

U.S. NUCLEAR REGULATORY COMMISSION

REGION III

Report No. 50-346/95002(DRSS)

Docket No. 50-346

License No. NPF-3

Licensee: Toledo Edison Company
300 Madison Avenue
Toledo, OH 42652

Facility Name: Davis Besse Nuclear Power Station

Inspection Dates: January 9-20, 1995 onsite
January 24-25, 1995 in Region III Office

Type of Inspection: Announced Physical Security Inspection

Date of Previous Physical Security Inspection: November 1-12, 1993

Inspector: *Gary L. Pirtle*
for Gary L. Pirtle
Physical Security Inspector

3/3/95
Date

Approved By: *James R. Creed*
James R. Creed, Chief
Safeguards and IR Section

3/3/95
Date

Inspection Summary

Inspection Between January 9-25, 1995 (Report No. 50-346/95002(DRSS))

Areas Inspected: Routine, announced physical security inspection involving: Audits, Corrective Actions and Management Support; Effectiveness of Management Controls; Security Program Plans; Alarm Stations and Communications; Testing, Maintenance and Compensatory Measures; Review of Corrective Actions for Security Force Licensee Event Reports; and Followup on Previous Inspection Findings.

Results: The licensee was found to be in compliance with NRC requirements within the areas examined. Noncited violations were noted for an accidental discharge of a firearm within the plant, and a failure to record an access authorization deficiency in the security event log.

Corrective actions for eight previous open inspection items were reviewed and closed. Additionally, the corrective actions for two security related Licensee Event Reports were reviewed and closed.

An unresolved item was noted pertaining to reascertaining activities of personnel allowed unescorted access who have not been under a behavioral observation program for more than 30 days.

Two program strengths were identified during the inspection and pertained to: excellent annual audit of the security program; and the excellent quality of the security investigation reports reviewed during the inspection.

The security program continues to receive strong management support and effective supervision. Equipment observed functioned as designed. Self assessment efforts were good and offered a high degree of flexibility. Material condition of security equipment and housekeeping was good except for the Secondary Alarm Station, which requires attention.

REPORT DETAILS

1. Key Persons Contacted

In addition to the key members of the licensee's staff listed below, the inspector interviewed other employees, contractor personnel, and members of the security organization. The asterisk (*) denotes those present at the onsite Exit Interview conducted on January 20, 1995.

- * T. Myers, Acting Director, Nuclear Assurance
 - * G. Skeel, Manager, Security
 - * P. Smith, Supervisor, Compliance
 - * A. Schumaker, Supervisor, Security Support
 - * J. Waddell, Supervisor, Security Operations
 - * R. Buehler, Supervisor, Access Control
 - * G. Bradley, Licensing Representative
 - * D. Alley, Auditor, Nuclear Assurance
 - * D. Reese, Security Investigator
 - * R. Maier, Supervisor, Security Shift
 - * B. Smith, Training Instructor
- * S. Stasek, Senior Resident Inspector, US NRC Region III

2. Followup on Previous Inspection Findings

- a. (Closed) Inspection Followup Item (Report No. 50-346/93018-01):
This item was discussed in Section 5.a of the above report and pertained to self-screening contractors and corporate security representatives not being provided detailed written criteria to evaluate and define derogatory information.

An adjudication matrix which described types of material that would or would not involve revoking of unescorted access and types of information requiring further investigation was developed. This matrix was incorporated into Procedure "IS-AC-00516- Unescorted Access Requirements, Revision 6" as Attachment No. 7. This item is closed.

- b. (Closed) Inspection Followup Item (Report No. 50-346/93018-02):
This issue was discussed in Section 5.b of the above report and pertained to weak quality review checks of background investigation documentation, particularly as it pertained to comparing investigation results against information provided on the employee's application for unescorted access.

Section 6.5.4 of Procedure "IS-AC-00516, Unescorted Access Requirements, Revision 6" requires actual data collected during the background investigation to be reviewed against the information supplied by the applicant. Additionally, Note 2 to the Nuclear Assurance Audit Checklist for access authorization audits of background investigations also requires the auditor to

compare the completed background information data to the historical data supplied by the employee. The recent licensee's audit of the Access Authorization Program (Audit No. AR-94-SECUR-01) conducted between January 14 and March 15, 1994, noted as a strength the quality checks of background investigation results against requests for employment data. This item is closed.

- c. (Closed) Inspection Followup Item (Report No. 50-346/93018-03):
This issue was discussed in Section 5.c of the above report and pertained to an error in the licensee's policy for resubmittal of fingerprint cards. Specifically, the policy was to request a criminal history check based upon a name check rather than by fingerprint if two submittals of fingerprint cards were considered unclassifiable.

Section 6.4.2 of Procedure "IS-AC-0015, Fingerprint Processing and Controls, Revision 4" was revised to require fingerprint cards to be submitted to the FBI three times before requesting a criminal history check by name only. This item is closed.

- d. (Closed) Inspection Followup Item (Report No. 50-346/93018-04):
This issue was discussed in Section 6.a of the above report and pertained to the need for a procedure to address the control, administration, distribution, or storage of the psychological test booklets and answer sheets used to evaluate access authorization decisions.

Procedure ADMIN-002, "Minnesota Multiphasic Personality Inventory (MMPI) Administration, Revision 0," was prepared to address administration and handling of the MMPI tests and answer sheets. This item is closed.

- e. (Closed) Inspection Followup Item (Report No. 50-346/93018-05):
This issue was discussed in Section 6.b of the above report and pertained to the Purchase Order for psychological services not addressing record retention requirements for psychological evaluations.

Purchase Order No. S 038618 C92 was revised on January 26, 1994 to require all documents generated as part of the MMPI testing and interview process to be maintained for a period of five years from termination of the contract unless otherwise advised. Written approval must be received from the owner (licensee) representative prior to any records being destroyed. This item is closed.

- f. (Closed) Inspection Followup Item (Report No. 50-346/93018-06):
This issue was addressed in Section 7.b of the above report and pertained to the inability to adequately monitor security badge holders who may be offsite for more than 30 days and not under a behavioral observation program.

A manual system of monitoring security badge use and absence from a behavioral observation program has been developed by the licensee and described in the appropriate procedure. This item is closed.

- g. (Closed) Inspection Followup Item (Report No. 50-346/93022-01):
This item was discussed in Section 4.a of the above report and pertained to administrative changes needed to the security plan and security force training plan to address organizational changes and to clarify the responsibilities for the position of watchman.

The required security plan changes have been submitted to NRC Region III for licensing review. The results of the review will be addressed by separate correspondence. This item is closed.

- h. (Closed) Inspection Followup Item (Report No. 50-346/93022-02):
This issue was discussed in an attachment to the above report and pertained to poor clarity and resolution of the closed circuit television system at one of the security alarm stations.

The clarity and resolution of the closed circuit television system observed at both alarm stations during this inspection were adequate. This item is closed.

- i. (Closed) Licensee Event Report No. 94S01, Dated April 8, 1994:
This security related licensee event report (LER) pertained to the theft of a firearm from the security armory which was discovered on March 11, 1994. The weapon was subsequently found in the protected area. Corrective actions included alarming the doors to the armory, imposing a two person rule for entry into and while in the armory, more stringent controls for keys to the armory, and more frequent inventories of weapons within the armory. The corrective actions are adequate to prevent recurrence.

Some of the corrective actions implemented to adequately secure weapons in the armory and identified as corrective measures in the LER have not been addressed in the appropriate procedure. The Manager of Security agreed to incorporate all of the measures identified in the LER into the appropriate procedure within 30 days. This item is closed.

- j. (Closed) Licensee Event Report No. 94S02, Dated December 22, 1994:
This security related licensee event report (LER) pertained to two incidents of contractor personnel providing false information on self disclosure forms pertaining to past drug abuse or criminal history. This licensee's actions of reporting the incidents to the NRC within one hour after discovery, denying the personnel access, submitting the required written report to the NRC, and initiating an inquiry were adequate and appropriate actions. This item is closed.

3. Entrance and Exit Interviews

- a. At the beginning of the inspection, Mr. Gary Skeel and other members of the licensee's staff were informed of the purpose of this inspection, its scope and the topical areas to be examined.
- b. The inspector met with the licensee representatives, denoted in Section 1, at the conclusion of onsite inspection activities. A general description of the scope and conduct of the inspection was provided. Briefly listed below are the findings discussed during the exit interview. The licensee representatives were invited to provide comments on each item discussed. The details of each finding listed below are referenced, as noted, in the report.
 - (1) Eight previous inspection findings were reviewed and closed. Corrective actions for two security related Licensee Event Reports were also reviewed and closed (Refer to Section 2).
 - (2) Noncited violations were noted pertaining to failure to log an access authorization deficiency in the security event log (Refer to Section 5.b) and an accidental discharge of a firearm within the plant on December 17, 1994 (Refer to Section 5.a).
 - (3) An resolved item was noted pertaining to failure to ascertain activities of personnel granted unescorted access when they have been away from a behavioral observation program for more than 30 days (Refer to Section 5.c).
 - (4) Program strengths were noted pertaining to the annual audit of the security program and the quality of the security investigator reports reviewed during the inspection (Refer to Section 5.d).
 - (5) Self Assessment efforts were good and offered a high degree of flexibility (Refer to Section 5.e).
 - (6) Material condition of security related equipment was good. Housekeeping standards were also good, except for the Secondary Alarm Station (Refer to Section 5.f).

4. Program Areas Inspected

Listed below are the areas examined by the inspector in which no findings (strengths, violations, deviations, unresolved items or inspection followup items) were identified. Only findings are described in subsequent Report Details sections.

The below listed clear areas were reviewed and evaluated as deemed necessary by the inspector to meet the specified "Inspection Requirements" (Section 02) of the applicable NRC Inspection Procedure (IP). Sampling reviews included interviews, observations, and document

reviews that provided independent verification of compliance with requirements. Gathered data was also used to evaluate the adequacy of the reviewed program and practices to adequately protect the facility and the health and safety of the public. The depth and scope of inspection activities were conducted as deemed appropriate and necessary for the program area and operational status of the security system. Additional testing of security systems was not requested by the inspector.

IP 81700-Physical Security Inspection Program for Power Reactors

No violations, deviations, unresolved items, or inspection followup items were noted pertaining to audits, corrective actions and management support, effectiveness of management controls, testing, maintenance and compensatory measures, alarm stations and communications as identified in Inspection Procedure 81700.

5. Physical Security Program for Power Reactors (IP 81700)

Two noncited violations and one unresolved item were noted. Two program strengths were also noted. Self assessment efforts were good and offered flexibility. Material condition of security equipment was adequate and housekeeping standards were adequate except for the secondary alarm station.

- a. A noncited violation was noted pertaining to a firearm being discharged under conditions other than those allowed by the security plan implementing procedures. Security implementing procedures prohibit discharge of a firearm by a security officer except to prevent an actual attack against the plant and personnel.

Contrary to this requirement, at approximately 0345 hours on December 17, 1994, a security officer left the immediate area of a security door he was posted at as a compensatory measure and accidentally discharged his firearm. No personal injury or significant property damage resulted from the incident. The security officer's employment was subsequently terminated.

The licensee's investigation concluded that undetected entry through the security door the officer was supposed to be posted at was very unlikely because the door was configured in such a way that entry through the door would cause a loud noise which would be heard by the security officer, who was about 12 feet from the door.

The licensee's investigation also concluded that the officer had removed his weapon from the holster while on post and thought he had emptied all of the rounds from the weapon and placed them in one of his trouser pockets prior to wiping the weapon with a cloth to clean it. Upon finishing wiping the weapon the officer closed the cylinder and dry fired (pulled trigger with no rounds in the cylinder) the weapon to check it for operability. On the second

dry fire, a round was discharged from the weapon striking the door jamb of a security door in the immediate area. The security officer notified his supervisor and asked to speak to him. When the supervisor arrived, the officer advised him of the accidental discharge of the weapon. The security officer was immediately relieved of duty and subjected to breath and urine fitness-for-duty (FFD) testing. The FFD test results were negative.

This incident was an isolated occurrence and meets the criteria of Section E to Supplement III of Appendix C to 10 CFR Part 2 as a Severity Level IV violation. Therefore, a Notice of Violation is not being cited as authorized by Section VII.B.(2) of Appendix C to 10 CFR Part 2.

- b. A noncited violation was noted pertaining to the failure to log as a security event the granting of access to an individual before all access authorization requirements had been completed. On October 5, 1994, an individual's security badge for unescorted access was issued and activated for about a four hour period before all requirements for unescorted access had been completed. The individual's fitness-for-duty test results had not been received before the security badge was issued and activated. The FFD test results, when received, were positive and therefore the individual was not eligible for unescorted access authorization. The individual did not use the security badge during the period it was activated. Although the access authorization had been granted, it was not used by the individual. Section II(B) of Appendix C to 10 CFR Part 73 requires such an incident to be logged since it constitutes an incident with the potential for reducing the effectiveness of the safeguards system below that committed to in a licensed security plan. The security procedure pertaining to logging and reporting of security events was revised to address the type of incidents noted above.

This incident was an isolated occurrence and meets the criteria of Section E to Supplement III of Appendix C to 10 CFR Part 2 as a Severity Level V violation. Therefore, a Notice of Violation is not being cited as authorized by Section VII.B.(1) of Appendix C to 10 CFR Part 2.

The circumstances pertaining to the granting of unescorted access authorization before all requirements for such access were completed is still being evaluated. The licensee was requested to provide us a copy of their investigation report for the incident and a copy of the Nuclear Assurance audit report of the incident when both documents are completed (346/92005-01).

- c. An unresolved item was noted pertaining to "ascertaining" the activities of some personnel who have been granted unescorted access and have not been under a behavioral observation program for periods of 30 days or more.

Personnel granted unescorted access authorization in accordance with 10 CFR 73.56 are required to be subject to a continuous behavioral observation program. During review of a related issue, it was determined that members of the offsite safety review committee (up to five personnel) routinely need site access only about once each two months to complete their review responsibilities. These personnel are routinely granted unescorted access without confirming they have been under a continuous behavioral observation program between site visits or by "ascertaining" their activities between visits. Section B.3 of Regulatory Guide 5.66 "Access Authorization Program for Nuclear Power Plants", which the licensee committed to for implementation of their Access Authorization program, states in part that it is reasonable to expect licensees to ascertain that whatever activities an employee engaged in during a reasonable absence would not have the potential to affect the employee's trustworthiness and reliability. The Regulatory Guide does not identify the minimum period of time an employee can be away from a behavioral observation program before the ascertaining of activities is required. The minimum period required is the unresolved item. This issue will be resolved and addressed by separate correspondence at a later date (346/95002-02).

- d. Two strengths were noted in the area of physical security and are addressed below.
 - The Quality Assurance audits of the security program continued to be a program strength. The audit of the security program conducted between January 14 and March 15, 1994, was excellent in scope and depth and very well documented. Audit findings are aggressively monitored and adequately closed. Progress on resolving NRC identified findings are reviewed during the routine annual audit.
 - Four security investigator reports were reviewed during followup on various issues during the inspection. All of the investigation reports reviewed were excellent in quality. The reports were detail in nature, well documented and conclusions within the reports were supported by the facts developed.
- e. Self assessment efforts were good and offered a high degree of flexibility. Self assessment efforts included program audits by the Nuclear Assurance Department, surveillances by the security section, analysis of maintenance performed on security equipment, supervisor tours, annual security barrier walkdown, monthly monitoring of perimeter alarm system performance, and participation in quarterly monitoring of certain parameters in the plant's "windows" program. The self assessment efforts were primarily performance oriented.

- f. Material condition of security related equipment was very good for the equipment observed, and housekeeping standards were comparable to the standards observed in other areas of the plant. The Secondary Alarm Station was the exception to the good housekeeping standards. Portions of the wall in the SAS had patches of painted plaster that had come loose and resulted in areas of bare wall being visible.