



**UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION IV
611 RYAN PLAZA DRIVE, SUITE 400
ARLINGTON, TEXAS 76011-4005**

PROPRIETARY INFORMATION

June 4, 2004

Harold B. Ray, Executive Vice President
San Onofre, Units 2 and 3
Southern California Edison Co.
P.O. Box 128, Mail Stop D-3-F
San Clemente, CA 92674-0128

**SUBJECT: SAN ONOFRE, UNITS 2 AND 3 - NRC PHYSICAL SECURITY LIMITED
BASELINE INSPECTION REPORT 05000361/2004011 AND 05000362/2004011**

Dear Mr. Ray:

This refers to the inspection conducted on April 19 through 22, 2004 at the San Onofre Nuclear Generating Station facility. The enclosed report presents the results of this inspection, which were discussed on April 22, 2004, with Mr. J. Wambold, VP Nuclear Generation, and other members of your staff.

This inspection examined activities conducted under your license as they relate to public health and safety, the common defense and security, and to compliance with the Commission's rules and regulations, orders, and with the conditions of your license. Within these areas, the inspection consisted of selected examination of procedures and representative records, observations of activities, and interviews with personnel.

Based on the results of this inspection, the NRC has identified an issue that was evaluated under the risk significance determination process as having very low safety significance (Green). The NRC has also determined that a violation is associated with this issue. This violation is being treated as a non-cited violation, consistent with Section VI.A of the Enforcement Policy. The non-cited violation is described in the subject inspection report. If you contest the violation or significance of the non-cited violation, you should provide a response within 30 days of the date of this inspection report, with the basis for your denial, to the Nuclear Regulatory Commission, ATTN: Document Control Desk, Washington DC 20555-0001, with a copy to the Regional Administrator, Region IV, and the Director, Office of Enforcement, United States Nuclear Regulatory Commission, Washington, DC 20555-0001, and the NRC Resident Inspector at the San Onofre Generating Station facility.

Because this issue involves security-related information, your response will not be made available electronically for public inspection in the NRC Public Document Room or from the NRC's document system (ADAMS), accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html>. If Safeguards Information is necessary to provide an acceptable response, please provide the level of protection described in 10 CFR 73.21.

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Otherwise, mark your entire response "Proprietary Information in accordance with 10 CFR 2.390(d)(1)" and follow the instructions for withholding in 10 CFR 2.390(b)(1). In accordance with 10 CFR 2.390(b)(1)(ii), the NRC is waiving the affidavit requirements for your response.

The material enclosed herewith contains Proprietary Information in accordance with 10 CFR 2.390(d)(1) and its disclosure to unauthorized individuals could present a security vulnerability. Therefore the material will not be made available electronically for public inspection in the NRC Public Document Room or from the NRC's document system (ADAMS), accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html>.

Should you have any questions concerning this inspection, we will be pleased to discuss them with you.

Sincerely,

//RA//

Michael P. Shannon, Chief
Plant Support Branch
Division of Reactor Safety

Dockets: 50-361
50-362
Licenses: NPF-10
NPF-15

Enclosure:
NRC Inspection Report
05000361 and 05000362/2004011 w/Attachment:
Supplemental Information (**Proprietary Information**)

cc: **without enclosure**
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 RIV Docket File - File Room Custodian
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ADAMS: Yes No Initials: MPS
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DOCUMENT: SONG2004-011-sec-dah.lbi.wpd

| RIV: PSB/PSI | C:PSB | Peer Review | DRP/C | C:PSB |
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U.S. NUCLEAR REGULATORY COMMISSION
REGION IV

Dockets: 50-361, 50-362
Licenses: NPF-10, NPF-15
Report: 05000361/2004011 and 05000362/2004011
Licensee: Southern California Edison, Co.
Facility: San Onofre Nuclear Generating Station, Units 2 and 3
Location: San Clemente, CA
Dates: April 19 - 22, 2004
Inspector: David A. Holman, Physical Security Inspector
Thomas Dexter, Consultant
Approved by: Michael P. Shannon, Chief, Plant Support Branch
Division of Reactor Safety

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SUMMARY OF FINDINGS

IR 05000361/2004011, 05000362/2004011; 04/19 - 04/22/2004; San Onofre Nuclear Generating Station; Security Review of Access Control

The report covered a 4-day period of on site inspection by two physical security inspectors. The inspection identified one Green non-cited Severity Level IV violation. The significance of most findings is indicated by their color (Green, White, Yellow, Red) using Inspection Manual Chapter 0609, "Significance Determination Process" (SDP). Findings for which the SDP does not apply may be Green or be assigned a severity level after NRC management review.

A. NRC-Identified and Self-Revealing Findings

Cornerstone: Physical Protection

- SL-IV. The inspectors identified a Green non-cited violation of 10 CFR Part 73, Appendix G. Specifically, the licensee temporarily lost control of a set of vital area keys and failed to record the event in their safeguards event log. The licensee initiated a corrective action document to address this failure.

The failure of security personnel to record the event in the safeguards event log was a performance deficiency. Since the finding had the potential to impact the NRC's ability to perform its regulatory function it was processed in accordance with traditional enforcement. When processed through the Interim Physical Protection Significance Determination Process, the finding was determined to be of very low safety significance, because there was a vulnerability in Access Controls; however, there was no malevolent act and there were not more than two similar findings in the previous 4 quarters (Section 3PP2).

B. Licensee-Identified Violations

One violation of very low safety significance, which was identified by the licensee has been reviewed by the inspectors. Corrective actions taken or planned by the licensee were entered into the licensee's corrective action program. This violation is listed in Section 4OA7 of this report.

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REPORT DETAILS

3. Cornerstone: Physical Protection (PP)

3PP1 Access Authorization (71130.01)

a. Inspection Scope

The inspectors evaluated this area by: reviewing procedures and records; conducting interviews with responsible personnel and plant employees; and performing walk downs of the access authorization spaces.

The inspectors verified that the access authorization program: (1) complied with the NRC-approved security plan and any other applicable Commission requirements; (2) provided high assurance that personnel with unescorted access were trustworthy, reliable, and did not constitute an unreasonable risk to public health and safety, including the potential to commit radiological sabotage; and (3) established a behavioral observation program that provided high assurance of continued reliability and trustworthiness of personnel with unescorted access. The inspectors conducted the following specific inspection activities:

- Reviewed and evaluated licensee event reports, safeguards log entries, and corrective action documents between January 2003 and March 2004. (No licensee event reports were documented).
- Verified that the licensee implemented: (a) behavioral observation training; procedures related to: (b) behavioral observation training; (c) unescorted access program; and (d) the personnel information management system.
- Verified that the licensee established an effective access authorization program that: (a) included appropriate categories; (b) verified true identities; (c) conducted suitable inquiries; (d) required psychological evaluations; (e) had anomalous results reviewed by a licensed psychologist or psychiatrist; (f) required FBI criminal history record checks; (g) assessed trustworthiness and reliability; (h) reviewed credit history summaries; (i) evaluated for fraud and misuse of financial identifiers; (j) compared the credit history summary with the personal history questionnaire; and (k) implemented best effort evaluations, as appropriate.
- Verified that the licensee implemented an update process that: (a) reviewed employment history; (b) reviewed the length and character of employment; (c) required psychological evaluations; (d) conducted clinical reviews by a licensed psychologist or psychiatrist; (e) conducted inquiries for reinstatement, as required; (f) reviewed the criminal history, credit history, and drug test results prior to granting access; and (g) audited contractor/vendor programs with a knowledgeable person.

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- Verified that the licensee utilized a program to effectively manage a common industry database that: (a) established a method to check on personnel from other facilities; (b) identified personnel denied access; (c) had procedures to address personnel denied access; (d) denied access to personnel who violated NRC requirements; (e) identified personnel who are in a follow-up program; and (f) identified personnel potentially affected by any violation of 10 CFR Part 26.
- Verified that the licensee (a) reinvestigated all personnel having unescorted access and (b) developed, implemented, and maintained similar criteria for individuals performing background investigations.
- Verified that the licensee established a behavioral observation program that: (a) ensured recognition of behaviors adverse to the safe operation and security of the facility; (b) documented behavioral observation program training and refresher training; (c) established provisions to train offsite personnel; and (d) validated implementation of the behavior observation program for off-site employees.
- Verified that the licensee implemented the following to address an insider threat and verify human reliability: (a) re-assessed and re-approved personnel access lists for vital areas; (b) established controls for vital area access upon existence of a specific, credible insider threat; (c) eliminated temporary unescorted access to the facility; (d) established a program to account for the prescribed attributes of an insider; and (e) established a program that included the prescribed human reliability elements to mitigate the potential for an active insider.
- Verified that the licensee developed, implemented, and maintained a personnel information management system that: (a) protected personal and confidential information; (b) protected information stored or transmitted in electronic format; and (c) prohibited unauthorized access and modification of the data without proper authorization.

The inspectors completed 42 of the required 44 samples. Two samples related to the design basis threat were not inspected since the requirements will be effective on October 29, 2004.

b. Findings

No findings of significance were identified.

3PP2 Access Control (71130.02)

a. Inspection Scope

The inspectors evaluated this area by: reviewing procedures and records; conducting interviews with responsible personnel and plant employees; and performing walk downs of the personnel, package, and vehicle access points into the protected area.

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The inspectors verified that the access control program: (1) complied with the NRC-approved security plan and any other applicable Commission requirements; (2) established control measures and equipment to detect and prevent the introduction of contraband into the protected area; and (3) ensured that only personnel who were properly screened were granted unescorted access to the protected and vital areas. The inspectors conducted the following specific inspection activities:

- Reviewed and evaluated licensee event reports, safeguards log entries, and corrective action documents between January 2003 and February 2004 (No licensee event reports were documented).
- Verified that the licensee: (a) developed procedures to block badges for suspended personnel; (b) ensured security personnel remained familiar with the steps for denying access; (c) did not establish procedures that reduced the effectiveness of the security plans; and (d) established measures to protect badging activities conducted outside the protected area.
- Verified for package, personnel, and vehicle searches that the licensee: (a) established effective implementing procedures; (b) ensured collateral duties did not adversely impact the security officers' ability to perform their primary duties; (c) provided sufficient staffing; and (d) established appropriate processes for items exempted from search.
- Verified that the licensee could manually control access to vital areas.
- Verified that the licensee properly: (a) controlled and accounted for hard keys; (b) properly maintained the bullet-resistant glazing at access control; (c) positively controlled package, personnel, and vehicle access into the protected area; (d) ensured access control personnel appropriately identified packages; and (e) maintained control of vehicles delivering hazardous material within the protected area.

The inspectors completed 16 of the required 16 samples.

b. Findings

Safeguards Event Log Deficiency

Introduction. The inspectors identified a Green Severity Level IV non-cited violation of 10 CFR Part 73, Appendix G, Paragraph II.(a). Specifically, the licensee failed to record an event in their safeguards event log, as required.

Description. The inspectors identified one deficiency that reflected the failure of security personnel to record an event in the safeguards event log, as required. On March 17, 2004, a Security Officer working the 3:00 P.M. - 11:00 P.M. shift took a set of responder keys, which included vital area keys, home after being held over 3 additional hours due

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to manning shortfalls. The on-duty security force was unaware that the keys were missing for approximately 5 hours, and was not aware of their location until the officer brought them back approximately 12 hours later. The inspectors determined that security personnel had initiated a corrective action document to reflect this failure; however, the inspectors identified that a corresponding safeguards event log entry was not made. The loss of control of vital area keys reduced the effectiveness of safeguards systems below that required in the Physical Security Plan. The security plan requires, in part, that the Security Shift Commander ensure continuous accounting of all locks and keys.

Analysis. The inspectors determined that the failure of security personnel to record the event in the safeguards event log was a performance deficiency. When processed through the Interim Physical Protection Significance Determination Process, the finding was determined to be of very low safety significance (Green). There was a vulnerability in Access Controls; however, there was no malevolent act and there were no similar findings in the previous 4 quarters. Since the failure to record this event in the licensee's safeguards event log had the potential for impacting the NRC's ability to perform its regulatory function, this issue was processed in accordance with traditional enforcement.

Enforcement. Operating License, Paragraph 2.E, specified Southern California Edison shall fully implement and maintain in effect all provisions of the Commission-approved Physical Security and Safeguards Contingency Plans. The Physical Security Plan specified in: Section 4.4, "The Security Shift Commander (SC), or designee, supervises maintenance of key issue logs and ensures a continuous accounting of all locks and keys". 10 CFR Part 73, Appendix G, Paragraph II.(a) requires, in part, "Any . . . discovered vulnerability in a safeguards system that could have allowed unauthorized . . . access to a . . . vital area . . . had compensatory measures not been established," shall be recorded within 24 hours of discovery in the safeguards event log. Contrary to the above, on March 17, 2004, the licensee failed to record in its safeguards event log a discovered vulnerability in its safeguards system that could have allowed unauthorized access to a vital area. Specifically, the loss of control of a set of security responder keys that included vital area keys could have allowed the "finder" unauthorized access to a vital area, was not recorded in the safeguards event log.

Because this failure was of very low safety significance and had been entered into the corrective action program as Action Request 040301908, this violation is being treated as a non-cited Severity Level IV violation, consistent with Section VI.A of the NRC Enforcement Policy: NCV 05000361; 05000362/2004011-01, Failure to log event.

3PP6 Inspection of Security Plan Changes (71130.06)

a. Inspection Scope

The inspectors reviewed plan changes submitted by the licensee to: (1) develop inspection data that provided an independent evaluation of the significance of security

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plan and program changes, and (2) verify whether changes to the licensee's security plans and attendant implementing procedures have not decreased the effectiveness of the previous plan, as required by 10 CFR 50.54(p).

The inspectors reviewed the following plan change to: (a) verify that the change did not reduce the effectiveness of the previously approved plan; (b) evaluate supporting information, if needed, to verify the changes did not decrease the effectiveness of the safeguards program; (c) determine whether other elements of the safeguards program were affected, which included coordination with other regions if the change affected licensees in multiple regions; and (d) if needed, independently review any change that appeared to decrease the effectiveness of the safeguards program.

- Physical Security Plan, Revision 76, dated November 25, 2003, which standardized terminology and added information related to security requirements for the Independent Spent Fuel Storage Installation.
- Safeguards Contingency Plan, Revision 30, dated November 25, 2003, which standardized terminology and added information related to security requirements for the Independent Spent Fuel Storage Installation.
- Training and Qualification Plan, Revision 26, dated November 25, 2003, which standardized terminology and added information related to security requirements for the Independent Spent Fuel Storage Installation.
- Consolidated Defueled Physical Protection Plan, Revision 2, dated November 25, 2003, which standardized terminology and added information related to security requirements for the Independent Spent Fuel Storage Installation.
- Safeguards Contingency Plan, Revision 31, dated January 8, 2004, which clarified that armed responders would have at least the minimum amount of ammunition readily available.

b. Findings

No findings of significance were identified.

3PP8 Fitness For Duty Program (FFD) (71130.08)

a. Inspection Scope

The inspectors evaluated the specific area of security force work hour controls by: reviewing procedures and records; conducting interviews with responsible personnel and plant employees; and reviewing security event reports, corrective action documents and event logs for the previous 12 months.

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The inspectors verified that the fitness-for-duty program: (1) complied with the NRC-approved security plan, 10 CFR Part 26, "Order for Compensatory Measures Related to Fitness-for-Duty Enhancements Applicable to Nuclear Facility Security Force Personnel" (Order), dated October 23, 2003, and any other applicable Commission requirements; and (2) ensured nuclear facility security force personnel were not assigned to duty while in a fatigued condition. The inspectors conducted the following specific inspection activities:

- Reviewed and evaluated licensee event reports, safeguards log entries, and corrective action documents between January 2003 and March 2004 (No licensee event reports were documented).
- Verified the FFD audit program ensured identified issues were resolved in a technically adequate and timely manner and met regulatory requirements.
- Verified for security force working hours required by the Order that the licensee: (a) ensured individual work hour limits were not exceeded and that management-approved deviations were authorized and documented; (b) ensured group work hour limits have not been exceeded under normal plant conditions, planned plant or planned security system outages, unplanned plant or unplanned security outages, increases in plant threat condition, and during force-on-force exercises; and (c) developed procedures/processes that: (1) controlled the work hours program, (2) provided the ability to self report being unfit for duty, and (3) ensured self-declarations were documented and that at least 10 hours passed prior to returning to duty.

The inspectors completed 5 of the required 5 samples.

b. Findings

No findings of significance were identified.

4. OTHER ACTIVITIES

4OA1 Performance Indicator Verification (71151)

a. Inspection Scope

The inspectors sampled licensee submittals for the following Physical Protection Cornerstone performance indicators: (1) protected area security equipment, (2) personnel screening program performance, and (3) fitness-for-duty program performance for the period between September 2003 and January 2004. The inspectors verified: (1) the accuracy of the performance indicator data reported during that period and (2) used the performance indicator definitions and guidance contained in NEI 99-02, "Regulatory Assessment Indicator Guideline," Revision 2, to verify the basis in reporting for each data element.

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The inspectors interviewed licensee personnel that were accountable for collecting and evaluating the performance indicator data and reviewed the process for collecting and submitting the performance indicator data. Specifically, the inspectors randomly selected security event logs and corrective action reports for the 3 months being reviewed.

The inspectors completed 3 of the required 3 samples.

b. Findings

No findings of significance were identified.

4OA2 Problem Identification and Resolution

Annual Sample Review

a. Inspection Scope

The inspectors evaluated licensee activities to determine whether the licensee appropriately resolved conditions adverse to quality, which included identifying the root cause, implementing appropriate corrective actions, and trending lower level deficiencies.

b. Findings and Observations

The inspectors reviewed the safeguards event logs and evaluated a listing of corrective action documents between January 2003 and March 2004. The inspectors did not identify any negative trends and concluded that the licensee implemented appropriate corrective actions.

The inspectors reviewed several quality assurance audits and determined that the licensee implemented appropriate corrective actions for all identified deficiencies and/or concerns. No findings of significance were identified.

4OA5 Other Activities

(Closed) Unresolved Item 05000361; 05000362/2001019-01: Potential Access Control Vulnerability

This unresolved item documented the fact that in August 2001 an employee inadvertently entered the protected area with an incorrect badge. The inspectors reviewed the licensee investigation documented in Action Request 010801261. The inspectors determined that the licensee had performed a detailed root cause evaluation and implemented appropriate corrective actions to prevent recurrence of this deficiency. The inspectors concluded that no violation of regulatory requirements occurred because the setting on the hand geometry reader met the design requirements. Specifically, the

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licensee had established a setting that ensured with a 98 percent probability that personnel could not inadvertently enter the protected area.

4OA6 Meetings, including Exit

On April 22, 2004, the inspectors presented the inspection results to Mr. R. W. Waldo, Station Manager, and other members of licensee management who acknowledged the findings. The inspectors confirmed that proprietary information was not provided or examined during the inspection.

4OA7 Licensee-Identified Violations

The following violation of very low safety significance (Green) was identified by the licensee and is a violation of NRC requirements that meets the criteria of Section VI of the NRC Enforcement Policy, NUREG-1600, for being dispositioned as a non-cited violation.

- The Order for Compensatory Measures Related to Access Authorization Enhancements Applicable to Granting Unescorted Access, Section B.1.3.b.1.(i) specified, in part, credit checks must contain an inquiry to detect potential fraud or misuse of social security numbers or other financial identifiers. On December 12, 2003, the Access Authorization Manager learned from one of his contracted background investigation providers (ChoicePoint) that the extended inquiries had not been performed in all cases. The Access Authorization Manager was able to determine that 41 personnel had been granted unescorted access without first receiving the extended inquiries as required by the order. Immediate corrective actions were taken to get the extended inquiries completed on the 41 personnel by other background investigation providers, revealing no access denial information. This event was documented in the licensee's corrective action program as Action Request 040100053. When processed through the Physical Protection Significance Determination Process, this finding is only of very low safety significance because there was a vulnerability in Access Control; however, it did not involve a malevolent act and there were no similar finding in the last 4 quarters.

ATTACHMENT: SUPPLEMENTAL INFORMATION

PROPRIETARY INFORMATION
SUPPLEMENTAL INFORMATION

KEY POINTS OF CONTACT

Licensee personnel

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S. Blue, Supervisor 3, Fitness For Duty
J. Buck, Analyst 3, Business
J. Davila, Analyst 3, Business
M. Flannery, Manager, Access Authorization
P. Hollom, Alarm Station Operator
S. McMullen, Supervisor 3, Screening
G. Plumlee, Supervisor, Security Compliance
M. Watson, Shift Commander, Day Shift

NRC personnel

C. Osterholtz, Senior Resident Inspector

LIST OF ITEMS OPENED, CLOSED, AND DISCUSSED

Opened and Closed

05000361; 362/2004011-01 NCV Failure to log event (Section 3PP2)

Closed

05000361; 362/20001019-01 URI Potential Access Control Vulnerability (Section 40A5)

Discussed

None

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LIST OF DOCUMENTS REVIEWED

Section 3PP1: Access Authorization (71130.01)

Procedures

SOI123-IV-11.2, "Reporting Safeguards Events," Revision 6

SOI123-XII-18.19, "Supplier Audits," Revision 6

SOI123-XV-6, "SONGS Continual Behavior Observation Program (CBOP)," Revision 7

SOI123-XV-13, "1410 Access Authorization Process For Protected and Vital Area Entry,"
Revision 8

SOI123-XXIII-4.2, "Personnel Screening Programs For Unescorted Access," Revision 4

SOI123-XXIII4.3, "Screening Deficiencies Affecting Unescorted Access And Access To
Safeguards Information," Revision 2

SONGS Fitness For Duty Training, CBOP, Computer Based, current as of report

SONGS Fitness For Duty Training, Escort Level, Computer Based, current as of report

SONGS Fitness For Duty Training, Supervisor Level, Computer Based, current as of report

SONGS Fitness For Duty Training, Worker Level, Computer Based, current as of report

Condition Reports

AR040100053, AR040301908, AR040301908-02, AR030100621-18, AR040302439,
AR040302340, AR030701458, AR031201685-01, AR031201685-5, CAR S-1840,
AR040302340-2

Audits and Assessments

Audit of Baley Hinchey Downes and Associates Inc., Audit Report 2003-08

Audit of Creative Services, Dominion Vendor Programs Audit Report 2003-20

Audit of Interquest Northwest, Inc., Exelon Audit Number NE-48-2003

Audit of Wackenhut Corporation Background Investigation Program, FPL Audit Number
08.13.WACFL.03.1

NEI Joint Audit No. PA-03-03, Access Authorization and Fitness For Duty Programs

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Other

25 Unescorted Access Authorization Files
6 Fitness For Duty Lab Results Files
NEI 03-01, "Nuclear Power Plant Access Authorization Program"

Section 3PP1: Access Control (71130.02)

Procedures

SOI123-IV-4.4, "Lock and Key Issue, Control, and Accountability," Revision 8
SOI123-IV-4.5, "Security Lock and Key Repair and Replacement," Revision 2
SOI123-IV-5.1, "Protected Area and Vital Area Access," Revision 2
SOI123-IV-5.1.4, "Security Photo Identification Badge," Revision 1
SOI123-IV-5.3.3, "Security Processing Facility Search and Inspection," Revision 0
SOI123-IV-5.3.5, "Vehicle Search Facility/Area Search, Inspection and Vehicle Escort,"
Revision 1

Condition Reports

AR030100300, AR030100490, AR030100811, AR030101936, AR030202105, AR030601337,
AR030701484, AR031000344, AR031101277, AR031200483, AR040301908, AR040300649

Audits and Assessments

SONGS Audit No. SCES-010-03
SONGS Audit No. SCES-015-03
Leadership Observation Program Report January 2003 through March 2004
Security Division Self-Assessment Reports January through December 2003.

Section 3PP8: Fitness-for-Duty (71130.08)

Procedures

SDG-SO123-G-26, "Overtime/Holiday Staffing Guideline," Revision 4
SE(123)35-1, "Individual Work Hour Tracking Form," Revision 2
SOI123-IV-3.5, "Security Work Hours Management," Revision 0

Condition Reports

AR 04302340

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Other

Fatigue Training for Supervisors, Dated 11/5/2003

NEI Memorandum Entitled, "Security Officer Work Hours Compensatory Measures"

Order EA-03-038, "Issuance of Order for Compensatory Measures Related to Fitness-For-Duty Enhancements Applicable to Nuclear Facility Security Force Personnel"

Work Hours

Group for 6-week period 03/07/2004 through 04/18/2004

Group for 6-week period 01/25/2003 through 03/06/2004

20 individual Time Card Reports 03/07/2004 through 04/18/2004

20 individual Time Card Reports 01/25/2003 through 03/06/2004

Section 40A1: Performance Indicator Verification (71151)

Selected intrusion detection system out of service hours verified from September 2003 to February 2004