DETERMINATION NADE BY MECLES George Car Street See 5.11-91 Report Nos. 50-333/92-10 Docket Nos. 50-333

License Nos.

DPR-59

Licensee:

Power Authority of the State of New York

10 Columbus Circle

New York, New York 10019

Facility Name:

James A. FitzPatrick Nuclear Power Plant

Inspection At:

Scriba, New York

Inspection Conducted:

April 20-24, 1992

Type of Inspection: Routine, Unannounced Physical Security

Inspector:

E. B. King, Physical Security Inspector

5-6-92

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Approved by:

Jackerat ! R. R. Keimig, Chief

Safeguards Section

Division of Radiation Safety and Safeguards

1677159

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

Results: The program was found to be directed toward the protection of public health and safety. The licensee was found to be in compliance with the NRC requirements in the areas inspected. However, potential weaknesses were identified in the areas of assessment aids and training documentation. Previously identified FFD weaknesses were reviewed and determined to be properly addressed. Security program upgrades and enhancements continue to be made.

DETAILS

1.0 Ley Persons Contacted

1.1 Licensee

*H. Salmon, Resident Marager

*T. Teifke, Security/Safety Manager

*M. Colomb, General Manager-Support Services

*J. Haley, Security Supervisor

*R. Liseno, General Manager-Operations

*D. Lindsey, General Manager-Maintenance

*M. Warchol, Security Training Coordinator

*G. Tasick, Quality Assurance Manager

*T. Wise, Security Coordinator

*G. MacCammon, Jr., Security Coordinator

*S. Scott, Instrument and Controls (I&C) Supervisor

1.2 U. S. Nuclear Regulatory Commission

*W. Cook, Senior Resident Inspector

*Denotes those present at the exit interview

The inspector also interviewed other licensee security personnel during this inspection.

2.0 Followup of Previously Identified Fitness-for-Duty (FFD) Weaknesses

2.1 Fitness-for-Duty

During the initial inspection of the FFD program on December 17-20, 1991, the inspector identified four follow-up items to be reviewed during a subsequent inspection. The licensee's corrective actions for those items were reviewed during this inspection. They were: (1) the policy addressing infrequent access did not reflect the licensee's position on contractor personnel who have unescorted plant access; (2) the lack of employee knowledge of certain portions of the employee assistance program (EAP); (3) the lack of a safeguards feature to prevent unauthorized manipulation of the random selection process; (4) the policy for follow-up testing for an initial confirmed positive drug test did not reflect the particulars of the minimum frequency and duration of follow-up testing. The licensee's corrective actions in all of those areas were found to be acceptable and there were no further regulatory concerns identified.

3.0 Management Support, Security Program Plans, 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's review of the various aspects of the licensee's program during this inspection as documented in this report.

Management support for the program was evident by the security program enhancements made since the last routine physical security inspection (50-333/91-23) primarily:

- the installation of new video monitors in the central and secondary alarm stations (CAS/SAS);
- the procurement of three additional light corts utilized for temporary and emergency lighting situations; and
- the development and implementation of a formalized in bouse selfassessment program to provide increased management oversight.

3.2 Security Program Plans

The inspector verified that changes to the NRC-approved Physical Security Plan (the Plan), as implemented, did not decrease the effectiveness of the Plan and that they were submitted in accordance with NRC requirements.

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3.3 Audits

The inspector reviewed the licensee's annual Quality Assurance Audit (No. 746) of the security program, which was conducted from May 20 - June 9,1991. During the audit, no adverse findings were identified but six recommendations were made. The recommendations were not indicative of

programmatic problems and were appropriately addressed. No deficiencies were noted.

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

4.1 Protected Area Barner

The inspector conducted a physical inspection of the PA barrier on April 20, 1992. The inspector determined by observation that the barrier was installed and maintained as described in the NRC-approved Plan. No deficiencies were noted.

4.2 Protected Area Detection Aids

The inspector observed the perimeter detection aids on April 21, 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 forty-nine locations in nineteen zones. All test results were satisfactory with no adjustments required. No deficiencies were noted.

4.3 Protected Area and Isolation Zone Lighting

The inspector conducted a PA and isolation zone lighting survey on April 23, 1992, from approximately 4:45 a.m. to 6:15 a.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 installed, maintained and operated as committed to in the Plan.

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Except as noted in (Section 3.2), no deficiencies were noted.

4.5 Vital Area Barriers

The inspector conducted a physical inspection of selected VA barriers on April 22, 1992. The inspector determined by observation that the VA barriers were installed and maintained as described in the Plan. No deficiencies were noted.

4.6 Vital Area Detection Aids

The inspector expected and observed testing of selected VA detection aids on April 22, 1992, and attermined that they were installed, maintained and operated as committee to in the Plan. No deficiencies were noted.

5.0 Protected and Vital Areas Access Control of Personnel, Pack and Vehicles

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 was checked prior to issuance of badges and key cards. No deficiencie: were noted.
- 5.1.2 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 April 21 and 23, 1992. The inspector also interviewed members of the security force and licensee security staff about personnel access procedures. Additionally, the inspector observed access control for drywell entry on April 22, 1992, and determined that an effective mechanism was in place to positively control materials and personnel into the area. No deficiencies were noted.
- 5.1.3 The inspector determined, by observation, that individuals in the PA and VAs displayed their badges as required. No deficiencies were noted.
- 5.1.4 The inspector verified that the licensee had escort procedures for visitors into the PA and VAs. No deficiencies were noted.

5.1.5 The licensee had a mechanism for expediting access to the vital equipment during emergencies and that mechanism was adequate for its purpose. No deficiencies were noted.

5.2 Package and Material Access Control

The inspector determined that the licensee was exercising positive control over packages and materials that were brought into the PA through the warehouse and main access portal. 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 Testi Maintenance and Compensatory Measures

The inspector determined that the licensee was conducting testing and maintaining security systems and equipment as committed to in the Plan. This determination was based upon a review of the test records for security equipment. The station provides instrumentation and controls (I&C) technicians whom are specifically assigned to maintain security equipment. A review of these records indicated repairs are being completed in a timely manner and that a prioritization schedule is assigned to each work request. The inspector also reviewed the use of compensatory measures and security force overtime and found them to be minimal, largely due to the efforts and prompt response of the maintenance group. Additionally, the I&C Manager is in the process of developing a preventive maintenance (PM) program for the security equipment to be implemented in the near future. No deficiencies were noted.

7.0 Security Training and Qualification

The inspector randomly selected and reviewed training and qualification records for eight security force members (SFMs). The physical qualification and firearms requalifications records were inspected for armed and unarmed 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.

However, the training records did not indicate that the security force was being trainer in the protection of safeguards information (SGI). Task #20 titled "Understand the Concept of Physical Security at the Station, Including Potential Threats and Areas Vulnerable to Sabotage", contains a block of instruction on the protection of SGI and is part of initial and requalification training. The inspector reviewed the lesson plans and class attendance rosters and determined that the material was being properly administered to the security force. To resolve the issue the licensee reiterated the

protection of SGI to the entire security force during guardmount and placed a signed memo for record in each member's training file. Additionally, the Task #20 classroom attendance roster will be revised annotating the instruction in SGI to reflect that the SFM's have received the required training.

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 the job requirements. No deficiencies were noted.

on Safeguards Information Program

spector reviewed the licensee's stations procedures and records, interviewed nel and discussed the training of SFM's and other Security Department nel on the preparation, receipt, identification, use, reproduction, transmittal and e of SGI with licensee management. The inspector verified that all SGI is stored access controlled areas in approved storage cabinets, and is only accessed by anorized 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.

9.0 Exit Interview

The inspector met with the licensee's representatives indicated in Paragraph 1.0 at the conclusion of the inspection of April 24, 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.