

TVA EMPLOYEE CONCERNS
SPECIAL PROGRAM

REPORT NUMBER: 71300

REPORT TYPE: Management and Personnel Subcategory

REVISION NUMBER: 3

TITLE: Medical

PAGE 1 OF 28

REASON FOR REVISION: Incorporation of Revision 2 comments from TAS.

PREPARATION

PREPARED BY:

Kenneth A. Mason
SIGNATURE

3/18/87
DATE

REVIEWS

PEER:

H. Dean Peoples
SIGNATURE

5/6/87
DATE

TAS:

Randal R. Gibbs
SIGNATURE

5/11/87
DATE

CONCURRENCES

SIGNATURE DATE

CEG-H: *W. B. W. [Signature]* *7 May 87*

SRP: *Jim [Signature]* *5-15-87*
*SIGNATURE DATE

APPROVED BY:

W. J. [Signature] *5/15/87*
ECSP MANAGER DATE

N/A
MANAGER OF NUCLEAR POWER DATE
CONCURRENCE (FINAL REPORT ONLY)

*SRP Secretary's signature denotes SRP concurrences are in files.

1765T

8706040287 8705227
PDR ADCK 05000259
P PDR

2
2
2



Preface

This subcategory report is one of a series of reports prepared for the Employee Concerns Special Program (ECSP) of the Tennessee Valley Authority (TVA). The ECSP and the organization which carried out the program, the Employee Concerns Task Group (ECTG), were established by TVA's Manager of Nuclear Power to evaluate and report on those Office of Nuclear Power (ONP) employee concerns filed before February 1, 1986. Concerns filed after that date are handled by the ongoing ONP Employee Concerns Program (ECP).

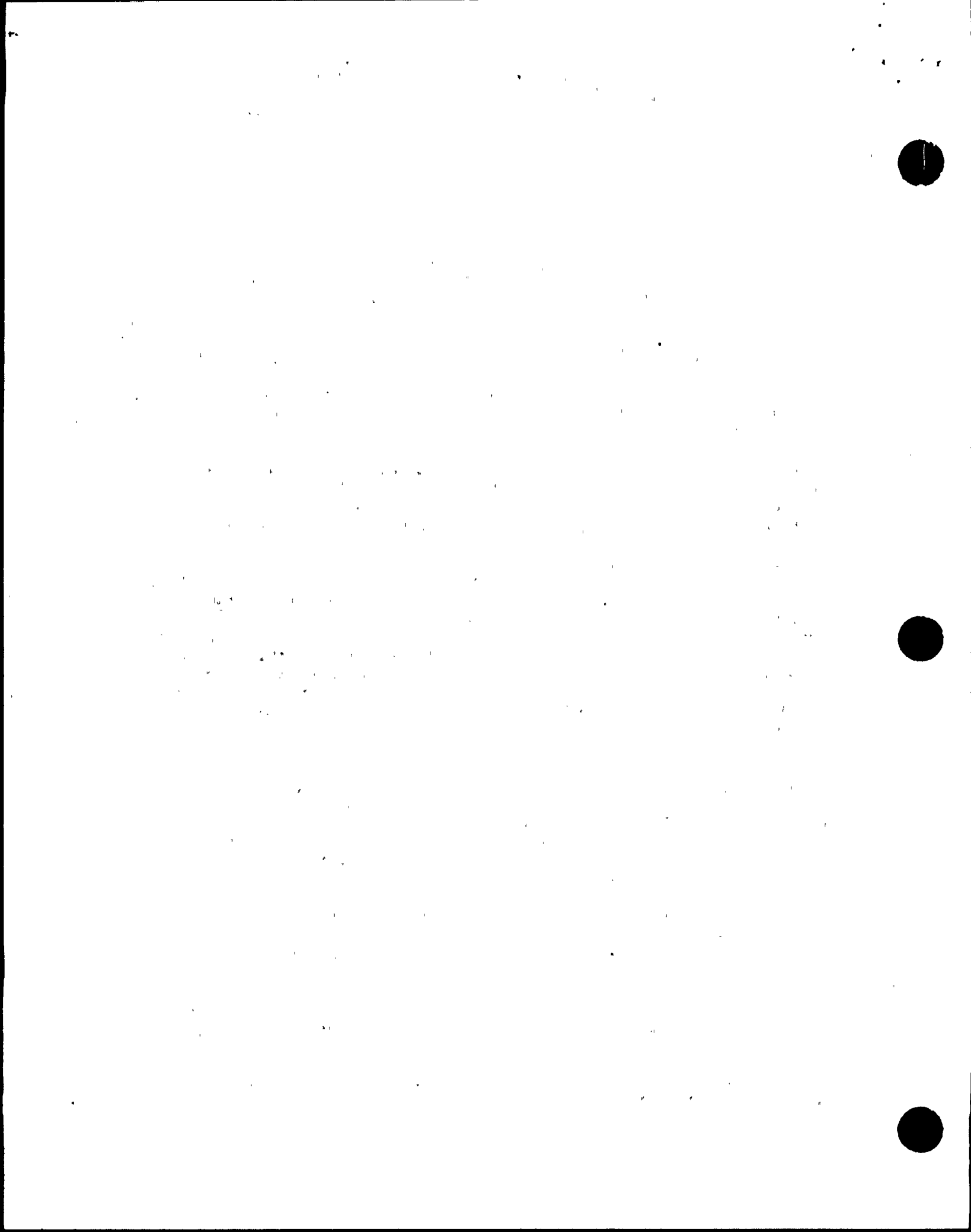
The ECSP addressed over 5800 employee concerns. Each of the concerns was a formal, written description of a circumstance or circumstances that an employee thought was unsafe, unjust, inefficient, or inappropriate. The mission of the Employee Concerns Special Program was to thoroughly investigate all issues presented in the concerns and to report the results of those investigations in a form accessible to ONP employees, the NRC, and the general public. The results of these investigations are communicated by four levels of ECSP reports: element, subcategory, category, and final.

Element reports, the lowest reporting level, will be published only for those concerns directly affecting the restart of Sequoyah Nuclear Plant's reactor unit 2. An element consists of one or more closely related issues. An issue is a potential problem identified by ECTG during the evaluation process as having been raised in one or more concerns. For efficient handling, what appeared to be similar concerns were grouped into elements early in the program, but issue definitions emerged from the evaluation process itself. Consequently, some elements did include only one issue, but often the ECTG evaluation found more than one issue per element.

Subcategory reports summarize the evaluation of a number of elements. However, the subcategory report does more than collect element level evaluations. The subcategory level overview of element findings leads to an integration of information that cannot take place at the element level. This integration of information reveals the extent to which problems overlap more than one element and will therefore require corrective action for underlying causes not fully apparent at the element level.

To make the subcategory reports easier to understand, three items have been placed at the front of each report: a preface, a glossary of the terminology unique to ECSP reports, and a list of acronyms (terms formed from the first letters of a series of words).

Additionally, at the end of each subcategory report the reader will find at least two attachments. The first is a Subcategory Summary Table that includes the following information: the concern number, a brief statement of the concern, and a designation of nuclear safety-related concerns. The second attachment is a listing of the concerns included in each issue evaluated in the subcategory.



The subcategories are themselves summarized in a series of eight category reports. Each category report reviews the major findings and collective significance of the subcategory reports in one of the following areas:

- ° management and personnel relations
- ° industrial safety
- ° construction
- ° material control
- ° operations
- ° quality assurance/quality control
- ° welding
- ° engineering

A separate report on employee concerns dealing with specific contentions of intimidation, harassment, and wrongdoing will be released by the TVA Office of the Inspector General.

Just as the subcategory reports integrate the information collected at the element level, the category reports integrate the information assembled in all the subcategory reports within the category, addressing particularly the underlying causes of those problems that run across more than one subcategory.

A final report will integrate and assess the information collected by all of the lower level reports prepared for the ECSP, including the Inspector General's report.

For more detail on the methods by which ECTG employee concerns were evaluated and reported, consult the Tennessee Valley Authority Employee Concerns Task Group Program Manual. The Manual spells out the program's objectives, scope, organization, and responsibilities. It also specifies the procedures that were followed in the investigation, reporting, and closeout of the issues raised by employee concerns.

ECSP GLOSSARY OF REPORT TERMS*

classification of evaluated issues the evaluation of an issue leads to one of the following determinations:

Class A: Issue cannot be verified as factual

Class B: Issue is factually accurate, but what is described is not a problem (i.e., not a condition requiring corrective action)

Class C: Issue is factual and identifies a problem, but corrective action for the problem was initiated before the evaluation of the issue was undertaken

Class D: Issue is factual and presents a problem for which corrective action has been, or is being, taken as a result of an evaluation

Class E: A problem, requiring corrective action, which was not identified by an employee concern, but was revealed during the ECTG evaluation of an issue raised by an employee concern.

collective significance an analysis which determines the importance and consequences of the findings in a particular ECSP report by putting those findings in the proper perspective.

concern (see "employee concern")

corrective action steps taken to fix specific deficiencies or discrepancies revealed by a negative finding and, when necessary, to correct causes in order to prevent recurrence.

criterion (plural: criteria) a basis for defining a performance, behavior, or quality which ONP imposes on itself (see also "requirement").

element or element report an optional level of ECSP report, below the subcategory level, that deals with one or more issues.

employee concern a formal, written description of a circumstance or circumstances that an employee thinks unsafe, unjust, inefficient or inappropriate; usually documented on a K-form or a form equivalent to the K-form.



TVA EMPLOYEE CONCERNS
SPECIAL PROGRAM

REPORT NUMBER: 71300

FRONT MATTER REV: 2

PAGE iv OF viii

evaluator(s) the individual(s) assigned the responsibility to assess a specific grouping of employee concerns.

findings includes both statements of fact and the judgments made about those facts during the evaluation process; negative findings require corrective action.

issue a potential problem, as interpreted by the ECTG during the evaluation process, raised in one or more concerns.

K-form (see "employee concern")

requirement a standard of performance, behavior, or quality on which an evaluation judgment or decision may be based.

root cause the underlying reason for a problem.

*Terms essential to the program but which require detailed definition have been defined in the ECTG Procedure Manual (e.g., generic, specific, nuclear safety-related, unreviewed safety-significant question).



Acronyms

| | |
|-------|--|
| AI | Administrative Instruction |
| AISC | American Institute of Steel Construction |
| ALARA | As Low As Reasonably Achievable |
| ANS | American Nuclear Society |
| ANSI | American National Standards Institute |
| ASME | American Society of Mechanical Engineers |
| ASTM | American Society for Testing and Materials |
| AWS | American Welding Society |
| BFN | Browns Ferry Nuclear Plant |
| BLN | Bellefonte Nuclear Plant |
| CAQ | Condition Adverse to Quality |
| CAR | Corrective Action Report |
| CATD | Corrective Action Tracking Document |
| CCTS | Corporate Commitment Tracking System |
| CEG-H | Category Evaluation Group Head |
| CFR | Code of Federal Regulations |
| CI | Concerned Individual |
| CMTR | Certified Material Test Report |
| COC | Certificate of Conformance/Compliance |
| DCR | Design Change Request |
| DNC | Division of Nuclear Construction (see also NU CON) |



TVA EMPLOYEE CONCERNS
SPECIAL PROGRAM

REPORT NUMBER: 71300

FRONT MATTER REV: 2

PAGE vi OF viii

DNE Division of Nuclear Engineering
DNQA Division of Nuclear Quality Assurance
DNT Division of Nuclear Training
DOE Department of Energy
DPO Division Personnel Officer
DR Discrepancy Report or Deviation Report
ECN Engineering Change Notice
ECP Employee Concerns Program
ECP-SR Employee Concerns Program-Site Representative
ECSP Employee Concerns Special Program
ECTG Employee Concerns Task Group
EEOC Equal Employment Opportunity Commission
EQ Environmental Qualification
EMRT Emergency Medical Response Team
EN DES Engineering Design
ERT Employee Response Team or Emergency Response Team
FCR Field Change Request
FSAR Final Safety Analysis Report
FY Fiscal Year
GET General Employee Training
HCI Hazard Control Instruction
HVAC Heating, Ventilating, Air Conditioning
II Installation Instruction
INPO Institute of Nuclear Power Operations
IRN Inspection Rejection Notice

TVA EMPLOYEE CONCERNS
SPECIAL PROGRAM

REPORT NUMBER: 71300

FRONT MATTER REV: 2

PAGE vii OF viii

| | |
|--------|---|
| L/R | Labor Relations Staff |
| H&AI | Modifications and Additions Instruction |
| HI | Maintenance Instruction |
| HSPB | Merit Systems Protection Board |
| HT | Magnetic Particle Testing |
| NCR | Nonconforming Condition Report |
| NDE | Nondestructive Examination |
| NPP | Nuclear Performance Plan |
| NPS | Non-plant Specific or Nuclear Procedures System |
| NQAM | Nuclear Quality Assurance Manual |
| NRC | Nuclear Regulatory Commission |
| NSB | Nuclear Services Branch |
| NSRS | Nuclear Safety Review Staff |
| NU CON | Division of Nuclear Construction (obsolete abbreviation, see DNC) |
| NUMARC | Nuclear Utility Management and Resources Committee |
| OSHA | Occupational Safety and Health Administration (or Act) |
| ONP | Office of Nuclear Power |
| OWCP | Office of Workers Compensation Program |
| PHR | Personal History Record |
| PT | Liquid Penetrant Testing |
| QA | Quality Assurance |
| QAP | Quality Assurance Procedures |
| QC | Quality Control |
| QCI | Quality Control Instruction |



TVA EMPLOYEE CONCERNS
SPECIAL PROGRAM

REPORT NUMBER: 71300

FRONT MATTER REV: 2

PAGE viii OF viii

| | |
|--------|--|
| QCP | Quality Control Procedure |
| QTC | Quality Technology Company |
| RIF | Reduction in Force |
| RT | Radiographic Testing |
| SQN | Sequoyah Nuclear Plant |
| SI | Surveillance Instruction |
| SOP | Standard Operating Procedure |
| SRP | Senior Review Panel |
| SWEC | Stone and Webster Engineering Corporation |
| TAS | Technical Assistance Staff |
| T&L | Trades and Labor |
| TVA | Tennessee Valley Authority |
| TVTLC | Tennessee Valley Trades and Labor Council |
| UT | Ultrasonic Testing |
| VT | Visual Testing |
| WBECSP | Watts Bar Employee Concern Special Program |
| WBN | Watts Bar Nuclear Plant |
| WR | Work Request or Work Rules |
| WP | Workplans |

1.0 CHARACTERIZATION OF ISSUES

1.1 Introduction

The Medical Subcategory includes 58 employee concerns which raised 18 separate issues. The issues are grouped into three elements:

- ° Quality and Components of the Medical Program
- ° Administration of the Federal Employees' Compensation Act (FECA)
- ° Miscellaneous Medical Issues

To locate the issue in which a particular concern is evaluated, consult the following attachments:

Attachment A, Subcategory Summary Table

Attachment B, List of Concerns by Issue

All Management and Personnel Category concerns having a technical component (including all concerns designated Nuclear Safety-Related) are shared with the appropriate technical category for investigation and resolution of that technical component. Report(s) sharing a concern with this report are identified in the entry for that concern on Attachment A.

1.2 Description of Issues

1.2.1 Quality and Components of the Medical Program

Issue 71301 - TVA Medical Treatment is Inadequate

The concerns in this issue question the quality of medical service provided by TVA.

Issue 71302 - TVA Medical Personnel Are Not Qualified

The CIs claimed that TVA medical personnel lack the necessary credentials and training and are not qualified for their jobs.

Issue 71303 - Inadequate Medical Staff on Night Shift

Two CIs complained that the medical staffing on third shift is inadequate because there is no physician on duty.

Issue 71304 - Insufficient Emergency Medical Equipment Onsite

The CI stated that the lack of previously available eye treatment equipment necessitated a trip to the hospital to remove foreign matter from his/her eyes. She/he also contended that a heart attack victim might have survived had there been proper equipment available for emergency treatment.

Issue 71305 - TVA Medical Does Not Accept Private Physician's Medical Constraints

The basic contention in this issue is that TVA ignores the recommendations of private physicians, especially regarding medical constraints.

Issue 71306 - Health and Safety Training is Inadequate

The CIs felt that employees are inadequately informed of the hazards presented by certain chemicals. Medical personnel should participate in safety meetings and educate craft in substance dangers, noise limitations, and exposure to harmful chemicals.

Issue 71307 - Employees Who Falsify Medical Records are Retained

The CI contends that an employee who falsifies his/her medical records to gain employment is not punished or terminated when the falsification is discovered.

Issue 71308 - Employees Denied Access to Medical Records

The CI felt that his/her medical records contained erroneous data and he/she was not permitted to review the records.

Issue 71309 - Inadequate Physical Suitability Program and Health Standards

This issue is based on a perception that medically unsuitable personnel are working onsite and therefore health standards are too low or are not being effectively enforced.

1.2.2 Administration of the Federal Employees Compensation Act (FECA)



Issue 71310 - Injured Employees Returned to Duty Too Soon

The contention in this issue is that employees are returned to full duty too soon following treatment for work-related injuries.

Issue 71311 - Slow Claim Processing and Inadequate Compensation

The contention in this issue is that it takes an extremely long time to receive compensation for injuries, and the compensation is sometimes inadequate or incorrect.

Issue 71312 - Compensation is Unjustly Denied

The CIs contend that their claims for compensation were unjustly rejected or denied by TVA.

Issue 71313 - Claim Filing Information Purposely Withheld

The CI alleged that medical personnel intentionally withhold information as to which forms are required for filing compensation claims and on how to complete the forms.

1.2.3 Miscellaneous Medical Issues

Issue 71314 - Truck Drivers' Health Affected by Hazardous Materials

The CI alleged that more than half of 57 truck drivers suffered various physical ailments caused by transporting hazardous materials.

Issue 71315 - Unstable Employee in Sensitive Position

This issue is based on a contention that an employee deemed unstable by colleagues is in a sensitive position.

Issue 71316 - Medical and File Cabinets are Unsecure

The CI stated that medical and file cabinets cannot be easily locked and can be left unsecure.

Issue 71317 - Personnel Department Changes Medical Records

The CI alleged that the Personnel Department makes unauthorized changes to medical records.

Issue 71318 - Concerns With Insufficient Information to Evaluate

The following two concerns contained insufficient information to permit identification with an issue or to evaluate:

PH-85-003-016
WI-85-044-001

2.0 SUMMARY

2.1 Summary of Issues

The evaluator has reviewed all the information available on the concerns in this subcategory. The information pertinent to the evaluation of the issues has been considered and incorporated in this report.

The issues in this subcategory question the quality of medical care, the qualifications of medical staff personnel, the adequacy of available medical services and fair and efficient administration of the FECA. Four miscellaneous concerns were each evaluated as independent issues.

2.2 Summary of Evaluation Process

The evaluation process consisted of research of pertinent regulatory requirements and TVA policy documents, interviews of knowledgeable personnel, review of individual employee medical and compensation records, and review of previous investigation reports that responded to 22 of the employee concerns included in this subcategory.

2.3 Summary of Findings

None of the issues presented enough evidence to be verified as factually accurate. Gathering additional evidence was very difficult as the names of the CIs were not releasable to the evaluator. However, the findings did indicate the need for more effective communication with employees regarding entitlements and avenues of appeal available to them.

2.4 Summary of Collective Significance

A comparison of the large number of visits to WBN medical facilities (over 40,000) during the timeframe of the concerns, with the relatively small number of concerns (58) argues that WBN employees are generally satisfied with their onsite medical services.

1
2
3
4
5



No regulatory requirement mandates the high level of medical service that TVA has chosen to provide at its nuclear sites. However, employees need to be better informed on how to obtain available medical services and on how to appeal what they consider unsatisfactory service.

2.5 Summary of Causes

The concerns were caused by a lack of employee awareness of the medical services and benefits available or of the procedures for handling complaints and appeals.

2.6 Summary of Corrective Action

The Office of Nuclear Power has implemented training for managers and supervisors regarding TVA medical care policy, the medical program, and administration of the FECA. This training is included in the TVA Supervisory Training Program, which is required for all supervisors.

3.0 EVALUATION PROCESS

3.1 General Methodology

The evaluation of this subcategory was conducted according to the Evaluation Plan for the Employee Concerns Special Program (ECSP) and the Evaluation Plan for the Management and Personnel Group. The concern case files were reviewed. Source documents were researched and interviews were conducted to identify the requirements and criteria applicable to the issues raised by the concerns. The issues were evaluated against the identified requirements and criteria. A collective significance analysis of the findings was done. Causes were determined for negative findings and corrective action for negative findings was initiated or determined to be already completed or underway.

3.2 Specific Methodology

Research for TVA policy and regulatory requirements or commitments to NRC involved indepth analyses of the TVA Administrative Release Manuals, TVA Medical Examiner's Guide, TVA Medical Examiner's Guide Documentation Files, the TVA Division of Medical Services Historical Files, and Personnel History Records of TVA medical staff.

Interviews were conducted with personnel in TVA's Division of Medical Services Director's Office, with personnel in the Central Area Medical Services, with personnel at Watts Bar Nuclear Plant (WBN) Medical Office and Health Station, and with the Work Injury Compensation Services (WICs) staff. Interviews were also conducted with personnel from the Duke Power Company, Carolina Power and Light Company, Virginia Power Company, Alabama Power Company, National Aeronautics and Space Administration, General Services Administration, Veteran's Administration, Department of Interior, and United States Postal Services.

Computer analyses from the Division of Medical Services' Automated Medical Records System were also conducted to determine clinical visits, treatments, and disposition for duty of both employees and employment candidates at WBN.

The investigation of program practices included reviewing medical and compensation records of concerned individuals who allowed their identities to be revealed by Quality Technology Company (QTC).

This evaluation makes use of the results of previous investigative reports on 22 individual concerns. These earlier investigations were conducted by Quality Technology Company (QTC) and by Frank D. Faires, Medical Administrator, from September 6, 1985 to March 18, 1986. These previous investigations also included interviews with TVA medical employees and management personnel responsible for administering the Medical Program.

The WBN Medical Office and Health Station's adherence to TVA policy and regulatory requirements, and compatibility with other related industries or Federal agencies was reviewed

Note: See Attachment C for a List of Reference Documents.

See Attachment D for a List of Interviewees.

4.0 FINDINGS

4.1 Quality and Components of the Medical Program

Background

There are no regulatory requirements for providing medical treatments at a nuclear power site. However, under the provisions

of the TVA Code VIII HEALTH SERVICES, "Occupational Medical and Related Health Services," TVA:

helps employees to attain or maintain required or desirable health status by providing medical counsel, health education, treatment within limits described below, or referral to non-TVA sources of help.

Consistent with the Federal Employees Compensation Act (FECA), TVA provides treatment for service-connected injury or illness through its facilities and through cooperation with the Office of Workers' Compensation Programs, (OWCP) United States Department of Labor.

Within the limits of staff and equipment immediately available, TVA provides first-aid and temporary treatment for employees and nonemployees suffering non-job-related injury or illness on TVA premises.

TVA medical personnel and equipment respond as appropriate to any legitimate, reasonable request for emergency medical services to meet an emergency or life-threatening situation.

Also according to TVA Instruction VIII HEALTH SERVICES, "Examination":

Medical staffs of the Division of Medical Services provide treatment for occupational injury or illness within the limits of staff and facilities available and in accordance with rules and regulations established by the OWCP U. S. Department of Labor.

The employee remains responsible for obtaining non-TVA care for non-work-related health problems. Every employee is encouraged to establish contact with and utilize the services of a personal physician or medical facility for care of off-the-job illnesses or injuries. In most instances, treatment of nonoccupational injury and illness is not considered to be a responsibility of the occupational health program.

Assistance and available initial care will be provided in emergency situations arising at work where prompt treatment is a generally accepted method of preventing or controlling injury and disease. To reduce lost time from work, TVA also may offer, during work hours, limited medical treatment for minor

nonoccupational injuries and illnesses. An employee whose nonservice-related condition requires extensive treatment or is of major significance, is referred to his/her personal physician. TVA may offer services which will assist that physician in care of the worker.

TVA provides medical treatments for nonservice-connected injuries within the limits of staff and facilities, and also in emergency situations. Also within the limits of staff and time, TVA may provide medical treatments for employees with service-connected injuries if the injured employee requests so under the provisions of FECA.

From October 1, 1985 through June 30, 1986, there were 21,871 employee visits for clinical services to the DNC WBN Medical Office, of which 7,599 were for the purpose of medical treatments. Of the 7,599 treatments, 4,439 (58%) were for nonservice-connected injuries or illness, and 3,160 (42%) were for treating service-connected injuries or illnesses. Of the 3,160, TVA successfully treated 2,943 (93%) visits having to refer 217 (7%) for outside treatment. During the same time period, there were 18,417 employee visits for clinical services at the permanent plant WBN Health Station, of which 8,632 were for the purpose of medical treatments. Of the 8,632 treatments, 7,010 (81%) were for nonservice-connected injuries or illnesses, and 1,622 (19%) were for treating service-connected injuries or illnesses. Of the 1,622, TVA successfully treated 1,566 (97%) visits having to refer 56 (3%) for outside treatment.

Had these medical treatments for nonservice-connected injuries or illness not been available to employees, most employees would either have had to suffer through their ailment, taken a day of sick leave, or missed a day of pay. In addition, they would have incurred out-of-pocket medical expenses for the treatments.

4.1.1 Issue 71301 - TVA Medical Treatment is Inadequate

The CIs raising this issue contend that medical treatment given by TVA Medical Services is inadequate in terms of the quality of treatment received.

Discussion

The three concerns in this issue alleged (1) potentially ineffective medical treatment provided for on-the-job injury, (2) negligent handling of a job-related injury, and (3) failure to see a broken bone in initial x-ray, which resulted in improper treatment and a continuing problem.



Two of the concerns contained insufficient details to allow investigation of the specific cases (names of the individuals were not available to the evaluator). The third concern was previously investigated by a medical services staff member and a response was provided to the individual.

Medical personnel were interviewed and medical files were researched to determine the extent of complaints about the quality of medical services provided to employees. No record of such complaints was found, except the case of the allegedly misdiagnosed broken wrist cited above.

Conclusion

The investigation found that the issue of inadequate medical treatment is not supported by the evidence and therefore was not found to be factually accurate. Nevertheless, it is always possible for medical specialists, or any other specialist to make an error in judgment or an incorrect diagnosis.

If an employee feels that the treatment received is inadequate, he/she may discuss the situation with the physician or chief nurse at the facility. If no resolution is achieved, the situation may be appealed to the Area Chief Physician and, if necessary, to the TVA Medical Director. Also, FECA provides that employees who suffer job-related injuries are entitled to an initial choice of physician for treatment. An employee's choice of treatment by a TVA medical facility is not considered as an initial choice under FECA. If dissatisfied with TVA treatment, an employee still may choose a private physician to provide treatment under FECA.

4.1.2 Issue 71302 - Qualifications of Medical Personnel

The CIs claimed that TVA medical personnel lack the necessary credentials and training and are not qualified for their jobs.

Discussion

TVA requires its physicians to be graduates of American, Canadian, or other accredited medical schools. Although Federal Government physicians are not subject to state licensure laws, TVA also requires its physicians to hold a license to practice medicine in the United States. This evaluation determined that each license registration has been properly renewed. Beyond basic licensure, several TVA physicians are certified by medical specialty boards.

11



The medical staff includes two medical school graduates who do not hold state licenses, but neither works, nor is classified, as a physician. Until recently, both were classified as Physician Assistants, SE-6. One of them is now on the management schedule working as a clinical coordinator of workers' compensation and rehabilitation cases.

All WBN's nurses are registered professional nurses with current state licenses. Occupational nurse practitioners are required to have a minimum of ten months experience before being hired by TVA; occupational staff nurses are required to have at least 18 months prior experience in public or occupational health nursing, including at least one year of clinical nursing.

Construction Public Safety Service officers, who assist nurses on ambulance runs, have received emergency medical training that meets State standards for Emergency Medical Technician qualifications. Their training includes first aid, resuscitation, and other emergency techniques.

In addition to their basic professional training and experience, the WBN physicians and nurses have completed special training in emergency care and special training in handling radiations accidents from REAC/TS at the Oak Ridge Associated Universities.

Conclusion

A review of pertinent regulatory requirements, TVA policies, and personnel files revealed that all TVA medical professionals have the required education, licenses, and special training and are fully qualified for their positions. Therefore, this issue was not verified as factual.

4.1.3 Issue 71303 - Inadequate Medical Staff on Night Shift

Two CIs complained that the medical staffing on third shift is inadequate because there is no doctor on duty.

Discussion

The second and third shifts at the WBN Medical Office have one occupational health nurse on duty when construction is occurring during those shifts. At the WBN Health Station, at least one occupational staff nurse is on duty on all shifts, seven days per week.

Although there is no physician on duty during third shift, the staffing is considered to be adequate. All TVA nurses are fully trained to handle emergency situations. They are assisted by Public Safety officers who have received extensive training in emergency medical techniques (see 4.1.2). There are at least five trained personnel assigned on each shift, including on weekends, to respond to medical emergencies.

In addition, the TVA project physician is "on call" to receive requests for assistance and advice for any medical emergency. The onsite Health Physics staff is well trained to deal with radiological emergencies and we have agreements with community hospitals and the REAC/TS Center at Oak Ridge to provide prompt response to such emergencies.

The WBN Medical Office, Health Station, and ambulances are equipped with state-of-the-art emergency instruments, supplies, and equipment, but we do not, of course, have all the capabilities of a hospital emergency room. Patients with life-threatening injuries or illnesses are given the necessary first-aid and life support treatment and immediately transported to a hospital, just as they would be on day shift.

Conclusion

The investigation found that the medical staffing during night shift is adequate. A physician is not required because the nurses and public safety officers on duty are capable of properly handling medical emergencies. Therefore, this issue was not found to be factual.

4.1.4 Issue 71304 - Insufficient Emergency Medical Equipment Onsite

The CI stated that the lack of previously available eye treatment equipment necessitated a trip to the hospital to remove foreign matter from his/her eyes. She/he also contended that a heart attack victim might have survived had there been proper equipment available for emergency treatment.



Discussion

During the first 10 months of FY 1985, the WBN Medical Office had 376 employee patients with foreign bodies, most of which were in the eyes. The medical staff was able to effectively remove 336 of these foreign bodies and return the employee to work. It was necessary to refer 40 employees (10.6%) to outside specialist who have specialty training in ophthalmology because the foreign body was deeply embedded.

Before he retired in July 1983, the previous project physician, Dr. Robert Hicks, was able to remove most deeply embedded foreign bodies because he had additional training and practice in ophthalmological techniques. None of our current physician staff has this specialized training or experience.

There are no regulatory requirements to provide such a high degree of ophthalmological capability, nor is it TVA policy to do so. It was previously available only because of Dr. Hicks' unique qualifications and willingness to provide the service.

Records indicate that on April 16, 1983, medical personnel responded to an emergency call for an apparent heart attack victim. Upon arriving at the scene, the nurse assessed the condition of the patient and could find no pulse or other vital signs. The response team started CPR which was continued while the victim was being transported to the hospital. Unfortunately, the victim's condition was such that none of the emergency techniques could restore his pulse and breathing and he was pronounced dead on arrival at the hospital emergency room.

Conclusion

Neither of the incidents referenced in the concern that raised this issue resulted from a lack of equipment that is required by regulations or should reasonably be expected to be available. While it is arguable that the heart attack victim may have survived had more or better equipment been available, that contention is not supported by the evidence. Therefore, this issue was not found to be factually accurate.

4.1.5 Issue 71305 - TVA Medical Does Not Accept Private Doctor's Work Restrictions

The basic contention in this issue is that TVA ignores the recommendations of private doctors, especially work restrictions.

Discussion

TVA realized early in its existence the need for matching an employee's health condition with the requirements of the job. Physical examinations of applicants for employment became mandatory in 1934, and medical constraints (then known as work restriction codes) were developed to ensure that applicants were placed in work they were physically capable of performing. These constraints were also applied to employees who subsequently developed conditions which rendered them less able to perform their assigned jobs.

According to the TVA Medical Examiner's Guide, a "medical disposition for duty" is assigned an examinee and that disposition will be either "approved," "conditionally approved," or "not approved." A conditional approval is given for an individual if he or she has a health impairment which limits but does not preclude medical approval for the duty proposed. Medical constraints are placed upon individuals who are conditionally approved to "inform responsible management that specific accommodations may be required to enable the individual to perform the full range of pertinent job title and special duties safely and effectively."

According to the GUIDE, medical constraints are developed with input and close coordination from the individual, the individual's private physician, and the individual's TVA supervisor or manager. TVA management must specify relevant performance requirements and realistic hazards of the job. The TVA medical examiner makes the final decision when applying medical constraints since occupational health physicians are more fully aware of occupational health hazards than medical constraints.

One of the concerns in this issue was previously investigated by a TVA medical administrator and the situation was resolved. The WBN physician, upon learning that different medical constraints had been recommended by a private physician, asked the private physician to confirm his recommendations. This consultation resulted in acceptance of the private physician's recommended medical constraints.

As with disagreements concerning medical treatments, employees may discuss application of medical constraints with the physician at the local facility. If no resolution is achieved, the situation may be appealed to the appropriate Area Chief Physician. Following review by the Area Chief Physician, a review by TVA's Medical Director is required if the employee is dissatisfied with the Area Chief Physician's determination. Throughout the appeals process, the employee is encouraged to engage the active participation of his or her private attending physician.

Conclusion

The TVA medical examiner does make the final decision regarding work restrictions. However, the employee's private physician's recommendations are fully considered, along with input from the employee and his/her supervisor or manager. Therefore, this issue was not verified as factual.

4.1.6 Issue 71306 - Health and Safety Training is Inadequate

The CIs felt that employees are inadequately informed of the hazards presented by certain chemicals. Medical personnel should participate in safety meetings and educate craft in substance dangers, noise limitations, and exposure to harmful chemicals.

Discussion

There are no regulatory requirements for health education. However, according to TVA Code, VIII HEALTH SERVICES, "Occupational and Related Health Services," TVA:

helps employees to attain or maintain required or desirable health status by providing medical counsel, health education, treatment within limits described below, or referral to non-TVA sources of help.

TVA nurses conduct any management-requested special health education programs for employee groups and provide health counseling and education services to individual employees to promote health maintenance and restoration.

According to the Organization Bulletin, I Corporate Services, "Division of Occupational Health and Safety":

11



The Division of Occupational Health and Safety has corporate responsibility for formulating TVA occupational health and safety plans and policies. It develops and issues criteria and standards for control of hazards in the workplace... It develops and administers safety promotion, recognition, awareness, and incentive programs and materials as requested. It provides both technical and orientation health and safety training support to line management as requested.

Conclusion

Medical personnel are not responsible for determining health and safety requirements; they conduct training regarding medical topics only upon request by management. Therefore, this issue could not be verified as factual.

Employees who would like to receive health and hazardous materials education should request so from their supervisor who is responsible for making arrangements with presenting organizations such as the Division of Occupational Health and Safety or the WBN Safety Engineer.

Additional information about occupational health and hazardous materials issues may be found in Industrial Safety Subcategory Report 912, Industrial Hygiene.

4.1.7 Issue 71307 - Employees Who Falsify Medical Records Are Retained

The CI contends that an employee who falsifies his/her medical records to gain employment is not punished or terminated when the falsification is discovered.

Discussion

On each TVA medical examination/evaluation form, a certification statement is added to ensure the employee truthfully answered each item. The most common statement is:

I certify that I have truthfully answered the foregoing questions to the best of my knowledge. I further certify that should I develop a health problem or be placed on medication that might interfere with my ability to safely perform my duties, I will immediately notify my supervisor.

When it becomes known that an employee has falsified a medical record, the procedure below is carried out. A memorandum dated November 20, 1981, "Falsification of Medical Record Information" from Frank D. Faires, Medical Administrator, states:

Conflicting Information Uncovered At Time Of Employment Processing

Call the candidate's attention to the information just given by the candidate that conflicts with the previous record and make sure that the correct information and conflict is considered by the medical examiner and recorded in the medical record.

Conflicting Information Uncovered After The Employee Is On The Job

If the correct information indicates there may be a concealment of a health and safety threat, immediately call the employee's official supervisor or other appropriate authority and have the employee sent to medical for re-evaluation. Based on that re-evaluation, initiate appropriate medical disposition for continued duty, holding off duty, etc., and telephone me about the situation as early as possible. If the situation does not constitute an immediate health and safety threat, telephone me about the case as soon as possible. In cases where it appears there has been a deliberate and flagrant falsification of important medical information, I will refer these to the Personnel Security Officer for administrative disposition.

The Personnel Security Office in TVA's Division of Personnel then determines, on an individual basis, whether the falsification warrants termination.

If employees suspects or has information that indicates that another employee has falsified his or her medical record, they should contact the chief nurse at their local medical facility who will review the situation and notify the Medical Administrator as appropriate.

Conclusion

The evaluation found that sound procedures for dealing with medical records falsification do exist and may result in termination. Therefore, this issue was not verified as factual.

4.1.8 Issue 71308 - Employees Denied Access to Medical Records

The concern in this issue stated only that erroneous data had been placed in the CI's medical records. Upon consultation with QTC, it was learned that the CI's real concern was that he/she was denied access to the records and could not, therefore, determine whether the records were correct.

Discussion

According to the TVA Code, II PRIVACY, "Protection of Personal Privacy":

TVA permits an individual, except as authorized by law, to ascertain what records pertaining to that individual are maintained by TVA in TVA systems of records, to gain access to and to request correction or amendment of such records.

In addition, TVA Instruction, II PRIVACY, "Procedures" provides that:

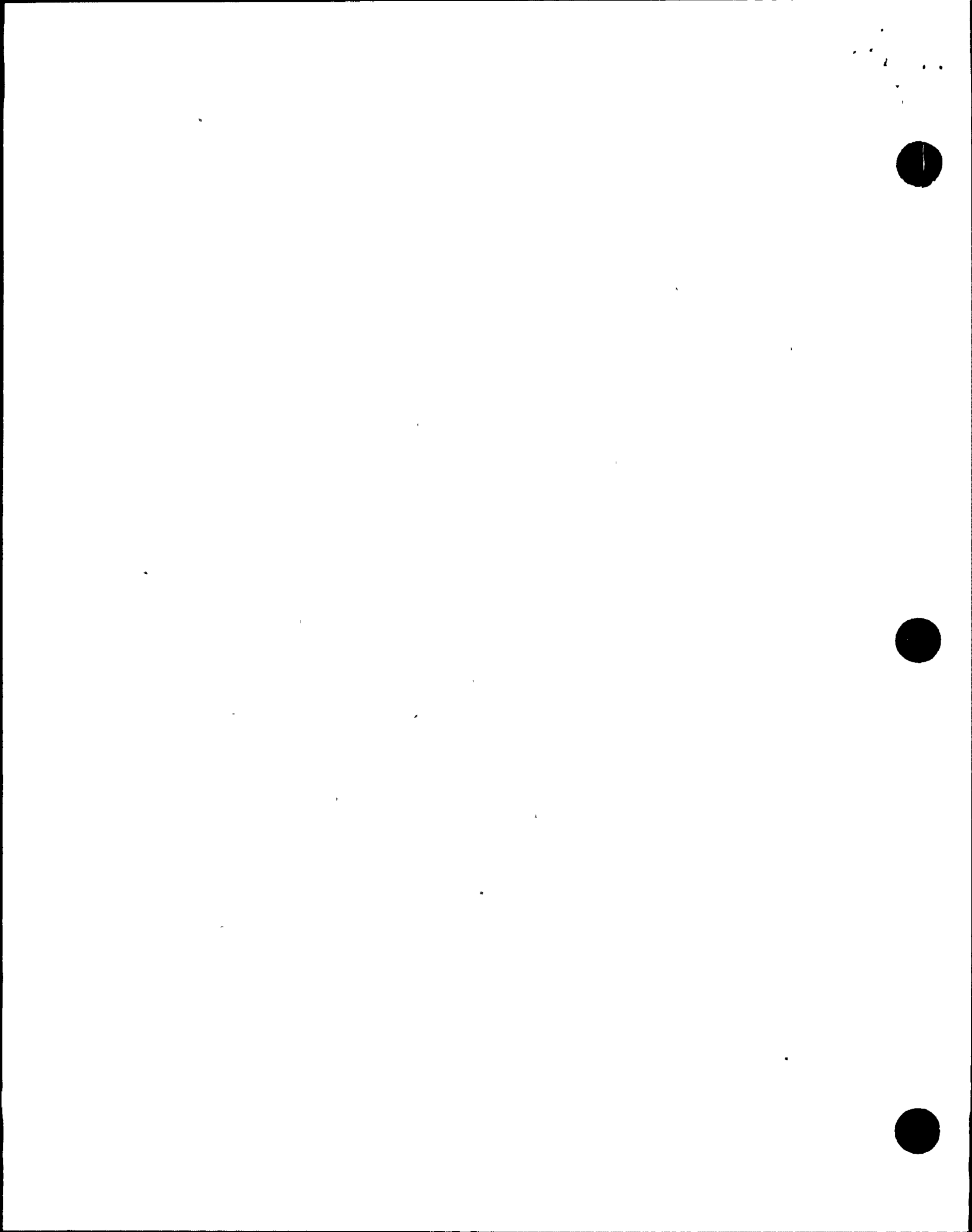
If in the judgment of the Division of Medical Services the transmission of medical records, including psychological records, directly to a requesting individual could have an adverse effect on such individual, TVA may refuse to provide such information directly to the individual. TVA will, however, provide this information to a licensed physician designated by the individual in writing.

Conclusion

The investigation revealed that employees have unrestricted access to information in their medical records except for that information which could have an adverse effect on the individual. In that case, the records would be released to a private physician designated by the employee, if requested; therefore, this issue could not be verified as factual.

4.1.9 Issue 71309 - Inadequate Physical Suitability Program and Health Standards

This issue is based on three employee concerns. One CI feels there are some WBN personnel who are physically unable to perform their duties and thinks a physical suitability



program would help. Another CI asked what medical standards are used to evaluate an employee's "condition to work." The third CI alleged that a particular crane operator has had a heart attack and open heart surgery.

These three concerns, taken together, seem to question whether TVA has and enforces a physical suitability program..

Discussion

Medical Services personnel and representatives of TVA employment offices were interviewed to determine what policy requirements and procedures were applicable and to what degree the requirements are enforced. The findings from those interviews are outlined below.

According to TVA CODE, VIII HEALTH SERVICES, "Occupational Medical and Related Health Services":

Physical and mental health adequate for safe and efficient performance of assigned duties is a condition of TVA employment.

The medical suitability of employees and candidates for employment at TVA is determined by relating each individual's physical and mental capacities to specific job requirements. Employees, employment candidates, and certain temporary assignees are examined to determine their capacity to work safely and efficiently within the specific health requirements of the job.

Candidates for employment are referred to a TVA medical office by TVA Employment Offices using a form TVA 9880A, "Appointment Affidavit and Conditions." Employees are referred to a TVA medical office by TVA management or supervisors using a form TVA 1444, "Request for Examination." These two forms outline to the TVA medical examiner the specific job for which the person is applying and any special physical conditions necessary for employment.

TVA medical examinations are conducted according to the two-volume TVA Medical Examiner's Guide. In addition to general employee medical examinations, the GUIDE outlines

procedures for special medical examinations. These examinations are for candidates who must comply with legislative, regulatory, and/or other requirements for determining special capacities or abilities required for duty, to assess medical qualifications for licensure for duty, or to monitor health factors related to control of specified occupational hazards.

Initial and re-employment examinations conducted at WBN from January 1, 1984 through June 1, 1986 totaled 979. From these 979, 798 (81%) were approved for duty, 172 (18%) were approved for duty with medical constraints, while less than 1% (9) were not medically approved for duty.

Conclusion

The evaluation revealed that TVA has an extensive physical suitability program and specific health standards that are rigidly enforced. Therefore, this issue was not verified as factual.

4.2 Administration of the Federal Employees Compensation Act (FECA)

4.2.1 Issue 71310 - Injured Employees Returned to Regular Duty Too Soon

This issue claims that CIs are put back on regular duty too soon after injuries or extensive surgery.

Discussion

Before the advent of the rehabilitation program, employees with job-related injuries were left in leave status until they had fully recovered. When an employee was able to perform productive work, the policy was to try to find a suitable position for him or her.

In 1972, a formal vocational rehabilitation program was established, with emphasis on rehabilitation of compensation recipients. The current Recovery Track Program is designed to return workers to their original jobs by assigning them to

special light-duty tasks during the recovery process. The program emphasizes injured workers' capabilities rather than limitations, and includes close coordination with the workers' private physicians. The Vocational Evaluation Program helps impaired workers to determine suitable job placement and training goals and to implement their goals.

Vocational rehabilitation is beneficial to injured workers because it helps speed their return to full duty and, thus, to full earnings status. It also helps TVA reduce compensation costs and make better use of available compensation resources. TVA's program was cited by both the Congressional Committee on Government Operations and the Department of Labor Inspector General for its effectiveness in restoring injured workers to their former status.

Conclusion

Any employee who is dissatisfied with the handling of his/her rehabilitation is encouraged to consult with the responsible TVA physician, private physician, and rehabilitation counselor. If necessary, further appeal may be made to the Area Chief Physician, then to the TVA Medical Director if still not satisfied.

The identities of the CIs who were dissatisfied with the speed of their return to duty was not released to the evaluator; therefore, an investigation of specific cases was not possible. The issue as a whole was not verified as factual.

4.2.2 Issue 71311 - Slow Claim Processing and Inadequate Compensation

The contention in this issue is that it takes an extremely long time to receive compensation for injuries, and the compensation is sometimes inadequate or incorrect.

Discussion

According to TVA Instruction VIII INJURY, "Employee":

TVA employees who sustain injuries or illnesses in the performance of their official duties are entitled to compensation and other benefits in accordance with provisions of the FECA. This Act is administered by the

OWCP, U.S. Department of Labor. OWCP reaches decisions about and awards benefits for all occupation-related injury or illness claims submitted by Federal employees. The Division of Medical Services acts as liaison with OWCP to provide or ensure that TVA employees receive the benefits to which they are entitled under the Act.

The Work Injury Compensation Services (WICS) staff in TVA's Division of Medical Services manages TVA's participation in the administration of FECA benefits. Essentially, all claims are submitted through the WICS and that staff handles all correspondence with OWCP about particular claims and the administration of FECA.

The claims management service is coordinated with and supported by other elements of TVA's occupational medical services program, including medical evaluations and management and the rehabilitation program in particular.

In 1981, the average lapsed time from an employee's initial notice of a traumatic lost-time injury to transmittal of a documented initial claim by TVA to OWCP was 48 days. By 1985, that time interval had dropped to 15 days TVA-wide -- a decrease in time of over 69 percent. At WBN, the process interval was 16 days by 1985.

FECA sets specific compensation rates including death benefits. According to TVA Instruction VIII INJURY, "Employee," FECA rates are set as follows:

The basic rate of compensation is 66-2/3 percent of the rate of pay, exclusive of overtime, at the time of injury. If the injured employee has one or more dependents, the basic rate of compensation is augmented by 8-1/3 percent. The monthly compensation can neither exceed 75 percent of the highest step of grade 15 of the current General Schedule of the Classification Act of 1949, nor can it be less than the lowest step of grade 2 of the schedule (see PM Section 2, Federal Service General Schedule) for temporary or permanent total disability unless the employee's monthly pay is less, in which case the monthly rate of compensation shall be equal to the employee's full monthly pay.

For a temporary employee who worked for TVA less than 90 percent of the year immediately preceding the date of injury and whose employment would have continued for less than 90 percent (234 workdays or 11 months) of the year had he or she not been injured, compensation may be based on the employee's average annual earnings, provided such earnings shall consist of not less than 150 times the average daily wage which he or she shall have earned in such employment during the year immediately preceding the injury.

If an employee suffers a recurrence of disability after having returned to a regular, full-time TVA job and worked for as long as six months, compensation is based on the rate of pay at the time of injury or recurrence of disability, whichever is greater.

A review of previous responses to some of the concerns in this issue found only one case of delayed submittal by WICS. That claim had been misfiled, in the wrong file cabinet. When the CI inquired about the claim, the error was discovered and the claim was submitted immediately to OWCP. In the other cases, claims were delayed by the employees' failure to submit information that had been requested either by WICS or OWCP to document the claims.

Conclusion

TVA does not determine the amount of compensation due an injured worker. Compensation rates are specified by the FECA, which is administered by the OWCP.

TVA has an excellent record for the timely submittal of claims to the OWCP, with an average elapsed time at WBN of 16 days from an employee's report of injury to transmittal of the initial claim. TVA has no control over claims processing by the OWCP; however, the WICS staff is readily available to assist employees in following up their claims with the OWCP.

Employees who feel their compensation claims are not being handled properly should contact the WICS staff in Chattanooga or, if necessary, the manager of TVA's Workers' Compensation Program Services.

Based on the evaluation summarized above, the issue of slow claim processing and inadequate compensation was not verified as factual.

11



4.2.3 Issue 71312 - Compensation is Unjustly Denied

The CIs contend that their claims for compensation were unjustly rejected or denied by TVA.

Discussion

Four of the eight CIs raising this issue have received previous responses to their concerns. In one of the cases, the CI had in fact received compensation for two separate claims, and a third claim was under review by the OWCP at the time of the response. The other responses told the CIs precisely how to get assistance in filing and following up their claims.

Interviews with WICS staff members and a review of compensation case files revealed that claims not paid fall into three categories:

- ° Claims for which additional information has been requested of the employee, but not yet provided
- ° Claims that had been denied by the OWCP for cause
- ° Claims that had been contested (controverted) by TVA as unjustified

When a claim is submitted with insufficient information or supporting evidence, the claimant is informed in writing of the status of the claim and what information or evidence is required. It is then incumbent upon the individual to submit the required documents. The WICS staff and the WBN compensation clerk assists the employee in gathering the required information and completing the necessary forms. When a claim is denied by OWCP, the employee is informed in writing of the reason(s) for the denial. The employee is also advised of his/her appeal rights and the procedure for exercising those rights.

A claim may also be denied as the result of a successful challenge by TVA. OWCP regulations give the employing agency the right to controvert claims that appear to be unjustified. Controvert means to submit formal objection with evidence. It must be supported by a concise, thorough,



factual report including the rationale on which the objection is based. Claimants are informed when a claim is being controverted and are told the reason why. The OWCP may concur with the controversion and deny the claim or it may decide in favor of the claimant; in any event, the decision is made by the OWCP, not by the employer.

As with any denial of a compensation claim, the claimant has the right to appeal the OWCP's decision to the U. S. Department of Labor Branch of Hearing and Review. The WICS staff and WBN compensation clerk assists employees in filing their appeals.

Conclusion

It was not possible to investigate all the specific cases, as the names of the CIs were not available to the evaluator. However, the investigation indicated that claims are handled and determinations are made in accordance with the FECA and OWCP procedures.

No cases of unjust denial were found. An individual may certainly disagree with a decision and consider it to be unjust. However, ample avenues of appeal are available, and assistance is available for the asking. Therefore, this issue was not found to be factual.

4.2.4 Issue 71313 - Claim Filing Information Purposely Withheld

The CI alleged that medical personnel intentionally withhold information as to which forms are required for filing compensation claims and how to complete the forms.

Discussion

The WICs staff in TVA's Division of Medical Services manages TVA's participation in the administration of FECA benefits. Essentially, all claims are submitted through the WICs, and that staff handles all correspondence with OWCP about particular claims and the administration of FECA.

Under FECA, every employee who is injured in the performance of duty must give written notice of the injury on Form CA-1 within 30 days after its occurrence. This is a legislated or legal requirement in the ACT itself. Also, to continue

11



treatment and eligibility for compensation, various forms (just which ones depends on the situation itself) must be completed and submitted to OWCP by the employee. Someone acting in the employee's behalf may initiate and submit the required forms. TVA, however, cannot initiate a filing for compensation.

The WICs staff and other designated compensation specialists are available to assist employees in completing necessary forms. However, it remains the employee's responsibility to take advantage of this assistance.

It is not possible to determine the precise reason for the concern in this issue, as the identity of the CI is not known to the evaluator. However, the concern was previously investigated by a medical administrator and a response was provided to the CI. That response referred the CI to specific persons for assistance and to the WICS staff in Chattanooga if any problems were encountered.

Conclusion

The investigation found that assistance is available to employees who need to file FECA claims, but it is the employee's responsibility to ask for help. No evidence was found of any WICs staff member or other compensation specialist refusing a request for assistance. Therefore, this issue could not be verified as factual.

4.3 Miscellaneous Medical Issues

Each of these miscellaneous issues was previously investigated and a response provided to the CI. This evaluation concurs with the previous findings as summarized below.

4.3.1 Issue 71314 - Truck Drivers' Health Affected by Hazardous Materials

The CI alleged that medical problems of several truck drivers were caused by transporting hazardous materials.

Investigation revealed that the cited health conditions were congenital; therefore, this issue was not found to be factually accurate.

4.3.2 Issue 71314 - Unstable Employee in Sensitive Position

The CI stated that an employee in a sensitive position was considered unstable by colleagues.

A previous investigation found the individual's condition to be medical, not psychological; therefore, this issue was not found to be factual.

4.3.3 Issue 71316 - Unsecure Medical and File Cabinets

The CI stated that medical cabinets and files cannot be completely locked and can easily be left unsecured.

Investigation revealed the issue was factual but the cabinets had already been replaced with ones that lock.

4.3.4 Issue 71317 - Personnel Department Changes Medical Records

The CI alleged that the personnel department makes unauthorized changes to medical records.

The investigation revealed that no entries are made to medical records by anyone other than the Medical Staff. Documents relating to personnel action, such as hirings or terminations, are included in medical records but they have no relation to medical actions. Therefore, this issue was not found to be factual.

5.0 COLLECTIVE SIGNIFICANCE

During the timeframe of the concerns in this subcategory, WBN medical services had over 40,000 visits. The 58 concerns in this category were from a total of 50 individuals. That 40,000 visits produced only 50 concerned individuals argues that WBN employees were generally satisfied with their onsite medical services.

All of this is not to say that many of 50 CIs did not have genuine cause for irritation. The patients and the medical staff at any American medical facility are overburdened with paperwork. The situation at WBN is not an exception. The evaluation indicates that some employees need to be better informed on what medical services and compensation benefits are due them and also better informed on how to obtain those services and benefits. They should also be better informed on the appeal processes available to them if they receive less than satisfactory medical service. Workers who feel they are being treated unfairly or indifferently are not likely to perform to their full potential.

11



6.0 CAUSES

Some of the concerns in this subcategory appear to be based on dissatisfaction with entitlements rather than denial of entitlements. Others, however, appear to stem from a lack of employee awareness of what medical services and compensation benefits are due them and how to obtain them. Employees are insufficiently aware of how medical constraints are determined, how to apply for FECA benefits, and how to appeal decisions with which they disagree.

7.0 PREVIOUSLY INITIATED CORRECTIVE ACTIONS

The Office of Nuclear Power has implemented training for managers and supervisors regarding TVA medical care policy. Training will also be offered on TVA's occupational medical program and the administration of FECA and its provisions. This informative program is incorporated in the TVA Supervisory Training Program and is required for all TVA supervisors as a corporate program.

Employees are also informed about medical programs by TVA publications such as Inside TVA, TVA Today, TVA announcements and by means of paycheck inserts.

8.0 ATTACHMENTS

Attachment A, Subcategory Summary Table
Attachment B, List of Concerns by Element
Attachment C, List of Reference Documents
Attachment D, List of Interviewees



REFERENC - ECPS132J-ECPS132C
 FREQUEN - REQUEST
 OHP - ISSS - RHM

ATTACHMENT A
 TENNESSEE VALLEY AUTHORITY
 OFFICE OF NUCLEAR POWER
 EMPLOYEE CONCERN PROGRAM SYSTEM (ECPS)
 EMPLOYEE CONCERN INFORMATION BY CATEGORY/SUBCATEGORY
 SUBCATEGORY: 713 SLOW CLAIM PROCESSING AND INADEQUATE COMPENSATION

PAGE - 1
 TIME - 10:04:3
 DATE - 03/10/8

CATEGORY: MP MGT. & PERS. ISSUES

| CONCERN NUMBER | CAT | SUB CAT | S H R D | PLT LOC | 1 REPORT APPL | | | | HISTORICAL REPORT | CONCERN ORIGIN | CONCERN DESCRIPTION | REF. SECTION CAT - MP SUBCAT - 71 |
|----------------------------|-----|---------|------------------|------------|---------------|-----|----|----|----------------------|-------------------|---------------------|--|
| | | | | | 2 | SAF | BL | SQ | | | | |
| EX -85-120-X0101 T50195 | MP | 71311 | N | WBN | 1 | N | N | N | N | EX-85-120-X01 | QTC | CI REGISTERED A CONCERN INVOLVING A WORK RELATED INJURY DURING HIS INITIAL INTERVIEW. CI STATED QTC WAS BEING PAID OFF BY TVA AND ONLY RESPONDED WITH INFORMATION THAT TVA APPROVED OF. CONSTRUCTION DEPT. CONCERN. CI HAS NO FURTHER INFORMATION. |
| EX -85-130-00101 T50195 | MP | 71312 | N | WBN | 1 | N | N | N | N | | QTC | TVA FORCED CI TO ACCEPT PRIVATE MEDICAL TREATMENT. CI FEELS THAT TVA SHOULD BE RESPONSIBLE FOR THE RESULTANT MEDICAL BILLS. DETAILS KNOWN TO QTC, WITHHELD DUE TO CONFIDENTIALITY. CONSTRUCTION DEPT. CONCERN. CI HAS NO FURTHER INFORMATION. |
| EX -85-149-00101 T50207 | MP | 71311 | N | WBN | 1 | N | N | N | N | | QTC | TVA TAKES TOO LONG WHEN PROCESSING WORK RELATED COMPENSATION CLAIMS. DETAILS KNOWN TO QTC, WITHHELD DUE TO CONFIDENTIALITY. CONSTRUCTION DEPT. CONCERN. CI HAS NO FURTHER INFORMATION. |
| EX -85-150-00101 T50207 | MP | 71301 | N | WBN | 1 | N | N | N | N | | QTC | TVA DELAYED GIVING CI NECESSARY MEDICAL ATTENTION FOR MANY DAYS. DETAILS KNOWN TO QTC; WITHHELD TO MAINTAIN CONFIDENTIALITY. CI HAS NO FURTHER INFORMATION. CONSTRUCTION DEPT. CONCERN. |
| EX -85-150-00301 T50205 | MP | 71312 | N | WBN | 1 | N | N | N | N | | QTC | TVA HAS DENIED CI COMPENSATION FOR LEGITIMATE EXPENSES INCURRED BECAUSE OF ON-THE-JOB INJURY. DETAILS KNOWN TO QTC; WITHHELD TO MAINTAIN CONFIDENTIALITY. CI HAS NO FURTHER INFORMATION. CONSTRUCTION DEPT. CONCERN. |
| EX -85-150-00401 T50204 | IH | 60400 | S | WBN | 1 | | | | | | QTC | TVA TREATS INJURED EMPLOYEES BADLY BY DENYING THEM TIMELY MEDICAL ATTENTION, AND THEIR INJURIES HAVE BEEN MADE WORSE. DETAILS KNOWN TO QTC, WITHHELD DUE TO CONFIDENTIALITY. CONSTRUCTION DEPT. CONCERN. CI HAS NO FURTHER INFORMATION. |
| | 02 | MP | 71301 | S | WBN | 1 | N | N | N | | | |
| | | | | | 2 | NA | NA | NA | NA | | | |

CONCERNS ARE GROUPED BY FIRST 3 DIGITS OF SUBCATEGORY NUMBER.



Small, faint, illegible markings or artifacts in the bottom left corner of the page.

REFERENCE - ECPS132J-ECPS132C
 FREQUENCY - REQUEST
 ONP - ISSS - RHM

TENNESSEE VALLEY AUTHORITY
 OFFICE OF NUCLEAR POWER
 EMPLOYEE CONCERN PROGRAM SYSTEM (ECPS)
 EMPLOYEE CONCERN INFORMATION BY CATEGORY/SUBCATEGORY
 SUBCATEGORY: 713 COMPENSATION IS UNJUSTLY DENIED

TIME - 10:04:32
 RUN DATE - 03/10/85

CATEGORY: MP MGT. & PERS. ISSUES

| CONCERN NUMBER | CAT | SUB CAT | S H R D | PLT LOC | 1 REPORT APPL 2 SAF RELATED BF BL SQ WB | HISTORICAL REPORT | CONCERN ORIGIN | CONCERN DESCRIPTION | REF. SECTIO CAT - ME SUBCAT - 71 |
|----------------------------|-----|---------|------------------|------------|---|----------------------|-------------------|---|--|
| EX -85-152-00201 T50204 | MP | 71312 | N | WBN | 1 N N N N 2 NA NA NA NA | | QTC | CI RECEIVED A JOB-RELATED INJURY WHICH CAUSED LATER PROBLEMS TO CI'S HAND WHICH TVA CLASSIFIED AS NON-JOB RELATED AND AS A RESULT CI RECEIVED NO BENEFITS FOR THE TIME OFF FOR HAND SURGERY AND CI'S RETIREMENT WAS ADVERSELY AFFECTED. (NAMES/DETAILS TO THE SPECIFIC CASE ARE KNOWN TO QTC AND WITHHELD TO MAINTAIN CONFIDENTIALITY). CONSTRUCTION DEPT. CONCERN. CI HAS NO FURTHER INFORMATION. | |
| HI -85-055-00101 T50036 | IH | 60100 | S | WBN | 1 N N N Y 2 NA NA NA NO | HI-85-055-001 | QTC | TVA DOES NOT ACCEPT PRIVATE PHYSICIANS' RECOMMENDATIONS REGARDING WORK RESTRICTIONS. (DETAILS KNOWN TO QTC) | |
| 02 | MP | 70506 | S | WBN | 1 N H N H 2 NA NA NA NA | | | | |
| 03 | MP | 71305 | S | WBN | 1 N N H N 2 NA NA NA NA | | | | |
| IH -85-119-00501 T50245 | MP | 71311 | N | WBN | 1 N H N N 2 NA NA NA NA | | QTC | MORALE IS VERY LOW. MORALE PROBLEM IS CAUSED BY TVA MANAGEMENT. CI CITES FOLLOWING EXAMPLES AS CAUSING LOW MORALE AMONG TVA EMPLOYEES: 1) SPLITTING UP OF INSTRUMENTATION QC GROUP IN JUNE, 1985. 2) THE SAFETY/MEDICAL GROUP ON SITE IS EXTREMELY SLOW IN PROCESSING TIME LOSS ACCIDENT CLAIMS FOR JOB-RELATED INJURIES. THIS DELAYS PAYMENT OF COMPENSATION WAGES TO INJURED WORKERS. CI STATED THAT MEDICAL GROUP OFTEN REFERS CONTINUATION OF PAY CLAIMS TO D.O.L. OFFICE IN JACKSONVILLE, FLORIDA ADDING T | |

CONCERNS ARE GROUPED BY FIRST 3 DIGITS OF SUBCATEGORY NUMBER.

REFERENCE - ECPS132J-ECPS132C
 FREQUENCY - REQUEST
 ONP - ISSS - RHM

TENNESSEE VALLEY AUTHORITY
 OFFICE OF NUCLEAR POWER
 EMPLOYEE CONCERN PROGRAM SYSTEM (ECPS)
 EMPLOYEE CONCERN INFORMATION BY CATEGORY/SUBCATEGORY
 SUBCATEGORY: 713 SLOW CLAIM PROCESSING AND INADEQUATE COMPENSATION

TIME - 10:04:33
 RUN DATE - 03/10/8

CATEGORY: MP MGT. & PERS. ISSUES

| CONCERN NUMBER | CAT | SUB CAT | S H R D | PLT LOC | 1 REPORT APPL | | | | HISTORICAL REPORT | CONCERN ORIGIN | CONCERN DESCRIPTION | REF. SECTIO CAT - MF SUBCAT - 71 |
|----------------------------|-----|---------|------------------|------------|---------------|-----|---------|----|----------------------|-------------------|--|--|
| | | | | | 2 | SAF | RELATED | BF | | | | |
| IN -85-199-00201 T50228 | MP | 71311 | N | WBN | 1 | N | N | N | N | QTC | CI WAS INJURED ON THE JOB AT WATTS BAR, AND WAS PAID INADEQUATE COMPENSATION. CI CAN NOT CLIMB OR CARRY A SACK OF GROCERIES. DETAILS KNOWN TO QTC WITHHELD DUE TO CONFIDENTIALITY. NO FURTHER INFORMATION MAY BE RELEASED. CONSTRUCTION DEPT. CONCERN. CI HAS NO FURTHER INFORMATION. NO FOLLOW-UP REQUIRED. | |
| | | | | | 2 | NA | NA | NA | NA | | | |
| IN -85-241-00901 T50117 | MP | 71308 | N | WBN | 1 | N | N | N | N | QTC | CI ALLEGES THAT ERRONEOUS DATA HAS BEEN PLACED IN HIS MEDICAL RECORDS AND HAS REQUESTED QTC REVIEW THESE RECORDS. (NAMES/DETAILS KNOWN TO QTC, AND RELEASE OF THIS INFORMATION WOULD JEOPARDIZE CI'S CONFIDENTIALITY) CI HAS NO MORE INFORMATION. NO FOLLOW UP REQUIRED. | |
| | | | | | 2 | NA | NA | NA | NA | | | |
| IN -85-248-00301 T50236 | MP | 71301 | N | WBN | 1 | N | N | N | N | QTC | TVA MEDICAL IS UNRESPONSIVE TO LEGITIMATE EMPLOYEE MEDICAL AND HEALTH NEEDS. DETAILS KNOWN TO QTC, WITHHELD DUE TO CONFIDENTIALITY. NO FURTHER INFORMATION MAY BE RELEASED. CONSTRUCTION DEPARTMENT CONCERN. CI HAS NO FURTHER INFORMATION. NO FOLLOW UP REQUIRED. | |
| | | | | | 2 | NA | NA | NA | NA | | | |
| IN -85-248-00501 T50236 | MP | 71310 | N | WBN | 1 | N | N | N | N | QTC | TVA MEDICAL PUT CI BACK ON REGULAR DUTY TOO SOON AFTER EXTENSIVE SURGERY TO CORRECT THE EFFECTS OF AN OIL THE JOB INJURY. DETAILS KNOWN TO QTC, WITHHELD TO MAINTAIN CONFIDENTIALITY. NO FURTHER INFORMATION MAY BE RELEASED. CONSTRUCTION DEPARTMENT CONCERN. CI HAS NO FURTHER INFORMATION. NO FOLLOW UP REQUIRED. | |
| | | | | | 2 | NA | NA | NA | NA | | | |

CONCERNS ARE GROUPED BY FIRST 3 DIGITS OF SUBCATEGORY NUMBER.



Small, faint markings or artifacts in the bottom left corner of the page.

REFERENC - ECPS132J-ECPS132C
 FREQUENC - REQUEST
 ONP - ISSS - RHM

TENNESSEE VALLEY AUTHORITY
 OFFICE OF NUCLEAR POWER
 EMPLOYEE CONCERN PROGRAM SYSTEM (ECPS)
 EMPLOYEE CONCERN INFORMATION BY CATEGORY/SUBCATEGORY
 SUBCATEGORY: 713 TVA MEDICAL PERSONNEL ARE NOT QUALIFIED

TIME - 10:04:34
 RUN DATE - 03/10/8

CATEGORY: MP MGT. & PERS. ISSUES

| CONCERN NUMBER | CAT | SUB CAT | S H R D | PLT LOC | 1 2 | REPORT SAF | APPL RELATED | B BF | L BL | S SQ | W WB | HISTORICAL REPORT | CONCERN ORIGIN | CONCERN DESCRIPTION | REF. SECTIO CAT - MF SUBCAT - 71 |
|----------------------------|-----|---------|------------------|------------|--------|---------------|-----------------|---------|---------|---------|---------|----------------------|-------------------|---|--|
| IN -85-248-00601 T50236 | MP | 71302 | N | WBN | 1 | N | N | N | N | | | | QTC | TVA MEDICAL PERSONNEL ARE NOT QUALIFIED. DETAILS KNOWN TO QTC, WITHHELD DUE TO CONFIDENTIALITY. NO FURTHER INFORMATION MAY BE RELEASED. CONSTRUCTION DEPARTMENT CONCERN. CI HAS NO FURTHER INFORMATION. NO FOLLOW UP REQUIRED. | |
| IN -85-284-00301 T50020 | MP | 71303 | N | WBN | 1 | N | N | N | N | | | | QTC | THERE IS NO DOCTOR ON THE NIGHT SHIFT | |
| IN -85-329-00101 T50025 | MP | 71301 | N | WBN | 1 | N | N | N | N | | | IN-85-329-001 | QTC | TVA MEDICAL DOCTORS FAILED TO SEE BROKEN BONE IN INITIAL X-RAY. WRIST INJURY WAS INITIALLY DIAGNOSED AS SPRAINED AND PLACED IN CAST FOR 4-6 WEEKS. THE WRIST CONTINUED TO SWELL. A CORTISONE SHOT WAS ADMINISTERED. EMPLOYEE HAS UNDERGONE SURGERY (BONE GRAFT) TVA MEDICAL STAFF WAS MADE AWARE OF SEVERITY OF INJURY BY CIVILIAN M.D. MEDICAL PROBLEM HAS EXISTED SINCE 1981. IT IS ASSUMED IF THE INITIAL EVALUATION OF THE FRACTURE HAD BE DIAGNOSED PROPERLY THE INJURY WOULD NOT HAVE REQUIRED ADDITONA | |
| IN -85-335-00301 T50054 | MP | 71305 | N | WBN | 1 | N | N | N | N | | | | QTC | THE CMA AND SITE DOCTOR RECORDS MEDICAL SPECIALIST' RESTRICTIONS SO THAT THE RESTRICTIONS ARE NOT THE SAME, IE EMPLOYEE IS TO WORK IN AN ENVIRONMENT WITH LESS THAN 85 DECIBELS IS RECORDED TO READ EMPLOYEE TO WORK IN AN ENVIRONMENT THAT AVERAGES 85 DECIBELS. 4/85 (NAMES OF PEOPLE INVOLVED IN THE RECORDING ARE KNOWN) | |
| IN -85-539-00101 T50219 | MP | 71316 | N | WBN | 1 | N | N | N | N | | | IN-85-539-001 | QTC | MEDICAL CABINETS AND FILES CANNOT BE COMPLETELY LOCKED. THEY CAN EASILY BE LEFT UNSECURED. CI DECLINED TO PROVIDE FURTHER INFORMATION. CONSTRUCTION DEPARTMENT CONCERN. | |

CONCERNS ARE GROUPED BY FIRST 3 DIGITS OF SUBCATEGORY NUMBER.

REFERENC - ECPS132J-ECPS132C
 FREQUENCY - REQUEST
 ONP - ISSS - RHM

TENNESSEE VALLEY AUTHORITY
 OFFICE OF NUCLEAR POWER
 EMPLOYEE CONCERN PROGRAM SYSTEM (ECPS)
 EMPLOYEE CONCERN INFORMATION BY CATEGORY/SUBCATEGORY
 SUBCATEGORY: 713 INJURED EMPLOYEES RETURNED TO DUTY TOO SOON

5
 TIME - 10:04:3
 DATE - 03/10/8

CATEGORY: MP MGT. & PERS. ISSUES

| CONCERN NUMBER | CAT | SUB CAT | S R D | PLT LOC | 1 REPORT APPL | | | | HISTORICAL REPORT | CONCERN ORIGIN | CONCERN DESCRIPTION | REF. SECTIO CAT - MP SUBCAT - 71 |
|----------------------------|-----|---------|-------------|------------|---------------|-----|---------|----|----------------------|-------------------|---------------------|---|
| | | | | | 2 | SAF | RELATED | BF | | | | |
| IN -85-539-00201 T50042 | MP | 70506 | S | WBN | 1 | N | N | N | N | IN-85-539-002 | QTC | INJURED EMPLOYEES SHOULD AVOID A FULL DUTY STATUS UNTIL AUTHORIZED BY TV A. (DETAILS KNOWN BY QTC) |
| | 02 | MP | 71310 | S | WBN | 2 | NA | NA | NA | | | |
| IN -85-546-00201 T50047 | MP | 71312 | N | WBN | 1 | N | N | N | N | IN-85-546-002 | QTC | DOCTORS TAKE ADVICE (ORDERS) FROM TV A MANAGEMENT AS TO WORK RESTRICTIONS FOR PERSONNEL INJURED ON THE JOB. THIS ALSO AFFECTS HOW PERSONNEL WILL RECEIVE ON THE JOB INJURY COMPENSATION. (DETAILS KNOWN) |
| | | | | | 2 | NA | NA | NA | NA | | | |
| IN -85-605-00301 T50107 | MP | 71302 | N | WBN | 1 | N | N | N | N | IN-85-605-003 | QTC | WATTS BAR CONSTRUCTION SITE HAS INAD EQUATELY TRAINED MEDICAL PROFESSIONALS. THEY HAVE PEOPLE TRAINED IN FIRST AID ONLY. A STAFF OF ONE HEAD NURSE, TWO ASSISTANTS AND A DOCTOR IN THE TRAILER IS NOT ENOUGH. CI HAS NO FURTHER INFORMATION. NO FOLLOW UP REQUIRED. |
| | | | | | 2 | NA | NA | NA | NA | | | |
| IN -85-627-03001 T50190 | MP | 71311 | N | WBN | 1 | N | N | N | N | | QTC | EMPLOYEE SUFFERED A JOB RELATED INJURY AND AFTER NINETEEN WEEKS HAS STILL NOT RECEIVED ANY WORKMAN'S COMPENSATION BENEFITS. DETAILS KNOWN TO QTC, WITHHELD DUE TO CONFIDENTIALITY. CONSTRUCTION DEPARTMENT CONCERN. CI HAS NO FURTHER INFORMATION. |
| | | | | | 2 | NA | NA | NA | NA | | | |

CONCERNS ARE GROUPED BY FIRST 3 DIGITS OF SUBCATEGORY NUMBER.



Small, faint markings or artifacts in the bottom left corner of the page.

REFERENC - ECPS132J-ECPS132C
 FREQUENCY - REQUEST
 ONP - ISSS - RHM

TENNESSEE VALLEY AUTHORITY
 OFFICE OF NUCLEAR POWER
 EMPLOYEE CONCERN PROGRAM SYSTEM (ECPS)
 EMPLOYEE CONCERN INFORMATION BY CATEGORY/SUBCATEGORY
 SUBCATEGORY: 713 MEDICAL RECORDS FALSIFICATION

REF. TIME - 10:04:36
 RUN DATE - 03/10/78

CATEGORY: MP MGT. & PERS. ISSUES

| CONCERN NUMBER | CAT | SUB CAT | S H R D | PLT LOC | 1 REPORT APPL 2 SAF RELATED BF BL SQ WB | HISTORICAL REPORT | CONCERN ORIGIN | CONCERN DESCRIPTION | REF. SECTION CAT - MP SUBCAT - 71 |
|----------------------------|-----|---------|------------------|------------|---|----------------------|-------------------|--|---|
| IN -85-663-00501 T50238 | MP | 71307 | N | WBN | 1 N N N N 2 NA NA NA NA | | QTC | TVA MANAGEMENT DOES NOT DISCOURAGE EMPLOYEES STRONGLY ENOUGH FROM LYING ABOUT PRIOR MEDICAL PROBLEMS AND DOES NOT TAKE EFFECTIVE CORRECTIVE ACTION WHEN SUCH AN UNTRUTH IS DISCOVERED. EXAMPLE: EMPLOYEE WAS TURNED DOWN AT ONE TVA PLANT FOR MEDICAL PROBLEMS. EMPLOYEE APPLIED AT ANOTHER PLANT AND WAS HIRED. LATER, THE UNTRUTH WAS DISCOVERED, BUT THE EMPLOYEE WAS NOT TERMINATED. DETAILS KNOWN TO QTC, WITHHELD TO MAINTAIN CONFIDENTIALITY. NO FURTHER INFORMATION MAY BE RELEASED. CI HAS NO FURTHER | |
| IN -85-663-01401 T50239 | MP | 71306 | N | WBN | 1 N N N N 2 NA NA NA NA | | QTC | TVA MANAGEMENT GAVE WATTS BAR'S "BACK CARE/PREVENTION PROGRAM" TOO LITTLE TIME TO SUCCEED. CI HAS NO FURTHER INFORMATION. CONSTRUCTION DEPARTMENT CONCERN. NO FOLLOW UP REQUIRED. | |
| IN -85-665-00201 T50067 | MP | 71304 | N | WBN | 1 N N N N 2 NA NA NA NA | IN-85-665-002 | QTC | INSUFFICIENT MEDICAL FACILITIES ON SITE. THERE USED TO BE EQUIPMENT ON SITE TO TREAT EMPLOYEES WITH FOREIGN OBJECTS IN THEIR EYES. NOW EMPLOYEES HAVE TO "BRASS OUT" AND GO TO THE HOSPITAL. AN EMPLOYEE (NAME UNKNOWN) WAS FELLEED WITH A HEART ATTACK AND DIED ON THE SPOT WHILE A MEDICAL STAFF INDIVIDUAL AND A SAFETY ENGINEER STOOD THERE SEEMINGLY NOT KNOWING WHAT TO DO. HAD THERE BEEN PROPER EQUIPMENT AVAILABLE AND HERE MEDICAL STAFF TRAINED IN ITS USE, THE "VICTIM" MAY HAVE LIVED. CI HAS NO AD | |
| IN -85-674-00101 | MP | 71305 | N | WBN | 1 N N N N 2 NA NA NA NA | | QTC | TVA WILL NOT ACCEPT PRIVATE DOCTORS RECOMMENDATIONS RELATIVE TO MEDICAL RESTRICTIONS. REF. PH-85-015-001 | |

CONCERNS ARE GROUPED BY FIRST 3 DIGITS OF SUBCATEGORY NUMBER.

REFERENCE - ECPS132J-ECPS132C
 FREQUENCY - REQUEST
 ONP - ISSS - RHM

TENNESSEE VALLEY AUTHORITY
 OFFICE OF NUCLEAR POWER
 EMPLOYEE CONCERN PROGRAM SYSTEM (ECPS)
 EMPLOYEE CONCERN INFORMATION BY CATEGORY/SUBCATEGORY
 SUBCATEGORY: 713 TRUCK DRIVERS AFFECTED BY HAZARDOUS MATERIAL

TIME - 10:04:37
 RUN DATE - 03/10/8

CATEGORY: MP MGT. & PERS. ISSUES

| CONCERN NUMBER | CAT | SUB CAT | S R D | PLT LOC | 1 REPORT APPL | | | | HISTORICAL REPORT | CONCERN ORIGIN | CONCERN DESCRIPTION | REF. SECTIC CAT - MF SUBCAT - 71 | | |
|----------------------------|-----|---------|-------------|------------|---------------|-----|----|----|----------------------|-------------------|---------------------|--|----|----|
| | | | | | 2 | SAF | BL | SQ | | | | | WB | |
| IN -85-720-X0501 T50133 | MP | 71314 | S | WBN | 1 | N | N | N | N | IN-85-720-X05 | QTC | CI STATED OF APPROX 57 TRUCK DRIVERS THAT OVER 1/2 HAD SOME SORT OF HEAR T, BLOOD AND/OR CANCER PROBLEM. CI FEELS THE MEDICAL PROBLEMS THE TRUCK DRIVERS ARE EXPERIENCING IS DUE TO THE HAZARDOUS TYPES OF MATERIALS (NO T SPECIFIED) THEY ARE REQUIRED TO TR ANSPORT. CI HAS NO FURTHER INFORMAT ION. | | |
| 02 | SF | 91204 | S | WBN | 1 | N | N | N | Y | 2 | NA | | NA | NA |
| IN -85-723-00101 T50102 | MP | 70506 | S | WBN | 1 | N | N | N | N | IN-85-723-001 | QTC | TVA MEDICAL REFUESED TO ALLOW CI'S P ERSONAL DOCTOR TO ADEQUATELY TREAT J OB RELATED INJURIES. MEDICAL CONSI S TENTLY REFUSED TO ABIDE BY RESTRICTI ONS ESTABLISHED BY PERSONAL DOCTOR (SUBMISSION OF ADD'1 DETAIL COULD COM PROMISE CI'S CONFIDENTIALITY). NO F OLLOW UP REQUIRED. | | |
| 02 | MP | 71305 | S | WBN | 1 | N | N | N | N | 2 | NA | | NA | NA |
| IN -85-725-00401 T50159 | MP | 71313 | N | WBN | 1 | N | N | N | N | IN-85-725-004 | QTC | TVA MEDICAL PERSONNEL (KNOWN) PURPOS ELY DO NOT TELL INJURED EMPLOYEES WH ICH FORMS MUST BE FILLED OUT OR HOW TO FILL OUT FORMS IN ORDER FOR THEM TO BE COMPENSATED FOR MISSED TIME AN D OUTSIDE MEDICAL TREATMENT. DETAIL S KNOWN TO QTC, WITHELD TO MAINTAIN CONFIDENTIALITY. (CONSTRUCTION DEPT CONCERN). CI HAS NO FURTHER INFORM ATION. NO FOLLOWUP REQUIRED. | | |
| 02 | MP | 71305 | S | WBN | 1 | N | N | N | N | 2 | NA | | NA | NA |
| IN -85-770-00501 T50116 | MP | 70506 | S | WBN | 1 | N | N | N | N | | QTC | FOLLOWING AN INJURY ON THE JOB IN '8 3 A TV DOCTOR CHANGED THE RESTRICTIO N IMPOSED BY A PRIVATE DOCTOR. FURT HER INFORMATION WILL COMPROMISE CONF IDENTIALITY. CONSTRUCTION DEPT. CON CERH. | | |
| 02 | MP | 71305 | S | WBN | 1 | N | N | N | N | 2 | NA | | NA | NA |

CONCERNS ARE GROUPED BY FIRST 3 DIGITS OF SUBCATEGORY NUMBER.



Small, faint markings or artifacts in the bottom left corner of the page.

REFERENC - ECPS132J-ECPS132C
 FREQUENC - REQUEST
 ONP - ISSS - RHM

TENNESSEE VALLEY AUTHORITY
 OFFICE OF NUCLEAR POWER
 EMPLOYEE CONCERN PROGRAM SYSTEM (ECPS)
 EMPLOYEE CONCERN INFORMATION BY CATEGORY/SUBCATEGORY
 SUBCATEGORY: 713 MEDICAL RECORDS FALSIFICATION

TIME - 10:04:38
 RE DATE - 03/10/8

CATEGORY: MP MGT. & PERS. ISSUES

| CONCERN NUMBER | CAT | SUB. CAT | S H R D | PLT LOC | 1 2 | REPORT SAF | APPL RELATED | HISTORICAL REPORT | CONCERN ORIGIN | CONCERN DESCRIPTION | REF. SECTI CAT - MI SUBCAT - 71 | | |
|----------------------------|-----|----------|------------------|------------|--------|---------------|-----------------|----------------------|-------------------|---------------------|--|--|--|
| IN -85-810-X0101 T50253 | MP | 71307 | S | WBN | 1 | N | N | N | N | QTC | C/I REQUESTED AN ANSWER TO THE FOLLOWING QUESTIONS: 1) WHAT MEDICAL STANDARDS ARE USED BY TVA TO EVALUATE AN EMPLOYEE'S CONDITION TO WORK? 2) IS ASTHMA AN AUTOMATIC DISQUALIFIER ON AN EMPLOYEE PHYSICAL? 3) UNDER WHAT CONDITIONS MAY AN EMPLOYEE HAVE ASTHMA AND STILL WORK IN CONSTRUCTION? 4) WHAT PENALTY IS PRESCRIBED FOR A MEDICAL FORM THAT HAS BEEN IMPROPERLY COMPLETED? C/I REQUESTS THAT QTC PERFORM THE INVESTIGATION OF THE ABOVE. DETAILS KNOWN TO QTC, WITHHELD DUE TO CONFIDENTIALITY. NO F | | |
| 02 | MP | 71309 | S | WBN | 1 | N | N | N | N | | | | |
| IN -85-821-00701 T50198 | MP | 71312 | N | WBN | 1 | N | N | N | N | IN-85-821-007 | QTC | TVA IS REQUIRED BY FEDERAL LAW TO PROVIDE WORKMEN'S COMPENSATION BENEFITS TO ALL EMPLOYEES. THIS SHOULD BE ADMINISTERED IN AN HONEST AND FAIR MANNER WHICH DOES NOT INCLUDE TVA'S PRESENT METHOD OF EXCESSIVE DELAYS, REDUNDANT LOSSES OF NECESSARY PAPERWORK, REPEATED HASSLES TO THOSE AWAITING BENEFITS, AND ABUSIVE DENIAL BASED UPON "INJURY CAUSED BY WILLFUL MISCONDUCT OF THE EMPLOYEE", CREATING UNJUST, UNNECESSARY AND EXCESSIVE FINANCIAL HARDSHIPS ON EMPLOYEES. CONSTRUCTION DEPT. CONCERN. CI HAS | |
| IN -85-835-00301 T50254 | MP | 71302 | N | WBN | 1 | N | N | N | N | | QTC | MEDICAL TREATMENT FOR MINOR INJURIES IS BEING CONDUCTED BY NON-QUALIFIED PEOPLE. GENERAL FOREMAN ISSUE BAND-AIDS. MEDICAL VISITS W/O PERMISSION IS NOT ALLOWED. CONSTRUCTION CONCERN. NO ADDITIONAL INFORMATION AVAILABLE IN FILE. NO FOLLOW-UP REQUIRED. | |

CONCERNS ARE GROUPED BY FIRST 3 DIGITS OF SUBCATEGORY NUMBER.

REFERENC - ECPS132J-ECPS132C
 FREQUENCY - REQUEST
 ONP - ISSS - RWH

TENNESSEE VALLEY AUTHORITY
 OFFICE OF NUCLEAR POWER
 EMPLOYEE CONCERN PROGRAM SYSTEM (ECPS)
 EMPLOYEE CONCERN INFORMATION BY CATEGORY/SUBCATEGORY
 SUBCATEGORY: 713 INADEQUATE SUITABILITY PROGRAM

9
 TIME - 10:04:3
 RUN DATE - 03/10/8

CATEGORY: MP MGT. & PERS. ISSUES

| CONCERN NUMBER | CAT | SUB CAT | S H R D | PLT LOC | 1 REPORT 2 SAF | APPL RELATED | B BF | L BL | N SQ | N WB | HISTORICAL REPORT | CONCERN ORIGIN | CONCERN DESCRIPTION | REF. SECTI CAT - MI SUBCAT - 71 |
|----------------------------|-----|---------|------------------|------------|-------------------|-----------------|--------------|--------------|---------|---------|----------------------|-------------------|--|---------------------------------------|
| IN -85-871-00201 T50255 | MP | 71309 | N | WBN | 1 N 2 NA | N N NA NA | N N NA NA | N N NA NA | | | | QTC | CI FEELS THAT WBNP HAS SOME PERSONNEL WHO PHYSICALLY CANNOT DO THEIR JOB DUTIES. CI THINKS A "PHYSICAL SUIT ABILITY" PROGRAM WOULD HELP. NUCLEAR POWER CONCERN. NO ADDITIONAL INFORMATION AVAILABLE IN FILE. | |
| IN -85-876-X0101 T50087 | MP | 71301 | N | WBN | 1 N 2 NA | N N NA NA | N N NA NA | N N NA NA | | | IN-85-876-X01 | QTC | "MEDICAL WORKS FOR TVA INTERESTS NOT THE EMPLOYEES". CI FEELS THAT THE MEDICAL EFFORTS ON SITE ARE NOT RESPONSIVE TO THE NEEDS OF THE EMPLOYEES | |
| IN -85-901-00101 T50156 | MP | 71311 | N | WBN | 1 N 2 NA | N N NA NA | N N NA NA | N N NA NA | | | IN-85-901-001 | QTC | EMPLOYEE WAS GRANTED TIME OFF OF WORK PER TVA PROCEDURES IN ORDER TO RECOVER FROM A MEDICAL CONDITION. EMPLOYEE WAS ENTITLED TO COMPENSATION DURING TIME OFF, AND HAS APPLIED FOR IT. EMPLOYEE HAS RECEIVED NO COMPENSATION. DETAILS KNOWN TO QTC, WITHHELD TO MAINTAIN CONFIDENTIALITY. NO FOLLOW UP REQUIRED. | |
| IN -85-910-00201 T50248 | MP | 71306 | N | WBN | 1 N 2 NA | N N NA NA | N N NA NA | N N NA NA | | | | QTC | MEDICAL PERSONNEL SHOULD INFORM INDIVIDUALS OF THE HAZARDS OF COMING IN CONTACT WITH CAUSTIC/HARMFUL CHEMICALS (CHLORINE HYDRAZINE, ETC.). EXAMPLE: WHEN EMPLOYEE WENT TO TVA MEDICAL TO RECEIVE TREATMENT FOR INHALING AMMONIA FUMES TVA MEDICAL PERSONNEL SAID THAT THERE WAS NO PROBLEM DESPITE AMMONIA'S DAMAGING EFFECTS. DETAILS KNOWN TO QTC, WITHHELD DUE TO CONFIDENTIALITY. NO FURTHER INFORMATION MAY BE RELEASED. NO FURTHER INFORMATION IN FILE. NUCLEAR POWER DEPARTMENT CONCERN. NO FOLLOW UP | |
| IN -85-923-00101 T50136 | MP | 71312 | N | WBN | 1 N 2 NA | N N NA NA | N N NA NA | N N NA NA | | | IN-85-923-001 | QTC | CI INJURED BACK SEVERAL TIMES ON TVA PROPERTY & TIME - ALL JOB-RELATED. TVA HAS UNFAIRLY DENIED CI COMPENSATION. TREATMENT, AND EMPLOYMENT. CONSTRUCTION DEPT CONCERN. DETAILS KNOWN AND AVAILABLE FOR RELEASE. | |

CONCERNS ARE GROUPED BY FIRST 3 DIGITS OF SUBCATEGORY NUMBER.



1
2
3
4
5

REFERENC - ECPS132J-ECPS132C
 FREQUEN - REQUEST
 ONP - ISSS - RWM

TENNESSEE VALLEY AUTHORITY
 OFFICE OF NUCLEAR POWER
 EMPLOYEE CONCERN PROGRAM SYSTEM (ECPS)
 EMPLOYEE CONCERN INFORMATION BY CATEGORY/SUBCATEGORY
 SUBCATEGORY: 713 UNSTABLE EMPLOYEE IN SENSITIVE POSITION

TIME - 10:04:3
 RUN DATE - 03/10/8

CATEGORY: MP MGT. & PERS. ISSUES

| CONCERN NUMBER | CAT | SUB CAT | S H R D | PLT LOC | 1 REPORT APPL 2 SAF RELATED BF BL SQ WB | HISTORICAL REPORT | CONCERN ORIGIN | CONCERN DESCRIPTION | REF. SECTIO CAT - MI SUBCAT - 713 |
|----------------------------|-----|---------|------------------|------------|---|----------------------|-------------------|---|---|
| IN -85-951-00101 T50100 | MP | 71315 | N | WBN | 1 N N N N 2 NA NA NA NA | IN-85-951-001 | QTC | EMPLOYEE CONSIDERED UNSTABLE BY COLLEAGUES AND IS IN A SENSITIVE POSITION. (NAMES/DETAILS KNOWN TO QTC AND RELEASE OF THIS INFORMATION WOULD JEOPARDIZE CONFIDENTIALITY). CI HAS NO MORE INFORMATION. NO FOLLOW UP REQUIRED. | |
| IN -85-996-00401 T50156 | MP | 71312 | N | WBN | 1 N N N N 2 NA NA NA NA | IN-85-996-004 | QTC | CI WAS DENIED COMPENSATION FOR TIME MISSED DUE TO AN ON-THE-JOB INJURY BECAUSE TVA WRONGLY CLAIMED THAT THE INJURY WAS NOT REPORTED. DETAILS KNOWN TO QTC, WITHHELD TO MAINTAIN CONFIDENTIALITY. CONSTRUCTION DEPT. CONCERN. CI HAS NO FURTHER INFORMATION. NO FOLLOW UP REQUIRED. | |
| IN -86-033-00101 T50248 | MP | 71301 | N | WBN | 1 N N N N 2 NA NA NA NA | | QTC | POTENTIALLY INEFFECTIVE MEDICAL TREATMENT PROVIDED FOR ON THE JOB INJURY. DETAILS KNOWN TO QTC, WITHHELD DUE TO CONFIDENTIALITY. NO FURTHER INFORMATION AVAILABLE IN FILE. UNIT I CONSTRUCTION CONCERN. NO FOLLOW UP REQUIRED. | |
| IN -86-162-00201 T50245 | MP | 71312 | N | WBN | 1 N N N N 2 NA NA NA NA | | QTC | CI HAD A JOB RELATED INJURY. THIS INJURY RESULTED IN SURGERY. CI HAS RECEIVED NO FINANCIAL AIDE OR MENTAL THERAPY. CONSTRUCTION DEPARTMENT CONCERN. DETAILS KNOWN TO QTC, WITHHELD TO MAINTAIN CONFIDENTIALITY. NO FURTHER INFORMATION MAY BE RELEASED. NO FURTHER INFORMATION IN FILE. | |
| IN -86-172-00101 T50123 | MP | 71303 | N | WBN | 1 N N N N 2 NA NA NA NA | IN-86-172-001 | QTC | CI FEELS THAT THE MEDICAL STAFF ON THIRD SHIFT IS NOT ADEQUATE, AND THAT A MEDICAL DOCTOR SHOULD BE IN ATTENDANCE. CONSTRUCTION DEPT CONCERN. CI HAS NO ADDITIONAL INFORMATION. | |

CONCERNS ARE GROUPED BY FIRST 3 DIGITS OF SUBCATEGORY NUMBER.



REFERENC - ECPS132J-ECPS132C
 FREQUEN - REQUEST
 ONP - ISSS - RHM

TEHNESS VALLEY AUTHORITY
 OFFICE NUCLEAR POWER
 EMPLOYEE CONCERN PROGRAM SYSTEM (ECPS)
 EMPLOYEE CONCERN INFORMATION BY CATEGORY/SUBCATEGORY
 SUBCATEGORY: 713 SLOW CLAIM PROCESSING AND INADEQUATE COMPENSATION

TIME - 11:04:3
 RUN DATE - 03/10/8

CATEGORY: MP MGT. & PERS. ISSUES

| CONCERN NUMBER | CAT | SUB CAT | S H R D | PLT LOC | 1 REPORT APPL 2 SAF RELATED BF BL SQ WB | HISTORICAL REPORT | CONCERN ORIGIN | CONCERN DESCRIPTION | REF. SECTION CAT - MI SUBCAT - 713 |
|----------------------------|-----|---------|------------------|------------|---|----------------------|-------------------|---|--|
| IN -86-256-00101 T50145 | MP | 71311 | N | WBN | 1 N N N N 2 NA NA NA NA | IN-86-256-001 | QTC | CI HAD A JOB -RELATED INJURY WHICH R EQUIRED SURGERY (DR. SAID COME IN HE XT DAY) BUT TVA DID NOT GET THE PAPE RWORK COMPLETED UNTIL 30 DAYS LATER. DR. INFORMED CI THAT HE HAD FURTHE R DAMAGED HIS INJURY. (NAMES/DETAIL S TO THE SPECIFIC CASE ARE KNOWN TO QTC AND WITHELD TO MAINTAIN CONFIDENT IALITY). CONSTRUCTION DEPT. CONCERN . CI HAS NO FURTHER INFORMATION. H O FOLLOW UP REQUIRED. | |
| IN -86-280-00101 T50151 | MP | 71306 | N | WBN | 1 N N N N 2 NA NA NA NA | IN-86-280-001 | QTC | CI FEELS THAT THE ON-SITE MEDICAL PE RSONNEL SHOULD GET INVOLVED IN SAFET Y MEETINGS. MEDICAL PERSONNEL COULD EDUCATE THE CRAFT IN SUBSTANCE DANG ERS, NOISE LIMITATIONS AND HOW EXCESS IVE EXPOSURE TO CHEMICALS COULD HARM THEM. CI ALSO FEELS THAT THE CRAFT WOULD BE ABLE TO HAVE ANY QUESTIONS THEY MAY HAVE BY THE MEDICAL STAFF. CI HAS NO ADDITIONAL INFORMATION. NUCLEAR POWER CONCERN. NO FOLLOWUP REQUIRED. | |
| OO -85-005-00601 T50224 | MP | 71302 | N | SQN | 1 N N N N 2 NA NA NA NA | | QTC | SEQUOYAH: TVA DOCTORS (KNOWN) ARE PO ORLY QUALIFIED AND RENDER POOR SERVI CES WHICH HAS WORSENERD EMPLOYEE INJU RIES. SOME OF TVA'S DOCTORS HAVE NO T HAD MEDICAL LICENSES. DETAILS KHO NN TO QTC, WITHHELD DUE TO CONFIDENT IALITY. NO FURTHER INFORMATION MAY BE RELEASED. CONSTRUCTION DEPT. CONC ERN. CI HAS NO FURTHER INFORMATION. NO FOLLOW UP REQUIRED. | |

CONCERNS ARE GROUPED BY FIRST 3 DIGITS OF SUBCATEGORY NUMBER.



• • •
• • •
• • •

REFREQ - ECPS132J-ECPS132C
 FREQUEN - REQUEST
 ONP - ISSS - RWM

TENNESSEE VALLEY AUTHORITY
 OFFICE OF NUCLEAR POWER
 EMPLOYEE CONCERN PROGRAM SYSTEM (ECPS)
 EMPLOYEE CONCERN INFORMATION BY CATEGORY/SUBCATEGORY
 SUBCATEGORY: 713 TVA MEDICAL PERSONNEL ARE NOT QUALIFIED

TIME - 12
 10:04:3
 RUN DATE - 03/10/8

CATEGORY: MP MGT. & PERS. ISSUES

| CONCERN NUMBER | CAT | SUB CAT | S R D | PLT LOC | 1 REPORT APPL 2 SAF RELATED BF BL SQ WB | HISTORICAL REPORT | CONCERN ORIGIN | CONCERN DESCRIPTION | REF. SECTIO CAT - MF SUBCAT - 71 |
|----------------------------|-------|---------|-------------|------------|---|----------------------|-------------------|---|--|
| OW -85-007-00101 T50224 | MP | 71302 | N | WBN | 1 N N N N 2 NA NA NA NA | OW-85-007-001 | QTC | TVA DOCTORS ARE POORLY QUALIFIED, AND SOME HAVE NOT HAD MEDICAL LICENSES. ONE DOCTOR (KNOWN) WAS HIRED BY TVA AFTER BEING FORCED OUT OF PRIVATE PRACTICE IN A LOCAL COMMUNITY (KNOWN) FOR UNPROFESSIONAL CONDUCT. CI HAS NO FURTHER INFORMATION. CONSTRUCTION DEPARTMENT CONCERN NO FOLLOW UP REQUIRED. | |
| PH -85-003-01601 T50106 | MP | 71318 | N | WBN | 1 N N N N 2 NA NA NA NA | | QTC | TVA DOES NOT COMPLY WITH SITE MEDICAL'S DIRECTIONS. (NAMES/DETAILS KNOWN TO QTC AND RELEASE OF THIS INFORMATION WOULD JEOPARDIZE CI'S CONFIDENTIALITY) CI HAS NO MORE INFORMATION AVAILABLE NO FOLLOW UP REQUIRED | |
| PH -85-003-01901 T50106 | MP | 71317 | N | WBN | 1 N N N N 2 NA NA NA NA | | QTC | PERSONNEL DEPARTMENT MAKES UNAUTHORIZED CHANGES TO MEDICAL RECORDS OF EMPLOYEES. (NAMES/DETAILS KNOWN TO QTC AND RELEASE OF INFORMATION WOULD JEOPARDIZE CI'S CONFIDENTIALITY) CI HAS NO MORE INFORMATION AVAILABLE NO FOLLOW UP REQUIRED | |
| PH -85-045-00101 T50256 | IH | 60200 | S | WBN | 1 N N N Y 2 NA NA NA NO | | QTC | TVA CHANGED THE EMPLOYEE'S DOCTOR'S RESTRICTIONS AND THIS CHANGE FROM A 25 LB. LIFTING LIMIT TO A 50 LB. LIFTING LIMIT MADE IT IMPOSSIBLE FOR THE EMPLOYEE TO CONTINUE WORKING. EMPLOYEE HAD RECEIVED AN ON-THE-JOB INJURY. (NAMES/DETAILS TO THE SPECIFIC CASE ARE KNOWN TO QTC AND WITHHELD TO MAINTAIN CONFIDENTIALITY.) NO FURTHER INFORMATION MAY BE RELEASED. NO FOLLOW-UP REQUIRED | |
| | 02 MP | 71305 | S | WBN | 1 N N N N 2 NA NA NA NA | | | | |
| WBM-85-003-00301 T50257 | MP | 71311 | N | WBN | 1 N N N N 2 NA NA NA NA | | QTC | CI WAS INJURED ON THE JOB, AND DID NOT RECEIVE APPROPRIATE WORKMEN'S COMPENSATION BENEFITS. NO ADDITIONAL INFORMATION IS AVAILABLE IN FILE. | |

CONCERNS ARE GROUPED BY FIRST 3 DIGITS OF SUBCATEGORY NUMBER.

REFERENC - ECPS132J-ECPS132C
 FREQUEN - REQUEST
 ONP - ISSS - RHM

TENNESSEE VALLEY AUTHORITY
 OFFICE OF NUCLEAR POWER
 EMPLOYEE CONCERN PROGRAM SYSTEM (ECPS)
 EMPLOYEE CONCERN INFORMATION BY CATEGORY/SUBCATEGORY
 SUBCATEGORY: 713 INADEQUATE SUITABILITY PROGRAM

13
 TIME - 10:04:3
 RUN DATE - 03/10/8

CATEGORY: MP MGT. & PERS. ISSUES

REF. SECTIO
 CAT - MF
 SUBCAT - 71

| CONCERN NUMBER | CAT | SUB CAT | S H R D | PLT LOC | 1 REPORT APPL 2 SAF RELATED BF BL SQ WB | HISTORICAL REPORT | CONCERN ORIGIN | CONCERN DESCRIPTION |
|----------------------------|-----|----------|------------------|------------|---|----------------------|-------------------|--|
| WBN-0218 | 01 | MP 71309 | N | WBN | 1 N N N N 2 NA NA NA NA | | OECF | OPERATOR OF AUX CRANE ON 757 EL HAS HAD HEART ATTACK AND OPEN HEART SURGERY |
| WBP-86-001-00701 T50234 | MP | 71312 | N | WBN | 1 N N N N 2 NA NA NA NA | | QTC | TVA HAS NOT PAID CI'S DOCTOR'S BILLS OR REIMBURSED CI FOR SALARY LOST DUE TO A JOB-RELATED ACCIDENT IN 1984. (NAMES/DETAILS KNOWN TO QTC AND WITHHELD TO MAINTAIN CONFIDENTIALITY.) NO FURTHER INFORMATION MAY BE RELEASED. NUCLEAR POWER CONCERN. CI HAS NO FURTHER INFORMATION. NO FOLLOW UP REQUIRED. |
| WBP-86-003-00201 T50244 | MP | 71301 | N | WBN | 1 N N N N 2 NA NA NA NA | | QTC | CI REPORTED THAT TVA MEDICAL WAS NEGLIGENT IN THE HANDLING OF CI'S JOB-RELATED INJURY. (DETAILS KNOWN TO QTC AND WITHHELD TO MAINTAIN CONFIDENTIALITY). NO FURTHER INFORMATION MAY BE RELEASED. CONSTRUCTION DEPARTMENT CONCERN. CI HAS NO FURTHER INFORMATION. |
| WI -85-044-00101 T50250 | MP | 71318 | N | WBN | 1 N N N N 2 NA NA NA NA | | QTC | CI REPORTED MEDICAL CONCERN. DETAILS ARE KNOWN TO QTC, WITHHELD TO MAINTAIN CONFIDENTIALITY. NO FURTHER INFORMATION IN FILE. CONSTRUCTION DEPARTMENT CONCERN. NO FOLLOW UP REQUIRED. |
| WI -85-044-00601 T50132 | IH | 60400 | S | WBN | 1 2 | | QTC | CI'S MEDICAL RESTRICTIONS WERE REMOVED BY A NON-MEDICAL SUPERVISOR. (NAMES/DETAILS KNOWN TO QTC AND RELEASE OF THIS INFORMATION COULD JEOPARDIZE CI'S CONFIDENTIALITY). CONSTR. CONCERN. CI HAS NO MORE INFORMATION. NO FOLLOW UP REQUIRED. |
| | 02 | MP 70506 | S | WBN | 1 N N N N 2 NA NA NA NA | | | |
| | 03 | MP 71310 | S | WBN | 1 N N N N 2 NA NA NA NA | | | |

CONCERNS ARE GROUPED BY FIRST 3 DIGITS OF SUBCATEGORY NUMBER.

REFERENC - ECPS132J-ECPS132C
 FREQUEN - REQUEST
 ONP - ISSS - RHM

TEHNESS VALLEY AUTHORITY
 OFFICE NUCLEAR POWER
 EMPLOYEE CONCERN PROGRAM SYSTEM (EPCS)
 EMPLOYEE CONCERN INFORMATION BY CATEGORY/SUBCATEGORY
 SUBCATEGORY: 713 PRIVATE DOCTORS' MEDICAL CONSTRAINTS NOT ACCEPTED

TIME - 10:04:3
 RUN DATE - 03/10/8

CATEGORY: MP MGT. & PERS. ISSUES

| CONCERN NUMBER | CAT | SUB CAT | S H R D | PLT LOC | 1 REPORT APPL 2 SAF RELATED BF BL SQ WB | HISTORICAL REPORT | CONCERN ORIGIN | CONCERN DESCRIPTION | REF. SECTIO CAT - MF SUBCAT - 71 |
|----------------------------|-----|---------|------------------|------------|---|----------------------|-------------------|--|--|
| WI -85-048-00101 T50120 | MP | 71305 | N | WBN | 1 N N N N 2 NA NA NA NA | WI-85-048-001 | QTC | CI IMPROPERLY TREATED BY TVA MEDICAL . DETAILS KNOWN TO QTC, WITHHELD DUE TO CONFIDENTIALITY. CONSTRUCTION C ONCERN. CI HAS NO ADDITIONAL INFORM ATION. | |
| WI -85-048-00201 T50185 | MP | 71312 | N | WBN | 1 N N N N 2 NA NA NA NA | | QTC | CI'S MEDICAL RECORDS WERE CHANGED FR OM JOB-RELATED INJURY TO NON-JOB-REL ATED INJURY WITHOUT CI'S DOCTORS APP ROVAL. (NAMES/DETAILS TO THE SPECIF IC CASE ARE KNOWN TO QTC AND WITHHEL D TO MAINTAIN CONFIDENTIALITY). CON STRUCTION DEPT. CONCERN. CI HAS NO FURTHER INFORMATION. | |

58 CONCERNS FOR CATEGORY MP SUBCATEGORY 713

CONCERNS ARE GROUPED BY FIRST 3 DIGITS OF SUBCATEGORY NUMBER.

ATTACHMENT B

MEDICAL

List of Concerns by Element/Issue

The Medical Subcategory (71300) is comprised of 58 concerns broken down into three elements addressing eighteen issues.

Quality and Components of the TVA Medical Program

Issue 71301 - TVA Medical Treatment is Inadequate

| | |
|---------------|----------------|
| EX-85-150-001 | IN-85-876-X01 |
| EX-85-150-004 | IN-86-033-001 |
| IN-85-248-003 | WBP-86-003-002 |
| IN-85-329-001 | |

Issue 71302 - TVA Medical Personnel are not Qualified

| | |
|---------------|---------------|
| IN-85-248-006 | 00-85-005-006 |
| IN-85-605-003 | OW-85-007-001 |
| IN-85-835-003 | |

Issue 71303 - Inadequate Medical Staff on Night Staff

IN-85-284-003
IN-86-172-001

Issue 71304 - Insufficient Emergency Medical Equipment on Site

IN-85-665-002

Issue 71305 - TVA Medical Does not Accept Private Doctors' Medical Constraints

| | |
|---------------|---------------|
| HI-85-055-001 | IN-85-770-005 |
| IN-85-335-003 | PH-85-045-001 |
| IN-85-674-001 | WI-85-048-001 |
| IN-85-723-001 | |

Issue 71306 - Health and Safety Training is Inadequate

IN-85-663-014
IN-85-910-002
IN-86-280-001

1 2 3



ATTACHMENT B

MEDICAL

List of Concerns by Element/Issue
(Continued)

Issue 71307 - Employees who Falsify Medical Records are Retained

IN-85-663-005
IN-85-810-X01*

Issue 71308 - Employees Denied Access to Medical Records

IN-85-241-009

Issue 71309 - Inadequate Physical Suitability Program and Health Standards

IN-85-810-X01*
IN-85-871-002
WBN-0218

Administration of the Federal Employees Compensation Act (FECA)

Issue 71310 - Injured Employees Returned to Duty Too Soon

IN-85-248-005
IN-85-539-002
WI-85-044-006

Issue 71311 - Slow Claim Processing and Inadequate Compensation

| | |
|---------------|----------------|
| EX-85-120-X01 | IN-85-627-030 |
| EX-85-149-001 | IN-85-901-001 |
| IN-85-119-005 | IN-86-256-001 |
| IN-85-199-002 | WBM-85-003-003 |

Issue 71312 - Compensation is Unjustly Denied

| | |
|---------------|----------------|
| EX-85-130-001 | IN-85-923-001 |
| EX-85-150-003 | IN-85-996-004 |
| EX-85-152-002 | IN-86-162-002 |
| IN-85-546-002 | WBP-86-001-007 |
| IN-85-821-007 | WI-85-048-002 |

Issue 71313 - Claim Filing Information Purposely Withheld

IN-85-725-004

* Concerns addressed in more than one issue

11



ATTACHMENT B

MEDICAL

List of Concerns by Element/Issue
(Continued)

Miscellaneous Medical Issues

Issue 71314 - Truck Drivers' Health Affected by Hazardous Materials

IN-85-720-X05

Issue 71315 - Unstable Employee in Sensitive Position

IN-85-951-001

Issue 71316 - Medical and File Cabinets are Unsecure

IN-85-539-001

Issue 71317 - Personnel Department Changes Medical Records

PH-85-003-019

Issue 71318 - Concerns with Insufficient Information to Evaluate

PH-85-003-016

WI-85-044-001

11



ATTACHMENT C

List of Reference Documents

TVA GENERAL RELEASES, ORGANIZATIONAL BULLETIN, I CORPORATE SERVICES, Medical Services

TVA GENERAL RELEASES, II PRIVACY (Code)

TVA GENERAL RELEASES, II PRIVACY (Procedures)

TVA GENERAL RELEASES, VIII HEALTH SERVICES (Code)

TVA GENERAL RELEASES, VIII HEALTH SERVICES, Examination

TVA GENERAL RELEASES, VIII HEALTH SERVICES, Facilities

TVA GENERAL RELEASES, VIII HEALTH SERVICES, Radiation Workers

TVA GENERAL RELEASES, VIII HEALTH SERVICES, Rehabilitation

TVA GENERAL RELEASES, VIII INJURY

TVA GENERAL RELEASES, VIII OCCUPATIONAL HEALTH AND SAFETY (Code)

TVA Medical Examiner's Guide, Volume I, IV. Medical Disposition for Duty

TVA Medical Examiner's Guide, Volume I, V. Basic Categories of Examinations

TVA Medical Examiner's Guide, Volume I, VI. Special Examinations for Specific Duty

TVA Medical Examiner's Guide, Volume I, VII. Special Examinations for Specific Systems

TVA Medical Examiner's Guide, Volume I, VIII. Special Examinations for Specific Exposures

TVA Medical Examiner's Guide, Volume I, IX. Special Evaluations of Specific Health Conditions

TVA Medical Examiner's Guide, Volume II, Minimum Physical Requirements and Environmental Conditions for Selected TVA Job Titles

TVA Medical Examiner's Guide, Documentation Files, VI. 2 Unescorted Access to Nuclear Plants

TVA Medical Examiner's Guide, Documentation Files, VI. 3 Nuclear Reactor Operator Licensure

American National Standard N18.17-1973, "Industrial Security for Nuclear Power Plants" as amended, which includes American Nuclear Society ANS 3.3-1982, "Security for Nuclear Power Plants"



ATTACHMENT C (Continued)

American National Standard ANSI/ANS-3.4-1983, "Medical Certification and Monitoring of Personnel Requiring Operator Licenses for Nuclear Power Plants"

NRC Regulatory Guide 1.134, "Medical Evaluation of Nuclear Power Plant Personnel Requiring Operator Licenses"

TVA Memorandum to Mark B. Whitaker from H. E. Lindler dated August 16, 1986, "Summary of Information Exchange Visits with Selected Southeastern Utilities"

TVA's Occupational Health and Medical Services - A Historical Documentation, 1933-1984

Tennessee Valley Authority, Division of Medical Services, Program Outline, (MED SV 2/86)

TVA Memorandum to "Those listed" from Frank D. Faires, dated November 20, 1981, "Falsification of Medical Record Information"

TENNESSEE VALLEY AUTHORITY ACT

TVA Division of Medical Services, Selected Clinical Services Report, September 30, 1985 through June 30, 1986

TVA Division of Medical Services, A. History of TVA Medical Examinations, B. TVA Requirements for Special Examinations, and C. Statutory Requirements for Examinations (March 5, 1976)

TVA Selected Activities Summary, Division of Medical Services, FY 1982

TVA Selected Activities Summary, Division of Medical Services, FY 1983

TVA Selected Activities Summaries, Division of Medical Services, Quarters ending March 31, 1979 through December 31, 1984

U.S. Department of Labor, Employment Standards Administration, Office of Workers' Compensation Programs, Division of Federal Employees' Compensation, "Agency FECA Injury Reporting Time-Lag Analysis," FY 86

"Reducing Civilian Injury Claims, Six Successes in Meeting Presidential Goals," United States Army Safety Center

Positive Case Management Handbook, Work Injury Compensation Services, Tennessee Valley Authority June 1986

Managing Injury Compensation Claims and Promoting Recovery and Return to Work; Summary of TVA's Injury Compensation Experience, January 1982

Background Paper, Federal Employee's Compensation Experience, Tennessee Valley Authority, January 20, 1982

100-100000



ATTACHMENT C (Continued)

TVA memorandum to W. F. Willis from Charles Bonine, Jr. dated January 22, 1981, "First Quarterly Executive Summary Report on Workers' Compensation"

TVA memorandum to John W. Thompson from Robert L. Craig, M.D., dated June 18, 1986, with the subject, "Quarterly Executive Summary Report on Workers' Compensation"

KEY TOPICS REPORTS, Division of Medical Services, dated August 14, 1980; December 19, 1980; January 15, 1982; June 23, 1982; and July 20, 1982

TVA Medical Records (Individual Employees)

TVA Compensation Records (Individual Employees)

TVA Personnel History Records (Individual Employees)

ATTACHMENT D

List of Names and Job Title of Those Interviewed

TVA

Robert L. Craig, M.D., Medical Director
Frank D. Faires, Medical Administrator
Richard K. McGee, Ph.D., Chief, Health Counseling and Rehabilitation Branch
Elmo E. Emily, Program Manager, Work Injury Compensation Services
Murphy S. Watson, Supervisor, Workers' Compensation Assistance Unit
Debbie Youngblood, Claims Officer, Workers' Compensation Assistance Unit
Edmund S. Lane, M.D., Chief Physician, Central Area Medical Services
Georgene L. Johnson, R.N., Supervisor of Nursing Services, Central Area
Medical Services
Patricia A. Nabors, R.N., Supervisor of Nursing Services, Watts Bar Medical
Office
William A. Miller, R.N., Occupational Nurse Practitioner, Watts Bar Health
Station

UTILITIES

Duke Power Company, Dr. Peter Loper
Carolina Power and Light Company, Julia Craft, R.N.
Virginia Power Company, Dr. William S. Dingleline
Alabama Power Company, Tom Chapel

OTHER FEDERAL AGENCIES

Leven B. Gray, Manager, Nuclear Industrial and Fire Safety-National
Aeronautics and Space Administration

Bill Billingsley, Director, Safety and Environmental Management
Division-General Services Administration

Carl Eichinger, Director, Occupational Health and Safety-Veteran's
Administration

Joseph M. Dalton, Jr., Safety Manager, Division of Safety
Management-Department of the Interior

Richard Bauer, Manager, Injury Compensation Branch-United States Postal
Services

12/15/54

