a workplace that is free from intoxicants, drugs and narcotics. This program provides reasonable assurance that:

- individuals are trustworthy and reliable as demonstrated by the avoidance of substance abuse;
- individuals are not under the influence of any substance, legal or illegal, or mentally or physically impaired from any cause, which in any way adversely affects their ability to safely and competently perform their duties;
- the effects of fatigue and degraded alertness on individuals' abilities to safely and competently perform their duties are managed commensurate with maintaining public health and safety; and
- the early detection of individuals who are not fit to perform the duties that require them to be subject to the FFD program are identified.

The program shall include the following elements:

- Providing reasonable measures for the early detection of persons who are not fit to perform their duties in a safe and reliable manner.
- Having a goal of achieving a drug free workplace and a workplace free from the effects of such substances.
- Having a goal of preventing employees who might be under the influence of alcohol from performing safety-related activities by prohibiting the consumption of alcohol within an abstinence period of at least 5 hours preceding any scheduled working tour, and during the period of any working tour.

- Establishing an Employee Assistance Program which is available to Luminant Power employees desiring assistance in dealing with drug, alcohol, or other problems that could adversely affect their ability to safely and competently perform their duties.
- Providing reasonable measures to address other factors that could affect fitness for duty, such as mental stress, fatigue and illness.
- Establishing criteria for use of medication properly prescribed by licensed physicians.
- Providing the proper Fitness for Duty training.
- Providing a means to deter and detect substance abuse.

POLICY

EMPLOYEE RESPONSIBILITIES

The company expects all individuals to report for work in condition fit to perform their duties in a safe and reliable manner. Not only on-the-job, but also off-the-job possession or use of illegal drugs or prescription drugs without a valid prescription is against CPNPP policy, as is on or off-duty alcohol use that adversely affects the plant, such as affecting either the employee's ability to perform his/her job, the confidence of the employee's co-workers in the employee or the ability to work with the employee, or the public trust in the ability of the site to carry out its responsibilities. Such conduct will be subject to discipline, up to and including discharge, depending on the nature of the conduct and the facts involved (see SANCTIONS section of this policy for the minimum sanctions to be applied in the event of a FFD Policy violation). Facts to be considered in assessing discipline for such conduct may include (but will not necessarily be limited to) the employee's job and past record, the potential or actual adverse effect of the conduct on the site, and the obligation of employees to uphold the public's trust and confidence.

No alcohol shall be consumed at least 5 hours prior to any scheduled work and for the duration of any work period. Abstinance from alcohol for the 5 hours preceding any scheduled work period is considered to be the minimum that is necessary, but may not be sufficient, to ensure that the individual is fit for duty. Any employee who suspects unusual behavior, or detects the odor of alcohol on the breath of another individual onsite, or observes an employee who appears to be under the influence of drugs or alcohol shall immediately inform his/her supervisor, plant security, or any other member of site management.

Only the person for whom a prescription drug is issued can bring that medication on CPNPP premises. Employees must use prescription drugs only in the manner, combination, and quantity prescribed. An employee taking a prescription or nonprescription (OTC) drug that could affect the employee's job performance must inform his/her supervisor of the medication and dosage being taken in order to enable the supervisor to determine whether the employee can safely and competently perform his/her job while taking the medication. On request, the prescription shall be verified in writing by the issuing physician. Medical information, including that related to prescription and nonprescription drugs will be kept confidential to the fullest extent possible.

It is each employee's responsibility to report unsafe working conditions or hazardous activities that jeopardize their own or their coworker's safety and the safety of the general public.

Therefore, all employees—including managers, supervisors, and escorts—are encouraged to fulfill their responsibility to each other and the general public, and to report the use or possession of illegal drugs, prescription drugs without a valid prescription, or alcohol that is in violation of this policy, as well as any other fitness-for-duty concerns. Any such information reported will be used in an attempt to promote a safe work environment, and if desired, the source of information will be treated confidentially to the fullest extent possible.

All employees are also required to report any arrests or legal actions to their supervisor to determine whether or not it may affect the individual's continued access authorization. Legal action means a formal action taken by a law enforcement authority or court of law, including an arrest, an indictment, the filing of charges, a conviction, or the mandated implementation of a plan for substance abuse treatment in order to avoid a permanent record of an arrest or conviction, in response to any of the following activities:

- The use, sale, or possession of illegal drugs;
- The abuse of legal drugs or alcohol; or
- The refusal to take a drug or alcohol test.

Minor traffic violations are not required to be reported.

PROHIBITED CONDUCT

Except as indicated below, any individual who brings, attempts to bring, has in his or her possession, or is under the influence of intoxicants, drugs, or narcotics on company property, shall be subject to termination of the individual's Unescorted Access and immediate discharge. In addition, the abuse of legally prescribed or over-the-counter drugs on CPNPP property is prohibited. Such conduct shall be subject to termination of the individual's Access Authorization and disciplinary action in accordance with company policy, up to and including immediate discharge.

These rules apply to all company property, except that possession of alcoholic beverages in sealed containers is permitted in designated employee parking areas.

EMPLOYEE TESTING & SEARCHES

In order to enforce this policy, employees may be required to submit to urinalysis, breathalyzer, or other recognized investigatory tests or procedures which would assist in evaluating the employee's physical condition or aid in investigation of a violation of this policy. Any such test or procedure will be administered by qualified personnel in conformance with applicable law and established methods, and subject to confirmation by appropriate laboratory processes.

All employees and their vehicles and belongings, and all Company property, including (but not limited to) offices, lockers, and desks are subject to search.

Refusal on the part of an employee, after being requested to do so, to submit immediately to a search or to be tested, shall subject the employee to discharge. If illegal substances are found on

company premises, Security shall be notified and Security shall in turn notify local law enforcement officials.

DRUG AND ALCOHOL TESTING

In order to enforce these rules, individuals will be required to submit to urinalysis or breath alcohol tests, or submit to other recognized investigatory tests or procedures which would assist in evaluating the employee's physical condition or aid in the investigation of a violation of these rules. Any such test or procedure shall be administered by qualified personnel under established methods and subject to confirmation by appropriate laboratory processes.

The drug and alcohol testing program provides a means to detect and deter substance abuse in the workplace at CPNPP. There are five test categories used at CPNPP:

- Pre-Access testing is conducted within 30 days prior to granting Unescorted Access or assignment to the Emergency Operations Facility (EOF) at CPNPP.
- Random testing will be conducted at various unannounced times of the day, night, weekend, and holidays at an annual rate at least equal to 50 percent of the work force that are authorized Unescorted Access or that are required to report to the EOF. Individuals notified by their supervisor of selection for random testing must report to the FFD collection facility within 1 hour of notification (within 2 hours if the individual's work location is off site).
- For-Cause testing will be conducted as soon as possible following the occurrence of any of the following events:
 - Any observed behavior indicating possible substance abuse or other involvement such as on-site possession or involvement in the sale of illegal drugs.
 - After receiving credible information that an individual is abusing drugs or alcohol.
- Post-Event testing will be conducted as soon as practical after an event involving a human error that was committed by an individual who is subject to this subpart, where the human error may have caused or contributed to the event. Only the individual(s) who committed the error(s) needs to be tested, and individuals who were affected by the event whose actions likely did not cause or contribute to the event need not be tested. The individual(s) who committed the human error(s) shall be tested after accidents involving a failure in individual performance (human error) that results in:
 - a significant personal injury or an illness that is OSHA recordable at the time of the event or reasonably could be classified as an OSHA recordable event.
 - a radiation exposure or release of radioactivity in excess of regulatory limits.
 - actual or potential substantial degradations of the level of safety of the plant, if there is reasonable suspicion that the worker's behavior contributed to the event.
- Follow-up testing will be performed for any individual, if reinstated, after testing positive for drugs or alcohol to verify continued abstention from the use of substances.

FATIGUE

Proper management of fatigue is another important part of being fit for duty. Personnel shall ensure they receive adequate rest when not on duty to ensure that fatigue does not adversely affect their ability to safely and competently perform their duties.

Personnel are responsible for reporting FFD concerns, related to the impact of fatigue on themselves and others. Personnel that find themselves excessively fatigued shall self-declare their fatigue to their supervision. Supervision can provide the individual time off to recover or may perform an assessment of the person's fatigue. Excessive use of self-declaration could be determined to be a personnel performance issue and could lead to discipline, up to and including discharge.

Personnel required to work hours in excess of federal work hour rules, who are determined to be fatigued, who self-declare fatigue, or who are involved in an event that requires a Determination of Fitness evaluation will be subject to a fatigue assessment by plant supervision or FFD program personnel.

EMPLOYEE ASSISTANCE PROGRAM

The company encourages personnel who may be suffering from mental stress, fatigue or illness to seek professional help, if appropriate, before job performance suffers or the level of job safety is reduced. The company also expects these types of conditions to be reported to one's supervisor if job performance or safety could be affected. Luminant Power employees desiring assistance in dealing with a drug, alcohol or other personal problem may participate in the Employee Assistance Program (EAP). Participation in EAP will not jeopardize an employee's continued employment, provided he/she stops any and all abuse of drugs or alcohol. However, enrollment in EAP will not excuse violation of site rules and policies and is not an alternative to discipline. In addition, if the EAP staff determines that your condition constitutes a hazard to yourself, or to others, federal FFD regulations require notification of company management, even if you are a self-referral. If an employee needs assistance in dealing with a drug or alcohol problem, it is the employee's obligation to request and attain such assistance before the condition results in a violation of Fitness for Duty policies and procedures. Contract and vendor employees desiring assistance in dealing with drug, alcohol or other personal problems should also arrange for professional assistance through their employer.

SANCTIONS

Violations of the Fitness for Duty policy will result in suspension of Unescorted Access for a period ranging from 14-days to permanent denial, depending on the specific type of violation (see below examples). Violations of this policy may also be addressed by the individual's management using the company's discipline policy resulting in disciplinary action, up to and including immediate discharge.

The first violation of the FFD policy involving a confirmed positive drug or alcohol test result* shall result in the immediate unfavorable termination of the individual's Access Authorization for a minimum of 14 days.

The following acts require an unfavorable termination of the individual's Access Authorization for a minimum of 5 years:

- Any subsequent confirmed positive drug or alcohol test result*, including during an assessment or treatment period
- When an individual is determined to have been involved in the sale, use, or possession of illegal drugs on or off site, or the consumption of alcohol within a protected area of any nuclear power plant, or while performing duties that require the individual to be subject to 10 CFR Part 26
- When an individual resigns or withdraws his or her application for authorization before authorization is terminated or denied for a first violation of the FFD policy involving a confirmed positive drug or alcohol test result.

The following act(s) shall result in permanent denial of Unescorted Access.

- Any attempt to subvert the drug/alcohol testing process by acts taken to avoid being tested, bring about an inaccurate test result at any stage of the testing process, or providing a substituted or adulterated specimen.

In addition, for any individuals whose authorization was previously denied for 5 years, any subsequent violation of the drug and alcohol provisions of a FFD policy.

Rafael Flores
Senior Vice President &
Chief Nuclear Officer

* FFD policy violations related to the misuse of prescription or over-the-counter drugs will be evaluated by the Medical Review Officer (MRO) to determine if misuse of the prescription or over-the-counter drug represents substance abuse. Any MRO determination of substance abuse will be treated the same as a confirmed positive drug or alcohol test result under the CPNPP FFD Policy.

COMANCHE PEAK NUCLEAR POWER PLANT

STATION ADMINISTRATION MANUAL

FITNESS FOR DUTY PROGRAM

PROCEDURE NO. STA 910

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PLANT MANAGER

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1.0 PURPOSE

The purpose of this procedure is to define the Fitness for Duty Program (FFDP) for Comanche Peak Nuclear Power Plant (CPNPP). The FFDP outlined in this procedure is designed to provide a safe work environment and reasonable assurance that station personnel perform their tasks in a reliable and trustworthy manner and are not under the influence of any substance, legal or illegal, or mentally or physically impaired from any cause, which in any way adversely affects their ability to safely and competently perform their duties. This FFDP complies with the Nuclear Regulatory Commission’s (NRC) Fitness for Duty Program as outlined in 10 CFR 26.

The forms listed below do not require SORC review when being modified and issued per STA-202:

- STA-910-01 EAP Referral Form
- STA-910-03 Determination of Fitness Form

2.0 APPLICABILITY

The following individuals are subject to the CPNPP access authorization program and must be screened in accordance with applicable sections of this document.

- Any individual to whom CPNPP intends to grant UA to our protected or vital areas or any individual for whom we intend to authorize UAA.
- Any individual whose duties and responsibilities permit the individual to take actions by electronic means, either on site or remotely, that could adversely impact CPNPP’s operational safety, security, or emergency response capabilities.
- Any individual who has responsibilities for implementing CPNPP’s protective strategy, including but not limited to, armed security force officer, alarm station operators, and tactical response team leaders.
- CPNPP’s access program’s reviewing official.
- All persons who are required by CPNPP to physically report to the Technical Support Center or Emergency Operations Facility as specified within CPNPP’s emergency plans and procedures.
- Background investigation screener personnel responsible to control, collect and process information that will be used by the CPNPP reviewing official to make access determinations.
- CPNPP personnel who evaluate information for the purpose of processing individuals for UAA/UA who has unfettered access to the file and records of person applying for or holding UAA/UA or who is responsible for data management upon which UAA/UA decisions may be based.
- CPNPP FFD program personnel;
 - Who are involved in the day-to-day operation of the program;
 - Who can link test results with the individual who was tested before an FFD policy violation determination is made, including, but not limited to the MRO;
 - Who make determinations of fitness;
 - Who make authorization decisions;
 - Who are involved in selecting or notifying individuals for testing; and
 - Who are involved in the collection or on-site testing of specimens.
- At CPNPP’s discretion, other individuals, including employees of a contractors or a vendors who are designated in the access authorization program procedures are subject to an access authorization program.

This procedure does not apply to individuals covered by another FFD program, or portions thereof, which has been accepted by CPNPP, including Nuclear Regulatory Commission (NRC) employees, law enforcement personnel, State and local representatives or off-site emergency fire and medical response personnel while responding to an emergency on site. Contractor and vendor personnel, excluding non-contracted visitors, who are assigned to work at CPNPP, yet do not require UA, are subject to for-cause, including post-event drug/alcohol testing in accordance with the provisions of this procedure.

3.0 REFERENCES

3.1 Developmental References:

- 3.1.1 10 CFR 26, "Fitness for Duty Programs"
- 3.1.2 10 CFR 73.56, "Personnel Access Authorization Requirements for Nuclear Power Plants"
- 3.1.3 USNRC Order for Interim Safeguards and Security Compensatory Measures, dated February 25, 2002 [Safeguards Information]
- 3.1.4 USNRC Order for Compensatory Measures Related to Access Authorization, dated January 7, 2003 [Safeguards Information]
- 3.1.5 USNRC Order EA-03-086, Design Basis Threat for Radiological Sabotage for Operating Power Reactors, dated April 29, 2003 [Safeguards Information]
- 3.1.6 NRC Administrative Letter 94-09, "Changes to the Mandatory Guidelines for Federal Workplace Drug Testing Programs"
- 3.1.7 NRC Administrative Letter No. 97-01, "state Initiative to Legalize Schedule 1 Drugs" dated January 17, 1997
- 3.1.8 USNRC Regulatory Issues Summary 2005-28, "Scope of For-Cause Fitness-For-Duty Testing Required By 10CFR26.24(a)(3)" dated November 22, 2005
- 3.1.9 NUREG-1304, "Reporting of Safeguards Events"
- 3.1.10 Nuclear Energy Institute, NEI 03-01, "Nuclear Power Plant Access Authorization Program"
- 3.1.11 NEI 03-04, "PADS Guideline for General Access Training"

3.2 Performance References:

- 3.2.1 Nuclear Policy Statement 123, "Fitness for Duty"
- 3.2.2 Nuclear Policy Statement 120, "Security"
- 3.2.3 CPNPP Security Plan
- 3.2.4 STA-501, "Nonroutine Reporting"
- 3.2.5 STA-502, "Routine Reporting"
- 3.2.6 STA-902, "Access to CPNPP Site Areas"
- 3.2.7 STA-911, "Behavior Observation Program"
- 3.2.8 STA-615, "Fatigue Management and Staff Work Hours"
- 3.2.9 SEC-120, "CPNPP Access Authorization Program"
- 3.2.10 SEC-124, "Collection Facility"

4.0 DEFINITIONS/ACRONYMS

Acronyms

Term	Meaning
AA	Access Authorization
ASD	Alcohol Screening Device
BAC	Blood Alcohol Concentration
BOP	Behavior Observation Program
CPNPP	Comanche Peak Nuclear Power Plant
C/V	Contractor / Vendor
EAP	Employee Assistance Program
EBT	Evidential Breath Tester
EOF	Emergency Operations Facility
FFD	Fitness for Duty
HHS	Department of Health and Human Services
LOD	Limit of Detection
LOQ	Limit of Quantification
MRO	Medical Review Officer
NRC	Nuclear Regulatory Commission
PDI	Potentially Disqualifying Information
SAE	Substance Abuse Expert
UA	Unescorted Access
UAA	Unescorted Access Authorization

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Definitions

- 4.1 Access Authorization
Group within the CPNPP Security Department tasked to determine that an individual has met the requirements to be granted or maintain the types of access or perform the duties specified in 10 CFR 26.4(a) through (e), and 10 CFR 26.4(g).
- 4.2 Access-denied
A clearance condition where an individual is not considered trustworthy and reliable based upon the reviewing official's evaluation of potentially disqualifying information.
- 4.3 Adulterated specimen
A urine specimen that has been altered, as evidenced by test results showing either a substance that is not a normal constituent of urine or showing an abnormal concentration of an endogenous substance.
- 4.4 Aliquot
A portion of a specimen that is used for testing. It is taken as a sample representing the whole specimen
- 4.5 Annual
Requirements specified as "annual" should be scheduled at a nominal 12-month periodicity. Performance may be conducted up to three months before to three months after the scheduled date. The next scheduled date is 12-months from the originally scheduled date.
- 4.6 Administrative Withdrawal
A process to temporarily withhold UAA/UA from an individual while action is taken to complete or update an element of the UAA requirements.
- 4.7 Background Investigation (BI)
Information from all BI elements to be collectively evaluated by the reviewing official pursuant to a determination of trustworthiness and reliability of an individual. Depending upon the BI period, the BI elements may include any or all of the following: verification of true identity, employment verification with suitable inquiry (includes education in lieu of employment and military service as employment), a credit check, and character and reputation determination.
- 4.8 Behavior Observation Program
An awareness program meeting the requirements of both the CPNPP Access Authorization and Fitness for Duty programs. Personnel are trained to report legal actions; to possess certain knowledge and abilities (K&A's) related to drugs and alcohol and the recognition of behaviors adverse to the safe operation and security of the facility by observing the behavior of others in the workplace and detecting and reporting aberrant behavior or changes in behavior that might adversely impact an individual's trustworthiness or reliability.

4.9 Best Effort

Documented actions that a licensee or other entity who is subject to this part takes to obtain suitable inquiry and employment information in order to determine whether an individual may be granted authorization, when the primary source of information refused or indicates an inability or unwillingness to provide the information within 3 business days of the request and the licensee or other entity relies on a secondary source to meet the requirement.

4.10 Business Day

Normally, Monday through Friday, except federal holidays, however, may include Saturdays and/or Sundays for purposes of sharing data when UAA/UA decisions are made on a Saturday or Sunday and for making notifications whenever day of discovery requirements are initiated on a Saturday or Sunday.

4.11 Blind Sample

A controlled sample that is submitted to the contracted HHS-certified lab for evaluation.

4.12 Blood Alcohol Concentration

The mass of alcohol in a volume of blood

4.13 Chain of custody

Procedures to account for the integrity of each specimen or aliquot by tracking its handling and storage from the point of specimen collection to final disposition of the specimen and its aliquots. "Chain of custody" and "custody and control" are synonymous and may be used interchangeably

4.14 Collection site

A designated place where individuals present themselves for the purpose of providing a specimen of their urine, oral fluids, and/or breath to be analyzed for the presence of drugs or alcohol

4.15 Collector

A person who is trained in the collection procedures and instructs and assists a specimen donor at a collection site, and receives and makes an initial examination of the specimen(s) provided by the donor

4.16 Comanche Peak Access Program (CPAP)

The data base used by the Security Department to track CPNPP unescorted access authorization status and manage the Fitness for Duty program.

4.17 Company

Luminant Generation Company LLC (aka Luminant Power)

4.18 Confirmatory drug or alcohol test

A second analytical procedure to identify the presence of alcohol or a specific drug or drug metabolite in a specimen. The purpose of a confirmatory test is to ensure the reliability and accuracy of an initial test result

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4.19 Confirmatory validity test

A second test performed on a different aliquot of the original urine specimen to further support a validity test result

4.20 Confirmed Test Result

A test result that demonstrates an individual has used drugs and/or alcohol in violation of requirements or has attempted to subvert the testing process by submitting an adulterated or substituted urine specimen. For drugs, adulterants, and substituted specimens, a confirmed test result is determined by the Medical Review Officer (MRO), after discussion with the donor subsequent to the MRO's receipt of a positive confirmatory drug test result from the HHS-certified laboratory and/or a confirmatory substituted or adulterated validity test result from the HHS-certified laboratory for that donor. For alcohol, a confirmed test result is based on a positive confirmatory alcohol test result from an evidential breath testing device (EBT) without MRO review of the test result

4.21 Contractor/Vendor (C/V)

Any company, or any individual not employed by CPNPP, who is providing work or services at a nuclear power plant, either by contract purchase order, oral agreement, or other arrangement.

4.22 Critical Group

Individuals who have extensive knowledge of defensive strategies and design and/or implementation of the plant's defense strategies. The positions include: Site security supervisors, Site security managers, Security training instructors, Corporate security managers.

Individuals in a position to grant an applicant unescorted access or unescorted access authorization, including site access authorization managers.

Individuals assigned a duty to search for contraband or other items that could be used to commit radiological sabotage (i.e., weapons, explosives, incendiary devices).

Individuals who have access, extensive knowledge, or administrative control over plant digital computer and communication systems and networks as identified in 10 CRR 73.54, plant network system administrators and IT personnel who are responsible for securing plant networks.

Individuals qualified for and assigned duties as: armed security officers, armed responders, alarm station operators, response team leaders, and armorers as defined in the licensee's Physical Security Plan; and reactor operators, senior reactor operators and non-licensed operators. Non-licensed operators include those individuals responsible for the operation of plant systems and components, as directed by a reactor operator or senior reactor operator. A non-licensed operator also includes individuals who monitor plant instrumentation and equipment and principally perform their duties outside of the control room.

4.23 Cutoff level

The concentration or decision criteria established for designating and reporting a test result as positive, of questionable validity or adulterated, substituted, dilute, or invalid (referring to initial or confirmatory test results from an HHS-certified laboratory)

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- 4.24 Determination of Fitness
A process of evaluating an individual when there are indications that the individual may be in violation of the Licensee or C/V's FFD policy or is otherwise unable to safely and competently perform his or her duties.
- 4.25 Dilute specimen
A urine specimen with creatinine and specific gravity concentrations that is lower than expected for human urine.
- 4.26 Donor
The individual from whom a specimen is collected.
- 4.27 Employment Action
A change in job responsibilities or removal from a job, or the employer-mandated implementation of a plan for substance abuse treatment in order to avoid a change in or removal from a job, or military non judicial punishment because of the individual's use of drugs or alcohol.
- 4.28 Employment/Unemployment History Verification
A verification of specified periods of employment, military service as employment, education in lieu of employment and unemployment on a best effort basis from information provided or claimed by the individual on their personal history questionnaire.
- 4.29 Evidential Breath Testing (EBT) Device
A device approved by the National Highway Traffic Safety Administration (NHTSA) for the evidential testing of breath for BAC as listed in the Conforming Products List of Evidential Breath Measurement Devices.
- 4.30 Fatigue
The degradation in an individual's cognitive and motor functioning resulting from inadequate rest.
- 4.31 Fitness for Duty Program Personnel
Individuals who are involved in the day-to-day operations of the FFDP and whose duties require them to have the following types of access or perform the following activities:
- All persons who can link test results with the individual who was tested before an FFD policy violation determination is made, including, but not limited to the MRO;
 - All persons who make determinations of fitness;
 - All persons who make authorization decisions;
 - All persons involved in selecting or notifying individuals for testing;
 - All persons involved in the collection or onsite testing of specimens.
- 4.32 Formal Action
The initiation of any UAA/UA element by a licensee at the licensee facility.
- 4.33 HHS-certified laboratory
A laboratory that is certified to perform urine drug testing under the Department of Health and Human Services Mandatory Guidelines for Federal Workplace Drug Testing Programs

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- 4.34 Illegal drug
Any drug that is included in Schedules I to V of section 202 of the Controlled Substances Act [21 U.S.C. 812], but not when used pursuant to a valid prescription or when used as otherwise authorized by law
- 4.35 Initial drug test
A test to differentiate “negative” specimens from those that require confirmatory drug testing
- 4.36 Initial Unescorted Access Authorization
An access category used to identify persons in the process of obtaining UA at a nuclear power plant for the first time, or after a lapsed clearance beyond the established 3-year cutoff, or after last UAA/UA was denied or terminated unfavorably.
- 4.37 Initial validity test
A first test used to determine whether a specimen is adulterated, dilute, substituted, or invalid, and may require confirmatory validity testing.
- 4.38 Insider
A person who has been granted UAA/UA under the requirements of 10 CFR 73.56 or has the ability to access information systems that: (1) connect to systems that connect to plant operating systems or (2) contain sensitive information that could benefit an insider.
- 4.39 Invalid result
The result reported by an HHS-certified laboratory for a specimen that contains an unidentified adulterant, contains an unidentified interfering substance, has an abnormal physical characteristic, contains inconsistent physiological constituents, or has an endogenous substance at an abnormal concentration that prevents the laboratory from completing testing or obtaining a valid drug test result.
- 4.40 Knowledgeable and Practiced (K&P)
An individual audit team member who has current or previous access authorization program experience and who is responsible for validating that overall program performance is meeting the objective of screening individuals to provide high assurance that individuals are trustworthy and reliable to have or maintain UAA/UA.
- 4.41 Legal Action
A formal action taken by a law enforcement authority or court of law, including being held, detained, taken into custody, charged, arrested, indicted, fined, forfeited bond, cited, or convicted for a violation of any law, regulation or ordinance this includes felony, misdemeanor, serious traffic offenses, serious civil charges or military charges but does not include minor misdemeanors such as parking tickets or minor civil actions such as zoning violations or minor traffic violations such as moving violations when the individual was not physically taken into custody, and includes the mandated implementation of a plan for treatment or mitigation in order to avoid a permanent record of an arrest or conviction in response to the following activities:
- The use, sale, or possession of illegal drugs
 - The abuse of legal drugs or alcohol
 - The refusal to take a drug or alcohol test

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4.42 Medical Review Officer (MRO)

A licensed physician who is responsible for receiving laboratory results generated by a Part 26 drug testing program and who has the appropriate medical training to properly interpret and evaluate an individual's drug and validity test results together with his or her medical history and any other relevant biomedical information.

4.43 Need to Know

Term used to refer to the requirement that, in order to gain access to personal information collected in fitness-for-duty and access authorization programs, an individual must require such access in order to perform his or her job and is authorized access to the information. An individual's privacy rights under state and federal law continue to be protected.

4.44 Nominal

The limited flexibility that is permitted in meeting a scheduled due date for completing a recurrent activity. Completing a recurrent activity at a nominal frequency means that the activity may be completed within a period that is 25 percent longer or shorter than the period required in this part. The next scheduled due date would be no later than the current scheduled due date plus the required frequency for completing the activity.

4.45 Personal History Questionnaire (PHQ)

Information provided in a written statement by an individual applying for UA/UAA that provides the personal information required to assist in processing UAA/UA elements.

4.46 Personal Information

All information, unique to an individual, that is collected or developed during the implementation of the UA/UAA or FFD program requirements.

4.47 Positive Result

The drug test result reported by the HHS-certified laboratory when a specimen contains a drug or drug metabolite equal to or greater than the cutoff concentration. A result reported by an HHS-certified laboratory that a specimen contains a drug or drug metabolite below the cutoff concentration may also be considered a positive result when the laboratory has conducted the special analysis for dilute specimens as permitted in 10 CFR 26.163(a)(2) upon direction by the MRO.

For alcohol testing, a positive result means the result reported by a collection site when the BAC indicated by testing a specimen exceeds the established cutoff concentrations

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4.48 Potentially Disqualifying FFD Information

Means information demonstrating that an individual has:

- Violated a licensee's or other entity's FFD policy,
- Had authorization denied or terminated unfavorably under 10 CFR 26.35(c)(2), 26.53(i), 26.63(d), 26.65(g), 26.67(c), 26.69(f), or 26.75(b) through (e),
- Used, sold, or possessed illegal drugs,
- Abused legal drugs or alcohol,
- Subverted or attempted to subvert a drug or alcohol testing program,
- Refused to take a drug or alcohol test,
- Been subjected to a plan for substance abuse treatment (except for self-referral), or
- Had legal action or employment action, as defined in this section, taken for alcohol or drug use.

4.49 Protected Area

The site area located inside the plant's double fenced line and to which access is controlled.
[10 CFR 73.2(g)]

4.50 Refusal to Participate or Cooperate

When a donor refuses to participate or cooperate in chemical testing, determination of fitness under the CPNPP Fatigue Management Program, a fitness for duty evaluation by the Employee Assistance Program (EAP), or who is shown to have in any way altered or substituted a specimen provided for chemical testing.

4.51 Reviewing Official

A company employee who is designated by the licensee to be responsible for reviewing and evaluating any potentially disqualifying FFD information about an individual in order to assess the individual's trustworthiness, reliability and fitness for duty, including, but not limited to, the results of a determination of fitness, in order to determine whether the individual may be granted or maintain authorization.

4.52 Self Disclosure

All employees seeking to be granted or maintain Unescorted Access Authorization are required to self-disclose potentially disqualifying personal information in a personal history questionnaire (PHQ) that is verified during the background investigation and evaluated relative to the applicant's trustworthiness, reliability and fitness for duty. Individuals covered by a BOP are also required to self-disclose (report) all legal actions in accordance with this procedure.

4.53 Substance Abuse

The use, sale, or possession of illegal drugs, or the abuse of prescription and over-the-counter drugs, or the abuse of alcohol

4.54 Substance Abuse Expert (SAE)

A licensed professional, knowledgeable in substance abuse disorders and the requirements of NRC Fitness for Duty regulation, who has the appropriate credentials, knowledge, and qualification training to perform a determination of fitness of an employee in situations where fitness for duty potentially disqualifying information is revealed either before or after UA/UAA is granted.

4.55 Substituted Specimen

A specimen with creatinine and specific gravity values that are so diminished or so divergent that they are not consistent with normal human physiology

4.56 Subversion and Subvert the Testing Process

A willful act to avoid being tested or to bring about an inaccurate drug or alcohol test result for oneself or others at any stage of the testing process (including selection and notification of individuals for testing, specimen collection, specimen analysis, and test result reporting), and adulterating, substituting, or otherwise causing a specimen to provide an inaccurate test result

4.57 Supervisor

For the purposes of this procedure, a supervisor is a member of management permanently or temporarily assigned to a position that may or may not hold the title of supervisor, who:

- coordinates and directs the work of others,
- makes recommendations concerning promotions, transfers, etc,
- makes employee performance appraisals, and
- makes recommendations as to the distribution of merit increases.

A supervisor has the responsibility for recording, tracking, and trending employee behavior and/or work habits (i.e., discipline, performance, absences, etc.) which could indicate changes in behavior that may require remedial action. This definition applies to Company personnel, contractors and vendors.

4.58 Valid Prescription

A prescription for medication which is written by a licensed health professional and is written specifically for the individual who is taking the medication.

4.59 Validity Screening Test

A test to determine the need for initial validity testing of a urine specimen, using a non-instrumented test in which the endpoint result is obtained by visual evaluation (read by the human eye), or a test that is instrumented to the extent that results are machine-read

4.60 Visitors Log

A log used to monitor and record visitor entry into the collection facility controlled area, which includes name, ID/badge number, time of entry, and time of exit.

5.0 RESPONSIBILITIES

5.1 Site Vice President

- Providing executive management oversight of the Fitness for Duty Program.
- Responsible for determining the final disposition of any drug case issue appealed by an individual.

5.2 Manager, Plant Support

- Responsible for providing senior management oversight of the unescorted access authorization program at CPNPP; including FFD, drug/alcohol testing and BOP.

5.3 Security Manager

- Responsible for overall management of the FFD Program in accordance with unescorted access authorization program requirements.
- Responsible for establishing and maintaining operating processes and procedures for the FFD which includes pre-access, random, follow-up, for-cause, and post-event tests.
- Approving any deviation from the provisions of this procedure provided the deviation does not conflict with the requirements specifically imposed by 10CFR26 and NEI 03-01, or the FFD Policy Statement.
- Responsible for maintaining this procedure current.

5.4 Supervisor, Security Nuclear (or designee)

- Providing day-to-day management of the Fitness for Duty Program.
- Development and implementation of a chemical testing program which includes pre-access, random, follow-up, for-cause, and post-event tests.
- Reviewing and coordinating for-cause test requests.
- Determining when a direct observation specimen collection is warranted.
- Reviewing and approving requests for test deferral.
- Initiating actions to suspend Unescorted Access and notifying appropriate personnel when:
 - confirmed positive test results are received
 - personnel are unavailable for screening within a reasonable time period
 - notified by Training that an individual has failed to maintain PAT (encompassing FFD training elements) through annual requalification training.
- Initiating follow-up investigative actions regarding confirmed positive drug/alcohol tests, adulterated specimens, or after misconduct involving the FFD Program.
- Development and maintenance of a FFD record keeping program in accordance with this procedure and the provisions of 10CFR26.
- Coordinating with Human Resources the return to work of employees completing mandated EAP evaluations, counseling, and treatment programs.
- Providing notification/reports to Licensing and other responsible management when NRC notification/reporting are required.
- Providing notification to Emergency Preparedness when licensee personnel assigned to the Emergency Response Organization lose Unescorted Access.
- Responsible for the selection of, and coordination with, the toxicological service laboratory(s) contracted to perform drug testing of specimens.
- Responsible for reviewing CPNPP C/V Fitness for Duty audits, policies, and programs.

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5.5 Medical Review Officer (MRO)

- Responsible for reviewing presumptive positive tests results within ten (10) days of identification, making a final determination of positive result classification and providing the documented results of the review to the Supervisor, Security Nuclear. The ten (10) day review is only applicable to those individuals currently granted Unescorted Access.
- Responsible for providing counseling and medical assessments for Luminant and contractor/vendor employees within the scope of this procedure.
- Assisting the Supervisor, Security Nuclear in the management of the FFD Collection Facility by providing medical/technical support, as requested and by performing the review of positive test results.
- Determining when a retest/reanalysis of a specimen is warranted should any question arise as to the accuracy or validity of a test result.

5.6 Emergency Planning Manager

- Responsible for ensuring individuals assigned as EOF responders comply with the applicable requirements of this procedure prior to assuming EOF duties.

5.7 Operations Shift Manager

- Responsible for making reportability determinations for fitness for duty events and notifying the NRC of reportable events in accordance with 10 CFR 26.

5.8 Regulatory Affairs

- Responsible for assisting with FFD reportability determinations in accordance with 10 CFR 26, and submitting FFD reports to the NRC in accordance with STA-501 and STA-502.

5.9 Nuclear Oversight

- Responsible for auditing the CPNPP programs on a nominal 24 month basis and CPNPP approved C/V FFD programs on a nominal annual frequency.

5.10 Nuclear Security Staff

- Responsible for administering the Fitness for Duty Programs, including drug/alcohol testing and BOP.

5.11 Plant Security

- Responsible for detaining and isolating any individual found to be in possession of illegal drugs or alcohol, under the influence of drugs or alcohol or displaying signs of aberrant behavior, behavior that indicates decreased trustworthiness and reliability, or behavior that is detrimental to safety, public health or the safe operation of CPNPP.

5.12 Contracts Administration

- Responsible for maintaining contracts and written agreements between CPNPP and contractors/vendors for the life of the contract which clearly state that the contractor/vendor must comply with the Luminant FFD Program and applicable provisions of 10 CFR 26.

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5.13 Department Managers / Supervisors

- Responsible for removing impaired workers, or those whose fitness may be questionable, from work activities within the scope of 10 CFR 26, and ensuring they are returned to duty only after they are determined fit to safely and competently perform those activities.
- Responsible for ensuring that employees and supervisors receive initial and annual recurring FFD and BOP training, and that this training is completed prior to individuals being assigned supervisory duties.
- Responsible for ensuring that, in the absence of supervisors over an extended period of time, personnel continue to be subject to the BOP.
- Responsible for requesting and terminating unescorted access in accordance with STA-902 in response to substantiated FFD issues.
- Responsible for observing personnel for indications of substance abuse, signs of aberrant behavior, or other behavior reliability issues that may indicate a decrease in trustworthiness and reliability.
- Responsible for reassigning or granting leave from work, if necessary, any individual that self reports a mental, physical condition or the use of over-the-counter or prescription drugs that could affect the employee's job performance.
- Responsible for implementing corrective action, including referral to the Employee Assistance Program as necessary, to address Fitness for Duty issues.
- Responsible for reporting to management any individual found to be in possession of illegal drugs or alcohol, under the influence of drugs or alcohol or displaying signs of aberrant behavior, behavior that indicates decreased trustworthiness and reliability or behavior that is detrimental to safety, public health or the safe operation of CPNPP.
- Responsible for reporting information related to legal actions reported by an individual to CPNPP Security management as soon as practical.
- Responsible for completing BOP Annual Supervisory Reviews on a nominal annual basis for each direct report with UA.
- Responsible for reviewing, at a minimum, all work performed by a worker who has violated the FFDP, for the period from the time the worker's tour of duty started on the day of the chemical test to the time the worker was removed from the Protected Area for the violation. This review is intended to evaluate potential impacts on ongoing plant safety. Documentation of completion of this review, with any findings, should be forwarded to the Supervisor, Security Nuclear.
- Taking appropriate actions, as necessary, based on the above review and its findings.

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5.14 Luminant Power and Contractor/Vendor Employees

- Responsible for understanding and complying with CPNPP FFD policy and program requirements.
- Responsible for reporting conditions that could adversely affect their ability to safely and competently perform their duties.
- Responsible for promptly reporting legal actions to their supervision or Security.
- Responsible for reporting observed aberrant behavior or behavior adverse to the safe operation and security of CPNPP.
- Responsible for abstaining from the consumption alcohol for a minimum of five hours preceding arrival for any scheduled work and during any working tour (including meal breaks).

Note: Abstinance from alcohol consumption for the five hours preceding any scheduled working tour of duty is considered the minimum that is necessary, but may not be sufficient to ensure fitness for duty.

- Responsible for informing supervision when taking medication if the packaging insert and/or medication container states the medication “may cause drowsiness” or that you should “not drive or operate machinery” while taking the medication, or if there are other similar warnings.
- Responsible for making a statement as to whether alcohol has been consumed within the preceding five hours when called in to perform unscheduled work.
- Responsible for submitting, as requested, to a fitness for duty determination if alcohol has been consumed during the five-hour period preceding unscheduled work.
- Responsible for monitoring physical and mental condition for signs of mental stress, physical illness, excessive fatigue, and any other factors that could result in on-duty impairment; and seeking assistance when any of these conditions exist.
- Responsible for completing initial FFDP training and annual FFDP requalification training.
- Responsible for reporting to supervision those cases in which an escorted individual appears to be in violation of the FFDP or otherwise appears unfit for duty.
- Responsible for notifying supervision when there is reasonable suspicion that any individual within the protected area, TSC, or EOF is unfit for duty or upon discovery of illegal drugs or alcohol.
- Responsible for recognizing that authorized, announced or unannounced investigations, inspections, or searches of property, equipment, facilities, or personnel for illegal drugs or alcohol may be conducted as appropriate.
- Responsible for reporting to the Collection Facility as instructed for chemical testing.

6.0 INSTRUCTIONS

6.1 Corrective Actions

- 6.1.1 CPNPP shall document, trend, and correct non-reportable indicators of FFD programmatic weaknesses under the corrective action program, but may not track or trend drug and alcohol test results in a manner that would permit the identification of any individuals.
- 6.1.2 Provisions within federal regulations for the protection of personal information do not allow documenting a single confirmed positive, adulterated, substituted, or invalid drug test result in the corrective action program because such documentation, along with other cues in the work environment, may permit any individual who has access to the corrective action system to identify the donor.

6.2 FFD Requirements for Granting Unescorted Access

- 6.2.1 The following steps of the FFDP shall be completed satisfactorily to be granted unescorted access authorization:
- 6.2.1.1 The following personnel shall be subject to a pre-access drug and alcohol test.:
- an individual who has never held UA/UAA, or whose UA/UAA was terminated greater than 3 years and whose last period of authorization was terminated favorably.
 - an individual whose UA/UAA was terminated greater than 365 days but less than 3 years and whose last period of authorization was terminated favorably.
- 6.2.1.2 For a reinstated access, an individual who's UA/UAA has been terminated greater than 30 days but no more than 365 days and whose last period of authorization was terminated favorably shall be subject to pre-access drug and alcohol testing; including:
- verify that the individual has negative results from the alcohol testing and collect a specimen for drug testing within the 30-day period proceeding the day the individual's authorization is granted.
 - verify that the drug test results are negative within 5 business days of collection or administratively withdraw authorization until drug test results are received.
- 6.2.1.3 An individual whose UA/UAA was terminated greater than 5 days and less than 30 days and whose last period of authorization was terminated favorably shall be subject to pre-access drug and alcohol testing; including:
- verify that the individual has negative results from the alcohol testing and collect a specimen for drug testing within the 30-day period proceeding the day the individual's authorization is granted.
 - verify that the drug test results are negative within 5 business days of collection or administratively withdraw authorization until drug test results are received.

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- 6.2.1.4 Completion of a Personal History Questionnaire (PHQ) when applicable.
- 6.2.1.5 A self-disclosure of FFD and legal actions has been completed and reviewed.
- 6.2.1.6 A suitable inquiry has been completed.
- 6.2.1.7 Individual shall be subject to random drug and alcohol testing.
- 6.2.1.8 Successfully completing any required training.
- 6.2.1.9 If potentially disqualifying FFD information is disclosed or discovered, UA may not be granted except as determined under requirements of Authorization with Potentially Disqualifying Fitness-for-Duty Information (Section 6.3).

6.2.2 CPNPP may rely on the transfer of FFD program elements from another licensee to satisfy the above requirements, including the transfer of negative drug and alcohol tests conducted by another licensee if the specimen collection was performed within the 30-day period preceding the date UA/UAA is authorized.

6.2.3 CPNPP may rely on a C/V's FFD program or program elements when granting or maintaining the authorization of an individual who is or has been subject to the C/V's FFD program, if the C/V's program or program elements meet the applicable 10 CFR 26 requirements, and:

- CPNPP will formally review and pre-approve the C/V's FFDP.
- The program must be subject to CPNPP and NRC audit.
- CPNPP will clearly state this delegation and the C/V's responsibilities in a contractual agreement.
- If a C/V's FFD program denies or terminates an individual's authorization, and the individual is performing any duties for CPNPP, the C/V shall inform CPNPP of the denial or unfavorable termination.

6.2.4 CPNPP shall identify any violation of any requirement of the FFDP to any licensee who has relied on or intends to rely on that CPNPP FFD program element.

6.3 Granting Access Authorization with FFD PDI

6.3.1 Explicit actions are necessary to grant or maintain the authorization of an individual who is in the following circumstances:

- 6.3.1.1 A first drug or alcohol confirmed positive test result or potentially disqualifying FFD information within the past 5 years has been disclosed or discovered about the individual by any means, including but not limited to, the individual's self-disclosure, the suitable inquiry, drug and alcohol testing, the administration of any 10 CFR 26 FFD program, a self-report of a legal action, behavioral observation, or other sources of information, including but not limited to, any background investigation or credit and criminal history check conducted under the requirements of 10 CFR 26.
- 6.3.1.2 The potentially disqualifying FFD information has not been reviewed and favorably resolved by a previous licensee.

6.3.2 The requirements in this section apply to individuals whose authorization was denied or terminated unfavorably for a first violation of a FFD policy involving a confirmed positive drug or alcohol test result and for individuals whose authorization was denied for 5 years.

- 6.3.3 To grant and subsequently maintain the individual's UA/UAA, CPNPP shall:
- 6.3.3.1 Obtain and review a self-disclosure of FFD PDI and legal actions and employment history from the individual that addresses the shorter period of either the past 5 years or since the individual's last period of authorization was terminated, and verify that the self-disclosure does not contain any previously undisclosed potentially disqualifying FFD information before granting authorization.
 - 6.3.3.2 Complete a suitable inquiry with every employer by whom the individual claims to have been employed during the period addressed in the employment history and obtain and review any records that other licensees may have developed related to the unfavorable termination or denial of authorization.
 - 6.3.3.3 If the individual was subject to a 5-year denial of authorization for a random FFD test violation, verify that he or she has abstained from substance abuse or at least the past 5 years.
 - 6.3.3.4 Ensure that the MRO/SAE has conducted a determination of fitness and concluded that the individual is fit to safely and competently perform his or her duties.
 - 6.3.3.5 If the individual's authorization was denied or terminated unfavorably for a first confirmed positive drug or alcohol test result, ensure that clinically appropriate treatment and follow-up testing plans have been developed by the MRO/SAE before granting authorization.
 - 6.3.3.6 If the individual was subject to a 5-year denial of authorization for a FFD violation, ensure that any recommendations for treatment and follow-up testing from the MRO/SAE's determination of fitness are initiated before granting authorization.
 - 6.3.3.7 Verify that the individual is in compliance with, and successfully completes, any follow-up testing and treatment plans. Within (10) business days before granting authorization, perform a pre-access alcohol test, collect a specimen for drug testing under direct observation, and ensure that the individual is subject to random testing thereafter. Verify that the pre-access drug and alcohol test results are negative before granting authorization.
 - 6.3.3.8 If the individual's authorization was denied or terminated unfavorably for a first confirmed positive drug or alcohol test result and a licensee grants authorization to the individual, ensure that the individual is subject to follow-up testing.
 - 6.3.3.9 Verify that any drug and alcohol tests required in this section, and any other drug and alcohol tests that are conducted under this part since authorization was terminated or denied, yield negative results.
 - 6.3.3.10 The investigation must validate no further drug abuse, as determined by the MRO/SAE review, or alcohol abuse as determined by the result of confirmatory alcohol testing.

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6.4 Granting Access Authorization with Other Potentially Disqualifying FFD Information

6.4.1 The requirements in this section apply to an individual who has applied for UA/UAA, and about whom potentially disqualifying FFD information has been discovered or disclosed that is not a first confirmed positive drug or alcohol test result or a 5-year denial of authorization. If potentially disqualifying FFD information is obtained about an individual by any means, including, but not limited to, the individual's self-disclosure, the suitable inquiry, the administration of any FFD program under this part, a self-report of a legal action, behavioral observation, or other sources of information, including, but not limited to, any background investigation or credit and criminal history check conducted under the requirements of this chapter, before granting authorization to the individual, CPNPP shall obtain and review the self-disclosure and employment history that addresses the shortest of the following periods:

- the past 5 years; or
- since the individual's eighteenth birthday; or
- since the individual's last period of authorization was terminated.

6.4.2 Complete a suitable inquiry with every employer by whom the individual claims to have been employed during the period addressed in the employment history. If the individual held authorization within the past 5 years, obtain and review any records that other licensees may have developed with regard to potentially disqualifying FFD information about the individual from the past 5 years.

6.4.3 If the reviewing official determines that a determination of fitness is required, verify that the MRO/SAE has indicated that the individual is fit to safely and competently perform his or her duties.

6.4.4 Ensure that the individual is in compliance with, or has completed, any plans for treatment and drug and alcohol testing from the determination of fitness, which may include the collection of a urine specimen under direct observation.

6.4.5 Verify that the results of pre-access drug and alcohol tests are negative before granting authorization, and that the individual is subject to random testing after the specimens have been collected for pre-access testing and thereafter.

6.5 Maintaining Access with Other Potentially Disqualifying FFD Information

6.5.1 If an individual is authorized when other potentially disqualifying FFD information is disclosed or discovered, in order to maintain the individual's authorization, CPNPP shall ensure that the designated reviewing official completes a review of the circumstances associated with the information.

6.5.2 If the designated reviewing official concludes that a determination of fitness is required, verify that the MRO/SAE has determined that the individual is fit to safely and competently perform his or her duties.

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6.5.3 If the reviewing official determines that maintaining the individual's authorization is warranted, implement any recommendations for treatment and follow-up drug and alcohol testing from the determination of fitness, which may include the collection of urine specimens under direct observation, and ensure that the individual complies with and successfully completes the treatment plans.

6.6 Accepting Follow-up Testing and Treatment Plans from another FFD Program

6.6.1 CPNPP may rely on follow-up testing, treatment plans, and determinations of fitness under the following conditions:

6.6.1.1 If an individual leaves the FFD program in which a treatment and/or follow-up testing plan was required and is granted UA/UAA at CPNPP, then CPNPP shall ensure that any follow-up testing requirements are met and that the individual complies with any existing treatment plan requirements.

6.6.1.2 If it is impractical for the individual to comply with a treatment plan that was developed under another FFD program because of circumstances that are outside of the individual's or CPNPP's control (e.g., geographical distance, closure of a treatment facility, etc.), then CPNPP shall ensure that the MRO/SAE develops a comparable treatment plan, with accountability for monitoring the individual's compliance with the plan assumed by CPNPP.

6.6.2 If the previous licensee or other entity determined that the individual successfully completed any required treatment and follow-up testing, and the individual's last period of authorization was terminated favorably, CPNPP may rely on the previous determination of fitness and no further review or follow-up is required.

6.7 Maintaining Access Authorization

6.7.1 Individuals may maintain authorization under the following conditions:

6.7.1.1 The individual complies with CPNPP's FFD policies and procedures, including the responsibility to report any legal actions.

6.7.1.2 The individual remains subject to a drug and alcohol testing program that meets the requirements of 10 CFR Part 26, including random testing.

6.7.1.3 The individual remains subject to a behavioral observation program.

6.7.1.4 The individual successfully completes required FFD training on schedule.

6.7.2 If an authorized individual is not subject to an FFD program that meets these requirements for more than 30 continuous days, then CPNPP shall terminate the individual's UA/UAA.

6.8 Behavioral Observation Program

6.8.1 Individuals who are subject to the FFDP are subject to behavioral observation.

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- 6.8.2 Behavioral observation must be performed by individuals who are trained to detect behaviors that may indicate:
- 6.8.2.1 Possible use, sale, or possession of illegal drugs
 - 6.8.2.2 Use or possession of alcohol on site or while on duty or
 - 6.8.2.3 Impairment from fatigue or any cause that, if left unattended, may constitute a risk to public health and safety or the common defense and security.

6.8.3 Individuals shall report any FFD concerns about other individuals to their supervisor or the Supervisor, Nuclear Security or designee.

6.8.4 Further guidance on the CPNPP Behavior Observation Program is provided in STA-911.

6.9 Policy for Unscheduled Work Call Outs

6.9.1 If the worker is not fit for unscheduled duty, it is not considered a fitness for duty violation.

6.9.2 All workers are expected to report fit for duty.

6.9.3 Each worker called in for unscheduled work must declare his or her fitness for duty and state whether he or she consumed any alcohol during the five-hour abstinence period.

6.9.4 This policy applies to all workers who meet one of the following conditions:

- Are called in to work with less than five hours notice at times not previously scheduled, or
- Are responding to the protected area or EOF as part of an emergency response plan.

6.9.5 If a person declares they are unfit for any reason (illness, fatigue, or other potentially impairing conditions) and are still called in for work, the following steps are required before allowing the individual to perform work:

6.9.5.1 The supervisor must evaluate the declared impairment and determine what steps are necessary to allow the individual to safely perform any work.

6.9.5.2 If alcohol use within the 5 hour abstinence period is declared by the individual, a breath alcohol test must be administered by a qualified alcohol collector.

6.9.5.3 If the breath test indicates the presence of alcohol (> 0.0 percent BAC), a 30 minute waiting time is required to see if the reading is rising or falling.

6.9.5.4 If after the waiting period the result is <0.02 percent BAC, the individual may be allowed to perform duties.

6.9.5.5 If the reading is rising, the individual is impaired they may not perform any duties.

6.8.5.6 If the individuals reading are above 0.04 percent BAC, then transportation must be arranged to get the individual home.

6.9.5.7 If the individual is called to respond to an emergency and no other individual is available, and the individual is impaired, the individual may be allowed to work under direct escort provided Emergency Response Facility management approves the plan and the impairment is below 0.04 BAC and not rising.

6.10 Admitted or Discovered Use of Illegal Substances or Improper Use of Legal substances.

6.10.1 Any worker admitting (or discovered using) an illegal drug, or improperly using legal medications (including over-the-counter medications or prescription medications) as determined by the MRO, shall be deemed to be in violation of the CPNPP FFDP.

6.10.2 The MRO may not determine that the consumption of food products is a legitimate medical explanation for the presence of morphine or codeine at or above the cutoff levels specified in 10 CFR 26.163.

6.10.3 If the MRO determines that the donor has used another individual's prescription medication, including a medication containing opiates, and no clinical evidence of drug abuse is found, the MRO shall report to the licensee or other entity that the donor has misused a prescription medication. If the MRO determines that the donor has used another individual's prescription medication and clinical evidence of drug abuse is found, the MRO shall report to the licensee that the donor has violated the FFD policy.

6.10.4 The MRO may not consider consumption of food products, supplements, or other preparations containing substances that may result in a positive confirmatory drug test result, including, but not limited to supplements containing hemp products or coca leaf tea, as a legitimate medical explanation for the presence of drugs or drug metabolites in the urine specimen above the cutoff levels specified in 10 CFR 26.163.

6.10.5 The MRO may not consider the use of any drug contained in Schedule I of section 202 of the Controlled Substances Act [21 U.S.C. 812] as a legitimate medical explanation for a positive confirmatory drug test result, even if the drug may be legally prescribed and used under State law.

6.10.6 The MRO may not consider prescription medication as a legitimate medical explanation for a positive drug test unless it was obtained through a valid patient-physician relationship.

- A patient-physician relationship must include personal contact in order to be considered authentic.
- A prescription written by a doctor based solely on information from an internet questionnaire or telephone interview is not acceptable.

6.11 State Initiatives to Legalize Schedule I Drugs

The requirements to 10 CFR 26 remain in effect even where State law attempts to legalize the use of Schedule I drugs (marijuana, heroin, and PCP). A Schedule I drug is one which, in the opinion of the NRC, has no currently accepted medical use.

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6.12 Lack of Cooperation or Refusal to Participate in the Chemical Testing Process.

6.12.1 When a worker refuses to participate or cooperate in chemical testing, or a fitness for duty evaluation by the EAP, or is shown to have in any way adulterated or otherwise altered a specimen provided for chemical testing, this act will be considered a program violation.

6.12.2 Uncooperative acts during the collection process include, but are not limited to:

- Making threatening gestures to the Collector.
- Doing anything which may cause the process to be circumvented.
- Intentionally tampering with documentation, test products, or equipment.

6.12.3 The Collector shall inform the Supervisor, Nuclear Security or designee and if necessary the MRO of a refusal to participate or cooperate during the collection process and shall document the non-cooperation on the specimen chain-of-custody form.

6.12.4 The Supervisor, Nuclear Security or designee will inform the Manager of Security, Human Resources Representative (if the issue involves an licensee employee), and the individual's supervisor.

6.12.5 The Supervisor, Nuclear Security or designee will call 5666 and have the individual's badge deactivated for cause.

6.13 Worker Cooperation with Investigations, Inspections, or Searches

6.13.1 A department head or designee may authorize announced or unannounced investigations, inspections or searches of property, equipment, facilities, desks, lockers, or personnel for illegal drugs or alcohol when necessary to ensure compliance with this FFDP.

6.13.2 CPNPP or contractor personnel may utilize, but are not limited to, investigative techniques such as physical searches, chemical testing, and trained animals.

6.13.3 At all times during the conduct of investigations, inspections, or searches, care will be taken to protect the personal privacy and dignity of the worker.

6.13.4 A worker's refusal to allow or to cooperate with properly authorized investigations, inspections, or searches shall result in possible denial of unescorted access.

6.14 Noncompliance of NRC Employees

If there is a reasonable belief that an NRC employee or NRC contractor may be under the influence of any substance, or is otherwise unfit for duty:

- CPNPP may not deny access but shall escort the individual.
- The Plant Vice President or designee shall immediately notify the appropriate Regional Administrator by telephone, followed by written notification (e.g., email or fax) to document the oral notification. If the Regional Administrator cannot be reached, the licensee or other entity shall notify the NRC Operations Center. [Reference 10CFR26.77(c)]

6.15 Training

6.15.1 Individuals who are subject to the FFDP shall demonstrate the successful completion of training by passing a comprehensive examination that addresses the following areas of knowledge and abilities (KAs):

- 6.15.1.1 Knowledge of the policy and procedures that apply to the individual, the methods that will be used to implement them, and the consequences of violating the policy and procedures;
- 6.15.1.2 Knowledge of the individual's role and responsibilities under the FFD program;
- 6.15.1.3 Knowledge of the roles and responsibilities of others, such as the MRO and the human resources, FFD, and EAP staffs;
- 6.15.1.4 Knowledge of the EAP services available to the individual;
- 6.15.1.5 Knowledge of the personal and public health and safety hazards associated with abuse of illegal and legal drugs and alcohol;
- 6.15.1.6 Knowledge of the potential adverse effects on job performance of prescription and over-the-counter drugs, alcohol, dietary factors, illness, mental stress, and fatigue;
- 6.15.1.7 Knowledge of the prescription and over-the-counter drugs and dietary actors that have the potential to affect drug and alcohol test results;
- 6.15.1.8 Ability to recognize illegal drugs and indications of the illegal use, sale, or possession of drugs;
- 6.15.1.9 Ability to observe and detect performance degradation, indications of impairment, or behavioral changes;
- 6.15.1.10 Knowledge of the individual's responsibility to report an FFD concern and the ability to initiate appropriate actions, including referrals to the EAP and person(s) designated by the licensee or other entity to receive FFD concerns.

6.15.2 Training must be completed before obtaining unescorted access or engaging in other activities within the scope of this FFDP.

6.15.3 Individuals shall complete refresher training on a nominal 12-month frequency.

6.16 Fitness for Duty Program Personnel

6.16.1 To assure the honesty and integrity of FFD program personnel, CPNPP must carefully select and monitor FFDP personnel based on the highest standards of honesty and integrity, and shall implement the following measures before assignment to tasks directly associated with administration of the FFD program.

- 6.16.1 Background investigation
- 6.16.2 Credit check
- 6.16.3 Criminal history check
- 6.16.4 Psychological assessment

6.16.2 These items must be updated nominally every 5 years.

6.16.3 Collectors who have personal relationships with a donor may not perform any assessments.

Note: These personal relationships include supervisors, coworkers within the same work group, and relatives of the donor.

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- 6.16.4 Except if a directly observed collection is required, a collector who has a personal relationship with the donor may collect specimens from the donor only if the integrity of specimen collections in these instances is assured through the following means:
- 6.16.4.1 The collection must be monitored by an individual who does not have a personal relationship with the donor and who is designated for this purpose, including, but not limited to, security force or quality assurance personnel.
- 6.16.4.2 Individuals who are designated to monitor collections in these instances shall be trained to monitor specimen collections and the preparation of specimens for transfer or shipping.
- 6.16.4.3 If a specimen must be collected under direct observation, the collector or an individual who serves as the observer, may not have a personal relationship with the donor.
- 6.16.4.4 CPNPP may rely on a local hospital or other organization that meets the requirements of 49 CFR 40, “Procedures for Department of Transportation Workplace Drug and Alcohol Testing Programs” (65 FR 41944; August 9, 2001) to collect specimens for drug and alcohol testing from the FFD program personnel.
- 6.16.5 FFD program personnel shall be subject to the behavioral observation program to assure that they continue to meet the highest standards of honesty and integrity.
- 6.16.6 The MRO and MRO staff shall be subject to behavioral observation.

6.17 Conditions for Testing

6.17.1 For-Cause

In response to an individual’s observed behavior or physical condition indicating possible substance abuse or after receiving credible information that an individual is engaging in substance abuse. For-cause testing shall be initiated as soon as reasonably practical.

A for-cause chemical test shall be performed under the following conditions:

- 6.17.2.1. Observed behavior indicating possible substance abuse or otherwise raising a question regarding an individual’s fitness for duty.
- 6.17.2.2 Receipt of credible information that an individual is abusing drugs or alcohol. Credible information may be one of the following:
- Conviction for a drug-related offense; or
 - The source of the information is trustworthy and reliable; or
 - Verified odor of alcohol.
- 6.17.2.3 For-Cause Testing Approval
- 6.17.2.3.1 A supervisor may request a for-cause test.
- 6.17.2.3.2 The Supervisor, Nuclear Security or designee authorizes the chemical testing. The supervisor or designee must keep the individual under observation, provide transportation for the worker to the Collection Facility and remain there until the collection procedure is complete.
- 6.17.2.3.3 Upon completion of the collection, the worker shall be excused from work and his/her unescorted access suspended pending receipt of the drug test results..
- 6.17.2.3.4 If a for-cause test is authorized based only on the odor or suspicion of alcohol, and the subsequent evidential breath analysis is negative, the individual may be allowed unescorted access pending drug test results.

6.17.3 Post-event

As soon as practical after an event involving a human error where the human error may have caused or contributed to the event, CPNPP shall test the individual(s) who committed the error(s) (individuals who were affected by the event but whose actions likely did not cause or contribute to the event need not be tested). When Post-Event chemical testing cannot be performed due to exceptional circumstances, the supervisor is required to document the justification.

Note: Any person whose fitness for duty is questionable shall have their unescorted access suspended pending determination of their fitness to safely and competently perform their duties.

6.17.3.1 The individual(s) who committed the human error(s) shall be tested if the event resulted in a significant illness or personal injury to the individual to be tested or another individual, which within 4 hours after the event is determined to be OSHA recordable under Dept of Labor standards, results in:

- death,
- days away from work,
- restricted work,
- transfer to another job,
- medical treatment beyond first aid,
- loss of consciousness,
- or other significant illness or injury as diagnosed by a physician or other licensed health care professional,
- radiation exposure or release of radioactivity in excess of regulatory limits, or
- actual or potential substantial degradations of the level of safety of the plant.

6.17.3.2 Any supervisor may request a Post Event test.

6.17.3.3 The Supervisor, Nuclear Security or designee authorizes the chemical testing.

6.17.3.4 The supervisor or designee must keep the individual under observation, provide transportation for the worker to the Collection Facility and remain there until the collection procedure is complete.

6.17.3.5 Upon completion of the collection, the worker shall be excused from work and his/her unescorted access suspended pending receipt of the drug test results.

6.17.3.6 When use of drugs or alcohol is suspected, a determination of fitness shall be accomplished through chemical testing and other appropriate means prior to return to work.

6.17.3 Pre-Access

In order to grant initial, updated, or reinstated authorization to an individual or to a worker who has been out of CPNPP's Behavioral Observation Program >30 days.

6.17.4 Follow-up Testing

Used as part of a rehabilitation plan to verify an individual's continued abstinence from substance abuse. If the individual's authorization was denied or terminated unfavorably for a first confirmed positive drug or alcohol test result and CPNPP or other entity grants AA/UA to the individual, ensure the following plan is in place.

6.17.4.1 Follow-up testing consists of unannounced tests over a period of at least 3 calendar years after the date the individual is granted authorization.

6.17.4.2 Both random and follow-up tests satisfy this requirement.

6.17.4.3 Verify that the individual has negative test results from a minimum of 15 tests distributed over the 3-year period, except if the individual does not continuously hold authorization during the 3-year period, CPNPP shall ensure that at least one unannounced test is conducted in any quarter during which the individual holds authorization.

6.17.4.4 If the 15 tests are not completed within the 3-year period due to periods during which the individual does not hold authorization, the follow-up testing program may be extended up to 5 calendar years to complete the 15 tests.

6.17.4.5 If the individual does not hold authorization during the 5-year period a sufficient number of times or for sufficient periods of time to complete the 15 tests required, CPNPP shall ensure that the MRO/SAE conducts a determination of fitness to assess whether further follow-up testing is required and implement the SAE/MRO's recommendations.

6.17.4.6 A customized Follow-up testing plan may be developed, at the discretion of the MRO/SAE, for other identified fitness for duty issues that do not meet the above criterion.

6.17.5 Random Testing

Testing shall be conducted on a statistically random and unannounced basis, so that all individuals in the population subject to testing have an equal probability of being selected and tested.

6.17.5.1 Random testing must be administered in a manner that provides reasonable assurance that individuals are unable to predict the time periods during which specimens will be collected, including weekends, backshifts, holidays, and at various times during a shift.

6.17.5.2 Random testing must be administered by the FFD program on a nominal weekly frequency.

6.17.5.3 Random testing must require individuals who are selected for random testing to report to the collection site normally within 1 hour from the time they are notified.

6.17.5.4 Random testing must require that individuals who are off site when selected for testing, or who are on site and are not reasonably available for testing when selected, shall be tested at the earliest reasonable and practical opportunity when both the donor and collectors are available to collect specimens for testing and without prior notification to the individual that he or she has been selected for testing.

6.17.5.5 Random testing must provide that an individual completing a test is immediately eligible for another unannounced test.

6.17.5.6 Random testing must ensure that the sampling process used to select individuals for random testing provides that the number of random tests performed annually is equal to at least 50 percent of the population of the random testing pool.

- 6.17.5.7 If an individual is not immediately available for testing, but becomes aware that he/she has been selected for random testing, the individual's unescorted access authorization will be terminated and the individual will require reprocessing for unescorted access, including a pre-access drug/alcohol test upon returning to work.
- 6.17.5.8 FFD program personnel shall take reasonable steps to either conceal from the workforce that collections will be performed during a scheduled collection period or to create an appearance that specimens are being collected during a portion of each day on at least four days in each calendar week.

6.18 Scheduling of Sample Collections

- 6.18.1 The lab collector assigns a day and time for testing to each random selection on the list after consultation with the selected individual's supervision.
- 6.18.2 A worker may be on the list multiple times, in which case, the worker will be tested at multiple future opportunities. (e.g., if a worker's name appears on the list two times due to previous unavailability for testing, then the worker will be tested twice at different times, with no prior warning of either).
- 6.18.3 Workers have no safe periods and may be tested on weekends, holidays, and back shifts.

6.19 Notification of Workers Selected for Random Testing

- 6.19.1 Normally, the supervisor will be notified that the individual is scheduled to be tested. The supervisor is not to inform the worker of his or her scheduled test until approximately one but not more than two hours in advance of the appointment.
- 6.19.2 The supervisor must ensure that this information remains confidential.
- 6.19.3. The worker may be notified directly by the Supervisor, Nuclear Security or designee in cases where it has been determined to be the most effective method for random notification.

6.20 Worker Late for Chemical Testing Appointment

Should an individual who has been properly notified, arrive more than 15 minutes late for a scheduled collection, this may be considered a refusal to cooperate in chemical testing, which may result in denial of unescorted access without a reasonable explanation for the missed appointment.

6.21 General Requirements for Drug and Alcohol Testing

6.21.1 Substances tested for:

- Marijuana metabolite
- Cocaine metabolite
- Opiates
- Amphetamines
- Phencyclidine
- Alcohol
- Adulterants

6.21.2 The cut-off levels for the substances and the methods used to test for the substances are discussed in Section 6.30, “Methods and Techniques used for Testing Alcohol,” and “Section 6.31, Methods and Techniques used for Testing Drugs.”

6.21.3 A specimen suspected of being adulterated or diluted through hydration or other means may be tested for any illegal drug in addition to substances listed above.

6.21.4 CPNPP may consult with local law enforcement authorities, hospitals, and drug counseling services to determine whether other drugs with abuse potential are being used in the locale of the facility and workforce that may not be detected in the panel of drugs and drug metabolites specified. CPNPP may then add other drugs to the panel of substances for testing at appropriate cutoff limits, but only if the additional drugs are listed in Schedules I through V of section 202 of the Controlled Substances Act [21U.S.C. 812].

6.21.5 Drug Testing

6.21.5.1 Testing of urine specimens for drugs and validity must be performed in a HHS-certified laboratory. Specimens must be subject to initial validity and initial drug testing.

6.21.5.2 Specimens that yield positive initial drug test results, or that are determined by initial validity testing to be of questionable validity, must be subject to confirmatory testing by the laboratory, except for invalid specimens that cannot be tested.

6.21.5.3 CPNPP shall uniformly apply the cutoff levels specified in this procedure for initial and confirmatory drug testing at HHS-certified laboratory.

6.21.5.4 Before awarding a contract to a HHS-certified laboratory, the Supervisor, Nuclear Security shall ensure that qualified personnel conduct a pre-award inspection and evaluation of the procedural aspects of the laboratory’s drug testing operations. However, if an HHS-certified laboratory loses its certification, in whole or in part, CPNPP may immediately begin using another HHS-certified laboratory that is being used by another licensee. The laboratory shall permit representatives of the NRC and CPNPP to inspect the laboratory at any time, including unannounced inspections.

6.21.6 Alcohol Testing

- 6.21.6.1 Initial tests for alcohol may be administered by Alcohol Screening Devices (ASDs) approved by the National Highway Traffic Safety Administration (NHTSA) and listed in the most current version of the NHTSA's conforming Products List.
- 6.21.6.2 An ASD may be used only for initial tests for alcohol and may not be used for confirmatory tests.
- 6.21.6.3 If the initial test shows a BAC of 0.02 percent or greater, a confirmatory test for alcohol must be performed.
- 6.21.6.4 The confirmatory test must be performed with an Evidential Breath Testing (EBT) device that meets the requirements NHTSA Conforming Products List.
- 6.21.6.5 The EBT may also be used for initial alcohol tests.

6.22 Medical Conditions

- 6.22.1 If an individual has a medical condition that makes collection of breath or urine specimens difficult or hazardous, the MRO may authorize an alternative evaluation process, tailored to the individual case, to meet the requirements for drug and alcohol testing.
- 6.22.2 The alternative process must include measures to prevent subversion and achieve results that are comparable to those produced by urinalysis for drugs and breath analysis for alcohol.
- 6.22.3 If an individual requires medical attention, including, but not limited to, an injured worker in an emergency medical facility who is required to have a post-event test, treatment may not be delayed to conduct drug and alcohol testing.

6.23 Limitations of Testing

- 6.23.1 Specimens collected may not be used to conduct any other analysis or test without the written permission of the donor.
- 6.23.2 Analyses and tests that may not be conducted include, but are not limited to, DNA testing, serological typing, or any other medical or genetic test used for diagnostic or specimen identification purposes.

6.24 Employee Assistance Program

- 6.24.1 CPNPP maintains an Employee Assistance Program (EAP) to strengthen the FFD program by offering confidential assessment, short-term counseling, referral services, and treatment monitoring to individuals who have problems that could adversely affect the individuals' abilities to safely and competently perform their duties.
- 6.24.2 The EAP is available to all Luminant Power employees and is designed to achieve early intervention and provide for confidential assistance.

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6.24.3 The EAP staff shall protect the identity and privacy of any individual (including those who have self-referred) seeking assistance from the EAP, except in the following circumstances:

- If the individual waives the right to privacy in writing; or
- a determination is made that the individual is likely to commit self-harm or harm to others; or
- has been impaired from using drugs or alcohol while in a work status and has a continuing substance abuse disorder that makes it likely he or she will be impaired while in a work status in the future; or
- has ever engaged in any acts that would be reportable under 10CFR26.719(b)(1) through (b)(3). [See Reporting Requirements in Section 6.44]

6.25 Protection of Information

6.25.1 Personal information collected on individuals within the scope of the FFDP is maintained and used with the highest regard for individual privacy.

6.25.2 CPNPP shall obtain a signed consent that authorizes the disclosure of the personal information collected and maintained before disclosing the personal information, except for disclosures to the following individuals:

- 6.25.2.1 The individual or his or her representative, when the individual has designated the representative in writing for specified FFD matters.
- 6.25.2.2 Assigned MRO's and MRO staff.
- 6.25.2.3 NRC representatives.
- 6.25.2.4 Appropriate law enforcement officials under court order.
- 6.25.2.5 CPNPP's representatives who have a need to have access to the information to perform their assigned duties under the FFD program, including determinations of fitness, and FFD program audits.
- 6.25.2.6 The presiding officer in a judicial or administrative proceeding that is initiated by the individual.
- 6.25.2.7 Reviewing Officials.
- 6.25.2.8 Other persons pursuant to court order.

6.25.3 Personal information that is collected under the FFDP must be disclosed to other licensees and entities, including C/Vs or their authorized representatives, who are legitimately seeking the information for authorization decisions as required and who have obtained a signed release from the subject individual.

6.25.4 Upon receipt of a written request by the subject individual or his or her designated representative, the FFD program, including but not limited to, the collection site, HHS-certified laboratory, or MRO possessing such records shall promptly provide copies of all FFD records pertaining to the individual, including, but not limited to, records pertaining to a determination that the individual has violated the FFD policy, drug and alcohol test results, MRO reviews, determinations of fitness, and management actions pertaining to the subject individual.

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6.25.5 CPNPP shall obtain records related to the results of any relevant laboratory certification, review, or revocation-of certification proceedings from the HHS-certified laboratory and provide them to the subject individual on request.

6.24.6 This section does not authorize CPNPP or other entity to withhold evidence of criminal conduct from law enforcement officials.

6.26 Suitable Inquiry Request

When any other licensee is seeking information required for an authorization decision and has obtained a signed release from the individual authorizing the disclosure of information, CPNPP shall disclose:

- Whether the individual’s authorization was denied or terminated unfavorably as a result of a violation of an FFD policy; and
- Information on the basis for a denial or unfavorable termination, including, but not limited to, drug or alcohol test results, treatment and follow-up testing requirements or other results from a determination of fitness; and
- Any other information that is relevant to an authorization decision.

6.27 Management Actions and Sanctions to Be Imposed

This section defines the minimum sanctions CPNPP shall impose when an individual has violated the drug and alcohol provisions of the FFD policy.

6.27.1 Any act or attempted act to subvert the testing process, including, but not limited to, refusing to provide a specimen and providing or attempting to provide a substituted or adulterated specimen, for any test must result in the immediate unfavorable termination of the individual’s authorization and permanent denial of authorization thereafter.

6.27.2 Any individual who is determined to have been involved in the sale, use, or possession of illegal drugs or the consumption of alcohol within a protected area of a nuclear power plant, or while performing the FFD administration duties that require the individual to be subject to this FFDP shall immediately have his or her authorization unfavorably terminated and permanently denied from the date of the unfavorable termination of authorization.

6.27.3 Any individual who resigns or withdraws his or her application for authorization before authorization is terminated or denied for a first violation of the FFD policy involving a confirmed positive drug or alcohol test result shall immediately have his or her authorization denied permanently from the date of termination or denial.

6.27.4 If an individual resigns or withdraws his or her application for authorization before his or her authorization is terminated or denied for any violation of the FFD policy, CPNPP shall record the resignation or withdrawal, the nature of the violation, and the minimum sanction that would have been required had the individual not resigned or withdrawn his or her application for authorization.

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- 6.27.5 Lacking any other evidence to indicate the use, sale, or possession of illegal drugs or consumption of alcohol on site, a confirmed positive drug or alcohol test result must be presumed to be an indication of offsite drug or alcohol abuse in violation of the FFD policy.
- 6.27.6 The first violation of the FFD policy involving a confirmed drug or alcohol test result must, at a minimum, result in the immediate unfavorable termination of the individual's authorization for at least 14 days from the date of the unfavorable termination.
- 6.27.7 Any subsequent confirmed positive drug or alcohol test result, including during an assessment or treatment period, must result in the denial of authorization for a minimum of 5 years from the date of denial.
- 6.27.8 For individuals whose authorization was denied for 5 years under 6.26.7, any subsequent violation of the drug and alcohol provisions of an FFD policy must immediately result in permanent denial of authorization.
- 6.27.9 The abuse or misuse of prescription or over the counter medication is considered a violation of the FFDP if the MRO determines that the misuse constitutes substance abuse.
- 6.27.10 The penalties for misuse of prescription or over-the-counter medication representing substance abuse are the same as the penalties for confirmed positive drug tests. Misuse of prescription or over-the-counter medication which is not substance abuse as determined by the MRO may result in disciplinary action up to and including termination and denial of UA.

6.28 Management Actions Regarding Possible Impairment

- 6.28.1 If an individual appears to be impaired or the individual's fitness is questionable, except as permitted under Section 6.9, "Policy for Unscheduled Work Call Outs," CPNPP shall take immediate action to prevent the individual from performing duties within the scope of the FFDP, including suspending unescorted access pending determination of their fitness to safely and competently perform their duties.
- 6.28.2 If an observed behavior or physical condition creates a reasonable suspicion of possible substance abuse, CPNPP shall perform drug and alcohol testing.
- 6.28.3 The results must be determined to be negative before the individual returns to performing their duties.
- 6.28.4 If the physical condition is the smell of alcohol with no other behavioral or physical indications of impairment, then only a negative alcohol test is required before the individual returns to performing his or her duties.

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6.28.5 For other indications of possible impairment that do not create a reasonable suspicion of substance abuse, CPNPP may permit the individual to return to performing his or her duties only after the impairing or questionable conditions are resolved and a determination of fitness indicates that the individual is fit to safely and competently perform his or her duties.

6.28.6 If a reasonable belief that an NRC employee or NRC contractor may be under the influence of any substance, or is otherwise unfit for duty, CPNPP may not deny access but shall take actions as stated in Section 6.14 of this procedure.

6.29 Determination of Fitness

6.29.1 A determination of fitness is the process entered when there are indications that an individual may be in violation of the FFD policy or is otherwise unable to safely and competently perform his or her duties.

6.29.2 A determination of fitness must be made by a licensed or certified professional who is appropriately qualified and has the necessary clinical expertise, to evaluate the specific fitness issues presented by the individual.

6.29.3 A professional may not perform a determination of fitness regarding fitness issues that are outside of his or her specific areas of expertise.

6.29.4 The types of professionals and the fitness issues for which they are qualified to make determinations of fitness include, but are not limited to, the following:

6.29.4.1 A MRO may determine the fitness of an individual who may have engaged in substance abuse and shall determine an individual's fitness to be granted authorization following an unfavorable termination or denial of authorization, but may not be qualified to assess the fitness of an individual who may have experienced mental illness, significant emotional stress, or other mental or physical conditions that may cause impairment but are unrelated to substance abuse, unless the MRO has additional qualifications for addressing those fitness issues.

6.29.4.2 A clinical psychologist may determine the fitness of an individual who may have experienced mental illness, significant emotional stress, or cognitive or psychological impairment from causes unrelated to substance abuse, but may not be qualified to assess the fitness of an individual who may have a substance abuse disorder, unless the psychologist is also an MRO.

6.29.4.3 A psychiatrist may determine the fitness of an individual who is taking psychoactive medications consistently with one or more valid prescription(s), but may not be qualified to assess potential impairment attributable to substance abuse, unless the psychiatrist has had specific training to diagnose and treat substance abuse disorders.

6.29.4.4 A physician may determine the fitness of an individual who may be ill, injured, fatigued, taking medications in accordance with one or more valid prescriptions, or using over-the-counter medications, but may not be qualified to assess the fitness of an individual who may have a substance abuse disorder, unless the physician is also an MRO.

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6.29.4.5 As a physician with specialized training, the MRO may determine the fitness of an individual who may have engaged in substance abuse or may be ill, injured, fatigued, taking medications under one or more valid prescriptions, and/or using over-the-counter medications, but may not be qualified to assess an individual's fitness to be granted authorization following an unfavorable termination or denial of authorization under this part.

6.29.4.6 A Substance Abuse Expert (SAE) may determine the fitness of an individual who may be engaged in the abuse of illegal or over the counter drugs, but may not be qualified in other fields.

6.29.5 A determination of fitness must be made in at least the following circumstances:

6.29.5.1 When there is an acceptable medical explanation for a positive, adulterated, substituted, or invalid test result, but there is a basis for believing that the individual could be impaired while on duty.

6.29.5.2 Before making return-to-duty recommendations after an individual's authorization has been terminated unfavorably or denied under an FFD policy.

6.29.5.3 Before an individual is granted authorization when potentially disqualifying FFD information is identified within the last five years that has not previously been evaluated by another licensee.

6.29.5.4 When potentially disqualifying FFD information is otherwise identified and the Reviewing Official concludes that a determination of fitness is warranted.

6.29.6 A determination of fitness that is conducted for cause (i.e., because of observed behavior or a physical condition) must be conducted through face-to-face interaction between the individual and the professional making the determination. Electronic means of communication may not be used.

6.29.7 If there is neither conclusive evidence of a FFD policy violation, nor a significant basis for concern that the individual may be impaired while on duty, then the individual must be determined to be fit for duty.

6.29.8 If there is no conclusive evidence of an FFD policy violation but there is a significant basis for concern that the individual may be impaired while on duty, then the individual must be determined to be unfit for duty.

6.29.8.1 This result does not constitute a violation of the FFD policy, and no sanctions may be imposed. However, the professional who made the determination of fitness shall consult with the individual's supervisor to identify the actions required to ensure that any possible limiting condition does not represent a threat to workplace or public health and safety.

6.29.8.2 The individual's supervisor shall implement the required actions and when appropriate, the individual may also be referred to the EAP.

6.29.9 Neither the individual nor CPNPP may seek a second determination of fitness if a determination of fitness has already been performed by a qualified professional employed by or under contract to the CPNPP.

6.29.9.1 After the initial determination of fitness has been made, the professional may modify his or her evaluation and recommendations based on new or additional information from other sources including, but not limited to, individual, another licensee or entity, or staff of an education or treatment program.

6.29.9.2 Unless the professional who made the initial determination of fitness is no longer employed by or under contract to the licensee, only that professional is authorized to modify the evaluation and recommendations.

6.29.9.3 When reasonably practicable, CPNPP shall assist in arranging for consultation between the new professional and the professional who is no longer employed, to ensure continuity and consistency in the recommendations and their implementation.

6.30 Methods and Techniques used for Testing for Alcohol

6.30.1 Screening for alcohol is done in the collection facility. The confirmatory tests for BAC are done using evidential-grade breath alcohol analysis instruments that conform to the National Highway Traffic Safety Administration standards.

6.30.2 Only one alcohol breath tests is needed unless a confirmatory is required. Testing shall be delayed at least 15 minutes if the donor has had anything to eat or drink, belched, or put anything into his or her mouth (including, but not limited to, a cigarette, breath mint or chewing gum).

6.30.3 Breath alcohol measurements less than 0.02 percent BAC are considered negative and are not generally reported to management. The Collector shall inform the donor of the results and remind the donor of the consequences of an alcohol violation for any reading >0.0 percent BAC.

6.30.4 When the result of the confirmatory test for alcohol is equal to or greater than 0.01 percent BAC but less than 0.02 percent BAC and the donor has been in a work status for 3 hours or more at the time the initial test was concluded (including any breaks for rest, lunch, dental/doctor appointments, etc.), the collector shall declare the test result as negative and inform Supervisor, Nuclear Security.

6.29.4.1 The licensee or other entity shall prohibit the donor from performing any duties and may not return the individual to performing such duties until a determination of fitness indicates that the donor is fit to safely and competently perform his or her duties.

6.30.5 If the initial test result is 0.02 percent BAC or higher, a confirmatory test must be conducted within 30 minutes after the conclusion of the initial test.

- 6.30.6 A confirmed positive test result for alcohol must be declared under any of the following conditions:
- 6.30.6.1 When the result of the confirmatory test is 0.04 percent BAC or higher.
 - 6.30.6.2 When the result of the confirmatory test is 0.03 percent BAC or higher and the donor had been in a work status for at least 1 hour at the time the initial test was concluded including any breaks for rest, lunch, dental/doctor appointments, etc.)
 - 6.30.6.3 When the result of the confirmatory test is 0.02 percent BAC or higher and the donor had been in a work status for at least 2 hours at the time the initial test was concluded (including any breaks for rest, lunch, dental/doctor appointments, etc.)

6.31 Methods and Techniques used for Testing Drugs

6.31.1 Urine Specimen Collection

CPNPP's collection facility follows procedures for collecting urine specimens that are described in procedure SEC-124, "Fitness for Duty Collections."

6.31.2 Chain of Custody

- 6.31.2.1 The CPNPP FFDP calls for both the donor and the Collector to participate in completing the chain-of-custody form and to assure that all required information is documented during each specimen collection.
- 6.31.2.2 The chain-of-custody form identifies the donor and the collection process and transfers custody of the specimen.
- 6.31.2.3 Every effort shall be made to minimize the number of persons handling and transporting the specimens.
- 6.31.2.4 The original of the chain-of-custody form accompanies the specimen to the HHS-certified laboratory.
- 6.31.2.5 The Supervisor, Nuclear Security or designee shall take appropriate action based on reports regarding tampering or discrepancies between the information on the specimen container and the information on the chain-of-custody documents.
- 6.31.2.6 If CPNPP uses a form other than the current Federal custody-and-control form, it shall provide a memorandum to the laboratory explaining why a non-Federal form was used, but must ensure, at a minimum, that the form used contains all the required information on the Federal custody-and-control form.

6.31.3 Validity testing

The HHS-certified laboratory shall perform initial validity testing of each specimen as follows:

- 6.31.3.1 Determine the creatinine concentration;
- 6.31.3.2 Determine the specific gravity of every specimen for which the creatinine concentration is less than 20 mg/dL;
- 6.31.3.3 Determine the pH;
- 6.31.3.4 Perform one or more initial validity tests for oxidizing adulterants; and

- 6.31.3.5 Perform additional validity tests, the choice of which depends on the observed indicators or characteristics below, when the following conditions are observed:
- 6.31.3.5.1 Reactions or responses characteristic of an adulterant obtained during initial or confirmatory drug tests (e.g., non-recovery of internal standards, unusual response)
 - 6.31.3.5.2 Possible unidentified interfering substance or adulterant.
- 6.31.4 Abnormal physical characteristics
- 6.31.4.1 The lab shall report specimens as adulterated, substituted, and invalid or dilute per 10 CFR 26.
 - 6.31.4.2 If the presence of an interfering substance/adulterant is suspected that could make a test result invalid, but it cannot be identified (e.g., a new adulterant), laboratory personnel shall consult with the MRO and, with the MRO's agreement, shall send the specimen to another HHS-certified laboratory that has the capability to identify the suspected substance.
 - 6.31.4.3 CPNPP may not specify more stringent validity test cutoff levels than those specified in this section.
- 6.31.5 Cutoff levels for drugs and drug metabolites
- 6.31.5.1 The following cutoff levels will be applied for initial testing of specimens to determine whether they are negative for the indicated drugs and drug metabolites, except if validity testing indicates that the specimen is dilute.
 - 6.31.5.2 Initial Test cutoff levels for drugs and drug metabolites [nanograms (ng)/mL]
 - Marijuana metabolites 50
 - Cocaine metabolites 300
 - Opiate metabolites 2000
 - Phencyclidine (PCP) 25
 - Amphetamines 1000
 - 6.31.5.3 CPNPP may require the HHS-certified laboratory to conduct special analyses of dilute specimens as follows:
 - 6.31.5.3.1 If initial validity testing indicates that a specimen is dilute, the HHS-certified laboratory shall compare the responses of the dilute specimen to the cutoff calibrator in each of the drug classes.
 - 6.31.5.3.2 If any response is equal to or greater than 50 percent of the cutoff, the HHS-certified laboratory shall conduct confirmatory testing of the specimen down to the LOD for those drugs and/ or drug metabolites.
 - 6.31.5.3.3 The laboratory shall report the numerical values obtained from this special analysis to the MRO.

6.31.6 Confirmatory Drug Testing.

6.31.6.1 A specimen that is identified as positive on an initial drug test must be subject to confirmatory testing for the class(es) of drugs for which the specimen initially tested positive.

6.31.6.2 The HHS-certified laboratory shall apply the confirmatory cutoff levels except if the special analysis of dilute specimens is performed.

6.31.6.3 Drug or metabolites Cutoff level (ng/mL)

- Marijuana metabolite¹15
- Cocaine metabolite²150
- Opiates:
 - Morphine 2000
 - Codeine 2000
- 6-acetylmorphine³10
- Phencyclidine (PCP)25
- Amphetamines:
 - Amphetamine500
 - Methamphetamine⁴500

1 As delta-9-tetrahydrocannabinol-9-carboxylic acid.

2 As benzoylecgonine.

3 Test for 6-AM when the confirmatory test shows a morphine concentration exceeding 2,000 ng/mL.

4 Specimen must also contain amphetamine at a concentration equal to or greater than 200 ng/mL.

6.31.7 Retesting a specimen for adulterants.

6.31.7.1 A second laboratory shall use the required confirmatory validity test and criteria to reconfirm an adulterant result when retesting an aliquot from a single specimen.

6.31.7.2 The second laboratory may only conduct the confirmatory validity test needed to reconfirm the adulterant result reported by the first laboratory.

6.31.8 Retesting a specimen for substitution.

6.31.8.1 A second laboratory shall use its confirmatory creatinine and confirmatory specific gravity tests, when retesting an aliquot of a single specimen, to reconfirm that the creatinine concentration was less than 2 mg/dL and the specific gravity was less than or equal to 1.0010 or equal to or greater than 1.0200.

6.31.8.2 The second laboratory may only conduct the confirmatory creatinine and specific gravity tests to reconfirm the substitution result reported by the first laboratory.

6.32 Management Actions and Sanctions for Positive Drug Test.

- 6.32.1 If the MRO confirms a positive, adulterated, or substituted test result(s) from the first HHS-certified laboratory and the donor requests retesting of the specimen, CPNPP shall administratively withdraw the individual's authorization on the basis of the first confirmed positive, adulterated, or substituted test result until the results of the retest are completed by the MRO.
- 6.32.2 The MRO shall complete his or her review within 10 business days of the initial positive or retest of any original positive, adulterated, or substituted test result(s) and determines there is no legitimate medical explanation for the result, must notify the appropriate licensee representative.
- 6.32.3 If the results of the retest are negative, CPNPP:
- 6.32.3.1 May not impose any sanctions on the individual.
 - 6.32.3.2 Shall eliminate from the donor's personnel file and other records any matter that could link the individual to the temporary administrative action.
 - 6.32.3.3 May not disclose the temporary administrative action in response to a suitable inquiry or to any other inquiry or investigation required under 10 CFR 26. To ensure that no records have been retained, access to the system of files and records must be provided to personnel conducting reviews, inquiries into allegations, or audits under the provisions of 10 CFR 26, or to NRC inspectors.
 - 6.32.3.4 Shall provide the tested individual with a written statement that the records specified at the collection site have not been retained and shall inform the individual in writing that the temporary administrative action that was taken will not be disclosed and need not be disclosed by the individual in response to requests for self-disclosure of potentially disqualifying FFD information.
- 6.32.4 If a donor requests a retest and the specimen is not available due to circumstances outside of the donor's control (including, but not limited to, circumstances in which there is an insufficient quantity of the single specimen or the original specimen is lost in transit to the second HHS-certified laboratory, or the specimen has been lost at the HHS-certified laboratory, the MRO shall cancel the test and instruct that another collection is required under direct observation as soon as reasonably practical.
- 6.32.5 CPNPP shall eliminate from the donor's personnel and other records any matter that could link the donor to the original positive, adulterated or substituted test result(s) and any temporary administrative action, and may not impose any sanctions on the donor for a cancelled test.
- 6.32.6 If test results from the second specimen collected are positive, adulterated, or substituted and the MRO determines that the donor has violated the FFD policy, then CPNPP shall impose the appropriate sanctions, but may not consider the original confirmed positive, adulterated, or substituted test result in determining the appropriate sanctions.

6.33 Criteria for Observed Collections

Procedures for collecting urine specimens must provide for the donor's privacy unless a directly observed collection is warranted. The following circumstances constitute the exclusive grounds for performing a directly observed collection:

- 6.33.1 The donor has presented, at this or a previous collection, a urine specimen that the HHS-certified laboratory reported as being substituted, adulterated, or invalid to the MRO and the MRO reported that there is no adequate medical explanation for the result.
- 6.33.2 The donor has presented a urine specimen that falls outside the required temperature range.
- 6.33.3 The collector observes conduct clearly and unequivocally indicating an attempt to dilute, substitute, or adulterate the specimen.
- 6.33.4 A directly observed collection is required under Section 6.4, Authorization with Potentially Disqualifying Fitness-for-Duty Information.

6.34 Negative Findings Based on Scientific Insufficiency

The Supervisor Access Authorization or designee maintains records on specimens that summarize any negative findings based on scientific insufficiency and makes them available to the NRC on request.

6.35 Notifying a Worker of a Positive Drug Test Result

- 6.35.1 The MRO notifies the Access Authorization Supervisor or designee when a MRO conference needs to take place or when more information is needed from a worker prior to making a final evaluation of a chemical testing report.
- 6.35.2 The MRO must provide the worker with an opportunity to explain a positive drug urinalysis laboratory report prior to determining whether the report indicates a violation of the FFDP.
- 6.35.3 The MRO's review of the test results must be completed and management notified within 10 days of the initial presumptive positive screening test.
- 6.35.4 The Supervisor, Nuclear Security or designee will arrange a conference between the MRO and the worker if the worker is unavailable for a conference with the MRO.
- 6.35.5 If attempts to reach the worker are unsuccessful, the worker will be notified by certified mail of the consequences of a positive violation.

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6.36 Other Positive Drug Testing Notification Procedure

If the MRO determines that the chemical testing indicates a violation of the FFDP, the following steps are taken:

- 6.36.1 The MRO notifies Supervisor, Nuclear Security or designee of the determination.
- 6.36.2 The Supervisor, Nuclear Security or designee notifies the Shift Security Supervisor to ensure that the security computer system is updated to remove or deactivate access levels for the worker.
- 6.36.3 The Supervisor, Nuclear Security or designee notifies the individuals' supervisor or contract management and informs the worker of the consequences of the FFDP violation.
- 6.36.4 The individuals supervisor or designee reviews at a minimum, all work performed by a worker who has violated the FFDP, for the period from the time the worker's tour of duty started on the day of the chemical test to the time the worker was removed from the Protected Area for the violation.
- 6.36.5 Document and acknowledge completion of this review with any findings and forward to the Supervisor, Nuclear Security or designee.
- 6.36.6 This documentation shall be maintained for at least five years.
- 6.36.7 If the worker is a supervisor, a licensed reactor operator, or FFD Program Personnel, a report to the NRC is necessary within 24 hours.
- 6.36.8 Notify Site Security and the nuclear plant representative normally responsible for making notifications to the NRC Operations Center.

6.37 Positive Alcohol Testing Notification Procedure

When the breath analysis test results indicate a violation of the FFDP, the following steps are taken:

- 6.37.1 The supervisor arranges transportation for the individual.
- 6.37.2 The supervisor or designee reviews at a minimum, all work performed by a worker who has violated the FFDP, for the period from the time the worker's tour of duty started on the day of the chemical test to the time the worker was removed from the Protected Area for the violation.
- 6.37.3 Document and acknowledge completion of this review with any findings and forward to the Supervisor, Nuclear Security or designee. Take appropriate actions, as necessary, based on the above review and findings.
- 6.37.4 This documentation shall be maintained for at least five years.

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6.37.5 The Supervisor, Nuclear Security or designee notifies the worker of the denial of unescorted access.

6.37.6 The Supervisor, Nuclear Security or designee notifies the Security Shift Supervisor to deactivate access levels for the worker.

6.37.7 If the worker is a supervisor, a licensed reactor operator, or FFDP personnel a report to the NRC is necessary within 24 hours.

6.37.8 Notify Site Security and the nuclear plant representative normally responsible for making notifications to the NRC Operations center.

6.38 Denying Unescorted Access to Nuclear Plants for FFD Violations

When it is determined that an individual will not be granted unescorted access, the Supervisor, Nuclear Security or designee:

6.38.1 Ensures that unescorted access is denied by contacting the Security Shift Supervisor if the individual has UA.

6.38.2 Prepares an unescorted access denial notification letter to be sent to the worker and files a copy in the worker's folder.

6.38.3 Records the details of the unescorted access denial in the Comanche Peak Access Program (CPAP) database.

6.38.4 Updates the Personnel Access Data System (PADS).

6.39 Appeals Policy

6.39.1 If a worker is denied access for a violation of the FFD program, the individual may initiate an appeal by submitting, in writing, the issues and all known facts to the Supervisor, Nuclear Security, or Reviewing Official as specified in the denial letter.

6.39.2 In the case where the worker has a specimen determined to be adulterated, the worker will be considered to have refused to participate in the FFDP and may not request retesting of the sample.

6.39.3 Workers may appeal a positive alcohol determination by submitting, in writing, the issues and all known facts to the Supervisor, Nuclear Security or Reviewing Official as specified in the denial letter.

6.39.4 A worker will not be discriminated or retaliated against in any manner for submitting an appeal or for requesting clarification of any issues.

6.39.5 If the review determines the worker was not in violation of the FFDP, the Supervisor, Nuclear Security or designee will notify the worker, the worker's supervisor, contract management, and any other sites (as applicable) that access may be reauthorized.

6.39.6 If the worker is a supervisor or a licensed reactor operator, a report to the NRC is necessary within 24 hours. Notify Site Security and the nuclear plant representative normally responsible for making notifications to the NRC Operations Center.

6.39.7 Supervisor, Nuclear Security or designee will ensure that the violation entry is removed from the internal and external databases (i.e., CPAP and PADS).

6.40 Blind Performance Testing

6.40.1 Blind samples shall be indistinguishable from a donor's specimen using the same channels through which donors' specimens are sent to laboratory.

6.40.2 A custody-and-control form shall be used with fictional initials on the specimen bottle labels/seals, and indicate for the MRO on the MRO's copy that the specimen is a blind performance test sample.

6.40.3 CPNPP shall use only blind performance test samples that have been certified by the supplier to be:

6.40.3.1 Negative - A negative blind performance test sample may not contain a measurable amount of a target drug analyte and must be certified by immunoassay and confirmatory testing.

6.40.3.2 Drug positive - These samples must contain a measurable amount of the target drug or analyte in concentrations ranging between 150 and 200 percent of the initial cutoff values and be certified by immunoassay and confirmatory testing to contain one or more drug(s) or drug metabolite(s).

6.40.3.3 A false negative challenge - This blind performance test sample must contain a measurable amount of the target drug or analyte in concentrations ranging between 130 and 155 percent of the initial cutoff values.

6.40.3.4 Adulterated - The adulterated blind performance test sample must have a pH of less than or equal to 2, or greater than or equal to 12, or a nitrite or other oxidant concentration equal to or greater than 500 mcg/mL, equal to or greater than 50 mcg/mL chromium (VI) -equivalents, or a halogen concentration equal to or greater than the LOD.

Blind performance test samples for other adulterants must have adulterant concentrations equal to or greater than (or equal to or less than, as appropriate) the initial cutoff levels used by the licensee's or other entity's HHS-certified laboratory.

6.40.3.5 Dilute - The dilute blind performance test sample must contain a creatinine concentration that is equal to or greater than 5 mg/dL but less than 20 mg/dL, and the specific gravity must be greater than 1.0010 but less than 1.0030.

6.40.3.6 Substituted - The substituted blind performance test sample must contain less than 2 mg/dL of creatinine, and the specific gravity must be less than or equal to 1.0010, or equal to or greater than 1.0200.

- 6.40.4 During the initial 90-day period of any new drug testing program, CPNPP shall submit blind performance test specimens to each HHS-certified laboratory it contracts with at the rate of 20 percent of the total number of samples submitted (up to a maximum of 100) or 30 blind performance test samples, whichever is greater.
- 6.40.5 Thereafter, CPNPP shall submit per quarter blind performance samples at a rate of one percent of all samples submitted (to a maximum of 100), or 10 blind performance test samples, whichever is greater.
- 6.40.6 Both during the initial 90-day period and quarterly thereafter, blind performance test samples should be submitted at a frequency that corresponds to the submission frequency for other specimens.
- 6.40.7 Approximately 60 percent of the blind performance test samples submitted to the laboratory must be positive for one or more drugs or drug metabolites per sample and submitted so that all of the drugs for which the FFD program is testing are included at least once each calendar quarter, except as follows:
- 6.40.7.1 At least two times each quarter blind samples shall be positive for marijuana metabolite.
- 6.40.7.2 At least two quarters each year, an additional blind sample that is positive for cocaine shall be submitted instead of the required sample that is positive for PCP.
- 6.40.8 The positive blind performance test samples must be positive for only those drugs for which the FFD program is testing.
- 6.40.9 To challenge the HHS-certified laboratory's ability to limit false negatives, approximately 10 percent of the blind samples submitted to the laboratory each quarter must be a false negative challenge.
- 6.40.9.1 Challenges the HHS-certified laboratory's ability to determine specimen validity, CPNPP shall submit blind samples each quarter that are appropriately adulterated, diluted, or substituted, in the amount of 20 percent of the specimens submitted that quarter or at least three samples per quarter (one each that is adulterated, diluted, or substituted), whichever is greater. These samples must be formulated at the concentrations established for Adulterated and Substituted.
- 6.40.9.2 Approximately 10 percent of the blind performance test samples submitted to the laboratory each quarter must be negative.

6.41 Errors in Testing

- 6.41.1 The Supervisor, Nuclear Security shall ensure that the HHS-certified laboratory investigates any testing errors or unsatisfactory performance discovered in blind performance testing, in the testing of actual specimens, or through the processing of reviews, as well as any other errors or matters that could adversely reflect on the testing process.
- 6.41.2 Whenever possible, the investigation must determine relevant facts and identify the root cause(s) of the testing or process error.
- 6.41.3 CPNPP or the HHS-certified laboratory, shall take action to correct the causes of any errors or unsatisfactory performance that are within each entity's control.
- 6.41.4 Sufficient records shall be maintained to furnish evidence of activities affecting quality. CPNPP shall assure that the cause of the condition is determined and that corrective action is taken to preclude repetition.
- 6.41.5 The identification of the significant condition, the cause of the condition, and the corrective action taken shall be documented and reported to appropriate levels of management.
- 6.41.6 If a false positive error occurs on a blind performance test sample or on a regular specimen, CPNPP shall require the laboratory to take corrective action to minimize the occurrence of the particular error in the future.
- 6.41.7 If there is reason to believe that the error could have been systematic, CPNPP may also require review and re-analysis of previously run specimens.
- 6.41.8 If a false positive error occurs on a blind performance test sample and the error is determined to be technical or methodological CPNPP shall instruct the laboratory to provide all quality control data from the batch or analytical run of specimens that included a false positive sample. In addition, the laboratory shall retest all specimens that analyzed as positive for that drug or metabolite, or as adulterated, substituted, dilute, or invalid in validity testing, from the time of final resolution of the error back to the time of the last satisfactory performance test cycle.
- 6.41.9 This retesting must be documented by a statement signed by the laboratory's responsible person.
- 6.41.10 CPNPP and the NRC also may require an onsite review of the laboratory, which may be conducted unannounced during any hours of operation of the laboratory.

6.42 Fitness for Duty Program Performance Data

6.42.1 The Access Supervisor or designee shall collect and compile FFD program performance data. The FFD program performance data must include:

6.42.1.1 The random testing rate.

6.42.1.2 Drugs for which testing is conducted and cutoff levels, including results of tests using lower cutoff levels, tests for drugs not included in the HHS panel, and any special analyses of dilute specimens.

6.42.1.3 Populations tested (i.e., individuals in applicant status, permanent licensee employees, C/Vs).

6.42.1.4 Number of tests administered and results of those tests sorted by population tested (i.e., individuals in applicant status, permanent licensee employees, C/Vs).

6.42.1.5 Conditions under which the tests were performed.

6.42.1.6 Substances identified.

6.42.1.7 Number of subversion attempts by type.

6.42.1.8 Summary of management actions.

6.42.2 The Access Supervisor or designee shall analyze the data at least annually and take appropriate actions to correct any identified program weaknesses.

6.42.3 Records of the data, analyses, and corrective actions taken must be retained for at least 3 years or until the completion of any related legal proceedings, whichever is later.

6.42.4 If CPNPP terminates an individual's authorization or takes administrative action on the basis of the results of a positive initial drug test for marijuana or cocaine, it shall also report these test results in the annual summary by processing stage (i.e., initial testing at the licensee testing facility, testing at the HHS-certified laboratory, and MRO determinations).

6.42.5 The report must include the number of terminations and administrative actions taken against individuals for the reporting period.

6.42.6 The Supervisor, Nuclear Security or designee shall submit the FFD program performance data (for January through December) to the NRC annually, before March 1 of the following year.

6.42.7 The Supervisor, Nuclear Security or designee may submit the FFD program performance data in a consolidated report, as long as the report presents the data separately for each site.

6.43 NRC Inspections

CPNPP and its contractors or vendors who implement any portion of this FFDP shall permit authorized representatives of the NRC to inspect, to copy, or to obtain copies of records and to inspect premises, activities, and personnel as may be necessary to accomplish the purposes of this FFDP.

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6.44 Reporting Requirements

CPNPP shall inform the NRC of significant violations of the FFD policy, significant FFD program failures, and errors in drug and alcohol testing. These events must be reported under 10 CFR 26.719, rather than under the provisions of 10 CFR 73.71.

The following significant FFD policy violations and programmatic failures must be reported to the NRC Operations Center by telephone within 24 hours after discovery of the violation:

- The sale, use, purchase, or possession of illegal drugs within the protected area of a nuclear plant.
- Any acts by any person licensed under 10 CFR Part 55 to operate a power reactor or by any supervisor with unescorted access or otherwise assigned duties within the scope of the FFDP that:
 - Involve the sale, use, purchase, or possession of illegal drugs, or
 - Result in a determination that the individual has violated the licensee's or other entity's FFD policy (including subversion), or
 - Involve the consumption of alcohol within a protected area or while performing the duties that require the individual to be subject to the FFD program, or
 - Result in a confirmed positive alcohol test indicating a BAC equal to or greater than 0.04 percent when reporting for scheduled work or during scheduled work.
- Any intentional act that casts doubt on the integrity of the FFD program, or
- Any programmatic failure, degradation, or discovered vulnerability of the FFD program that may permit undetected drug or alcohol use or abuse by individuals within a protected area, or by individuals who are assigned to perform duties that require them to be subject to the FFD program.

6.45 Records

The Supervisor, Nuclear Security or designee shall maintain, until the NRC terminates the license(s), a file system and procedures for protecting the personal information collected under the FFDP.

CPNPP shall retain the following records for at least 5 years after the termination or denial of an individual's authorization or until the completion of all related legal proceedings, whichever is later:

- Records of self-disclosures, employment histories, and suitable inquiries that are required under 10 CFR 26.55, 26.57, 26.59, and 26.69 that result in the granting of authorization;
- Records pertaining to the determination of a violation of the FFD policy and related management actions;
- Documentation of the granting and termination of authorization; and
- Records of any determinations of fitness conducted under 10 CFR 26.189, including any recommendations for treatment and follow-up testing plans.
- superseded versions of the written FFD policy and procedures required under 10 CFR 26.27, 26.39, and 26.203(b)

CPNPP STATION ADMINISTRATION MANUAL		PROCEDURE NO. STA-910
FITNESS FOR DUTY PROGRAM	REVISION 11	PAGE 53 of 53

CPNPP shall retain the following records for at least 3 years or until the completion of all related legal proceedings, whichever is later:

- Records of FFD training and examinations conducted under 10 CFR 26.29; and
- Records of audits, audit findings, and corrective actions taken under 10 CFR 26.41.

CPNPP shall ensure the retention and availability of records pertaining to any 5-year denial of authorization under 10 CFR 26.75(c), (d), or (e)(2) and any permanent denial of authorization under 10CFR 26.75(b) and (g) for at least 40 years or until, on application, the NRC determines that the records are no longer needed.

CPNPP shall retain written agreements for the provision of services under this part for the life of the agreement or until completion of all legal proceedings related to an FFD policy violation that involved those services, whichever is later.

CPNPP shall retain records of the background investigations, credit and criminal history checks, and psychological assessments of FFD program personnel, conducted under 10 CFR 26.31(b)(1)(i), for the length of the individual’s employment by or contractual relationship with the licensee or other entity, or until the completion of all related legal proceedings, whichever is later.

CPNPP Collection Facility shall maintain and make available documentation of all aspects of the testing process for at least 2 years or until the completion of all legal proceedings related to a determination of an FFD violation, whichever is later. This 2-year period may be extended on written notification by the NRC or by the Company. Documentation that must be retained includes, but is not limited to, the following:

- Personnel files, including training records, for all individuals who have been authorized to have access to specimens, but are no longer under contract to or employed by the collection site;
- Chain-of-custody documents (other than forms recording specimens with negative test results and no FFD violations or anomalies, which may be destroyed after appropriate summary information has been recorded for program administration purposes);
- Quality assurance and quality control records;
- Superseded procedures;
- Records that summarize any test results that the MRO determined to be scientifically insufficient for further action;
- Either printed or electronic copies of computer-generated data;
- Records that document the dates, times of entry and exit, escorts, and purposes of entry of authorized visitors, maintenance personnel, and service personnel who have accessed secured areas of licensee testing facilities and HHS-certified laboratories; and
- Records of the inspection, maintenance, and calibration of EBTs.

7.0 ATTACHMENTS/FORMS

7.1 Attachments
None

7.2 Forms

7.2.1 STA-910-01, "EAP Referral Form"

7.2.2 STA-910-03, "Determination of Fitness Form"

U. S. Nuclear Regulatory Commission
CP-201000243
TXNB-10010
2/22/2010

Attachment 5

Response to Request for Additional Information No. 4245 (CP RAI #132)

RESPONSE TO REQUEST FOR ADDITIONAL INFORMATION

**Comanche Peak Units 3 and 4
Luminant Generation Company LLC
Docket No. 52-034 and 52-035**

RAI NO.: 4245 (CP RAI #132)

SRP SECTION: NONE – No SRP Section

QUESTIONS for Integrated Security Coordination and Policy Branch (NSIR/DSP/ISCPB)

DATE OF RAI ISSUE: 1/19/2010

QUESTION NO.: NONE-3

Under 10 CFR 52.79(a)(44), the Applicant's FSAR must contain a description of the fitness for duty (FFD) program required by 10 CFR Part 26 and its implementation. How will the proposed license conditions described in the COLA Application, Part 10 comport with FSAR, Part 2, Table 13.4-201, item 20.

ANSWER:

COLA Application Part 10 has been revised to reflect FSAR Table 13.4-201 Item 20.

Impact on R-COLA

See attached marked-up COLA Part 10 Revision 1 pages 7 and 8.

Impact on S-COLA

None.

Impact on DCD

None.

**Comanche Peak Nuclear Power Plant, Units 3 & 4
COL Application
Part 10 - ITAAC and Proposed License Conditions**

Program Title	Milestone
Security Program – Physical Security Program	Prior to receipt of fuel on site.
Security Program- Safeguards Contingency Program	Prior to receipt of fuel on site.
Security Program – Training and Qualification Program	Prior to receipt of fuel on site.
Motor-Operated Valve Testing	Prior to initial fuel load.
Initial Test Program	<p>Prior to the first construction test for the Construction Test Program.</p> <p>Prior to the first preoperational test for the Preoperational Test Program.</p> <p>Prior to initial fuel loading for the Startup Test Program.</p>
Fitness for Duty Program—Construction Mgt & Oversight personnel	Prior to on-site construction of safety or security related SSCs.
Fitness for Duty Program—Construction Workers & first Line Supv.	Prior to on-site construction of safety or security related SSCs.
Fitness for Duty Program—Operations Phase Program	Prior to fuel receipt
<u>FFD Program for Construction (workers and first-line supervisors)</u>	<u>Prior to onsite construction of safety- or security-related SSCs</u>
<u>FFD Program for Construction (management and oversight personnel)</u>	<u>Prior to onsite construction of safety- or security-related SSCs</u>
<u>FFD Program for Security Personnel</u>	<u>Prior to fuel assemblies being received on site</u>
	<u>Prior to the earlier of:</u> <u>Licensee's receipt of fuel assemblies onsite or</u> <u>Establishment of a protected area or</u> <u>The 10 CFR 52.103(g) finding</u>
<u>FFD Program for FFD Program Personnel</u>	<u>Prior to initiating 10 CFR 26 construction activities</u>
<u>FFD Program for persons required to physically report to the TSC or EOF</u>	<u>Prior to the conduct of the first full-participation emergency preparedness under 10 CFR 50, App E, Section F.2.a</u>

RCOL2_
NONE-3

**Comanche Peak Nuclear Power Plant, Units 3 & 4
COL Application
Part 10 - ITAAC and Proposed License Conditions**

Program Title	Milestone
<u>FFD Program for Operation</u>	<u>Prior to the earlier of:</u> <u>Licensee's receipt of fuel assemblies onsite or</u> <u>Establishment of a protected area or</u> <u>The 10 CFR 52.103(g) finding</u>

RCOL2_
NONE-3