

C. R. "Chuck" Pierce
Director
Regulatory Affairs

Southern Nuclear
Operating Company, Inc.
42 Inverness Center Parkway
Post Office Box 1295
Birmingham, AL 35242

Tel 205.992.7872
Fax 205.992.5296



MAY 21 2012

Docket Nos.: 52-025
52-026

ND-12-1100
10 CFR 26.719

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

Southern Nuclear Operating Company
Vogtle Electric Generating Plant Units 3 & 4
Submittal of Report in Accordance with Fitness for Duty Requirements

Ladies and Gentlemen:

Southern Nuclear Operating Company (SNC) submits the enclosed report regarding drug testing errors, in accordance with 10 CFR 26.719(c)(1), which describes the requirements for reporting Fitness for Duty (FFD) "... errors or matters that could adversely reflect on the integrity of the random selection or testing process..." Any identified errors must be reported to the NRC within 30 days of completing an investigation. Since the investigation was completed on April 20, 2012, this report is required to be submitted by May 21, 2012.

It should be noted that after further details of this issue were uncovered, SNC reported these details in Event Notification (EN) #47765 on March 23, 2012 to satisfy the requirements of 10 CFR 26.417(b)(1) and 10 CFR 26.719(b)(4). The Event Notification was subsequently revised on March 26, 2012. This letter and enclosure, however, satisfies the requirement under 10 CFR 26.719(c)(1) and provides the information, details, and corrective actions taken.

This letter contains no NRC regulatory commitments. If you have any questions, please contact Dave Midlik at (205) 992-6860.

Respectfully submitted,

A handwritten signature in cursive script that reads "C. R. Pierce".

C. R. Pierce

CRP/DWM/dmw

Enclosure: Submittal of Report in Accordance with Fitness for Duty Requirements

A021
DO92
NRO

cc: Southern Nuclear Operating Company

Mr. S. E. Kuczynski, Chairman, President & CEO (w/o enclosures)
Mr. J. A. Miller, Executive VP, Nuclear Development
Mr. D. A. Bost, Chief Nuclear Officer (w/o enclosures)
Mr. B. L. Ivey, VP, Regulatory Affairs
Mr. M. D. Rauckhorst, VP, Vogtle 3 & 4 Construction (w/o enclosures)
Mr. D. H. Jones, VP, Regulatory Affairs, Vogtle 3 & 4
Mr. J. R. Johnson, VP, Operational Readiness, Vogtle 3 & 4 (w/o enclosures)
Mr. T. E. Tynan, Site VP, Vogtle 1 & 2
Mr. D. M. Lloyd, Project Support Director, Vogtle 3 & 4 (w/o enclosures)
Mr. C. R. Pierce, Regulatory Affairs Director
Mr. M. J. Ajluni, Nuclear Licensing Director
Mr. P. R. Bizjak, Medical & FFD Manager
Ms. B. P. Rooks, Medical & FFD Supervisor
Mr. D. L. Fulton, Environmental Manager
Mr. J. D. Williams, Site Support Manager, Vogtle 3 & 4 (w/o enclosures)
Mr. C. H. Mahan, Site Licensing Manager, Vogtle 3 & 4
Ms. A. G. Aughtman, Corporate Licensing Manager, Vogtle 3 & 4
Mr. W. A. Sparkman, Licensing Supervisor
Mr. D. W. Midlik, Licensing Supervisor
RTYPE: GOV0208
File AR.01.02.06

Nuclear Regulatory Commission

Mr. V. M. McCree, Region II Administrator (w/o enclosures)
Mr. L. M. Cain, Senior Resident Inspector – Vogtle (w/o enclosures)
Mr. F. M. Akstulewicz, Deputy Director Div. of New Reactor Licensing (w/o enclosures)
Mr. M. E. Tonacci, AP1000 Licensing Branch Chief
Mr. R. G. Joshi, Lead Project Manager of New Reactors
Ms. D. L. McGovern, Project Manager of New Reactors
Mr. B. M. Baval, Project Manager of New Reactors
Ms. M. A. Sutton, Environmental Project Manager
Mr. L. M. Cain, Senior Resident Inspector of VEGP 1 & 2
Mr. J. D. Fuller, Senior Resident Inspector of VEGP 3 & 4

Georgia Power Company

Mr. B. H. Whitley, Nuclear Development Director

State of Georgia

Mr. J. H. Turner, Environmental Protection Division Director

Oglethorpe Power Corporation

Mr. M. W. Price, Executive VP and Chief Operating Officer
Mr. K. T. Haynes, Director of Contracts and Regulatory Oversight

Municipal Electric Authority of Georgia

Mr. J. E. Fuller, Senior VP, Chief Financial Officer
Mr. S. M. Jackson, VP, Power Supply

Dalton Utilities

Mr. D. Cope, President and Chief Executive Officer

Bechtel Power Corporation

Mr. J. S. Prebula, Project Engineer (w/o enclosures)
Mr. R. W. Prunty, Licensing Engineer

Tetra Tech NUS, Inc.

Ms. K. K. Patterson, Project Manager

Shaw Stone & Webster, Inc.

Mr. G. Grant, VP, Licensing & Regulatory Affairs (w/o enclosures)
Ms. K. Stoner, Vogtle Project Manager (w/o enclosures)
Mr. C. A. Castell, Licensing Engineer
Mr. E. C. Wenzinger, Licensing Engineer, Vogtle Units 3 & 4

Westinghouse Electric Company, LLC

Ms. J. Falascino, VP, Project Delivery (w/o enclosures)
Mr. T. H. Dent, VP, Consortium Project Director Vogtle Units 3 & 4 (w/o enclosures)
Mr. R. F. Ziesing, Director, Vogtle AP1000 Operations and Consortium Licensing (w/o enclosures)
Mr. P. A. Russ, Director, AP1000 Global Licensing
Mr. R. A. DeLong, Director of U.S. & International Licensing (acting)
Mr. S. A. Bradley, Vogtle Project Licensing Manager
Mr. M. A. Melton, Manager, Regulatory Interfaces
Mr. T. J. Ray, Manager, AP1000 COL Licensing Support

Southern Nuclear Operating Company

ND-12-1100

Enclosure

Vogle Electric Generating Plant (VEGP) Units 3 & 4

Submittal of Report in Accordance with Fitness for Duty Requirements

Introduction

10 CFR 26.71, "Maintaining authorization", states in (a)(2) that individuals may maintain authorization as long as "the individual remains subject to a drug and alcohol testing program that meets the requirements of 10 CFR 26.31, including random testing". 10 CFR 26.31, "Drug and alcohol testing" describes the procedure for generation of the random pool for collection of drug and alcohol tests for individuals covered by the Fitness for Duty (FFD) Program as required by NRC Regulations. Southern Nuclear Operating Company's (SNC's) Corporate Guideline 720-001, "Fitness for Duty", and Shaw's Vogtle 3&4 FFD Program Procedure SV0-G1-GSP-001, "Drug and Alcohol Testing", also describe random pool generation procedures.

On March 9, 2012, Shaw's FFD Program Manager notified SNC's FFD Program Manager of his discovery of anomalies in Shaw's random pool while preparing to perform the weekly random pool generation for the week of March 12th. Specifically, Shaw's FFD Program Manager observed that the random pool count was higher than the active badge report from earlier the same day. A 1:1 comparison was conducted and it was determined that twenty-three (23) individuals were currently badged for the construction site, but not in the random pool. A full investigation was initiated; the details and findings of which are summarized below.

Background

From the inception of Shaw's FFD program, the Shaw FFD Manager has been the sole individual responsible for adding or removing individuals from the random pool, which was maintained as an FFD Matrix in an EXCEL spreadsheet. On March 1, 2012, the Shaw FFD Manager was terminated and the Shaw FFD Program Manager assumed those responsibilities. On March 9, 2012, while attempting to run the random generator to obtain the pool for the week of March 12, 2012, the FFD Program Manager observed that the random pool count in the FFD Matrix was higher than the active badge report from earlier the same day. The number of individuals in the FFD Matrix was 2,446, while those listed as actively badged totaled 2,066, showing a discrepancy of 380. A 1:1 comparison was conducted and it was determined that twenty-three (23) individuals held current badges, but were not in the random pool. The remainder (357) was in the random pool, but not currently badged. File review for each of the 23 badged, but not in the pool revealed the following:

- Two (2) were removed from the pool after transferring to another company (sub-contractor). The FFD Manager had received email notification from the Reviewing Official that the initial badges had been terminated, but did not receive notice that the individuals had transferred to a new company (another sub-contractor), issued new badges, and needed to remain in the pool.
- Two (2) were removed from the pool after an Access Specialist requested their inactive badges be terminated; however, the Access Specialist had inadvertently referred to the individuals' temporary badges issued before UA/UAA was granted.
- One (1) had access reinstated, but the FFD Manager was not included on the email distribution list and, therefore, not aware that the individual should be added back to the random pool.
- One (1) was removed from the pool after his son, who shared the same name, was unfavorably terminated. Both father and son were inadvertently removed.
- Four (4) had access reinstated, but the FFD Manager did not place them back into the random pool.
- One (1) was originally badged as a Subpart K worker and never placed in the pool. The process for a FFD Program Personnel classification was started, but not completed due to

the individual not requiring this classification. The individual was not placed into the pool until seven months after the pre-access test.

- Nine (9) were removed from the pool for undetermined reasons.
- Three (3) were discovered to have been placed in the random pool, but their names were listed differently on the badge report than the FFD Matrix.

In order to determine the extent of condition, Shaw FFD staff reviewed five additional weeks of random pool selections, one in each month from October 2011 to February 2012, with the following findings.

Month	Actively Badged	Random Pool Size	Difference	Badged but not in Random Pool
October-2011	1767	1957	190	162
November-2011	1688	2018	330	66
December-2011	1691	2032	341	95
January-2012	1790	2122	332	33
February-2012	1989	2279	290	49

A review of all individuals outside of the random pool was conducted, and it was determined that 145 had not had a drug and alcohol test since initial badge issuance. Pre-access testing was performed on these individuals following this discovery.

Shaw's FFD Program Manager further investigated the accuracy of their random pool selection process by review and comparison of the random selection for June 4, 2010, a date chosen because it is six months after implementation of Shaw's FFD Program. Based on this information, Shaw's FFD Program Manager concluded that it is possible that the errors in the random pool generation have been present since the inception of Shaw's FFD Program.

On April 12, 2012, one of the identified individuals who had been badged, but not in the pool was confirmed positive by the MRO on a pre-access test. The individual's access was immediately denied and the person was removed from site. As a result, SNC requested Shaw FFD staff to compare every weekly random pool generation to the Badge Classification report for the corresponding week in order to identify individuals currently badged, but not eligible for random selection at some point during their period of unescorted access. Shaw did not complete this request for the following reasons, as taken directly from their Apparent Cause Evaluation Report, 2012-0217.

- "All individuals eligible for random selection are identified via hard copies in non-alphabetical order.
- To compare the two lists, a single individual requires at a minimum (17) seventeen hours per week. The random pool has been generated by SHAW for approximately 120 weeks. This is a total of 2,040 hours required to complete the review of each week.
- Dedicating one SHAW FFD Staff member to this task will take approximately 51 weeks (2,040 hr/40 hr work week)."

Shaw did review records for all individuals currently badged to determine if any of them may not have had random, for-cause, follow-up or post accident testing since badge issuance and identified 1,103 individuals who had not been tested.

During the investigation, on March 28, 2012, it was discovered that contractor/vendor individuals subject to Subparts A-H, N&O had not been entered in the random pool after pre-access

collections as required by §26.67. This occurred during the on-boarding process prior to the individuals reporting to the construction site. SNC Licensing determined that this information was related to the random pool issue currently being investigated and previously reported to the NRC. SNC initiated Technical Evaluation (TE) #359428 to document this event in SNC's Corrective Action Program with an action to track Shaw's CAR 2012-0217 to ensure adequate actions and resolutions for this issue.

Corrective Actions

Immediate corrective actions taken by Shaw include:

- Notification on March 9, 2012, to Shaw Security to place the 23 individuals identified as having current badges, but not in the random pool on hold until pre-access drug and alcohol tests were completed and they were placed in the random pool.
- Notification on March 9, 2012, to Shaw senior management, SNC FFD Program Manager, and SNC Licensing.
- Reviewed Access records of the 23 individuals to verify current status and the accuracy of the records.
- Removed terminated individuals from the random pool.
- On March 10, 2012, implemented a double verification process of the random pool prior to generation of the random list. This double verification (i.e., review by two FFD Coordinators) was implemented during the investigation to ensure that the pool is accurate.
- Implemented interim procedure step: All changes to the random pool will be reviewed by at least two FFD personnel prior to implementation and will be documented on the Traveler form if adding personnel to the pool or by email to the Reviewing Official if removing personnel from the pool.
- Initiated a full investigation on March 10, 2012, with extension into January and February 2012 to determine the extent of condition.

On March 12, 2012, Shaw FFD personnel initiated CAR 2012-0217 to document the random pool event into Shaw's Corrective Action Program. This CAR was assigned a 2A-Level Status, which requires an Apparent Cause Evaluation (ACE). The ACE was assigned a due date of April 20, 2012. The results of all corrective actions, including the ACE, are summarized above in the "Background" section.

SNC initiated CR #422034 to document this event into SNC's Corrective Action Program and implemented monthly spot audits of Shaw's FFD Program.

Four additional corrective actions were developed by Shaw. The first includes implementation of the random pool generator in the EmPACT system, an electronic database, also currently utilized by SNC, that automates background and FFD elements as required by 10 CFR 26. The FFD Matrix EXCEL spreadsheet will be discontinued upon start-up of EmPACT.

The second and third corrective actions relate to procedure revisions. A requirement will be added to Shaw's procedure, SV0-G1-GSP-001, "Drug and Alcohol Testing", for the FFD Manager/designee to perform a weekly comparison between the Badge Classification Report and the EmPACT random pool prior to generating the random report. Their "Unescorted Access Authorization" procedure, SV0-G1-GSP-009, will be revised to clarify the communication process

between Shaw FFD, Payroll, Human Resources, and Security with regards to activation and deactivation/termination of individuals.

The final corrective action will be to create a secondary pool to include the 1,103 individuals who have not had any type of drug and alcohol test since initial unescorted access. This pool will be run weekly with the random pool and will be run at a rate of no less than 1%. The individuals will remain in both pools until all have either received a random test or terminated their unescorted access.

Summary

Investigation of the apparent causes of the identified random pool errors determined that human performance error was the primary cause. Specifically, the program had an inadequate self-verification process in that only the FFD Manager added or removed individuals from the random pool and did so without having a peer-check for validation. Similarly, there was no process for the Access Specialist responsible for reviewing access files to validate/verify an individual's access was terminated prior to notifying the FFD Manager. Additional human performance errors included utilizing a different methodology when creating the random pool report each week (e.g. sorting one week by individuals' company and the next by their assigned number) and failure to verify that individuals had been collected and added to the random pool prior to documenting completion of these items on the Traveler form.

Use of an EXCEL spreadsheet played a significant role as well, since its use increased the opportunity for errors. This spreadsheet is located in a shared folder and can be opened simultaneously by more than one FFD personnel. Any changes made when one FFD personnel saved the file and exited the program would be overwritten when the second FFD personnel exited the program.

The investigation revealed that communications among the relevant departments (FFD, Payroll, Human Resources, and Security) were unclear and less than adequate to prevent errors. For example, instances were identified in which email notices of termination were inadvertently not sent to the FFD Manager. In addition, systems for these departments may have different versions of individuals' names (e.g. middle name entered for first name or father and son with same name) or inconsistent individual ID numbers.

SNC has implemented monthly spot audits to monitor and provide oversight for Shaw's FFD Program and will continue to do so to ensure that the program meets the intent and requirements as specified in 10 CFR 26. SNC maintains a strong FFD program and is committed to sustaining excellence and helping Shaw to achieve excellence. If the performance of Shaw's FFD program becomes unacceptable, SNC will adjust its actions to include more stringent monitoring and/or transition to partial or full management of that program.