

R.R. Keimig

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NRC: Region I

1-14-91

U. S. NUCLEAR REGULATORY COMMISSION  
REGION I

Report Nos. 50-220/90-29  
50-410/90-25

Docket Nos. 50-220  
50-410

License Nos. DPR-63  
NPF-69

Licensee: Niagara Mohawk Power Corporation  
301 Plainfield Road  
Syracuse, New York 13212

Facility Name: Nine Mile Point Nuclear Station, Units 1 and 2

Inspection At: Scriba, New York

Inspection Conducted: December 17-21, 1990

Type of Inspection: Routine, Unannounced Physical Security

Inspectors: Edward B. King for  
T. W. Dexter, Physical Security Inspector

1/11/91  
date

Edward B. King  
E. B. King, Physical Security Inspector

1/11/91  
date

Approved by: R. R. Keimig  
R. R. Keimig, Chief, Safeguards Section,  
Facilities Radiological Safety and  
Safeguards Branch

1-11-91  
date

Inspection Summary: Routine, Unannounced Physical Security Inspection  
on December 17-21, 1990 (Report Nos. 50-220/90-29 and 50-410/90-25)

Areas Inspected: Management Support and Security Program Plans; Protected and Vital Area Physical Barriers, Detection and Assessment Aids; Protected and Vital Area Access Control of Personnel, Packages and Vehicles; Alarm Stations and Communications; Power Supply; Testing, Maintenance and Compensatory Measures; Security Training and Qualifications.

Results: The licensee was found to be in compliance with NRC requirements in the areas inspected. However, one previously identified unresolved item concerning vital area barrier weaknesses was reviewed and will remain open. In addition, one unresolved item was identified concerning the requalification time periods utilized by the training department.

## DETAILS

### 1.0 Persons Contacted

#### Licensee

- \*J. Beratta, Manager, Nuclear Security
- \*P. Carroll, General Supervisor Operations
- \*D. Pierce, Nuclear Security Procedures Specialist
- \*H. Christensen, General Supervisor of Administration
- \*N. Zufelt, Nuclear Security Specialist
- \*D. Keeney, Program Coordinator
- \*D. O'Hara, General Supervisor, Security Services
- \*W. Byrne, Administrative Assistant
- \*L. Stephens-Twining, Nuclear Security Specialist
- \*J. Christmas, Site Supervisor, Operations
- \*R. Franssen, Nuclear Security Specialist
- \*D. MacVittie, Training Instructor
- \*M. Smith, Unit Supervisor, Operations
- \*B. Pearson, Supervisor, Technical Services
- \*R. Millier, Security Training Supervisor
- \*D. Crouse, Chief, Nuclear Security Guard
- \*G. Polinsky, Site Supervisor, Operations
- \*G. Gilmer, Supervisor, Technical Services - Projects

#### USNRC

- \*R. Temps, Resident Inspector
- \*S. Fiveash, Physical Security Technician

\*Indicates those present at the exit interview.

### 2.0 Licensee Action on Previously Identified Item

(Open) UNR 50-220/88-30-01 and 50-410/88-29-01: Vital area (VA) barrier weaknesses. While performing the installation of VA barriers in previously identified deficient ventilation ducts, other areas were identified that require barriers. These additional areas are presently being repaired, but based on the findings of the inspectors and discussions with licensee management all of the repairs have not been completed. This item will remain open and will be reviewed during a subsequent inspection.

### 3.0 Management Support and Audits

- a. Management Support - Management support for the licensee's physical security program was determined to be adequate by the inspectors. This determination was based upon the inspector's reviews of various aspects of the licensee's program during this inspection as documented in this report.

- b. Security Program Plans - The inspector verified that changes to the Security, Contingency, and Guard Training and Qualification Plans, as implemented, did not decrease the effectiveness of the respective plans and that they had been submitted to the NRC in accordance with NRC requirements.

#### 4.0 Protected and Vital Area Physical Barriers, Detection and Assessment Aids

- a. Protected Area Barriers - The inspectors conducted a physical inspection of the protected area (PA) barrier on December 18, 1990. The inspectors determined by observation that the barriers were installed and maintained as described in the NRC-approved Physical Security Plan (the Plan). No deficiencies were noted.
- b. Protected Area Detection Aids - The inspectors observed the PA perimeter detection aids on December 18, 1990. The inspectors determined that the detection aids were installed, maintained and operated as committed to in the Plan.

The inspectors requested the licensee to test the detection aids at over twenty locations. All tests results were satisfactory with no adjustments required. No deficiencies were noted.

- c. Isolation Zones - The inspectors verified that the isolation zones were adequately maintained to permit observation of activities on both sides of the PA barrier. No deficiencies were noted.
- d. Protected Area and Isolation Zone Lighting - The inspectors conducted a lighting survey of the PA and isolation zones on December 18, 1990. The inspectors determined by observation that lighting in the PA and isolation zones was adequate. No deficiencies were noted.
- e. Assessment Aids - The inspectors observed the PA perimeter assessment aids during daylight and the hours of darkness, and determined that they were installed, maintained, and operated as committed to in the Plan.

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- f. Vital Area Barriers - The inspectors conducted a physical inspection of several VA barriers on December 18, 1990. The inspectors determined by observation, that the barriers were installed and maintained as described in the Plan except as discussed in Section 2.0. of this report. No deficiencies were noted.

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5.0 Protected and Vital Areas Access Control of Personnel, Packages, and Vehicles

- a. The inspectors determined that the licensee was exercising positive control over personnel access to the PA and VAs. This determination was based on the following:
1. The inspectors verified that personnel were properly identified and authorization was checked prior to issuance of badges and key cards. No deficiencies were noted.
  2. The inspectors verified that the licensee was implementing a search program for firearms, explosives, incendiary devices and other unauthorized materials as committed to in the Plan. The inspectors observed both plant and visitor personnel access processing during peak and off-peak traffic periods. The inspectors also interviewed members of the security force and licensee's security staff about personnel access procedures. No deficiencies were noted.
  3. The inspectors verified that the licensee takes precautions to ensure that an unauthorized name cannot be added to the access list by having only one member of security management authorized to make changes to that list. No deficiencies were noted.
  4. The inspectors determined, by observations, that individuals in the PA and VAs display their access badges as required. No deficiencies were noted.
  5. The inspectors verified that the licensee has escort procedures for visitors to the PA and VAs. No deficiencies were noted.

6. The licensee has a mechanism for expediting access to the vital equipment during emergencies and that mechanism is adequate for its purpose. No deficiencies were noted.
  7. Unescorted access to VAs is limited to authorized individuals. The access list is revalidated at least once every 31 days as committed to in the Plan. No deficiencies were noted.
- b. Package and Material Access Control - The inspectors determined that the licensee was exercising positive control over packages and materials that are brought into the PA through the main access portal. The inspectors reviewed the package and material control procedures and found that they were consistent with commitments in the Plan. The inspectors also observed package and material processing and interviewed members of the security force and the licensee's security staff about package and material control procedures. No deficiencies were noted.
- c. Vehicle Access Control - The inspectors determined that the licensee properly controls vehicle access to and within the PA. The inspectors verified that vehicles are properly authorized prior to being allowed to enter the PA. Identification is verified by the security force member (SFM) at the main vehicle access portal. This procedure is consistent with the commitments in the Plan. The inspectors also reviewed the vehicle search procedures and determined that they were consistent with commitments in the Plan. The inspectors determined that at least two SFMs control vehicle access at the main vehicle access portal. On December 18, 1990 the inspectors also observed vehicle searches and interviewed members of the security force and the licensee's security staff about vehicle search procedures. No deficiencies were noted.
- d. Locks, Keys and Combinations - The inspectors reviewed the licensee's procedures for lock and key control on December 20, 1990 and determined that they were consistent with commitments in the Plan. The inspectors physically inspected the key storage cabinets, reviewed the PA and VA key inventory logs, and discussed lock and key procedures with SFMs and the licensee's staff. No deficiencies were noted.

However, the inspectors expressed concern that at least one control room supervisor, who may be responsible for security key inventory verification, when interviewed, was unfamiliar with the location of the security keys in the key cabinet. The licensee has agreed to review this concern and, if need be, develop a mechanism to ensure that the key verification procedure is being properly carried out.

#### 6.0 Alarm Station and Communications

The inspectors observed the operation of the Central Alarm Station (CAS) and Secondary Alarm Station (SAS) and determined they were operated as committed to in the Plan. CAS and SAS operators were interviewed by the inspectors and found to be knowledgeable of their duties and responsibilities. The inspectors verified that the CAS and SAS did not require any operational activities that would interfere with the assessment and response functions. No deficiencies were noted.

#### 7.0 Emergency Power Supply

The inspector verified that there are several systems that provide backup power to the security systems. The systems and procedures were consistent with the Plan. The systems and their components are located in VAs. No deficiencies were noted.

#### 8.0 Testing, Maintenance and Compensatory Measures

The inspectors determined that the licensee was conducting testing and maintenance of security systems as committed to in the Plan. This determination was based upon a review of the test records for security equipment which were readily available. The security organization has a dedicated maintenance group which ensures prompt repair and return to service of malfunctioning security equipment. A review of these records indicate repairs are normally made within 24 hours after a repair request is generated. The efforts of this group ensures minimal use of compensatory measures and corresponding security force overtime. No deficiencies were noted.

#### 9.0 Security, Training and Qualifications

The inspectors randomly selected and reviewed training and qualification records for nine SFMs. The physical qualification records for unarmed and armed SFMs and firearm qualification records for armed SFMs were inspected and found to be in accordance with the NRC-approved Training and Qualification (T&Q) Plan. However, during the review of training records, the inspectors identified that some SFMs apparently exceeded their 12 month requalification period. The licensee explained that this was due to the implementation of a new requalification system and that, due to the size of the security force, it would be impossible to implement the new requalification system without the requalification periods for some SFMs exceeding 12 months. To effectively implement the new requalification system, the licensee interpreted an annual requalification to allow a 25% tolerance, i.e., plus or minus three months. The additional three months permits the licensee to implement the new requalification system without creating a noncompliance situation. The inspectors informed the licensee that, while this is acceptable, a change to the T&Q plan, in accordance with 10 CFR 50.54(p),

would be required within two months to notify the NRC of this modification. The licensee had apparently overlooked the need to submit the change but stated that it would be submitted in a timely fashion. In addition, the licensee has agreed to insert a memo for record purposes in the training records affected by the utilization of the extended annual requalification. The licensee has ensured the inspectors that the new requalification program will be fully implemented by March, 1991, and that the utilization of the extended annual requalification is temporary until the new program is in place. This is an unresolved item and will be reviewed during subsequent inspections. (UNR 50-220/90-29-01 and 50-410/90-25-01).

In addition, the inspectors identified a conflict in a requalification date between the training department's requalification tracking system and the training records. The licensee agreed to audit all training records to correct any other discrepancies. This will be reviewed during subsequent inspections.

#### 10.0 Exit Interview

The inspectors met with the licensee representatives indicated in Paragraph 1 at the conclusion of the inspection on December 21, 1990. At that time, the purpose and scope for the inspection were reviewed, and the findings were presented. The licensee's commitments, as documented in this report, were reviewed and confirmed with the licensee.