U.S. NUCLEAR REGULATORY COMMISSION

REGION III

Report No. 50-155/90018(DRSS)

Docket No. 50-155 License No. DPR-6

Licensee: Consumers Power Company
1945 West Parnall Road
Jackson, MI 49201

Facility Name: Big Rock Point Nuclear Power Plant

Inspection At: Big Rock Point Nuclear Power Plant, Charlevoix, Michigan; Burns Clinic Medical Center, P.C., Petoskey, Michigan; and Woodland Counseling Centers, Inc., Petoskey, Michigan

Inspection Date: September 25-28, 1990

Inspectors: J. R. Kniceley
J. R. Kniceley
Physical Security Inspector — 11/5/90 Date

J. R. Kniceley for
J. L. Belanger
Senior Physical Security Inspector — 11/5/90 Date

Approved By: James R. Creed
James R. Creed, Chief
Safeguards Section — 11/5/90 Date

Inspection Summary

Inspection on September 25-28, 1990 (Report No. 50-155/90018(DRSS))
Scope: This special, announced inspection reviewed the licensee's fitness-for-duty program required by 10 CFR Part 26. The review was conducted in accordance with Temporary Instruction 2515/106 (TI). Specifically, the inspectors evaluated the licensee's current drug and alcohol abuse policies and procedures, implementing organization, worker awareness of program, random testing program, collection and testing facilities, training and any reported fitness-for-duty (FFD) events.
Results: Based on the NRC's selective examination of key elements of the licensee's fitness-for-duty program, it was concluded that the licensee is satisfying the general objectives of 10 CFR Part 26.10. However, as identified through a licensee audit, the licensee's fitness-for-duty program was significantly discrepant for several months after the January 3, 1990 required implementation date. These discrepancies, which are being addressed in a separate inspection report (No. 50-155/90020; 50-255/90020(DRSS)),

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revealed weak initial management oversight of the program and training of key FFD staff. The thoroughness of the licensee's Quality Assurance (QA) audit of the FFD program appears responsible for the licensee's current satisfactory implementation of the general objectives of the FFD rule. One weakness was identified in the licensee's random testing program in that there was no random testing conducted on Sundays and very limited testing during backshifts. The licensee agreed to start testing on randomly related Sundays and to increase backshift testing.

DETAILS

1. Key Persons Contacted

In addition to the persons listed below, the inspectors interviewed other licensee and contractor employees. The asterisk (*) denotes those present at the Exit Interview conducted on September 28, 1990.

*W. Beckman, Plant Manager, Consumers Power Company (CPCO)
*B. Alexander, Technical Engineer, CPCO
*J. Griggs, Human Resources Director, CPCO Palisades
*E. Zienert, Human Resources Director, CPCO
*J. Dorr, Safety and Health Director, CPCO General Office
*J. Smith, FFD Administrator, CPCO General Office
*L. Monshor, QA Superintendent, CPCO
*M. VanAlst, Property Protection Supervisor, CPCO
L. Warner, M.A., Executive Director, Woodland Counseling Centers, Inc.
R. O'Gawa, R.N., Marketing Associate, Burns Clinic Medical Center
J. Keith, M.D., Director of Corporate Health Services, Burns Clinic Medical Center

*A. Masciantonio, Project Manager, NRC/NRR
E. Plettner, Senior Resident Inspector, NRC RIII

2. Followup on Previous Inspection Findings (IP 92701, 92702, 92703)

(Closed) Unresolved Item (Report No. 50-155/90002-02 (DRP): This item was described in Section 6 of the resident inspector's report. On January 3, 1990, while reviewing TI 2515/104 the senior resident inspector noted that two supervisors had not completed Fitness-For-Duty training which was required for all supervisors prior to rule implementation. When the concern was brought to the attention of the licensee, the two supervisors were immediately given the required training. This issue did not represent a significant program deficiency in that only two supervisors were not trained on schedule, and when identified the licensee took immediate corrective action. Upon review of the circumstances surrounding this unresolved item we determined that due to the low significance of the problem, the licensee was considered in compliance with the rule. The supervisors were trained at first opportunities. This item is considered closed.

3. Entrance and Exit Interview

At the beginning of the inspection, Mr. W. Beckman and other members of the licensee staff were informed of the purpose of this visit and the functional areas to be examined.

The inspectors met with the licensee representatives denoted in Section 1 at the conclusion of the inspection on September 28, 1990, and advised the representatives that this inspection had been a selective examination of their fitness-for-duty program utilizing TI 2515/106 to determine

whether it meets regulatory requirements, and included a review of findings identified in licensee QA audit QA 90-02. They were further advised that because this was a new inspection initiative, all findings would be further reviewed by both Region III and NRC headquarters management subsequent to the exit interview.

Our review concluded that the licensee's program is currently satisfying the general objectives of 10 CFR Part 26.10.

One issue dealing with random testing was identified which needed licensee attention, to increase the random testing on backshifts and to conduct random testing on Sundays. Employees on these shifts are subject to random selection, but because there was limited staff from which to collect specimens, very few were collected on backshifts and no collections were done on Sundays. This appears to form "safehavens" for employees to be immune from random testing during known periods. The licensee representative stated that sample collection would be conducted on Sundays and backshift sample collections would be increased.

The licensee representatives were advised that a number of the findings identified in their QA audit report represented potential violations of 10 CFR Part 26 and that these findings will be addressed in a separate inspection report.

The quality of the licensee's Quality Assurance audit of their FFD program was considered a program strength. The involvement of the Quality Assurance department enabled the licensee to currently meet program objectives.

4. Inspection Approach (MC 0610)

By letter dated July 16, 1990, the licensee was notified of the dates and scope of the inspection. They were requested to provide the latest revisions of the required FFD policies and procedures, which were reviewed in office prior to the onsite inspection. The inspectors also reviewed the semiannual report (January 1 - June 30, 1990) of program performance data. The results of the Resident Inspector's report which described his observation of the FFD training sessions were also reviewed.

Onsite inspection activities began with interviews of the key individuals responsible for program implementation and included, for example: the Medical Review Officer, EAP contractor, FFD Administrator, Human Resources Director, collection personnel and plant management. Inspection activities also included interviews with employees and contractors regarding their understanding of program requirements and protections.

The inspectors conducted a tour of the onsite collection and record storage facilities as appropriate. The inspectors examined the security and contents of the files and found them to be adequately secure and current. Access to sensitive information is limited to individuals with a need to know.

5. Written Policies and Procedures (TI 2515/106-05.01c)

The licensee's written FFD policies and procedures were reviewed and compared to the requirements of 10 CFR Part 26 to assure that they were comprehensive and of sufficient clarity and detail to communicate duties and responsibilities and to support the implementation of the program.

A written, comprehensive policy on fitness-for-duty was found in Consumers Power Company employee Fitness-For-Duty policy (FFD-PO-01) Revision 3, dated January 3, 1990. Copies of the policy were posted in hallways in a manner that made easy access by employees and contractors to the policy. In addition, each employee had been given a copy of the policy. Interviews with employees indicated that the policy was effectively communicated through training.

Written procedures were developed which adequately detailed responsibilities for important aspects of the program involving: selection and notification, presumptive positive testing, onsite collection, processing of specimens, and Medical Review Officers' (MRO) review and notification.

6. Program Administration (TI 2515/106-05.02a)

The program responsibilities are described in the licensee's procedures. There appear to be no gaps in the assignment of responsibilities. Consumers Power Company's Human Resource Department has the responsibility for FFD program implementation and management. The FFD Administrator reports to the Corporate Health and Safety Director. The site Human Resources Director is responsible for implementation of the FFD program and reports to the Plant Manager. The FFD has responsibility for all the departments that fall under the program. Management appears to currently be devoting adequate attention to monitoring the program performance.

The licensee has contracted with Woodland Counseling Center, Inc., Petoskey, Michigan, for Employee Assistance Services (EAS) which is available for Consumers Power employees. Employees are encouraged to use the EAS as needed. Interviews with plant staff indicated both a willingness to use the EAS and a willingness to refer others to the EAS. Prior to rule implementation, the EAS had been used to successfully refer and monitor personnel needing EAS services. EAS services are not provided by Consumers Power to contractor employees.

Authorities and responsibilities under the program were defined and adequate in detail to guide FFD personnel in the conduct of their duties. All of the personnel interviewed confirmed that they were now cognizant of their responsibilities. It should be noted that the key members of the licensee's fitness-for-duty staff had very little training or experience in performing their assigned functions. This contributed to many of the misinterpretations later identified in their QA audit.

7. Worker Awareness (TI 2515/106-05.02b)

The inspectors conducted interviews of twelve licensee and contractor employees. The individuals had a good understanding of the FFD policy and the program elements that relate to them. Those interviewed indicated support for the program and mentioned that they believed that a safer work environment was created because of the FFD program.

8. Program Elements (TI 2515/106-05.02c)

a. Random Testing

The selection and notification process was adequate to assure that testing is conducted in a random manner and that all individuals with unescorted access to the protected area and the Emergency Offsite Facility (EOF) were included and subject to testing.

The random selection process appears to produce a random selection of individuals for testing. Selection is randomly conducted once a week on different days using a computer generated list taken from a pool of all individuals with unescorted access to the protected area and EOF responders. The list of individuals with unescorted access is continuously updated. Dates for collections are randomly scheduled on a monthly basis and provided to the collection contractor so they can schedule their personnel accordingly. Individuals selected weekly are then matched with the pre-established test dates. The site Human Resources Director takes the generated list from the computer and notifies the individual's department supervisor who, in turn, notifies the individual to report for testing. When corporate and other off-site employees are selected, one of the collection personnel drives to the work location and collects the specimen. When employees are selected but are not available for testing, the individual is returned to the pool and not tested. When off-site contractors with infrequent site access are selected, and are not available for testing, their badges are tagged for testing when they visit the site.

One weakness was identified regarding the frequency of backshift testing and the failure to conduct testing on Sunday. Inspection results showed that although some backshift testing was being conducted, no tests were done on Sundays and approximately 92% of the random tests were done between the hours of 6:00 a.m. and 3:00 p.m. Some tests were being done on Saturdays and holidays. The licensee stated that due to the lack of plant personnel usually working on Sundays they didn't think it was necessary to test them. The inspector's concern was that there appears to be a "safehaven" for employees to be immune to random testing because of the policy to not test on Sundays and the limited amount of backshift testing. The licensee stated they would start testing on Sundays and increase backshift testing. The licensee's corrective actions to address this concern will be reviewed during future inspections.

Consumers Power Company has presently contracted with one HHS certified laboratory, South Bend Medical Foundation, Inc., South Bend, Indiana. Both pre-access and random tests are done by this laboratory. The licensee plans on contracting with a second HHS laboratory to use as a backup but has not yet decided with which lab to contract.

The licensee's testing cut-off levels and substances listed for testing are identical with those required in 10 CFR 26.

b. Documentation

The licensee has developed adequate systems for documenting the key elements of the FFD program and for assuring the protection of information. The licensee has a general policy of limiting access to information to those with a clear need to know. Selection lists, chain of custody forms, tests results, the permanent log, and individual FFD files are carefully protected. The design of the various records is adequate to assure that all relevant information is collected and can be retrieved when needed. An inspection of a sample of the records showed them to be legible and complete. Physical security of the records is adequate and access is limited to FFD personnel. Files are kept in locked cabinets and the rooms are locked when not attended. The FFD program personnel were knowledgeable concerning the data storage requirements outlined in the rule.

c. Sanctions and Appeals

The licensee's Policy and Procedures are consistent with required actions identified with 10 CFR 26. These procedures indicate that the first confirmed positive test results in denial of access for a minimum of 14 days and referral to the EAP. Any subsequent confirmed positive test results in denial of access for three years. Any individual involved in the sale, use, or possession of illegal drugs within the protected area will be denied access for five years and discharge.

The first occurrence of an identified violation of the alcohol abstinence period results in the same sanctions as for drugs. Repeated occurrences of positive alcohol tests will result in more serious disciplinary actions, up to and including discharge.

The licensee's appeal process for a positive alcohol or drug determination has been established in procedures and meets rule requirements. The MRO notifies the individual of a confirmed positive test result and offers an opportunity to discuss the results prior to notifying the FFD manager.

The individual is given the opportunity to request that the split specimen be screened and confirmed by an independent HHS certified laboratory.

Contractor employees who have been denied access based upon the first confirmed positive drug test are not allowed subsequent access to Consumers Power Plants.

d. Audits

The licensee appears to have an adequate audit program, based primarily on audits by its own QA department. The QA department conducted a post-implementation audit of certain portions of the FFD program which was successful in identifying and correcting a number of significant program violations and weaknesses. The audit revealed that portions of the FFD rule were either not addressed or were implemented contrary to NRC guidance. Management oversight of program implementation would have been significantly enhanced had this audit been completed prior to the effective date of the FFD rule. A separate review of the licensee's audit was performed by the inspectors and will be documented in a separate inspection report. The licensee plans on auditing the remaining portions of their FFD program in October 1990.

9. Sample Collection/Testing Facility (IP 2515/106-05/02d)

Consumers Power Company has contracted with Burns Clinic Medical Center, Petoskey, Michigan for MRO and specimen collection services. All collected specimens are sent to a HHS certified laboratory (South Bend Medical Foundation, Inc., South Bend, Indiana) for both initial and confirmatory tests. Quality control measures for the alcohol testing and urine sample collection processes were observed, reviewed, and determined to be adequate. These measures include access control procedures, chain-of-custody, blind performance tests, and courier services.

Review of personnel files and interviews showed that the contractor collection personnel are well qualified. During the walkthrough of the collection process, the inspectors noted that program personnel followed the required procedures carefully and professionally. Care was taken to explain the process to the individual, to obtain the necessary signatures, to obtain information on prescription drugs being used, to assess the specimen for indications of tampering, and to initiate the chain-of-custody process. Specimens were properly packaged, labelled, and stored adequately in preparation for shipment. The inspectors witnessed the licensee's practices for conducting random alcohol breathalizer test, noting that the licensee used CBS Alco-Sensor III intoxilyzers for both the preliminary as well as the confirmatory tests. The licensee is also equipped to collect onsite blood samples for a gas chromatography analysis upon an employee demand.

10. Training Program (TI 2515/106-05.01a)

The inspectors did not directly observe any FFD training, but did review selected curriculum and the results of the review of the FFD training program sessions which were attended by the NRC Senior Resident Inspector. The Senior Resident Inspector, using NRC's Temporary Instruction 2515/104, evaluated the licensee's FFD training for supervisors and found it to be

adequate. The FFD training appeared to be effective as evidenced by the employees' knowledge and support for the FFD program. Interviews with plant staff indicated knowledge of the rule and their responsibilities. Supervisors appeared to understand their special responsibilities and to have both the skills and motivation to use their training.

All workers interviewed appeared to be generally supportive of the FFD program and its goals. They appeared to have a high level of confidence in the integrity of the collection and testing process and the FFD personnel.

11. Reported FFD Events (TI 2515/106-05.01a)

There have been no events required to be reported to the NRC. The licensee has recently submitted their six-month report on program performance required by 10 CFR 26.71(d). The licensee has not experienced a confirmed positive drug test since implementation of the rule on January 3, 1990. The licensee's report submittal appeared adequate.