

U.S. NUCLEAR REGULATORY COMMISSION
REGION I

Report No.: 50-219/92-05

Docket No.: 50-219

License No.: DPR-16

Licensee: GPU Nuclear Corporation
P. O. Box 388
Forked River, New Jersey 08731

Facility Name: Oyster Creek Nuclear Generating Station

Inspection At: Forked River, New Jersey

Inspection Conducted: February 18-21, 1992

Inspectors: *G. C. Smith* 3/05/92
G. C. Smith, Senior Security Specialist date

A. Della Ratta 3/05/92
A. Della Ratta, Physical Security Inspector date

Approved by: *R. R. Keimig* 3/5/92
R. R. Keimig, Chief, Safeguards Section, date
Facilities Radiological Safety and Safeguards Branch
Division of Radiation Safety and Safeguards

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

Results: The licensee was found to be in compliance with NRC requirements in the areas inspected with the following exception: Failure to evaluate the security programs impact on plant and personnel safety during the NRC-required annual audit. One unresolved FFD item and five open FFD items were closed.

DETAILS

1.0 Key Persons Contacted

J. Barton, Director, OCNGS
*R. Cook, Area Human Resource Manager, Oyster Creek (OC)
G. Bush, Manager Licensing
M. Paston, GPU Nuclear Security Director
*R. Stintzcum, Sr., Security Manager
P. Thompson, Quality Assurance Manager
R. Markowski, Manager QA Program Development/Audit
R. Ewart, Senior Site Protection Supervisor
M. Heller, Licensing Engineer
G. Applegate, Security Shift Supervisor
J. Nakoski, Resident Inspector, USNRC
*D. Vito, Senior Resident Inspector, USNRC

*not present at exit interview

The inspectors also interviewed other members of the licensee's staff.

2.0 Followup of Previously Identified Fitness-for-Duty Items

2.1 (Closed) UNR 50-219/91-19-01

During the initial Fitness-for-Duty (FFD) inspection, 50-219/91-19, the inspector noted that the licensee did not have a policy to deal with contractor personnel that were granted infrequent unescorted access to the station. During this inspection, the inspectors determined through discussions with the FFD Manager and a review of the revised "GPU Nuclear Corporate Policy and Procedure Manual" dated February 17, 1992, that the licensee had developed a policy with implementing procedures which dealt with contractor personnel with infrequent unescorted access to the station. The inspectors found the action taken by the licensee to be adequate to resolve this matter. No deficiencies were noted.

2.2 The inspectors reviewed the licensee's actions on open items, noted during the initial FFD inspection, as documented in report No. 50-219/91-19. The inspectors determined through discussions with the FFD Manager and a review of documents that the licensee has:

- Revised medical department procedures to provide for positive identification of couriers who transport specimens from the collection facilities to the Health and Human Services (HHS) certified laboratory;

- Revised drug and alcohol testing procedures to require additional testing if trace amounts of alcohol (levels below .04 percent blood alcohol concentration), are detected, to determine whether the level is rising or falling, before unescorted access is continued. This will assure that the amount of alcohol would not rise to or above the cut-off level once the individual has returned to the protected area;
- Revised training lesson plans addressing the appeals procedure to improve employee understanding;
- Contracted a new HHS laboratory to replace the previous HHS laboratory that had several problems with the manner in which it was handling specimens. The licensee has also developed and implemented an onsite initial screening program; and
- Revised the use and storage of records procedures to address the importance of securing the permanent record books when not in use, to prevent the possibility of compromising an individuals privacy or subversion of data.

The inspectors' review of the licensee's corrective actions on these items during this inspection found the actions to be adequate. No deficiencies were noted.

3.0 Management Support, Security Program Plans and Audits

3.1 Management Support

Based upon the inspector's review of various aspects of the licensee's program as documented in this report, management support for the physical security program was determined to be adequate.

3.2 Security Program Plans

The inspectors verified that changes to the licensee's Security Program and Plans, as implemented, did not decrease the effectiveness of the respective plans, and had been submitted in accordance with NRC requirements. No discrepancies were noted.

3.3 Audits

The inspectors reviewed the licensee's annual quality assurance (QA) audits for 1990 and 1991 (Audit Nos. S-OC-90-11 and S-OC-91-14, respectively). The inspectors' review disclosed that the audits did not include an evaluation

of the security program's potential impact on plant and personnel safety as required by the NRC-approved Security Plan (the Plan). The inspectors' review further disclosed that neither the scope nor the objectives of the audits identified the safety evaluation as a component of the audits.

The failure to evaluate the security program's potential impact on plant and personnel safety in accordance with the NRC-approved Security Plan is an apparent violation of NRC requirements (50-219/92-05-01).

During the review of the licensee's security QA audit program, the inspectors also noted that the 1991 audit began on September 23, 1991, was completed on January 16, 1992, and the results were transmitted to the appropriate levels of management on February 12, 1992. The inspectors expressed concern over the timeliness of the completion of the audit and the transmittal of the results to the appropriate levels of management. The licensee stated that future audits would be concluded in a more timely manner in order to expedite corrective actions. This issue will be reviewed during subsequent inspections.

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

4.1 Protected Area Barriers

The inspectors conducted a physical inspection of the Protected Area (PA) barrier on February 19, 1992. The inspectors determined by observation that the barrier was installed and maintained as described in the Plan. No deficiencies were noted.

4.2 Protected Area Detection Aids

The inspectors requested that the licensee conduct tests of the PA perimeter intrusion detection aids on February 19, 1992. Numerous tests were conducted around the entire perimeter and the inspector determined that the detection aids were installed, maintained and operated as committed to in the Plan. No deficiencies were noted.

4.3 Protected Area and Isolation Zone Lighting

The inspectors conducted a PA and isolation zone lighting survey on February 19, 1992, from approximately 6:00 p.m. to 7:15 p.m., accompanied by a licensee security supervisor. The inspectors determined by observation that the station's lighting system was generally effective; however there were some areas that were marginal due to numerous trailers that were not skirted. The licensee committed to review the lighting maintenance program to ensure adequate lighting is maintained throughout the PA. This issue will be

reviewed during subsequent inspections.

The inspectors review determined 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 inspectors observed the PA perimeter assessment system and determined that it was installed, maintained and operated as committed to in the Plan. No deficiencies were noted.

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

5.1 Personnel Access Control

The inspectors determined that the licensee was exercising positive control over personnel access to the PA and Vital Areas (VAs). This determination was based on the following:

- The inspectors verified by observation that personnel are properly identified and authorization was checked prior to issuance of badges and key cards. No discrepancies were noted.
- The inspectors verified that the licensee has a program to confirm the trustworthiness and reliability of employees and contractor personnel. This program included checks on employment history, criminal history, physical examination and fitness-for-duty. No deficiencies were noted.
- The inspectors verified that the licensee has a search program for firearms, explosives, incendiary devices and other unauthorized materials as committed to in the Plan. The inspectors observed personnel access processing during shift changes, visitor access processing, and interviewed members of the security force and licensee's security staff regarding personnel access procedures. No deficiencies were noted.
- The inspectors determined by observation that individuals in the PA and VAs display their access badges as required. No deficiencies were noted.
- The inspectors verified that the licensee has escort procedures for visitors to the PA and VAs. No deficiencies were noted.

5.2 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 at both access control portals. 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 processing and interviewed members of the security force and the licensee's security staff about package search procedures. No deficiencies were identified.

5.3 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 processed prior to entering the PA. The process was consistent with commitments in the Plan. This determination was made by observing vehicle processing and search, and by interviewing security officers and licensee's security staff about vehicle processing and search procedures. No deficiencies were noted.

6.0 Alarm Stations and Communications

The inspectors observed the operation of the Central Alarm Station (CAS) and the Secondary Alarm Station (SAS) and determined that they 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. The inspectors verified that the CAS and SAS do not contain any operational functions that would interfere with assessment and response functions. The inspectors 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 inspectors 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 generally being accomplished in a timely manner. Maintenance support for security equipment was identified as a concern during inspection 50-219/91-24 and the inspectors noted the licensee has taken action to provide more timely maintenance support for security equipment. However, maintenance support for security lighting still requires additional management attention (see paragraph 4.3).

The inspectors also reviewed the licensee's use of compensatory measures and determined them to be as committed to in the plan. No discrepancies were noted.

8.0 Security Training and Qualification

The inspectors randomly selected and reviewed the training and qualification records for six security force members. Physical qualifications and firearms qualification records were also inspected. These records were for armed, unarmed and supervisory personnel. The inspectors determined that training had been conducted in accordance with the security program plans, and that it was properly documented.

9.0 Exit Interview

The inspectors met with licensee management identified in paragraph 1.0 at the conclusion of the inspection on February 21, 1992. At that time, the purpose and scope of the inspection were reviewed and findings were presented. The licensee's commitments, as documented in this report, were reviewed and confirmed with the licensee.