

From: Lonny L. Eckert (LLE)  
To: RLF1 Roy Fuhrmeister  
Date: Thursday, February 11, 1993 5:48 pm  
Subject: Oyster Creek Allegations

Roy, :-

The following is for your information concerning the Oyster Creek allegations which we were directed to follow-up during the January 4-8, 1993 FRPS outage inspection (NRC Inspection No. 50-219/93-01). Details 4.0 and 5.0 contained information pertinent to our follow-up on these 2 allegations.

Allegation No. RI-92-A-0247 (workers not wearing dosimetry to save dose and hiring practices)

\*During the week of our inspection, no violations concerning dosimetry usage were found.

\*Our inspection report (Detail 4.0) documented an incident in early 1992 in which a worker failed to wear both a SRD and a TLD in a HRA as required.

\*Resident inspector report 50-219/92-23 documented a case in which two workers entered the drywell without proper dosimetry.

Our inspection report (Detail 4.0) found that dosimetry utilization was weak in that SRDs and TLDs are placed on the inside of PCs. D. Vito directed the allegor to make a complaint with DOL concerning the portion of the allegation regarding licensee hiring practices.

A second allegation was made concerning a group of workers which had been fired for refusal to work without respirators.

Our findings were documented in report Detail 5.0. In summary, our review of licensee survey results identified no weaknesses in the licensee's determination to not use respirators. We briefly discussed other safety concerns (non-radiological (i.e. nuisance dust respiration)) with an OSHA Industrial Hygienist. We notified the allegor of our findings concerning the licensee's decision to not use respirators based on radiological hazards. We also told the allegor that any non-radiological concerns associated with the drywell insulation installation should be pursued with OSHA.

If you need further information, please call me at x5259.

Lonny

CC: JFR, DJC1, WJP

G/83

SAMPLE RECORD OF ALLEGATION PANEL DECISIONS

SITE: OSTER CREEK

PANEL ATTENDEES:

ALLEGATION NO.: RI-93-A-0013

Chairman - Mahl *art*

DATE: 27 JAN 93 (Panel No. 1 2 3 4 5)

Branch Chief - \_\_\_\_\_

PRIORITY: High Medium Low

Section Chief (AOC) - Rogge *h*

CONCURRENCE  
TO CLOSEOUT: DD EO SC

Sr. Allegation Coord (SAC) Fuhrmeister

OI Representative - R Matakas

CONFIDENTIALITY GRANTED: Yes No

(Other) Kernig

(See Allegation Receipt Report)

IS THERE A HARASSMENT/DISCRIMINATION  
ISSUE:

Yes No

IF YES,

- 1) has the individual been informed of the DOL  
process and the need to file a complaint within 30 days
- 2) has the individual filed a complaint  
with DOL
- 3) has a letter been sent to the complainant seeking  
any safety concerns

Yes No

Yes No

Yes No

IS A CHILLING EFFECT LETTER WARRANTED:  
IF YES, HAS IT BEEN SENT

Yes No  
Yes No

HAS THE LICENSEE RESPONDED TO THE CHILLING  
EFFECT LETTER:

Yes No

ACTION: (State each specific action, including acknowledgment letter, as well  
as responsibility and ECD)

RESP ECD

- 1) Inspect during next routine security inspection DESS TBD

2) \_\_\_\_\_

3) \_\_\_\_\_

4) \_\_\_\_\_

5) \_\_\_\_\_

G/85

Copies to: Attendees  
Blough, DRP  
Letts, OI

NOTES: The failure to make a 2 hour tour may be just  
a loggable event. There is no immediate safety issue,  
SNLP Category 2 on Security

**Allegation Receipt Report**  
(Use also for staff suspected wrongdoing)

Date/Time Received: \* 1/18/93 1910 Allegation No. RI-93-A-0013  
(leave blank)

Name of Allegor: \* UNKNOWN Address: \* UNKNOWN

Phone: \* UNKNOWN City/State/Zip: \* UNKNOWN

Confidentiality: \* No mention

Was it requested?	Yes ___ No ___
Was it initially granted?	Yes ___ No ___
Was it finally granted by the allegation panel	Yes ___ No ___
Does a confidentiality agreement need to be sent to allegor?	Yes ___ No ___
Has a confidentiality agreement been signed?	Yes ___ No ___
Memo documenting why it was granted is attached?	Yes ___ No ___

Allegor's Employer: \* UNKNOWN Allegor's Position/Title: \* (Possible Security Guard)

Facility: Oyster Creek Docket No.: 50-215

| Allegation Summary or staff suspected wrongdoing (brief description of concern(s):

Security Guard didn't make required  
2 hour check of vital area even though  
another guard was posted in the area and  
not reported, to NRC

Number of Concerns: 1

Employee Receiving Allegation or suspecting wrongdoing (first two initials and last name):

RJC (KONTZ) as RDO

6/86

\* These sections are not completed when the case involves staff suspected wrongdoing rather than an allegation

Type of Regulated Activity (a) ☒ Reactor (d) ☐ Safeguards  
 (b) ☐ Vendor (e) ☐ Other: \_\_\_\_\_  
 (c) ☐ Materials (Specify)

Materials License No. (if applicable): \_\_\_\_\_

Functional Area(s): \_\_\_\_\_ (a) Operations \_\_\_\_\_ (e) Emergency Preparedness  
 \_\_\_\_\_ (b) Construction \_\_\_\_\_ (f) Onsite Health and Safety  
☒ (c) Safeguards \_\_\_\_\_ (g) Offsite Health and Safety  
 \_\_\_\_\_ (d) Transportation \_\_\_\_\_ (h) Other: \_\_\_\_\_

Detailed Description of Allegation or staff suspected wrongdoing: see below & attached doc  
see attached (below) notes)

Unknown Allegation on Oyster Creek Security (cont'd)

At 1917 on 1/18/93, the HDO reported to me (RDO) an allegation that he recieved on the Oyster Creek security program. The allegor stayed on the phone only long enough to talk to the HDO (Steve Sandin). The HDO reported that he refused to give his name or phone number and that he would definitely not talk to the resident inspector.

The allegor claims that on January 5 or 6 of this year a particular guard didn't do a 2 hour vital area check because he thought another guard was already posted in the vital area. Security management wrote him up but failed to report it to the NRC staff.

I indicated to the HDO that I would put this into the allegation followup system in Region I.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Date: 1/13/93 Time: 7:17

ROO NOTIFICATION

U.S. NUCLEAR REGULATORY COMMISSION  
OPERATIONS CENTER

# No. *NA* EVENT NOTIFICATION WORKSHEET

*Steve Sanders*

NOTIFICATION TIME <i>1902</i>	FACILITY OR ORGANIZATION <i>Oyster Creek</i>	UNIT	CALLER'S NAME <i>None given</i>	CALL BACK =: ENS or <i>None given</i>
EVENT TIME & ZONE <i>NA</i>	EVENT DATE <i>NA</i>	1-Hr Non-Emergency 10 CFR 50.72(b)(1)		
POWER/MODE BEFORE <i>NA</i>	POWER/MODE AFTER <i>NA</i>	(i)(A) TS Required S/D	(v) Lost Offsite Comms	
		(i)(B) TS Deviation	(vi) Fire	
		(ii) Degraded Condition	(vi) Toxic Gas	
		(iii)(A) Unanalyzed Condition	(vi) Rad Release	
		(iii)(B) Outside Design Basis	(vi) Oth Hampering Safe Op.	
		(iii)(C) Not Covered by OPs/EPs	4-Hr Non-Emergency 10 CFR 50.72(b)(2)	
		(iii) Earthquake	(i) Degrade While S/D	
		(iii) Flood	(ii) RPS Actuation (scram)	
		(iii) Hurricane	(ii) ESF Actuation	
		(iii) Ice/Hail	(iii)(A) Safe S/D Capability	
		(iii) Lightning	(iii)(B) RHR Capability	
		(iii) Tornado	(iii)(C) Control of Rad Release	
		(iii) Oth Natural Phenomenon	(iii)(D) Accident Mitigation	
		(iv) ECCS Discharge to RCS	(iv)(A) Air Release > 2X App B	
		(v) Lost ENS	(iv)(B) Liq Release > 2X App B	
		(v) Lost Emerg. Assessment	(v) Offsite Medical	
			(vi) Offsite Notification	

## DESCRIPTION

*1/5 or 1/6/93 Guard says 2 HR Vital*

*alarm*

*A particular guard didn't a vital alarm  
ser. he thought someone posted  
Security Man wrote guard up - no report  
to NRC was made*

*Will not talk to resident inspectors*

*0720 1/14/93 Don Heled notified - allegation report to be submitted*

*0723 1/14/93 Talked with Jim Joyner - RDO will  
put in allegation report*

Include: Systems affected, actuations & their initiating signals, causes, effect of event on plant, actions taken or planned, etc

IFICATIONS RESIDENT	YES	NO	WILL BE	ANYTHING UNUSUAL OR NOT UNDERSTOOD?	YES (Explain above)	NO
STATE(s)				DID ALL SYSTEMS FUNCTION AS REQUIRED?	YES	NO (Explain above)
LOCAL				MODE OF OPERATION		
OTHER GOV AGENCIES				UNTIL CORRECTED	ESTIMATE FOR RESTART DATE:	ADDITIONAL INFO ON BACK?
MEDIA/PRESS RELEASE						



TELEPHONE REPORT

DATE 12 JAN 93 TIME 8:40am

FACILITY Oyster Creek DOCKET NO. 50-219

LICENSEE'S OCCURRENCE IDENTIFICATION NO. (IF ANY) \_\_\_\_\_

BRIEF SUBJECT: RL-93-a-0003

DESCRIPTION OF OCCURENCE, DEFICIENCY OR INCIDENT:

received call from Mr. Jenkins of OSHA, wanting to know  
what we had found, relative to the complaint

6/87

NOTIFICATION RECEIVED BY \_\_\_\_\_

**ORIGINAL-INITIALS**

Unit: ☐ TMI-1 ☐ TMI-2 ☒ Oyster Creek

REC NO \_\_\_\_\_  
REV \_\_\_\_\_  
DATE \_\_\_\_\_  
RECTYPE **002-01**  
LOCATION \_\_\_\_\_  
FORMNO **N1975**  
RETENTION **PERM**

**PLEASE**

Page 1 of 2

**1. Identification**

**EXPEDITE**

Originator: ANTONIO T. ALVEAR Dept/Date/Time: PLANT MAINT. 1-11-93 1845  
Material, Part, Component, etc.: V-25-22 VALVE BODY SEAT

Location: RX BLDG 119 ELEV MIRROR INSULATION RX HEAD  
Manufacturer (name): YALCOR ENGINEERING CORP. Vendor # Y030  
P.O.# \_\_\_\_\_ P.O. Item \_\_\_\_\_ Spec # \_\_\_\_\_  
B.A. # \_\_\_\_\_ WAJO 39741  
System: REACTOR HEAD VENT VALVE System No. 221  
Dwg. No. \_\_\_\_\_ PIR/RI# \_\_\_\_\_ Other \_\_\_\_\_  
Nonconforming to (requirements): VALVE SEAT SHOULD HAVE NO INDICATIONS OR ANY HAIRLINE CRACK

Description of Nonconformance: AFTER LAPPING VALVE SEAT TO GIVE 360° CONTACT VIA BLUE CHECK WITH VALVE DISC, THERE ARE STILL FOUR HAIRLINE CRACK INDICATIONS ACROSS SEATING SURFACE

Hand carry to Quality Control Manager (normal working hours) or Unit/Group Shift Supervisor (backshift/weekend).

**2. Evaluation & Validation**

**POTENTIALLY REPORTABLE:**

**QA PLAN**

**SCOPE**

10CFR50

10CFR21

10CFR71

10CFR73.71

L.E.R.

Yes: ☒ ☐ ☐ ☐ ☐ ☐  
No: ☐ ☒ ☒ ☒ ☒ ☒

Evaluated By (name): [Signature] Date/Time: 1/11/93 2048  
QC Mgr. Validation: [Signature] Date/Time: 01/14/93 0200 BSAH

If evaluated to be potentiall reportable, notify U/GSS and send copy of MNCR to Licensing.

U/GSS Notified: ☐ Yes ☒ No Date/Time: \_\_\_\_\_  
Hold Tags Issued: ☐ Yes ☒ No No. of Tags: N/A  
Installed By (name): N/A Date/Time: \_\_\_\_\_  
Serial Segregation Required: ☐ Yes ☒ No  
Segregation Verified By (name): N/A Date/Time: N/A

**DEVIATION REPORT**  
☒ YES ☐ NO ☐ N/A

ACTION PARTY (name): Ranft Dept: FE



3. Action Party Evaluation and Disposition By (name) J. ANVARI Dept PE Date 1/13/93

ation of Cause: ☐ Human Factors ☐ Procedure Related ☒ Material Related ☐ Program Related  
☐ OtherProposed Disposition: ☐ \*Repair ☒ \*Use-as-is ☐ Rework ☐ Scrap  
☐ Other (describe as necessary)

\*Requires Engineering Evaluation and Approval

4. Engineering Evaluation &amp; Disposition By (name) J. ANVARI Dept PE Date 1/12/93

Disposition Concurrence ☒ Yes ☐ No If NO, recommendation is:☐ \*Repair ☒ \*Use-as-is ☐ Rework ☐ Scrap ☐ Other

\*Requires Technical Justification

Justification: (include applicable work documents, limitations, etc.) A: V-25-0021 WILL PROVIDE THE ISOLATION FOR REACTOR HEAD VENT. B: MANUAL VALVE V-22-0767 WILL PROVIDE ISOLATION IF V-25-21&amp;22 LEAKS. C: HEAT WILL SEAL THE

Reinspection/Retest Requirements (as applicable) ☒ N/A HAIR LINE CRACKS WHICH IS ON STEEL FACING ONLY (PER INFORMATION PT)

PERFORM NORMAL POSTMAIN TESTING PER JOB ORDER #39741

Technical Corrective Action (as applicable). Check, as appropriate, of corrective action requires change to:

☐ Design ☐ Procedure ☐ Specification ☐ Drawing ☐ FSAR ☒ N/A☐ Manual ☐ Tech. Spec. Document No.

Review Requirements:

Safety Evaluation? ☐ Yes ☒ No

SE#

Rev.

Design Verification? ☐ Yes ☒ No

DV#

Rev.

Fire Hazards Analysis? ☐ Yes ☒ No

FHA#

Rev.

Concurred By (name) J. Anvari 1-12-93 Dept PLANT ENGR

5. Disposition Concurrence ☒ Yes ☐ No If NO, provide reasons:

NDE/ISI

Date

☒ N/A

AI/ANI/ANII

Date

☒ N/A

Other

Date

☒ N/A

QC Manager/Designee Rodney Turner

Date: 1/13/93

6. Quality Control Verification &amp; Closeout

Verification of satisfactory completion of material disposition and initiation of technical corrective action.

Verification Method:

DISPOSITIONED USE-AS-IS

Complete following as appropriate:

Inspection Report No.

Other

ed By (name/date)

/Segregation Removed By (name/date)

7. Final Package Review

Quality Control Manager Rodney Turner

Date 1/13/93

TELEPHONE REPORT

DATE BJAN 93 TIME 8:15am

FACILITY Oyster Creek DOCKET NO. 50-219

LICENSEE'S OCCURRENCE IDENTIFICATION NO. (IF ANY) \_\_\_\_\_

BRIEF SUBJECT: allegation issues

DESCRIPTION OF OCCURENCE, DEFICIENCY OR INCIDENT:

Dave Chawaga called, he's in the respiratory protection group. He utility told him that 9 people were discharged by NERC for not working. The insulators discharged were a low productivity group, and it was felt that they wanted to wear respirators in order to reduce their stay time in the drywell. They were installing new insulation, so there would have been no radiological hazard. On the rule in question, they were supposed to be putting on the black wrapped foam insulation, such as is used on cold water pipes.

Dave wasn't sure if the stay times issue was for heat stress or just admin limits on respirator use (temp in drywell  $\approx 89^{\circ}\text{F}$ ). He will be bringing back the MSDS on the insulation going in.

On the issue of not wearing dosimetry to 'some dose', hasn't been able to find any evidence of it.

NOTIFICATION RECEIVED BY Roy L. Lubmeister

RO:I Form 50  
June 74

cc: R. Timity  
filed RJ-92-a-0297  
RJ-93-a-0003

6/89

January 7, 1993

→ An NRP (Non-Radiological Respiratory Permit) was issued on Monday night, 1/4/93 to allow Insulators to reinstall Nukon pad insulation in the Drywell. On Tuesday 1/5/93 GPU Safety obtained an MSDS for the Nukon pad which identified that the Nukon pad did not present a hazard with the materials in the pad becoming an airborne dust hazard from normal handling the pad, such as installation or removal. The NRP was then canceled for this work activity. That night the night shift Insulators asked for a respirator to install new Armorflex insulation on the RBCCW lines on 13' elevation in the Drywell. Radcon denied this crew a respirator for radiological reasons as the airborne radioactivity levels from when the old Armorflex was removed on these lines did not warrant wearing a respirator. GPU Safety was contacted to obtain a NRP, this was denied based on the fact that this was brand new insulation, and that the Armorflex is a rubber foam insulation that would not produce an airborne dust hazard even if it was damaged beyond the point of being acceptable for use.

*Gregg M. Talley*  
 Gregg M. Talley  
 Safety Coordinator

TLV  
 DSHA  $5 \text{ mg/m}^3$   
 NUCLEAR DUST Limit for Resp Protection

STAN HOFFMAN

606-971-4725

6/90

GIVE  
 THEM  
 RESP.  
 TO PUT THEM  
 BACK TO  
 WORK  
 UNTIL

TELEPHONE REPORT

DATE 6 JAN 93 TIME 4:10 pm

FACILITY Oyster Creek DOCKET NO. \_\_\_\_\_

LICENSEE'S OCCURRENCE IDENTIFICATION NO. (IF ANY) N/A

BRIEF SUBJECT: RI-93-A-0003

DESCRIPTION OF OCCURENCE, DEFICIENCY OR INCIDENT:

called alleged, gave him the address for DOL headquarters, and told him how to file his complaint. I also stated that I would shortly send him a letter with the DOL procedure and instructions.

I mentioned that we would be looking at the matter from the standpoint of our regulatory authority, which is airborne radioactive material.

6/91

NOTIFICATION RECEIVED BY Roy L. Fabrester

Charles Jenkins OSHA

1/6/93-

609-757-5181

called back 4:00pm, he had departed for the day

called back 7 JAN 93, 9:20am, not at his desk

9:30 Mr. Jenkins called back Ron connected us  
complaint received yesterday working at Oyster Creek for UELC  
bin insulation work on reactors & support systems  
supplied with respirators ~~at~~ for 1 1/2 months, other night were  
told that would no longer supply respirators fired the night  
shift. day shift continues working the job without respirators  
working with ceramic fibers insulation, fiberglass, silica, calcium  
silicate workers also said may be radioactive

[all nuisance dust,  $5 \text{ mg/m}^3$  PEL need to look at MSDS  
which covers the insulation, see what PEL & HAs are

need to check with UELC to see what the dust levels are

6/92



# SAMPLE RECORD OF ALLEGATION PANEL DECISIONS

SITE: Oyster Creek

PANEL ATTENDEES:

ALLEGATION NO.: RI-93-A-0003

Chairman - Wiggins 

DATE: 1/16/93 (Panel No. 1 2 3 4 5)

Branch Chief - Blough

PRIORITY: High Medium Low

Section Chief (AOC) - Rogers

CONCURRENCE

Sr. Allegation Coord (SAC)

TO CLOSEOUT: DD BC SC

OI Representative - [Walsh info'd]

CONFIDENTIALITY GRANTED: Yes No

(Other) Ministry

(See Allegation Receipt Report)

IS THERE A HARASSMENT/DISCRIMINATION  
ISSUE:

Yes ~~No~~ Possibly

IF YES,

1) has the individual been informed of the DOL  
process and the need to file a complaint within 30 days

Yes No will be

2) has the individual filed a complaint  
with DOL

Yes No

3) has a letter been sent to the complainant seeking  
any safety concerns

Yes No

IS A CHILLING EFFECT LETTER WARRANTED:

Yes No

IF YES, HAS IT BEEN SENT

Yes No

HAS THE LICENSEE RESPONDED TO THE CHILLING  
EFFECT LETTER:

Yes No

ACTION: (State each specific action, including acknowledgment letter, as well  
as responsibility and ECD)

RESP ECD

1) Acknowledge receipt of allegation SAC 1/15/93  
and provide person info on DOL right DRSS: 1/18/93

2) (DRSS by phone; SAC by etc)

2) DRSS inspect residue this wk. DRSS 2/16/93

- need to wear respirators to conduct the

4) work described

- instances of airborne updates

5) Status of new Part 20 implementation

6/93



NOTES:

- DRSS (Nmtg) reports that P20 is not ~~noted~~ applicable.  
until 1994. ~~although not a part~~
- DRP indicated that DRSS (D. Chawaga) is onsite and  
could pick the issue up during inspection.
- Reed

# SAMPLE RECORD OF ALLEGATION PANEL DECISIONS

SITE: Oyster Creek

PANEL ATTENDEES:

ALLEGATION NO.: RI-92-A-0297

Chairman - Wiggins

DATE: 250007R (Panel No. (1) 2 3 4 5)

Branch Chief - Blough

PRIORITY: High Medium Low

Section Chief (AOC) - Rogge

CONCURRENCE  
TO CLOSEOUT: DD BC SC

Sr. Allegation Coord (SAC) Fuhrer, Ester

OI Representative - Letts

CONFIDENTIALITY GRANTED: Yes (No)

(Other) Pasciack, Frye, Sagala

(See Allegation Receipt Report)

IS THERE A HARASSMENT/DISCRIMINATION  
ISSUE:

Yes (No)

IF YES,

1) has the individual been informed of the DOL  
process and the need to file a complaint within 30 days

Yes No

2) has the individual filed a complaint  
with DOL

Yes No

3) has a letter been sent to the complainant seeking  
any safety concerns

Yes No

IS A CHILLING EFFECT LETTER WARRANTED:

Yes (No)

IF YES, HAS IT BEEN SENT

Yes No

HAS THE LICENSEE RESPONDED TO THE CHILLING  
EFFECT LETTER:

Yes No

ACTION: (State each specific action, including acknowledgment letter, as well  
as responsibility and ECD)

RESP ECD

1) Request specific information from allegor and that SAC 270007R  
kept us in contact with unnamed source. all send letter

2) Repanel if responds with specifics of names & <sup>wrong doing</sup> SAC 31DEC92  
otherwise feed specifics to DRESS

3) Inspect during upcoming outage inspection DRESS 31JAN92

4) Repanel if DRESS finds ~~a problem~~ potential wrong doing SAC 31JAN92

5)

G/94

NOTES: Site has good history of getting rid of people who don't wear their dosimetry. Hasn't heard of this recently. It is possible at this site. Inspection planned  $\pm$  4-5 weeks (outage inspection).