

U. S. NUCLEAR REGULATORY COMMISSION
REGION I

Report No. 50-247/92-05

Docket No. 50-247

License No. DPR-26

Licensee: Consolidated Edison Company of New York, Inc.
4 Irving Place
New York, New York 10003

Facility Name: Indian Point Nuclear Generating Station Unit 2

Inspection At: Buchanan, New York

Inspection Conducted: February 24-28, 1992

Inspector: Edward B. King 3/6/92
E. B. King, Physical Security Inspector date

Approved By: R. R. Keimig 3/6/92
R. R. Keimig, Chief, Safeguards Section date
Division of Radiation Safety and Safeguards

Areas Inspected: Onsite Followup of Previously Identified Security and Fitness-for-Duty (FFD) Items; Management Support and Audits; Protected and Vital Area Physical Barriers, Detection and Assessment Aids; Protected and Vital Area Access Control of Personnel and Packages; Alarm Stations and Communications; Testing, Maintenance and Compensatory Measures; Personnel Training and Qualification; and the Safeguards Information Protection Program.

Results: The licensee was found to be in compliance with the NRC requirements in the areas inspected. Two Security and four FFD open items were closed. Security program upgrades and enhancements continue to be made.

DETAILS

1.0 Key Personnel Contacted

1.1 Licensee and Contractor Personnel

M. Evans, Executive Vice President, Consolidated Edison
S. Quinn, General Manager, Nuclear Power Generation
J. M. Drexel, Manager, Site Protection
C. W. Jackson, Manager, Nuclear Safety - Licensing
G. Cullen, Security Superintendent
T. S. Elsroth, Security Administrator
M. L. Miele, General Manager, Technical Services
M. A. Whitney, Senior Engineer, Nuclear Safety - Licensing
J. McCann, Instrumentation and Control (I&C) Engineer
J. L. Worrall, Site Manager, The Wackenhut Corporation (TWC)
R. Meyer, Site Captain (TWC)
F. Wiedeman, Training Coordinator (TWC)

1.2 U. S. Nuclear Regulatory Commission

G. K. Hunegs, Senior Resident Inspector
B. Korona, Reactor Engineer

All of the above individuals were present at the exit interview.

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

2.0 Followup of Previously Identified Items

2.1 (Closed) IFI 50-247/89-22-03

During previous inspection (89-22), the inspectors identified several vital area (VA) barriers that required upgrading. During inspections 90-18 and 91-13, the inspectors verified that the equipment needed for the upgrades was received onsite and that one barrier had been upgraded. During this inspection, the inspectors determined that a second barrier had been upgraded and the remaining barriers were scheduled to be upgraded by the end of 1993. The inspectors verified that the licensee was maintaining compensatory measures for these barriers. This item will be reviewed during subsequent inspections.

2.2 (Closed) UNR 50-247/91-13-01

During previous inspection 91-13, the inspector determined that the metal detectors were unable to detect metal when the test weapon was placed at the ankle on the inside of the leg and a broad step was used to step through the equipment. To resolve this issue the licensee revised the access control procedures to require employees to momentarily pause inside the metal detectors prior to exiting. Based on observations during peak traffic periods and a review of access control procedures and post orders, the inspectors determined the corrective actions to be adequate. No deficiencies were noted.

2.3 (Closed) UNR 50-247/91-08-01

During the initial Fitness-for-Duty (FFD) inspection (50-247/91-08), the inspectors determined that the licensee was not able to provide accurate FFD performance data for the first year of program implementation. Additionally, the Medical Review Officer's (MRO) confirmed positives and blind performance data were found to be in error. To resolve this issue the licensee committed to revise and resubmit the performance data that was reported to the NRC for the first year of program implementation. The licensee subsequently met this commitment. Additionally, the licensee developed a FFD Tracking System which tracks data on all collected specimens, all negative tests, all laboratory positives from the Health and Human Service (HHS) Laboratory, all quality control (QC) samples and all MRO determinations. Based on discussions with the licensee and a review of the FFD Tracking System, the inspectors found the actions to be adequate.

2.4 (Closed) VIO 50-247/91-08-02

During the initial FFD inspection (50-247/91-08), the inspectors determined that the licensee failed to properly process a urine specimen which was outside the prescribed temperature range. To resolve this issue, the licensee revised the IP2 FFD Procedural Manual to include the revision of the Collection Procedure and Completion of Custody and Control Form. Based on discussions with the licensee and a review of the procedure revisions the inspectors found the corrective actions to be adequate. No deficiencies were noted.

2.5 (Closed) UNR 50-247/91-08-03

During the initial FFD inspection (50-247/91-08), the inspectors determined that the MRO's desk procedures were lacking in the elements needed to ensure that chain of custody issues are properly addressed. To resolve this issue, as

noted in Section 2.3, the licensee's FFD Tracking System will identify any chain of custody issues in a timely manner. No deficiencies were noted.

2.6 (Closed) VIO 50-247/91-08-04

During the initial FFD inspection (50-247/91-08), the inspectors determined that the licensee failed to maintain adequate permanent record books. To resolve this issue, the licensee required all collection site staff be trained in the use of the permanent record book prior to being assigned collection site responsibilities. All collection site staff folders contain a certificate of training. Additionally, the IP2 FFD procedural manual was revised to ensure entries in the permanent record book were being made as required. The inspectors determined the corrective actions to be adequate.

3.0 Management Support and Audits

3.1 Management Support

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

Security program enhancements made since the last routine physical security inspection (50-247/91-13) are as follows:

- an extensive Protected Area (PA) lighting upgrade was completed in February 1992;
- acquisition of an onsite bucket truck for security maintenance of CCTV's and lighting problems;
- all onsite shotguns have been replaced with new shotguns;
- upgraded the security command post by building a new breakroom and providing a new woman's locker room;
- completed the perimeter fence upgrade along the riverfront to include an upgrade of the intrusion detection system (IDS);
- attendance by the firearms instructor at the armorer training and certification school conducted by Smith and Wesson to enhance the weapons maintenance program.

In summary, the inspector found the licensee's efforts to upgrade and enhance the program to be timely and appropriate. The inspector also noted that the security force members (SFMs) were knowledgeable of their post duties, contents of procedures and their other responsibilities.

3.2 Audits

The inspector reviewed the licensee's annual Management Security Audit Report No. 91-06A, dated October 21, 1991, and verified that the audit had been conducted in accordance with the NRC-approved Security Plan (the Plan). The audit was very comprehensive in scope and the results were reported to the appropriate level of management. The inspector review included the response of the security organization to the audit findings and the corrective actions taken to remedy the findings. The documented corrective actions appeared appropriate for the findings. No deficiencies were noted.

4.0 Protected and Vital Area Physical Barrier, Detection and Assessment Aids

4.1 Protected Area Barrier

The inspector conducted a physical inspection of the PA barrier on February 24, 1992. The inspector determined by observation that the barrier was installed and maintained as described in the NRC-approved Plan. The inspector also noted that the barrier upgrade is proceeding satisfactorily and is tentatively scheduled for completion by July 1992.

4.2 Protected Area Detection Aids

The inspector observed the perimeter detection aids on February 26, 1992, and determined that they were installed, maintained and operated as committed to in the Plan. The inspector requested testing of the detection aids at several locations in several zones; all but two locations tested satisfactorily. The I&C technicians had both zones adjusted and satisfactorily tested within 24 hours of the findings. The inspector noted that the licensee plans a detection system upgrade upon completion of the barrier upgrade.

4.3 Protected Area and Isolation Zone Lighting

The inspector conducted a PA and isolation zone lighting survey on February 26, 1992, from approximately 5:45 p.m. to 6:45 p.m., accompanied by a licensee security supervisor. The inspector determined by observation 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. No deficiencies were noted.

4.4 Assessment Aids

The inspector observed the PA perimeter assessment aids during day and night periods and determined that they were generally installed, maintained and operated as committed to in the Plan.

However, the inspector identified several areas where the assessment aids continue to be marginally effective. This was first identified in inspection 89-22. The licensee is using compensatory measures in these marginal areas. Upon completion of the barrier upgrade the licensee will begin a major assessment upgrade to include camera repositioning and the installation of additional cameras. The assessment upgrade has been developed into phases with a scheduled completion date of 1995. This will remain a follow-up item to be reviewed during subsequent inspections.

4.5 Vital Area Barriers

The inspector conducted a physical inspection of selected VA barriers on February 26, 1992. The inspector determined by observation that the VA barriers were installed and maintained and described in the Plan. No deficiencies were noted.

4.6 Vital Area Detection Aids

The inspector requested and observed testing of selected VA detection aids on February 26, 1992, and determined that they were installed, maintained and operated as committed to in the Plan. No deficiencies were noted.

5.0 Protected and Vital Areas Access Control of Personnel and Packages

5.1 Personnel Access Control

The inspector determined that the licensee was exercising positive control over personnel access to the PA and VAs. This determination was based on the following:

- 5.1.1 The inspector verified that personnel were properly identified and authorization is checked prior to issuance of badges and key cards. No deficiencies were noted.
- 5.1.2 The inspector verified that the licensee has a program to confirm the trustworthiness and reliability of employees and contractor personnel. This program included checks on employment, credit and criminal

history and psychological examination and FFD testing. No deficiencies were noted.

- 5.1.3 The inspector verified that the licensee took precautions to ensure that unauthorized names could not be added to the access list by having of member of management review the list every 31 days as committed to in the Plan. No deficiencies were noted.
- 5.1.4 The inspector 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 inspector observed both plant and visitor personnel access processing during peak and off-peak traffic periods on February 25 and 27, 1992. The inspector also interviewed members of the security force and licensee's security staff about personnel access procedures. No deficiencies were noted.
- 5.1.5 The inspector determined, by observation, that individuals in the PA and VAs display their badges as required. No deficiencies were noted.
- 5.1.6 The inspector verified that the licensee has escort procedures for visitors into the PA and VAs. No deficiencies were noted.
- 5.1.7 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.

5.2 Package and Material Control

The inspector determined that the licensee was exercising positive control over packages and materials that are brought into the PA through the main and secondary access portals. The inspector reviewed the package and material control procedures and found that they were consistent with commitments in the Plan. The inspector 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.

6.0 Alarm Stations and Communications

The inspector observed the operations in 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 inspector and found to be knowledgeable of their duties and responsibilities. The inspector verified that the CAS and SAS did not require any operational activities that would interfere with the

assessment and response functions. The inspector verified that the licensee has communications with local law enforcement agencies as committed to in the Plan. No deficiencies were noted.

7.0 Testing, Maintenance and Compensatory Measures

The inspector reviewed the testing and maintenance records and confirmed that the records committed to in the Plan were on file and readily available for licensee and NRC review.

The station provides I&C technicians to conduct preventive and corrective maintenance on security equipment. A review of corrective maintenance records indicated repairs were being accomplished in a timely manner. No deficiencies were noted.

The inspector also reviewed the licensee's use of compensatory measures and determined them to be as committed to in the Plan. No deficiencies were noted.

8.0 Security Training and Qualification

The inspector randomly selected and reviewed training and qualification records for 10 SFMs. The physical qualification and firearms requalifications records were inspected for armed SFMs and security supervisors. The inspector determined that the training had been conducted in accordance with the security training and qualification (T&Q) plan and that it was properly documented.

During the previous inspection 91-13, the inspector noted that the security lesson plans were being revised to provide more information with an emphasis on performance. During this inspection, the inspector found that the Training Department had enhanced the effectiveness of the program as follows:

- all training and qualification lesson plans were reviewed and revised as needed to include newly developed refresher class lesson plans for annual requalification training;
- development of performance drills to reinforce security procedures and increase awareness;
- development of new forms to simplify training records; and
- procurement of new training aids, i.e. guns and simulated explosive devices.

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In summary, the inspector found the efforts of the Security Training Department to upgrade and enhance the program to be effective.

Several SFMs were interviewed to determine if they possessed the requisite knowledge and ability to carry out their assigned duties. The interview results indicated that they were professional and knowledgeable of their job requirements. No deficiencies were noted.

Safeguards Information Program

The inspector reviewed the licensee's station procedures and records, interviewed personnel and discussed the training of SFMs and other Security Department personnel on the preparation, receipt, identification, use, reproduction, transmittal and storage of safeguard information (SGI) with licensee security management. The inspector verified that all SGI is stored within access controlled areas in approved storage cabinets, and is only accessed by authorized personnel with a need-to-know. The inspector determined that the licensee's program for the protection of SGI meets the requirements of 10 CFR 73.21. No deficiencies were noted.

Exit Interview

The inspector met with the licensee's representatives indicated in Paragraph 1.0 at the conclusion of the inspection on February 28, 1992. At that time, the purpose and scope of the inspection were reviewed and the findings were presented. The licensee's commitments, as discussed in this report, were reviewed and confirmed with the licensee.