

U. S. NUCLEAR REGULATORY COMMISSION
REGION I

Report No. 50-271/92-05

Docket No. 50-271

License No. DPR-28

Licensee: Vermont Yankee Nuclear Power Corporation
RD 5, Box 169
Ferry Road
Brattleboro, Vermont 05301

Facility Name: Vermont Yankee Nuclear Power Station

Inspection At: Vernon, Vermont

Inspection Conducted: February 24 - 28, 1992

Inspector: Ronald J. Albert
R. J. Albert, Physical Security Inspector

03-23-92
date

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

3-26-92
date

Areas Inspected: Licensee Action on Previously Identified NRC Findings in the Fitness-for-Duty (FFD) and Security Programs; Management Support; Protected Area Physical Barriers and Assessment Aids; Protected and Vital Area Access Control of Personnel and Packages; Alarm Stations and Communications; Testing and Maintenance Records; and Security Training and Qualification.

Results: The licensee was in compliance with NRC requirements in the areas inspected. The licensee's actions to correct FFD Program findings and six violations were reviewed; the FFD items and three violations were found to be satisfactory and closed. Corrective actions for the other three violations were either completed or in progress but further inspection was deemed warranted. Potential weaknesses were identified in access control and in the protection of safeguards information.

DETAILS

1.0 Key Personnel Contacted

Licensee

- * R. Grippardi, Quality Assurance Supervisor
- * S. Jefferson, Assistant to Plant Manager
- * J. Morarity, Security Supervisor
- * R. Pagodin, Technical Services Superintendent
- * D. Reid, Plant Manager
- * M. Varno, Plant Services Supervisor

Contractor

- * W. Jacobson, Security Operations Supervisor, Green Mountain Security Services (GMSS)
- R. Landry, Security Trainer, GMSS
- G. Sherer, Security Trainer, GMSS

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- * P. Harris, Resident Inspector
- * indicates those present at the exit meeting

The inspector also interviewed other personnel and members of the licensee and contract security forces during this inspection.

2.0 Follow-up of Previously Identified Items in the Fitness-for-Duty Program and the Security Program

2.1 Fitness-for-Duty Program: 50-271/90-19

During the initial Fitness-for-Duty (FFD) inspection that was conducted on December 12-14, 1990, potential program weaknesses were identified as items to be reviewed during a subsequent inspection. The licensee's corrective actions for those items were reviewed during this inspection and were found to be acceptable, as follows:

- 2.1.1 The licensee's written policies and procedures did not: (1) require employees to report the usage of over-the-counter drugs which could induce impairment, (2) mandate that the medical review officer (MRO) provide the opportunity for an interview to individuals who tested positive for drugs before the MRO would confirm the test results as positive, (3) delegate authority in the absence of key program

personnel, and (4) contain step-by-step instruction for specimen collection personnel. The licensee revised its policies and procedures to address those aspects of its program.

- 2.1.2 The tracking mechanism for supervisory FFD training did not appear effective. The licensee's corrective actions requires its Personnel Office to notify its Training Department in writing when individuals are promoted to supervisory positions. The Training Department then coordinates and schedules the training.
- 2.1.3 The frequency of random testing on weekends, holidays and backshifts was minimal. The licensee's corrective actions included establishing a quarterly frequency for testing on weekends and holidays; and increasing testing on backshifts.
- 2.1.4 The ceiling tiles in the collection room were not secured. The licensee secured the tiles.
- 2.1.5 The collection room contained a small desk which had an open compartment. The licensee secured the compartment.

2.2 Security Program

- 2.2.1 (Open) Violation (50-271/89-08-03): failure to provide adequate assessment aids to assess protected area (PA) intrusion detection system (IDS) alarms. During this inspection, the inspector reviewed the status of the licensee's corrective actions. The licensee is in the final phase of upgrading its assessment aids.

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This item will remain open pending completion of the work and NRC inspection.

- 2.2.2 (Open) Violations 50-271/90-11-03 and 50-271/90-17-04: failure to complete a 1-hour report on a security event. During this inspection, the inspector reviewed the licensee's corrective actions, which included revising security procedure 0907: Compensatory and Reporting Requirements for Safeguards Events. The corrective actions appeared acceptable. However, a similar event occurred in January of 1992. While the procedures appeared technically sound when used in conjunction with proper assessment of security events, these items will remain open until the licensee's report (LER) on the latest event is evaluated and dispositioned.
- 2.2.3 (Closed) Violation 50-271/91-17-01: failure of a CAS operator to dispatch a security officer to an alarm as required by procedure. During this inspection, the inspector reviewed the licensee's corrective actions, which included revising alarm stations procedures and implementing better oversight of activities in the alarm stations. The licensee's corrective actions appeared acceptable. This item is closed.
- 2.2.4 (Closed) Violation 50-271/91-17-02: failure of SAS operators to follow security procedures for alarm assessment. During this inspection, the inspector reviewed the licensee's corrective actions, which, in addition to those stated in 2.2.3 above, included additional training for alarm station operators and better definition of their duties and responsibilities. The licensee's corrective actions appeared acceptable. This item is closed.
- 2.2.5 (Closed) Violation 50-271/91-17-03: the entry of false information into an NRC required record. During this inspection, the inspector reviewed the licensee's corrective actions, which included senior management briefings with the security force members to emphasize the severity of falsification of records and a revised review process for security records. The licensee's corrective actions appeared acceptable. This item is closed.

3.0 Management Support and Oversight

The inspector determined that management support and oversight of the licensee's physical security program were adequate and improving in most areas. This determination was based upon the inspector's review of various aspects of the licensee's program during the inspection as documented in this report. The most significant improvement was in the area of maintenance for security systems and hardware.

However, it appeared that more management oversight might be needed in the area of loggable safeguards events to ensure that prompt corrective measures are implemented for recurring events. The inspector reviewed the licensee's logs for calendar years 1991 and 1992 to the date of inspection. The logs reflected eight separate entries involving deficiencies in the protection of safeguards information (SGI). The licensee committed to review its procedures for the protection of SGI and evaluate its training program in regards to the handling of SGI. This area will be reviewed during subsequent inspections.

4.0 Protected Area Physical Barriers and Assessment Aids

4.1 Protected Area Barriers

The inspector conducted a physical inspection of the PA barrier on February 25, 1992, and determined by observation that the barrier was installed and maintained as described in the physical security plan (the Plan). No deficiencies were noted.

4.2 Isolation Zones

The inspector verified that the isolation zones were adequately maintained to permit observation of activities on both sides of the PA barrier. No deficiencies were noted.

4.3 Assessment Aids

The inspector observed the PA perimeter assessment aids and determined that they were installed and operated as committed to in the Plan. The licensee was in the process of rectifying previously identified deficiencies as described in Section 2.2.1 of this report.

4.4 Protected Area and Isolation Zone Lighting

The inspector conducted a lighting survey of the PA and isolation zones on February 24, 1992. The inspector determined by observation that lighting in the PA and isolation zones was adequate. No deficiencies were noted.

5.0 Protected and Vital Area 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 Vital Areas (VAs). This determination was based on the following:

- 5.1.1 The inspector verified that personnel were properly identified and authorization was checked prior to issuance of access badges and key cards.
- 5.1.2 The inspector verified that the licensee has a search program for firearms, explosives, incendiary devices and other unauthorized materials as committed to in the Plan. The inspector 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.
- 5.1.3 The inspector determined, by observation, that individuals in the PA and VAs display their access badges as required.
- 5.1.4 The inspector verified that the licensee has escort procedures for visitors in the PA and the VAs.

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This item will be reviewed during subsequent inspections.

5.2 Package and Material Access Control

The inspector determined that the licensee was exercising positive control over packages and materials that are brought into the PA at the main access control point. While observing package and material processing, the inspector identified a potential weakness.

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The licensee took prompt corrective actions, which included assigning additional personnel to the access control point during periods of heavy traffic and reemphasizing proper X-ray search procedures to security personnel. In addition, the licensee committed to review the training associated with this area. This area will be reviewed during subsequent inspections.

6.0 Alarm Stations and Communications

The inspector observed the operations of the CAS and SAS and determined that they were maintained and 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 do not contain any operational activities that would interfere with assessment and response functions. No deficiencies were noted.

7.0 Testing and Maintenance Records

The inspector reviewed testing and maintenance records and confirmed that the records committed to in the Plan were on file and readily available for NRC and licensee review. The station provided instrumentation and controls technicians to conduct preventive and corrective maintenance. A check of repair records indicated that maintenance and testing were accomplished in a timely manner. The licensee demonstrated marked improvements in its approach to maintaining security equipment. No deficiencies were identified.

8.0 Security Training and Qualification

The inspector randomly selected and reviewed the training and qualification records for six security officers, including supervisory personnel. Their physical and firearms qualifications records were also inspected. No deficiencies were noted.

9.0 Exit Interview

The inspector met with the licensee representatives indicated in Paragraph 1 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 documented in this report, were reviewed and confirmed with the licensee.