U. S. NUCLEAR REGULATORY COMMISSION REGION I

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sport Nos.	50-412/92-06	
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ocket Nos.	<u>50-412</u>	
	DPR-66	
icense Nos	. <u>NPF-73</u>	
icensee:	Duquesne Light Company 435 Sixth Avenue Pittsburgh, Pennsylvania	
acility Nar	ne: Beaver Valley Power Station, Units 1 and 2	
nspection A	At: Shippingport, Pennsylvania	
nspection (Conducted: <u>March 16-19, 1992</u>	
ype of Ins	pection: Routine Unannounced Physical Security	
nspectors:	G. C. Smith, Senior Security Specialist	3/27/
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	Ronald Albert	03-30-
	R. J. Albert, Security Inspector	date
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Approved 1	R. R. Keimig, Chief, Safeguards Section	<u>3-30</u> date
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R. R. Keimig, Chief, Safeguards Section Division of Radiation Safety and Safeguards 7-92

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

<u>Results:</u> The licensee was in compliance with NRC requirements in the areas inspected. Corrective actions for two open FFD items were reviewed and closed.

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DETAILS

1.0 Key Persons Contacted

a. Licensee and Contractor

*D. Spoerry, General Manager Nuclear Operations Services

*E. Barth, Director Personnel/Administration

*M. Johnson, Director of Security

*F. Lipchick, Senior Licensing Supervisor

*D. Kline, Security Operations Supervisor

*N. DiPietro, Security Procedures and Training Coordinator

W. Walker, Assistant Security Force Supervisor, Security Bureau Incorporated (SBI)

J. Gaglino, Security Equipment Coordinator, SBI

D. Roman, Supervisor, Quality Assurance Maintenance

B. Sepelak, Licensing Engineer

L. Miklavic, Site Force Supervisor, SBI

b. U.S. Nuclear Regulatory Commission

*L. Rossbach, Senior Resident Inspector

*P. Sena, Resident In. pector

The inspectors also interviewed other "censee and contractor personnel.

* present at the exit interview

2.0 Follow-Up of Previously Identified Items

During the initial inspection of the Fitness-for-Duty (FFD) Program conducted on October 16-18, 1990, the inspectors identified potential weaknesses and follow-up items to be reviewed during a subsequent inspection. The licensee's corrective actic is were reviewed during this inspection and were found to be acceptable, as follows:

- 2.1 (Closed) Unresolved Item 50-334/90-21-01 and 50-412/90-21-01: The licensee had not developed a refresher FFD training course for supervisors. During this inspection, the inspectors reviewed the licensee's corrective actions, which included developing a lesson plan for supervisory training and completing the training. The corrective actions were satisfactory. This item is closed.
- 2.2 (Closed) Unresolved Item 50-334/90-21-02 and 50-412/90-21-02: The licensee's Department of Health and Human Services (HHS) certified laboratory was reluctant to conform to NRC criteria for specimen analysis. During this inspection, the inspectors reviewed the licensee's corrective

actions, which included changing to an HHS-certified laboratory which conforms to NRC analysis criteria. The licensee's corrective actions were satisfactory. This item is closed.

During this inspection, the inspectors also reviewed FFD tollow-up items in the areas of: (1) written policies and procedures; (2) Employee Assistance Program (EAP); (3) selection and notification for testing; (4) collection and processing of specimens, and development, use and storage of records. The licensee's corrective actions in all of the areas were found to be acceptable.

3.0 Management Support and Security Program Plans

3.1 Management Support

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

3.2 Security Program Plans

The inspectors verified that changes to the licensce'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 definiencies were noted.

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

4.1 Protected Area (PA) Barriers

The inspectors conducted a physical inspection of the PA barriers on March 16, 1992, and determined by observation that the barriers are installed and maintained as described in the NRC-approved physical security plan (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 system (IDS) on March 16, 1992. Numerous tests were conducted around the perimeter and the inspectors determined that the IDS was installed, maintained a stated as committed to in the Plan. No deficiencies were noted.

4.3 Isolation Zones

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

4.4 Assessment Aids

The inspectors observed the PA perimeter assessment aids and determined that they were installed and operated as committed to in the Plan. The inspectors noted that the licensee is in the process of installing a "video capture" system to enhance perimeter alarm assessment. The system is expected to be fully operational within three months. No deficiencies were noted.

4.5 Protected Area and Isolation Zone Lighting

The inspectors conducted a lighting survey of the PA and isolation zones on March 18, 1992. The inspectors determined by observation and by observing licensee measurements with a calibrated light meter that lighting in the PA and isolation zones was in accordance with commitments in the Plan. No deficiencies were noted.

4.6 Vital Area (VA) Barriers and Detection Aids

The inspectors conducted a physical inspection of VA barriers and detection aids on March 17, 1992, and determined by observation that the barriers were installed and maintained 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 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. No deficiencies were noted.
- 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. No deficiencies were noted.

The inspectors observed personnel access processing during peak and off-peak periods. The inspectors interviewed members of the security force and licensee's security staff about personnel access procedures. No deficiencies were noted.

The inspectors determined, by observation, that individuals in the PA and VA3 displayed their access badges as required. No deficiencies were noted.

The inspectors verified that the licensee has a program to confirm the trustworthiness and reliability of employees and contractor personnel. No deficiencies were noted.

The inspectors verified that the licensee has escort procedures for visitors in the PA and VAs. No deficiencies were noted.

The inspectors verified that the licensee has a mechanism for expediting access to vital equipment during emergencies and that the mechanism is adequate for its intended purpose. No deficiencies were noted.

The inspectors verified that unescorted access to VAs is limited to authorized individuals with a right and need to work in the areas. The access list is revalidated at least once every 31 days as committed to in the Plan. The effectiveness of the revalidation program was a concern during a previous inspection because it did not appear to limit access to only those individuals that had a valid non-emergency work related need to enter the areas. Since the last inspection, the licensee has revised the revalidation program to limit temporary changes to the VA access lists to 30 days and to make the revalidation process more "user friendly" through the use of revised revalidation forms. The licensee also took action to limit the number of personnel for which each manager could authorize VA access revalidation. This action was taken so managers would be more cognizant of the actual need for VA access they authorized. The revised VA revalidation program has reduced the number of personnel with VA access by approximately 15 percent. 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 pacinge 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 noted.

5.3 Vehicle Access Control

The inspectors determined that the licensee properly controls 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 we be noted.

6.0 Alarm Stations and Communications

The inspectors observed the operations 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 did not contain any operational functions that would interfere with 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.

7.0 Testing, Maintenance and Compensatory Measures

7.1 Testing and Maintenance

The inspectors reviewed 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 insurumentation and control technicians to repair, replace and test security equipment which requires preventive or corrective maintenance. A check of repair records indicated that repairs, replacements and testing were being accomplished in a timely manner. No deficiencies were noted.

7.2 Compensatory Measures

The inspectors 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 inspectors randomly selected and reviewed the training and qualification records for nine of the temporary watchmen hired to support the current outage. The inspectors determined that the required training had been conducted in accordance with security program plans and that it was properly documented. Several security officers 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 very professional and knowledgeable of their job requirements.

The inspectors verified that the armed response force meets the commitments in the Plan and that there is always one full-time member of the security organization onsite who has the authority to direct security activities.

9.0 Exit Interview

The inspectors met with the licensee representatives indicated in Paragraph 1 at the conclusion of the inspection on March 19, 1992. At that time, the purpose and scope of the inspection were reviewed and the findings were presented.