

U.S. NUCLEAR REGULATORY COMMISSION
REGION I

License/Docket/Report No. DPR-61/50-213/94-11

Licensee: Connecticut Yankee Atomic Power Company

Facility Name: Haddam Neck Nuclear Power Plant

Inspection At: Haddam Neck, Connecticut

Inspection Conducted: April 25-29, 1994

Inspectors:

Arthur Della Ratta

A. Della Ratta, Physical Security Inspector
E. B. King, Physical Security Inspector

05-19-94
Date

Approved by:

E. C. McCabe, Jr.

E. C. McCabe, Chief
Safeguards Section

5/19/94
Date

SCOPE Announced physical security and fitness-for-duty (FFD) inspection of: previously identified FFD items; management support, security program plans and audits; protected and vital area physical barriers, detection and assessment aids; protected and vital areas access control of personnel, packages and vehicles; power supply; alarm stations and communication; testing, maintenance and compensatory measures; and security training and qualifications.

RESULTS The licensee program was found to be directed toward public health and safety. Two FFD violations and two FFD inspector follow-up items were closed. One inspector follow-up item was noted (see paragraph 5.3) concerning the classification of vehicles within the protected area. No safety concerns or violations of regulatory requirements were identified.

DETAILS

1.0 Persons Contacted

1.1 Licensee and Contractor Personnel

- J. Stetz, Vice President, Connecticut Yankee (CY) Atomic Power Company, Haddam Neck Station
- C. Grise, Senior, Vice-President, Human Resources, Northeast Utilities Service Company (NUSCo)
- * J. LaPlatney, Director, Nuclear Unit (CY)
- * G. Halberg, Manager, Nuclear Security (NUSCo)
- * J. Pandolfo, Security Manager (CY)
- * J. Lenois, Security Coordinator (CY)
- * J. Sullivan, Health Physicist Manager (CY)
- * T. Nichols, Maintenance Engineering Supervisor (CY)
- * P. Patton, Nuclear Licensing (NUSCo)
- * P. Marchese, Senior Security Agency (NUSCo)
- * B. Danielson, Staff Assistant (CY)
- W. Nevelos, Director Station Services (CY)
- L. Hoisl, Manager, Data Center Operations
- A. Vieira, Shift Supervisor, Data Center Operations
- B. Cook, Fitness-for-Duty (FFD) Administrator
- * M. Nericcio, Occupational Health Administrator (CY)
- S. Oates, FFD Administrator
- D. Cooney, Security Technician (CY)
- T. Gorczyaca, Security Shift Supervisor (CY)
- * R. Schmid, District Manager, Burns Contract Security Force
- * D. Caron, Chief, Burns Contract Security Force
- * M. Edwards, Training Specialist, Burns Contract Security Force

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- * P. Habighorst, Resident Inspector
- * Present at the exit interview.

The inspectors also interviewed other licensee and contractor personnel.

2.0 Follow-up on Previously Identified Items

2.1 (Closed) IFI 50-213/93-07-01 1991/1992 repetitive FFD audit findings.

During inspection 50-213/93-07, the inspectors determined that the audits contained repetitive findings in use of the FFD manual usage and calibrating the intoximeters to the required tolerance. During the current inspection, the inspectors determined, by

discussions with site FFD staff, licensee management, and a review of the newly developed FFD manual and procedures, that the licensee had taken appropriate corrective actions. No current repetitive audit findings were noted.

2.2 (Closed) VIO 50-213/93-23-01 Written FFD procedures.

During inspection 50-213/93-23, the inspectors determined that written licensee procedures were not established for protecting the employee and the integrity of the specimen, nor were the quality controls used to ensure that test results were valid and attributable to the correct individual identified in written procedures, nor were collection site persons provided with written licensee instructions on the collection of specimens. During the current inspection, the inspectors determined, by a review of the newly developed FFD manual and implementing procedures and discussions with key FFD staff, that corrective actions had provided the requisite controls. No current discrepancies were noted.

2.3 (Closed) IFI 50-213/93-23-02 Communications between site and corporate FFD staffs.

During inspection 50-213/93-23, the inspectors determined that there was confusion within the FFD organization about the reporting of concerns and the responsibility of each key player. Based on discussions of these aspects with corporate and site staffs and review of the FFD organizational chart in Appendix 1 of the current FFD manual, the inspectors found the corrective actions and personnel knowledge adequate. No discrepancies were noted.

2.4 (Closed) VIO 50-213/93-23-04 Report of unsatisfactory laboratory performance.

During inspection 50-213/93-23, the inspectors determined that the licensee did not investigate, or refer to the Department of Health and Human Services (DHSS) for investigation, unsatisfactory performance test results identified by the licensee's HHS-certified laboratory. Additionally, the licensee did not evaluate those results or submit the documented investigation record to the NRC as a report of unsatisfactory performance testing. The licensee then investigated this case, submitted the findings to the NRC, and issued Procedure 5.2, "Blind Specimen Controls," to prevent recurrence. Based on discussions with corporate management and a review of Procedure 5.2, the inspectors found these corrective actions adequate. No discrepancies were noted.

3.0 Management Support, Security Plan, and Audits

3.1 Management Support

Management support for the licensee's physical security program was determined to be consistent with program needs. That determination was based upon the inspectors' review of various aspects of the licensee's program during this inspection, as documented

in this report. Security program enhancements made since the last physical security inspection conducted in May, 1993, were as follows:

- purchased a new firearms training simulator (FATS) to enhance the training and qualification/requalification program;
- purchased a video enhancer, cassette recorder and camera to be used to develop new security training films;
- purchased and installed new vehicle-mounted radios, with Connecticut Yankee and Connecticut State Police frequencies, for the contractor security vehicles;
- purchased new uniforms for the security force; and
- ongoing remodeling of the weapons room to enhance traffic flow during contingency drills.

The following observations were made by the inspectors.

- The licensee's site security management continued to conduct self-assessments of all aspects of the program.
- The site security force totalled 67 personnel (including 5 officers on leave of absence) plus 10 new hires in training on April 29, 1994.
- The security program continued to be actively supported by other plant groups and effective communications channels existed among the security group (both licensee and contractor) and other plant groups. These included operations and emergency planning, participation in security contingency drills, (a minimum of twelve per year), and daily meetings between the Security Manager, the contractor's Chief of Security, and other plant groups to ensure work activities were well-coordinated to reduce impact on security.

Overall, the inspectors found the licensee's efforts to maintain the effectiveness of the program in protecting the plant and public health and safety to be excellent.

3.2 Security Plan

The inspectors verified that changes to the Security Plan, as implemented, did not decrease plan effectiveness and were submitted in accordance with NRC requirements.

3.3 Audits

The inspectors reviewed the annual security program QSD audit report, No. A-25085, dated October 22, 1993. The audit report documented one finding, two unresolved items and three recommendations. The inspectors' review found that the audit was comprehensive in scope and did not identify any programmatic weaknesses. The results of the audit were reported to the appropriate level of management. A review of the licensee's responses to the audit results indicated that corrective actions were adequate and that the program was being properly administered. No deficiencies were noted.

4.0 Barriers and Detection and Assessment Aids

4.1 Protected Area (PA) Barrier

Through physical inspection of the PA barrier on April 25, 1994, the inspectors concluded that the barrier was installed and maintained as described in the NRC-approved Security Plan (the Plan).

4.2 Protected Area Detection Aids

The inspectors observed weekly surveillance testing (ST) of the perimeter detection aids on April 27, 1994, and determined that they were installed, maintained, and operated as committed to in the Plan, with one exception. In one location, the intrusion detection system (IDS) zone was penetrated without a resultant alarm. The licensee immediately implemented compensatory measures and provided an I&C technician to monitor the system. The I&C technician corrected the deficiency by slightly increasing the sensitivity of the detection device. The zone was retested and the results were satisfactory. Review of preceding weekly tests showed acceptable prior performance for this location.

4.3 Protected Area and Isolation Zone Lighting

On April 27, 1994, from approximately 7:45 p.m. to 8:45 p.m., the inspectors, accompanied by a licensee security coordinator, conducted a PA and isolation zone lighting survey to determine if lighting levels met the minimum requirement of 0.2 footcandles. The inspectors determined by observation and by the use of the licensee's calibrated light meter that the station's lighting system was very effective and that the isolation zones were adequately maintained to permit observation of activities on both sides of the PA barrier.

4.4 Assessment Aids

During daylight and darkness, the inspectors observed PA perimeter assessment aids and determined that they were installed, maintained and operated as committed to in the Plan.

4.5 Vital Area (VA) Barriers

By observations during a physical inspection on April 28, 1994, the inspectors determined that the VA barriers were installed and maintained as described in the Plan.

4.6 Vital Area Detection Aids

The inspectors observed licensee testing of 12 VA detection aids on April 28, 1994, and determined that they were installed, maintained and operated as committed to in the Plan.

In summary, the licensee's PA and VA physical barriers, detection, and assessment aids satisfied NRC requirements.

5.0 Control of Personnel, Package and Vehicle Access

5.1 Personnel Access Control

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.

- The inspectors verified that personnel were properly identified and authorization was checked prior to issuance of badges and key cards.
- 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. Also, the inspectors observed both plant and visitor personnel access processing during peak and off-peak traffic periods on April 26 and 28, 1994, and interviewed members of the security force and licensee security staff about personnel access procedures.
- The inspectors determined, by observation, that individuals in the PA and VAs displayed their badges as required.
- The inspectors verified that the licensee had escort procedures for visitors to the PA and VAs.
- The inspectors verified that the licensee had a mechanism for expediting access to vital equipment during emergencies and found that mechanism adequate.
- The inspectors verified that the licensee took precautions to ensure that unauthorized names could not be added to the access list by having a member of management review the list every 31 days and by limiting access to the computer program to essential individuals.

5.2 Package and Material Access Control

The inspectors determined that the licensee was exercising positive control of packages and materials brought into the PA through the warehouse and main access portal. Inspector review of the package and material control procedures found these 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.

5.3 Vehicle Access Control

The inspectors determined that the licensee properly controls vehicle access to the PA. Vehicles were properly authorized prior to being allowed to enter the PA, with identification verified by a security force member (SFM). The inspectors also reviewed the vehicle search procedures and observed that at least two SFMs control vehicle access at the main vehicle access portal. These procedures were consistent with the commitments in the Plan. On April 28, 1994, the inspectors observed vehicle searches and interviewed members of the security force and the licensee's security staff about vehicle search procedures. The inspectors determined that these individuals were knowledgeable of the requirements. However, the inspectors determined, by comparing the vehicles parked inside the PA with the vehicles listed on the licensee's designated vehicle list, that all of the vehicles parked inside of the PA were not listed as designated vehicles even though they were being treated as designated vehicles. Based on discussions with licensee security management, the inspectors were informed that the licensee's definition for designated vehicles did not include vehicles such as cranes, forklifts, frontend loaders, bucket trucks etc. These vehicles remained inside the PA, were treated as designated vehicles in accordance with 10 CFR 73.55 (d)(4), but were not so listed. The inspectors discussed the importance of including the above mentioned types of vehicles on the designated vehicle list. The licensee committed to revise their vehicle control program to list all designated licensee vehicles. This matter will be reviewed further by the NRC. (IFI 50-213/94-11-01).

In summary, the licensee had effective programs and was observed to implement effective measures for the control of personnel, packages, and vehicle access to the PA and VAs, but the licensee committed to revise the designated vehicle list.

6.0 Emergency Power Supply

The inspectors verified that several systems (batteries, dedicated diesel-generator within a VA and plant onsite AC power) provided backup power to the security system. The inspectors reviewed the testing and maintenance records and procedures for these systems and found that these consistent with the Plan. No deficiencies were noted.

7.0 Alarm Stations and Communications

The inspectors observed operations in the Central Alarm Station (CAS) and Secondary Alarm Station (SAS) and determined the CAS and SAS were maintained and 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. Also, the inspectors verified that the CAS and SAS operators do not perform any operational activities that would interfere with the assessment and response functions. The inspectors verified that the licensee had communications with local law enforcement agencies as committed to in the Plan. No deficiencies were noted.

8.0 Testing, Maintenance and Compensatory Measures

The inspectors determined that the licensee was testing and maintaining security systems and equipment as committed to in the Plan. This determination was based upon a review of the test records for security equipment. The station specifically assigns instrumentation and controls (I&C) technicians to maintain security equipment. Records review indicated that timely repairs were being accomplished and that a priority was assigned to each work request. The inspectors also reviewed the use of compensatory measures and security force overtime and found them to be minimal, largely due to the efforts and prompt response of the maintenance group. No deficiencies were noted.

9.0 Security Training and Qualification

The inspectors randomly selected and reviewed training and qualification records for seven SFMs. Physical qualification and firearms requalifications records were inspected for armed SFMs and security supervisors. The inspectors determined that the training was conducted in accordance with the security training and qualification (T&Q) plan and that it was properly documented. Additionally, the inspectors discussed future training enhancements with the contract security force training specialists and received a tour of the new automated security firearms training facility. No deficiencies were noted.

10.0 Exit Interview

The inspectors met with the licensee's representatives indicated in Paragraph 1.0 at the conclusion of the inspection on April 29, 1994. At that time, the purpose and scope of the inspection were reviewed, and the findings were presented. The licensee acknowledged the inspection findings.