

U. S. NUCLEAR REGULATORY COMMISSION
REGION I

Report Nos. 50-317/90-30
50-318/90-30

Docket Nos. 50-317
50-318

License Nos. DPR-53
DPR-69

Licensee: Baltimore Gas and Electric Company
P.O. Box 1475
Baltimore, Maryland 21203

Facility Name: Calvert Cliffs Nuclear Power Plant

Inspection At: Lusby, Maryland

Inspection Conducted: October 30 - November 1, 1990

Type of Inspection: Initial Fitness-For-Duty

Inspectors: A. Della Ratta
A. Della Ratta, Safeguards Inspector

1-22-91
date

Ronald J. Albert
R. J. Albert, Safeguards Inspector

01-22-91
date

Approved by: B. R. Keimig
B. R. Keimig, Chief, Safeguards Section
Division of Radiation Safety and Safeguards

1-22-91
date

Inspection Summary: Initial Fitness-For-Duty Inspection on October 30 - November 1, 1990 (Combined Inspection Report Nos. 50-317/90-30 and 50-318/90-30)

Areas Inspected: Written policies and procedures, program administration, training, key program processes, and on-site collection facilities.

Findings: Based upon selective examinations of key elements of the Baltimore Gas and Electric Company's Fitness-For-Duty program, it is concluded that the objectives of 10 CFR Part 26 are being met. The following program strengths and potential weaknesses were identified.

Strengths

1. The professionalism, competency and dedication of the staff who were involved in administering the program.
2. The strong support exhibited by licensee management for the program.
3. The random testing of individuals on all shifts, including weekends and holidays.
4. The periodic use of drug detection dogs to conduct searches of the station for drugs.
5. The effectiveness of the audit program.

Potential Weaknesses

1. The FFD procedures do not specifically require supervisory training for contractor/vendor personnel and there was no mechanism to ensure it would be accomplished.
2. The dissemination of unconfirmed positive test results to personnel who do not have a need to know.
3. The licensee temporarily suspends unescorted access for personnel with unconfirmed positive test results.
4. The FFD Program Manager does not appear to have complete control of the FFD Program.
5. There did not appear to be an effective tracking mechanism for FFD supervisory training.
6. The control measures for the random computer-generated lists are inadequate.
7. The method by which the licensee conducts random testing on weekends, holidays and backshifts creates a predictable gap in testing.

DETAILS

1.0 Key Personnel Contacted

Licensee

- *R. Dernoga, Manager, Facilities Management Department
- *V. Bradley, Director, Security Services and Fitness for Duty Program
Manager
- S. Guarnieri, Medical Review Officer
- *F. R. Martenis, Supervisor, Psychological and Employee Assistance Services
- *J. Ross, Jr., Security Program Specialist
- *R. Leonard, Supervisor, Security Screening
- *C. W. Hart, Sr., Supervisor, Security Planning and Programs
- *L. Nolan, Security System Analyzer
- *J. Holleman, Employee Assistance Counselor
- R. Mosko, Psychologist/Counselor
- *L. Gibbs, General Supervisor, Security Operations
- *J. Vollcoff, Compliance Engineer
- *A. Anuje, Supervisor, Quality Assurance
- *S. Cowne, Senior Engineer, Quality Assurance
- *C. Mayes, Assistant General Supervisor, Administrative Services
- *J. Carlson, Supervisor, Technical Training
- K. Lombardi, Random Coordinator
- A. Endler, Manager, Employee Service Department
- R. Wilkinson, Director of Purchasing
- B. Stewart, Contracts Clerk
- D. Jacobs, Physician Assistant/Collector
- C. Barrett, Collector
- R. Rind, Director, Human Resources

USNRC

- *A. Howe, Resident Inspector

- *Attended the exit meeting

The inspectors also interviewed other licensee and contractor personnel during the course of the inspection.

2.0 Entrance and Exit Meetings

The inspectors met with the licensee's representatives, as indicated above, at Calvert Cliffs Nuclear Power Plant on October 30, 1990, to summarize the purpose and scope of the inspection, and on November 1, 1990, to present the inspection findings. The licensee's commitments, as documented in this report, were reviewed and confirmed with the licensee during the exit meeting.

3.0 Approach to NRC Review of the Fitness-For-Duty Program

The inspectors evaluated the licensee's Fitness-For-Duty (FFD) Program using NRC Temporary Instruction 2515/106: Fitness-For-Duty: Initial Inspection of Program Implementation. This evaluation included a review of the licensee's written policies and procedures, and program implementation, as required by 10 CFR Part 26, in the areas of: management support; selection and notification for testing; collection and processing specimens; chemical testing for illegal drugs and alcohol; FFD training and worker awareness; the employee assistance program; management actions, including sanctions, appeals, and audits; and maintenance and protection of records. The evaluation of program implementation also included interviews with key FFD program personnel and a sampling of licensee and contractor employees with unescorted plant access; a review of relevant program records; and observation of key processes, such as specimen collection and on-site notification/documentation procedure for random testing, and the random selection process.

4.0 Written Policies and Procedures

The inspectors determined, through a review of Baltimore Gas and Electric Company's (BG&E's) FFD Manual, Revision 1, dated September 1990, and discussions with the licensee, that the licensee's written FFD policies and procedures, with few exceptions, met regulatory requirements. The following policies were found to conflict with the requirements of 10 CFR Part 26.

- a. Section 3.22.2 states, in part, that BG&E Supervisors are responsible for "Ensuring that appropriate unit and contractor/vendor personnel attend required FFD training." Section 3.24.3 states that contractors and vendors are responsible for attending required FFD training. However, the inspectors noted that the procedures did not specify that the contractor/vendor supervisors were required to attend FFD supervisory training. The inspectors discussed this matter with the licensee. The licensee explained that, with few exceptions, BG&E does not regard contractor/vendor employees as supervisors while working on site. The licensee further stated that, since contractors/vendors, in most cases, report to a BG&E supervisor while on site, BG&E supervisors are responsible for FFD supervisory requirements, which includes behavioral observation.

However, for those contractor/vendor employees whom the licensee designates as supervisors, the licensee could not provide the inspectors with adequate documentation to demonstrate that those individuals had received the required supervisory training. Specifically, the licensee could not provide:

1. A listing of all contractor/vendor personnel designated as supervisors.

2. Procedures that specifically required the supervisory training or retraining of contractor/vendor personnel.
3. Clear evidence to substantiate the completion of required supervisory training for designated contractor/vendor supervisory personnel.

Part 26.20 of 10 CFR states, in part, that each licensee subject to this Part shall establish and implement written policies and procedures designed to meet the general performance objectives and specific requirements of this Part.

Part 26.23(a) of 10 CFR states, in part, that all contractor and vendor personnel performing activities within the scope of this Part for a licensee must be subject to either the licensee's program relating to fitness-for-duty, or to a program, formally reviewed and approved by the licensee, which meets the requirements of this Part.

Part 26.22(c) of 10 CFR states, in part, supervisory training must be completed within 3 months after initial supervisory assignments. A record of the training must be retained for a period of at least three years.

The licensee's failure to have procedures for, or documentation of, supervisory training is an apparent violation (VIO 50-317/90-30-01 and 50-318/90-30-01). An additional weakness in the training program is identified in paragraph 6.0 below.

- b. Section 3.17.8 of the Random Drug Coordinator (RDC) procedures, states, in part, that once a confirmatory positive drug test result for an employee, contractor or vendor has been received from the laboratory via the printer located in the RDC's office, the RDC will immediately give the results to the Medical Review Officer (MRO) for a quality assurance review. The RDC will then contact the Supervisor - Security Screening to advise the supervisor that the HHS laboratory has reported a positive drug test on the individual and to temporarily pull the individual's access (to the Station) until a final determination regarding the positive result has been made by the MRO.

Part 26.24(d) of 10 CFR 26 states, in part, that access to the results of preliminary tests must be limited to the licensee's testing staff, the Medical Review Officer (MRO), the FFD Program Manager, and employee assistance program staff, when appropriate.

Section 2.9(a) of Appendix A to 10 CFR Part 26 states, in part, that a positive test result does not automatically identify a nuclear power plant worker as having used substances in violation of the NRC's regulation or the licensee's company policies. An individual with a detailed knowledge of possible alternate medical explanations

is essential to the review of results. This review shall be performed by the Medical Review Officer prior to the transmission of results to licensee management officials.

Section 2.9(c) of Appendix A to 10 CFR Part 26 states, in part, that following verification of a positive test result, the Medical Review Officer shall, as provided in the licensee's policy, notify the applicable employee assistance program and the licensee's management official empowered to recommend or take administrative action.

The RDC's notification to the Supervisor - Security Screening of the individual's positive drug test reported by the HHS laboratory and temporarily denying the individual's access to the station prior to the review and verification of the confirmatory positive drug test results by the Medical Review Officer (MRO) appears to be inconsistent with 10 CFR Part 26.

This matter is considered an unresolved item, (UNR 50-317/90-30-02 and 50-318/90-30-02), pending further review by the NRC.

Other policies and procedures which the inspectors questioned are discussed in other sections of this report.

5.0 Program Administration

Following are the inspectors' findings with respect to the administration of key elements of the licensee's FFD Program:

a. Delineated Responsibilities

With few exceptions, overall program responsibilities have been clearly delineated by the licensee's primary FFD Program procedures. In general, major FFD Program functions have been assigned to appropriate staff elements.

However, by procedures, the FFD Program Manager has no direct control of certain key FFD program elements. As shown in the licensee's organizational chart, personnel responsible for FFD Training, Employee Assistance Services, Selection and Notification, Collection, and Processing of Specimens do not report directly to the FFD Program Manager.

Therefore, the inspectors expressed concern to the licensee that the FFD Program Manager may not be provided with all the information needed to administer the program properly. The licensee agreed to consider this matter, and it will be reviewed during a subsequent inspection.

b. Management Awareness of Responsibilities

Each of the licensee's managers who have been assigned responsibilities for program functions appeared knowledgeable of their responsibilities as described in the FFD Manual.

c. Program Resources

Program resources appeared adequate. FFD program staff with assigned program functions stated that upper management, both at the station and at the corporate office, have been supportive in providing necessary program resources.

d. Management Monitoring of Program Performance

During the inspection, the inspectors noted that the licensee had conducted an in-depth assessment of its FFD program from July 13 through 30, 1990. The licensee made appropriate adjustments to the program as a result of the findings.

e. Measures Undertaken to Meet Performance Objectives of the Rule

The licensee has provided adequate resources and personnel to meet the performance objectives of the NRC's FFD rule. In regard to a drug free workplace, as stated in 10 CFR 26.10(c), the licensee has conducted periodic searches of the workplace using drug detection dogs, although not required by NRC regulations.

The inspectors also found that the licensee had adequate mechanisms in place to receive and provide "suitable inquiry" information relative to an employee's or applicant's drug or alcohol abuse.

f. Sanctions

The licensee's procedures establish sanctions that meet or exceed the requirements of 10 CFR 26.27(b). An initial confirmed positive drug test will result in termination of employment for BG&E employees and permanent revocation of access for contractor/vendor employees. An initial confirmed positive alcohol test will result in disciplinary action, up to and including termination of employment, for BG&E employees and permanent access revocation for contractor/vendor employees. A second confirmed positive alcohol test will result in termination of employment for BG&E employees.

g. Employee Assistance Program (EAP)

The licensee maintains an EAP, referred to as Employee Medical Assistance Services (EMAS), which offers assessment, short-term counseling, referral services, and treatment monitoring to BG&E employees with drug or alcohol-related problems, and other behavioral or personal problems.

6.0 Training

The licensee had implemented a training program which generally met the requirements of the rule, notwithstanding the exceptions discussed below. The inspectors' evaluation was based on comments by resident inspectors who attended the licensee's training, on-site review of the licensee's FFD lesson plans, and interviews with licensee employees and contractors concerning special aspects of their training and their interpretation of the FFD performance objectives.

An exception to the training requirements of 10 CFR Part 26 was discussed in Section 4.0 a. of this report. In addition, the inspectors determined through interviews that BG&E and contractor employees were not fully aware of the appeal process. The licensee committed to emphasize the appeal process in initial training and revise the refresher training lesson plan to include the appeal process, where it was not addressed at all.

Further, the licensee does not appear to have an effective method for keeping track of employees who are promoted to supervisory positions and who must receive FFD supervisory training.

The inspectors noted that, on September 5, 1990, the licensee identified a supervisor who had not received training within 3 months of becoming a supervisor as required by 10 CFR Part 26.22(c). The individual was promoted to the supervisory position on June 1, 1990, but did not receive the required training until September 6, 1990.

The licensee needs to reevaluate its method of tracking FFD supervisory training to ensure that the method is effective. This is an unresolved item (UNR 50-317/90-30-03 and 50-318/90-30-03), which will be reviewed during a subsequent inspection.

The inspectors noted that the licensee's FFD training responsibilities are fragmented in that the Supervisor - Psychological and Employee Assistance Services, and the Supervisor - Security Screening are responsible for conducting the FFD training of supervisors rather than the Supervisor - Technical Training who is responsible for conducting FFD training for other personnel. The licensee was encouraged to ensure that training documentation and record maintenance are consistent.

7.0 Key Program Processes

a. Selection and Notification for Testing

Random selection for testing was conducted by use of a computer generated list. At the time of this inspection only three individuals had access to the random selection process.

Once the random list was printed, the RDC made all notifications and coordinated appointment times with the supervisors of the selected individuals. A time limit of one hour has been established between when an individual is notified by the supervisor and when he or she must report to the collection facility.

The inspectors determined that there was not a computer safeguards feature to account for the random lists generated in order to prevent unauthorized manipulation of the random selection process. The licensee agreed to evaluate and resolve this matter. This will be reviewed during subsequent inspections.

b. Collection and Processing of Specimens

The inspectors evaluated collection and processing of specimens by observing licensee personnel go through the collection process. The observations included processing of urine specimens and breathalyzer examinations. The specimens were properly identified, positively controlled, and analyzed according to the laboratory procedure. Use of the breathalyzer equipment was also observed to be proper and in accordance with the licensee's procedure and the rule.

The licensee is randomly conducting weekend, holiday and backshift testing. However, the inspectors determined that, during these periods, a predictable gap in testing occurs due to the method used to notify the individuals selected to be tested.

For an individual selected for testing on the backshifts, the licensee deactivates the individual's keycard badge prior to the start of the shift. When reporting to work, the individual is issued his or her keycard badge, upon request, but upon attempting to enter the protected area, the individual finds that the keycard does not work. When the individual reports to the security station that his or her keycard is not working, the security shift supervisor informs the individual that he or she has been selected for random testing. The individual then has one hour to report to the collection facility. This method of notification results in a predictable gap in random testing because:

- If an individual's keycard badge has not been deactivated before the start of the shift, it is apparent that he or she will not be randomly tested for the remainder of his or her work shift.
- Those individuals who are selected and tested during the first hour of their shift know that they will not be randomly tested again for the remainder of their shift.

The deterrent effect of random testing is lost when testing is consistently done at the beginning of a shift since it allows an individual to use drugs or alcohol during the remainder of the workshift without the fear of being called for testing, other than for-cause. This is an unresolved item pending further review by the NRC (UNR 50-317/90-30-04 and 50-318/90-30-04). This item will be reviewed during a subsequent inspection.

During the period from April through mid-September, 1990, the licensee was using a different selection method that prevented the predictability of random testing. However, the licensee adopted the method described above to avoid conflicts with the minimum manning requirements specified in its technical specifications, which was asserted to be a possibility.

The inspectors verified that the licensee has also implemented a program for testing personnel with infrequent unescorted site access that appears to be consistent with the NRC requirements.

Sections 3.17.8 of the licensee's RDC Procedures states, in part, "positives due to prescribed medications or over-the-counter drugs will be handled on an individual basis and will be automatically selected for testing within two weeks as a follow-up." The inspectors expressed the concern that the individuals so identified are being subjected to follow-up testing even though their drug test results have been determined to be negative by the MRO. Although not prohibited by the rule, this practice appears to penalize individuals for taking physician prescribed medications.

The inspectors reviewed BG&E's consent-to-testing Form, IR-3000, and determined that, by signing the form, employees release the licensee of all responsibility associated with the testing process, in addition to providing consent-for-testing. The form reads as follows:

"I further agree to hold harmless the Baltimore Gas and Electric Company, its Directors, officers, employees, and agents in connection with the aforementioned test, the results thereof, and any and all actions which may be taken as a result of that test."

While the rule requires the licensee to obtain an individual's consent prior to testing, the "hold harmless" clause was added to the consent form at the licensee's initiative. It should not have been associated with the consent required by the rule.

Based on the inspector's discussions with the licensee, the licensee has committed to delete the clause from the consent-to-test form.

This will be reviewed during a subsequent inspection.

c. Audit Program

The licensee had completed a Quality Assurance Audit (No. 90-28, dated October 25, 1990) of its FFD program. The inspectors found the licensee audit to be timely, in-depth, and thorough. This audit provided identification of several weaknesses in the licensee's FFD program, and these either had been corrected or were in the process of being corrected at the time of the inspection.

d. Development, Use, and Storage of Records

A system of files and procedures to protect personal information contained in FFD-related records had been developed. Such records were used and stored in an appropriate manner. Access to these records was limited to medical staff members who had job-related "need-to-know" responsibilities.

Tests results from the HHS certified laboratories are automatically transmitted to the printers located in the RDC's office. There were no procedures in place to ensure that the RDC's office was locked when unattended. The inspectors expressed concern that there could cause a breach of confidentiality with regard to the test results and other FFD records stored in the RDC's office. This concern was discussed with the licensee's representatives who committed to take corrective action. This matter will be reviewed during a subsequent inspection.

8.0 On-Site Testing Facility

The licensee does not conduct on-site testing for drugs, but maintains two collection facilities, one at the station and one at its corporate office in Baltimore. Access to both facilities was well controlled by collection personnel, and visitor access was recorded in a log. Chemical testing is done at a Health and Human Services (HHS) certified laboratory.

However, testing capabilities for breath alcohol are provided at each location. Approved breath-testing devices are used. Procedures for their use appear appropriate, and personnel have been trained in the use of the devices.

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Docket Nos. 50-317
50-318

Baltimore Gas and Electric Company
ATTN: Mr. G. Dowell Schwartz, Jr.
Vice President, General Services Division
P. O. Box 1475
Baltimore, Maryland 21203

Gentlemen:

Subject: Combined Inspection Nos. 50-317/90-30 and 50-318/90-30

This letter refers to the initial inspection of the Fitness-For-Duty (FFD) Program developed for and being implemented at the Calvert Cliffs Nuclear Power Plant, Units 1 and 2, Lusby, Maryland. The inspection was conducted on October 30 - November 1, 1990, by Messrs. A. Della Ratta and R. J. Albert of this office.

Areas examined during the inspection are described in the NRC Region I combined inspection report which is enclosed with this letter. Within these areas, the inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the inspectors.

Based on this inspection, we determined that the development, and implementation of your FFD program are responsive to both the spirit and intent of the FFD rule and that the program is aggressive and comprehensive. We also found that the professionalism and technical expertise exhibited by personnel involved in administering the program are commendable.

However, within the scope of this inspection, it appears that one of your activities was not conducted in full compliance with the requirements of 10 CFR Part 26 as set forth in the Notice of Violation enclosed herewith as Appendix A. The violation has been categorized by severity level in accordance with the "General Statement of Policy and Procedure for NRC Enforcement Actions," 10 CFR Part 2, Appendix C (Enforcement Policy). You are required to respond to this letter, and in preparing your response, you should follow the instructions in Appendix A.

In addition, three unresolved items were identified during the inspection. In your response to this letter, we would appreciate receiving a summary of the current status of the items identified as unresolved in the enclosed inspection report.

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Electric Company

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The response requested by this letter are not subject to the clearance procedures of the Office of Management and Budget as required by the Paperwork Reduction Act of 1980, PL 96-511.

In accordance with 10 CFR 2.790(a), a copy of this letter and the enclosures will be placed in the NRC Public Document Room.

Your cooperation with us is appreciated. Should you have any questions regarding this inspection, we would be pleased to discuss them with you.

Sincerely,

Original Signed By:
James H. Joyner

James H. Joyner, Chief
Facilities Radiological Safety
and Safeguards Branch
Division of Radiation Safety
and Safeguards

Enclosures:

1. Appendix A - Notice of Violation
2. Combined NRC Region I Inspection Report Nos. 50-317/90-30 and 50-318/90-30

cc w/encls:

G. Creel, Vice President - Nuclear Energy
V. Bradley, Director, Security Services
R. McLean, Administrator, Nuclear Evaluations
J. Ross, Jr., Security Planning and Programs Specialist
L. Gibbs, General Supervisor, Calvert Cliffs Security Operations
J. Walter, Engineering Division, Public Service Commission of Maryland
K. Burger, Esquire, Maryland People's Counsel
P. Birnie, Maryland Safe Energy Coalition
Public Document Room (PDR)
Local Public Document Room (LPDR)
Nuclear Safety Information Center (NSIC)
K. Abraham, PAO (2)
NRC Resident Inspector
State of Maryland (2)

JAN 21 1991

bcc w/encls:

Region I Docket Room (with concurrences)

Management Assistant, DRMA (w/o encls)

J. Joyner, DRSS

J. Linville, DRP

C. Cowgill, DRP

D. Vito, DRP

C. Lyon, DRP

B. Summers, DRP

M. Callahan, OCA

J. Caldwell, EDO

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D. McGuire, Region II

J. Creed, Region III

C. Cain, Region IV

D. Schuster, Region V

B. Grimes, NRR/DRIS

L. Bush, NRR/RSGB

G. McPeck, NRR/RSGB

APPENDIX A

NOTICE OF VIOLATION

Baltimore Gas and Electric Company
Calvert Cliffs Nuclear Power Plant
Lusby, Maryland

Docket Nos. 50-317
50-318
License Nos. DPR-53
DPR-69

As a result of the inspection conducted on October 30, 1990 through November 1, 1990, and in accordance with the "General Statement of Policy and Procedure for NRC Enforcement Actions," 10 CFR Part 2, Appendix U (Enforcement Policy 1990), the following violation was identified:

Part 26.20 of 10 CFR states, in part, that each licensee subject to this Part (Fitness-For-Duty Programs) shall establish and implement written policies and procedures designed to meet the general performance objectives and specific requirements of this Part.

Part 26.23(a) of 10 CFR states, in part, that all contractor and vendor personnel performing activities within the scope of this Part for a licensee must be subject to either the licensee's program relating to fitness-for-duty, or to a program, formally reviewed and approved by the licensee, which meets the requirements of this Part.

Part 26.22(c) of 10 CFR states, in part, that supervisory training must be completed within 3 months after initial supervisory assignments. A record of the training must be retained for a period of at least three years.

Contrary to the above, during October 30 - November 1, 1990 the licensee could not produce written procedures that required fitness-for-duty (FFD) training and retraining for contractor/vendor supervisors, and also could not provide evidence that contractor/vendor supervisors had received the required FFD training within 3 months after initial supervisory assignment.

This is a Severity Level IV Violation (Supplement VII).

Pursuant to the provisions of 10 CFR 2.201, Baltimore Gas and Electric Company is hereby required to submit a written statement or explanation to the U. S. Nuclear Regulatory Commission, ATTN: Document Control Desk, Washington, D. C. 20555 with a copy to the Regional Administrator, Region I, and if applicable, a copy to the NRC Resident Inspector, within 30 days of the date of the letter transmitting this Notice of Violation (Notice). This reply should be clearly marked as a "Reply to a Notice of Violation" and should include for each violation: (1) the reason for the violation, or if contested, the basis for disputing the violation, (2) the corrective steps that have been taken and the results achieved, (3) the corrective steps that will be taken to avoid further violations, and (4) the date when full compliance will be achieved. If an

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adequate reply is not received within the time specified in this Notice, an order may be issued to show cause why the license should not be modified, suspended, or revoked, or why such other action as may be proper should not be taken. Where good cause is shown, consideration will be given to extending the response time.