



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION II
101 MARIETTA STREET, N.W.
ATLANTA, GEORGIA 30323

Report Nos.: 50-338/90-27 and 50-339/90-27

Licensee: Virginia Electric and Power Company
Glen Allen, VA 23060

Docket Nos.: 50-338 and 50-339

License Nos.: NPF-4 and NPF-7

Facility Name: North Anna 1 and 2

Inspection Conducted: October 23-25, 1990

Inspector: William J. Tobin 11-21-90
W. J. Tobin, Senior Safeguards Inspector Date Signed

Accompanying Personnel: Loren Bush, Office of Nuclear
Reactor Regulation

Approved by: D. R. McGuire 11-21-90
D. R. McGuire, Chief Date Signed
Safeguards Section
Nuclear Materials Safety and Safeguards Branch
Division of Radiation Safety and Safeguards

SUMMARY

Scope:

This special announced inspection was conducted in the area of the licensee's Fitness For Duty (FFD) Program as required by 10 CFR Part 26. Specifically, the licensee's Policy, Program Administration, Chemical Testing and Key Program Processes were reviewed using NRC Temporary Instruction 2515/106 "Fitness For Duty: Initial Inspection of Implemented Program" dated July 11, 1990.

Results:

Based upon the NRC's selective examination of key elements of the licensee's Fitness For Duty Program, it has concluded that the licensee is satisfying the general objective of 10 CFR 26.10. Strengths were noted in that the licensee tests for a broader panel of drugs than NRC requires, is well staffed with professionals to implement its program, and has conducted extensive Quality Assurance Audits. It is further noted that the licensee had an ongoing Fitness For Duty Program prior to the Rule.

One Unresolved Item (90-27-01) was identified relative to employees and contractors having access to records of their tests as required by Part 26, Appendix A.

REPORT DETAILS

1. Persons Contacted

Licensee Employees

M. Barry, EAP, Administrator
*M. Bowling, Assistant Station Manager North Anna Nuclear Station (NANS)
S. Brazil, FFD, Administrator (NANS)
*R. Cherry, Licensing Engineer
J. Clark, Quality Assurance Auditor
*S. Cornwell, Assistant FFD Manager
*N. Cross, Manager, Employee Health Services
W. Dingledine, Medical Review Officer
*R. Driscoll, Quality Assurance Auditor
H. Gettler, FFD, Administrator
D. Grant, EAP, Administrator
*E. Harrell, Vice President, Nuclear Operations
*W. Hartley, Manager, Nuclear Operations
*J. Hegner, Licensing, Supervisor
J. Higgins, Manager, Nuclear Security
G. Hubbell, Laborer (NANS)
D. Jenkins, Corporate Investigator
*H. Johnson, Manager, Corporate Security
J. Jones, Welder (NANS)
*D. Llewellyn, Supervisor, Training Department
*J. Maciejewski, Manager, Quality Assurance
*W. Runner, Jr., Manager, FFD Program
S. Salamone, Quality Assurance Auditor
M. Smith, Instructor
J. Stall, Superintendent of Operations (NANS)
*W. Stewart, Senior Vice President
C. Tatum, Registered Nurse
*J. Wilson, Assistant Vice President
B. Wooten, EAP, Administrator

Contractor Employees

D. Johnson, Westinghouse, Health Physicist (NANS)
J. Kirk, Fluor-Daniels, Project Manager (NANS)
L. Lowe, FFD Technician (NANS)
Y. McNeil, FFD Technician (NANS)
V. Ross, FFD Supervisor (NANS)
D. Rowe, Fluor-Daniels, Laborer (NANS)

NRC Personnel

*L. Bush, Office of Nuclear Reactor Regulation
M. Lesser, Senior Resident Inspector

*Attended Exit Meeting

2. Licensee's Written Policy and Procedures

Several years prior to the NRC's Fitness For Duty (FFD) Rule (10 CFR Part 26 effective date January 3, 1990) the licensee had a FFD Policy and implementing procedures that addressed pre-employment and for-cause drug testing, Employee Assistance Programs (EAP), training, appeals and records retention for its 13,000 employees. The licensee considers its program to have been "expanded" by the Rule.

Currently a description the licensee's FFD program is found in a 33 page booklet which covers the Policy on drugs and alcohol, and presents a series of questions and answers relative to legal and illegal drugs, as well as alcohol and EAP. The licensee's Policy is appropriately thorough in addressing all the criteria found in Parts 26.10 and 26.20.

Nuclear Standard ASNS - 0105, "Fitness For Duty," Revision 2, dated February 27, 1990, is the primary vehicle for written policies, responsibilities, and requirements for implementing the licensee's FFD program. Corporate Administrative Procedures (VCAP-0105 and SSCP-0001) support North Anna Station Procedures in the actual day-to-day conduct of the program.

3. Program Administration Management

The licensee has assigned the additional duties of the Fitness For Duty Manager to the Corporate Director of Nuclear Administrative Services. Assisting the Fitness For Duty Manager at the Corporate level is the Supervisor, Management Information and Planning. External to the Nuclear Power Group is the utility - wide Director of Employee Health Services who provides for the Medical Review Officers, Employee Assistance Program, and related technical and administrative staffs. Training and Quality Assurance audits are provided by the corporate staff.

The FFD Manager reports directly to the Senior Vice President of the Nuclear Power Group along with three Nuclear Vice Presidents and one Quality Assurance Manager.

Resource Allocation

The licensee has four full-time FFD Administrators for its three collection facilities. A contract staff carries out day-to-day activities at the collection facilities (and two preliminary testing laboratories).

The collecting/testing facility at the North Anna Nuclear Station is located at the renovated First Aid Station on the Construction side of the Station. The foyer, collection area, testing laboratory and associated offices appeared to be adequate but in some examples slightly crowded, i.e. a duplicating machine was located in the Administrator's Office, and

the laboratory technician was observed placing empty trays on a chair due to lack of counter top space. Security of the facility was provided by a cypher locked door from the foyer to the collection area, two motion detectors and two duress alarms which annunciate inside the Station security building. The inspector noted, however, that the exit door of the collection area was left ajar due to the need to cool the area during daylight hours. The entire facility is secured during off-hours. Additionally, access to the testing laboratory which is considered part of the overall collection facility is more administratively controlled than physically controlled. The inspector noted that the intent of Part 26 Appendix A Subpart 2.7(a)(1), "... sufficient security measures..." was to preclude access by unauthorized individuals into the testing laboratory. The licensee responded positively to this identified weakness.

Proactive Measures

The licensee has installed electrical controls from the water source to the toilet in the collection area; this allows the technician to activate the flushing water (which is dyed blue) after the individual has provided the specimen to the technician.

Procedurally the licensee tracks randomly chosen individuals who for various reasons are excused from tests at the request of their supervisor, i.e. on scheduled leave, in excess of one hour from a collection area, etc. Upon the third absence a person's badge is tagged at the security access point for an automatic pre-access test.

As corrective action to a FFD incident at the Surry Station in April 1989, the Corporate Investigator tracks all drug confiscation cases that are furnished to offsite police jurisdictions to ensure the licensee is kept well informed of the results of offsite tests.

The licensee uses two drug dogs for searches at the two nuclear stations and at the Corporate offices.

As a result of a FFD incident at the Surry Station in June 1990, all persons involved with the conduct of the FFD program (to include the contract laboratory technicians) are now subject to random testing even if they are not badged for unescorted protected area access.

Employee Assistance Program

The licensee employs three full-time certified EAP professionals and three contractor professionals for its entire utility-wide work force. These six professionals travel extensively and are not assigned to any particular nuclear facility. On many occasions they interact with the workforce through presentations at Safety Meetings or visiting the site after hours. The licensee's EAP has recently finished a survey of its clients to determine weaknesses, strengths, union support, best communication media, etc.

The EAP offices appeared appropriate to meet the criteria of confidentiality although most interviews are held in private elsewhere. EAP is publicized through a selection of brochures, billboard signs, notepads, and news articles. The EAP was involved in the recent Quality Assurance Audit.

4. Training

Policy Communications/Training

Based upon input from the Resident Inspectors attendance at FFD training prior to January 3, 1990, and upon the results of limited interviews conducted during this inspection it appears the licensee's Policy and program were well communicated to the work-force. The licensee utilized a variety of medium to educate the employees and contractors on the FFD program; at least six newsletters or articles in the "Currents" newspaper, six memorandums to all employees, and a combination of four pamphlets and booklets were utilized in this effort. Additionally, wallet-sized cards and supervisor flow charts were made available to the employees.

Initial and Supervisor training appears to have adequately covered the licensee's Policy, safety hazards, role of the Medical Review Officer, EAP, drug abuse recognition, behavioral observation, escort duties, and the role of supervisors.

Of interest, was the attendance of the Chief Executive Officer of the utility at a regularly scheduled training class in the Corporate Offices.

5. Key Program Process

Notification/Identification

Each working day the Nuclear Security Corporate Officer updates the Station Clearance Systems reflecting any additions (or deletions) to the list of unescorted access authorized individuals. This system then serves as the database for those names randomly chosen by computer located at the FFD Coordinator's Office at the Corporate Offices. There are six pools (North Anna, Surry, and Corporate who are further divided into contractor/employees at each location) which are quizzed by the computer daily. Currently the licensee has randomly selected a rate of 107% of the population.

On the weekends the Site FFD Administrator receives a list of who in fact is within the protected area that day. The computer then furnishes a chronological list of numbers corresponding to the list of names so that approximately 5% are chosen.

Once notification is made through the appropriate Supervisor, employees are allowed about one hour to leave the protected area and walk over to the "construction side." As discussed earlier, procedurally the licensee tracks those individuals who have been randomly chosen but are excused by their Supervisor for a variety of reasons.

Testing

Positive identity of those to be tested is established by the technician at the collection facility through an employee picture card or a Virginia drivers license. Employees are given ample time to read and understand the Custody forms and related documents.

Jackets, hats and extraneous clothing are left inside one of three lockers available in the facility. Privacy is allowed in both bathrooms. The inspector noted that once the specimen is provided to the technician the individual turns around to wash his/her hands and further returns to the bathroom to flush the toilet. The licensee was receptive to the inspectors comment that the specimen should be kept within view of the worker until it is sealed. The specimens are then tested for subversion, split, sealed and stored inside the laboratory collection facility building. The access log used for entry/exit of the collection area is the only log showing possible access to the laboratory. The inspector pointed out that the log should be for laboratory access and not for recording entry/exit of the collection facility. While not observing non-compliance, the inspector was concerned that the contract technician would leave the laboratory area while specimens were being tested thus voiding the chain of custody. The licensee agreed to address this issue with the contractor. During this inspection, the licensee revised the form used to send specimens to the Roche Biomedical Laboratories because the ONRR representative noted that the form for blind specimens was different than the form for preliminary positive specimens in that it had pre-printed "NEG.SAMP." as part of the address. A strength was noted in that the blind specimens are "spiked" by the an additional contractor who submits them through the laboratory contractor, then through the onsite testing facility, and on through the confirmatory laboratory who furnishes results to another contractor who then advises the licensee of the proficiency of the various laboratories.

Randomness

Between January 3, 1990, till the end of September the licensee conducted over 6000 tests and experienced 51 positive confirmed tests. Three independent verifications of the randomness have been achieved, most recently by a professor at Virginia Commonwealth University. It was determined by the licensee that one worker has been randomly tested five times, 11 tested four times, 86 tested three times, and 396 tested twice. At North Anna, tests were performed so far on only one Holiday, and usually on two weekends per month. Nightshifts and evening shifts appeared well covered for randomness.

The licensee exceeds the panel of five drugs the NRC requires with the addition of barbiturates, methaqualone, and benzodiazepine. Additionally, the licensee has more restrictive cutoff levels for marijuana, opiates and phencyclidine. This is considered a strength in the licensee's program.

By letter dated October 15, 1989, the National Institute on Drug Abuse certified the contract offsite laboratory as meeting the requirements of the Department of Health and Human Services.

It was noted that no action is taken in the event an individual registers just below the cutoff of .04 blood alcohol concentration (even if tested at the end of the shift) or if below the cutoff levels for drugs yet still registering a quantified amount.

Reports of Results

The licensee has informed the NRC of two FFD events; May 22 a Health Physics Supervisor was terminated as a result of a positive marijuana test, and on May 24 the licensee experienced differences in four blind performances tests between the onsite testing laboratory and the confirmatory offsite laboratory. By letter dated August 29, 1990 the licensee submitted its Semi-Annual Performance Data Report.

Sanctions and Appeals

The licensee describes itself as "hard-line" in that there is no second chance if an individual is tested positive for illegal drugs. Regarding alcohol, the worker will be terminated upon a second positive test. For Supervisors and security officers the licensee's policy applies even to non-duty hours. For contractors there is not second chance for either drugs or alcohol. To date, the licensee has not accepted any applicants who admitted to a Part 26 offense.

Employees can appeal either the results of the Medical Review Officer (MRO) evaluation of the laboratory results or they can also appeal the disciplinary sanctions from the first line supervisor up to the President of the utility. Union grievance procedures are contractual.

Audits

Initially, upon the effective date of the Rule, the licensee conducted "performance assessments" by its own audit staff supported by a contractor. These teams closely monitored each collection facility and ensured procedural compliance by the contract technicians. This effort was focused on performance, as well as, compliance. Various technical issues were identified as were documentation inadequacies found. An ongoing corrective action plan was developed and is being successfully pursued.

As a result of these "performance assessments," Quality Assurance Audit #C90-06 was performed between April 2 - May 17, 1990 at all three locations. Two findings were site-specific to North Anna; the Hitachi analyzer was experiencing too much humidity during operation, and technicians did not complete a startup checklist. Various other record and report deficiencies were noted.

The inspector considered the "performance assessments" and the more formal Quality Assurance Audit to be a strength to the licensee's program. The auditors were thorough enough to include the EAP as part of their review.

6. Exit Interview

The exit meeting was held onsite on October 25, 1990, with those so noted above in attendance. The licensee was advised there were no violations and that several strengths had been observed.

One Unresolved Item was discussed relative to Appendix A, Subpart C, Section 3.2, which requires a licensee to provide individuals access to any records relating to their drug tests. During this inspection, the inspector was told that the licensee interpreted the regulation to apply to any record carrying the individuals signature. This was reiterated at the Exit Meeting. The inspector pointed out that Corporate Administrative Procedure VCAP #0105 "Fitness For Duty Program Administration" paragraph 6.1.7, d, 10. states, "The Manager Employee Health Services shall ensure that participants, upon written request, shall have access to laboratory records relating to the participant's test and any records relating to the results of any relevant laboratory certification, review, or revocation of certification proceeding." The licensee is in the process of responding to RII Allegation #90-A-0152 which deals with this issue also.