

DATE: 1/24/76
PAGE: 1
REF: 7C
TO: 99-76

mm/2

[REDACTED]

Security Contacts

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**ADMINISTRATION DEPARTMENT
CORRECTIVE ACTION DOCUMENT - TRACKING FORM**

ADMINISTRATION NO. ACR94-167 CLASS: B-PR

CONDITION REPORT No. 00-00-94-0969 PROBLEM REPORT No. 94-0969

REPORT DATE: 05-10-94 INVEST DUE: 06-12-94

ASSIGNED TO: [REDACTED] DATE ASSIGNED: 05-17-94

RETURN TO S. GANE BY DATE 5/27/94 RETURN DATE 6/7
TO WMH FOR REVIEW 6/7 BACK 6/7 TO JER FOR REVIEW 6/7 BACK _____

PROBLEM REPORT TRACKING

DOES PROBLEM REPORT REQUIRE ANY CLOSE OUT ITEMS? yes IF YES LIST BELOW

DOCUMENT TRACKING:

INVESTIGATION SENT TO SAFETY & ASSESSMENT: 6/9/94 RECEIPT: _____
TO PNSRC MEETING (DATE): _____ MTG No. 1795
TO SAFETY & ASSESSMENT: _____ RECEIPT: _____

CLOSE OUT DOCUMENT TRACKING:

	DESCRIPTION	DUE DATE	TO S&A/QA	S&A RECPT	QA APPRVE	CLOSED
#1	PSNRC-CRITIQUE	06-02-94			.	<u>6/2/94</u>
#2	PSNRC APPROVAL	06-09-94			.	<u>6/2/94</u>
#3	LER TO NRC	06-09-94				<u>6/9/94</u>

COMMENTS: FW TR FALSIFICATION THIS CR/PR REPORT CLOSED: _____

EXHIBIT 2
PAGE 1 OF 27 PAGE(S)

Condition Report Number 94-C.09

Page 1 of 1

Part A (Originator)

Reported By: [Redacted]

Department/Section Plant Protection

Report Date 5-10-94

Date/Time of Condition See attachment 1

Unit Affected:

☐ 1 ☐ 2 ☐ Both ☒ N/A

Condition Identification and Description

Description of Condition: A Review of Fire watch Tours performed by (Nicola Garrett) from November 17, 1993 through December 31, 1993 identified Twenty-Two Tours which could not be Verified as Complete via Cardreader Transactions or other Sources. Four of these Tours Exceeded the Tech. Spec. Requirement (3.7.10) for one hour fire watch patrols in 12/28/93, 12/30/93 and 12/31/93 (ESW pump rooms unit#).

The Remaining Tours were Violations of Administrative Procedures (12.04P 2276 Fire.001) which requires Tours be performed within max 30 minutes. This information was identified during a Review of 392 Tours initially evaluated in the Fire Protection Section.

Method of Discovery: Review of Fire Tours

Immediate Action Taken: Verified Tours were being performed as required.

Outage Management Notified:

Originator's Supervisor Review:

Supervisor's Comments:

Reference Documents:

References

QA/NSDRC Audit/Surv. Number _____
NRC Inspection Report/Finding Number _____
Specification(s) 3.7.10
Procedure Number(s) _____
Drawing Number(s) _____
Design Change Number _____
JO Number _____
Purchase Order _____
Code/Standard _____
Other (i.e., Previous P/Rs or C/Rs, etc.) _____

Equipment Involved:

☐ Yes ☒ No

Component FDB Identification Number:

Functional Name:

Key words: firewatch tours

A review of the fire watch tours performed by [REDACTED] from November 17th 1993 to December 31st 1993 was conducted by Erv Gerschoffer and the following discrepancies were found. 7C

- 11/27/93 0700 tour can not verify the check of the DRT3-323 Gate.
- 12/2/93 0600 tour can not verify, only an entry at DRT 5-842 door.
- 12/9/93 0700 tour can not verify the check of the DRT5-842 door.
- 12/10/93 2330 tour can not verify the check of the DRT3-323 Gate.
- 12/11/93 0530 tour can not verify the check of the DRT3-323 Gate.
- 12/14/93 0700 tour can not verify the check of the drA--486 Gate.
- 12/22/93 0000 tour can not verify the check of the DRT3-323 Gate.
- 12/24/93 0300 tour can not verify the check of the DRT3-323 Gate.
- 12/28/93 0030 tour can not verify the check of the DRT3-323 Gate.
- 12/28/93 0100 tour can not verify the check of the DRT3-323 Gate.
- 12/28/93 0630 tour can not verify the check of the DRT3-323 Gate.
- 12/30/93 0330 tour can not verify the check of the DRT3-444 Door.
- 12/30/93 0030 tour can not verify the check of the DRT3-323 Gate.
- 12/30/93 0100 tour can not verify the check of the DRT3-323 Gate.
- 12/30/93 0630 tour can not verify the check of the DRT3-323 Gate.
- 12/30/93 0700 tour can not verify the check of the DRT3-323 Gate.

12/31/93 0030 tour can not verify the check of the DRT3-323 Gate.

12/31/93 0100 tour can not verify the check of the DRT3-245 Door

12/31/93 0100 tour can not verify the check of the DRT3-323 Gate.

12/31/93 0430 tour can not verify the check of the DRT3-323 Gate.

~~12/31/93 0430 tour can not verify the check of the DRT-323 Gate.~~

12/31/93 0430 tour can not verify the check of the DRT3-245 Door.

12/31/93 0500 tour can not verify the check of the DRT3-323 Gate.


Erv

Initial Review by: [Signature] Date 3/10/99 Time 13:30

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Part D (CAG Review)

Transfer to AEPSC/Plant CAG

Date _____ Initial _____

Safety Related: ☒ Yes ☐ No

Potential to impact Fire Protection Documents: ☐ Yes ☒ No

Potential Environmental Qualification issue: ☐ Yes ☒ No

Backup Operability Determination Required: ☐ Yes ☒ No If Yes, Assigned to _____ Due _____

Risk H Uncertainty M Level of Root cause indicated by matrix B Level of Root Cause assigned A

To be Resolved Prior to: _____ or Mode Number _____
Time allotted for investigation 30 (Normally 15 days for High Risk, 30 to 45 days for Moderate Risk, and 30 days for Low Risk)

Investigation Due Date 6-12-94

Assigned to: [redacted] 12
Dept. [redacted] [redacted] [redacted]

Evaluation Team Leader: PRD

Evaluation Team Members: NSA OPR QA+C

Level of Review/Approval Required: ☒ Department Superintendent/Section Manager
☒ Assistant Plant Manager/Group Manager
☒ Plant Nuclear Safety Review Committee

CAG Comments C. OE COORDINATOR

- ☐ Documented discrepancy determined not to constitute an adverse condition
☐ Drawing discrepancy to be transferred to appropriate AEPSC Design organization for resolution

CAG Review by W2 Bof Date 5-13-94

PRELIMINARY REPORTABILITY REVIEW

Reportable to Offsite Agency(s): ☒ Yes ☐ No ☐ To Be Determined (Potentially Reportable)

☒ LER (Per 10CFR) Due Dates: PNSRC Critique 6-2-94 NRC 6-9-94
☐ INPO VIA HPES PNSRC Approval 6-4-94

☐ INPO VIA HPES☐ INPO VIA NETWORK

Other, To _____ Due Dates: PNSRC _____ Applicable Recipient _____

Licensing Activity Coordinator (AEPSC CAG) MB DATE 5-13-94

Comments _____

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Part E (Evaluator)

Investigation

See attached

See Operability Determination Sheet: ☐

Continuation Sheet: ☒

Subject event meets definition of Maintenance Rework: ☐ Yes ☒ No
If yes enter rework factor (a-m) which resulted in event: _____

Cause Description

See attached

Trending/Tracking
Data
Causal Factor Codes

SD 01 Primary
LS 22 Secondary
Possible

Human Behavioral
Factor Codes

Primary
Secondary
Possible

PRO Department in which
the inappropriate act occurred or
who's administrative controls should
have prevented the condition.

Continuation Sheet: ☒

Corrective Action

See attached

Continuation Sheet: ☒

Preventive Action

See attached

Continuation Sheet: ☒

Evaluator

[Redacted Signature]

Date

6/6/94

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Condition Report 94-0969

Investigation

During a routine review of tour records, ten percent of Technical Specification Fire Doors, Appendix A Fire Doors and Fire Watch (FW) tour records were reviewed for the months of November and December 1993, and January 1994. The review consisted of a comparison of the completed logs against the security computer door transaction records. (The review was restricted to locations equipped with cardreaders.) The review found five discrepancies attributed to four security officers and five discrepancies attributed to a single FW person. Four of the security officer discrepancies were attributed to a misunderstanding of the room to be toured. There was no intentional falsification of tour records. The officers simply toured the wrong area. The fifth discrepancy was attributed to a security officer touring the required area ten minutes prior to the required start time. The five remaining discrepancies were attributed to the FW at the Unit 1 Essential Service Water pump room (FDB door designation 1-GT-SCN212A-323) and could not be mitigated.

As a follow up to the initial record review, FW tour records generated by the FW responsible for the five discrepancies noted above for November 17 through December 31, 1993 were examined to determine the extent of the problem. Twenty-three total discrepancies were identified which are attributed to this individual. Of the 23 discrepancies three were determined to be Technical Specification 3.7.10 violations which occurred on 12/28/93 (one violation 0030 - 0130), 12/30/93 (one violation 0030 - 0130) and 12/31/94 (one violation 0030 - 0130).

Computer transaction records indicate that the FW was aware of the location of the tour points. The tour points identified as having been missed were visited by the FW during tour rounds completed prior to or on the dates of the discrepancies. FW training was completed. During an investigative interview, the FW accurately described the requirements for conducting a FW tour. There were no conflicting assignments which would have prevented visiting all of the required tour points during the scheduled rounds. The FW also stated during the interview, that all required tour points were checked. The FW to which these events are attributed is no longer at Cook Plant.

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Two of the violations initially documented on the Condition Report were resolved because personnel trained as FW had entered the area within the required time frame based upon Technical Specification bases 3/4.0 paragraph 4.0.2 which allows a maximum extension not to exceed 25% of the specified surveillance interval. The areas resolved in this way are the Unit 1 Essential Service FeedWater Pump Room (ESW FDB door designation 1-GT-SCN212A-323) on 12/30/93 between 0630 and 0730 and on 12/31/93 between 0430 and 0530. One additional violation attributed to the FW was identified during this investigation. That violation was the ESW pump room on 12/31/93 from 0030 to 0130. This additional violation is reference in the text above.

Based upon the results of the initial review an additional ten percent of Technical Specification Doors, Appendix A Doors and FW tour records for the months of December 1993, and January and February 1994 were reviewed (increasing the original 10% to 20% for the months of December, 1993 and January, 1994). The results of the second review are contained in Attachment A of this investigation. The expanded review identified an additional Technical Specification 3.7.10 violation which occurred on 2/23/94 for the Unit 1 CD Diesel Generator Room between 2230 and 2330. This FW is no longer working at Cook Plant. No additional investigation is warranted.

No additional investigation is warranted in that, the reviews conducted have identified the programmatic concerns, and adequate corrective/preventative actions were identified. Further, the items identified verse the sample size reviewed are not considered ineffective per Military Standard 105d.

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Background

PMI 2270 Fire Protection implements the requirement for FW tours to compensate for:

- inoperable fire barriers or fire barrier sealing devices
- inoperable fire doors
- inoperable Tech Spec related fire doors
- inoperable fire dampers
- non-functional cable tray or conduit fire protective material
- non-functional gap seals

The organization controlling the FW contractor is responsible for training contractor personnel in requirements of PMI 2270 or ensuring that the contractor has implemented a training program.

12 SHP 2270 FIRE.011 "Fire Watch Activities", provides for control and qualification of FW activities and establishes controls for Technical Specification compensatory measures and welding, burning, grinding Fire Watches.

The 12 SHP FIRE.011 is implemented by an onsite contractor specifically hired to provide onsite FW services. The SHP provides guidance on FW requirements.

The SHP assigns responsibility to the contractor to:

- a. Perform training in accordance with attachments 6 and 7 of the procedure.
- b. Assure all contractor Fire Watches are properly trained in their duties in conformance with an approved training program.
- c. Maintain documented evidence of the training.
- d. Ensure the prompt and timely posting of all required Fire Watches.
- e. Ensure only qualified Tech Spec Fire Watches are posted.
- f. Assure posted Fire Watches properly discharge duties.
- g. Conduct at least one surveillance per shift to assure Fire Watches discharge duties.

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- h. Coordinate multiple Fire Watches in an area to assure proper coverage is maintained.
- i. Fill out Fire Watch log for each posting.
- j. Review all completed Fire Watch logs.
- k. Review and approve all Fire Watch logs.
- l. Transmit completed Fire Watch logs to plant Fire Protection Coordinator.
- m. Resolve questions or problems reported by Fire Watch personnel.
- n. Be responsible for proper operation of Fire Watch systems.

Management direction for monitoring of contractor FW activities is initiated by SASO .018 Fire Watch Activity Verification. The SASO requires a quarterly random check of FW activities to verify that FW tours and posts are being conducted as required. The SASO allows the random checks to be accomplished by a review of security door transaction records or in-plant observations to verify the FW had arrived at the required area within the specified time.

Concerns

The investigation identified several areas of concern with the management of the FW tour activities, as follows:

1. 12 SHP 2270 FIRE.011 is unclear as to what constitutes an approved FW training program. There are no stated responsibilities for review and approval of training program materials. At the time of this event there was no periodic I&M monitoring of the training provided by the contractor to FW personnel.
2. The FW qualification process appears to be weak. There was no required supervisory monitoring of the On-The-Job Training to ensure training was adequate for it's intended purpose.
3. At the time of this event, interviews indicate shift tour surveillances were being conducted by contract supervision, However, licensee oversight was not conducted.

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4. The instruction (SASO.018) implementing the quarterly monitoring of FW tours does not state requirements for sample size or acceptance criteria to ensure the FW tours are being properly implemented.
5. The current practice of generating tour log data sheets by hand increases the opportunity for transcription and legibility errors.
6. The method of identifying inoperable seals is inadequate. Presently, the seal number is written on masking or duct tape and placed on the floor. Normal foot traffic and cleaning activities degrade the tape and number over time.
7. No guidance/standards exist as to the purpose for reviewing and approving FW logs. There is no stated purpose for the review of FW tour logs or the criteria used for approving logs.
8. FW supervisor responsibilities relative to FW systems operation are not stated. It is unclear as to the intent of this responsibility as currently stated in 12 SHP 2270 FIRE.011.
9. The investigation identified situations where FW personnel did not have appropriate security cardreader access to areas to be toured.
10. The team believes there have been cases where FW personnel were confused over the difference between the Technical Support Center (TSC) and the TSC Computer Room. There also appears to have been confusion between the UPS Battery Room and the UPS Battery Inverter Room based upon FW interviews and computer transaction logs.
11. There was an accepted practice of signing off an area toured by another FW or Security Officer.

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Root Cause

Based upon the existing evidence noted during this investigation and the concerns identified, the primary root cause for the three Technical Specification 3.7.10 violations is 50.01, a failure of a Fire Watch to perform the required task. A secondary cause is 13.20 Management follow-up or monitoring of activities did not identify problems. No security computer problems were identified which would have caused the door transaction records to be incomplete.

No hardware or maintenance activities could be identified which would have caused the security computer door transaction records to be incomplete.

Corrective Actions Taken

1. FP.004 Administrative Guideline to Monitor Fire Protection Tour/Surveillance was developed to establish a ten percent random monitoring program for FW tours.
2. The Security Cardreader access status for all Fire Watches has been changed to allow entry into all areas on the FW tours.
3. The FW contractor has issued a memo to all FW personnel directing them to contact security immediately if the security cardreader will not grant entry into a location to be toured.
4. Meetings were held during May 1994 with FW and Security personnel to outline expectations and the significance of falsification of tour activities.

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Preventive Actions

The following actions address the concerns identified during this investigation and if implemented should prevent recurrence.

1. Delineate in an appropriate procedure, the responsibilities of I & M personnel for the review and approval of the FW training program, to include lesson plan content, format and the FW qualification process.
2. Develop and implement a formalized OJT process (for each of the responsibilities of a FW) to address specific plant layout and terminology. Included in this process should be a clear understanding of management expectations for FW duties, standardized minimum plant knowledge, plant layout, and terminology which is to be demonstrated by all potential Fire Watches.
3. Develop and implement a method of generating the tour log sheets to ensure clarity and consistency of the entries.
4. Evaluate the adequacy of the method currently used to identify inoperable seals.
5. Revise the department procedure which controls FW activities to:
 - Define what is meant by the review/approval of FW logs.
 - Define the parameters the supervisor must verify to indicate proper performance of the tour.
 - Reference the FW tour log in the procedure text.
 - Require a printed name and initials on tour log sheets.
 - State the specific FW supervisor responsibilities relative to FW systems operation.
 - Define how tour points are to be added and subtracted during a shift.
 - Revise the tour sheet to include:
 - * Tour Point and location
 - * Reason for tour (inoperable Gap Seal)
 - * Requirement for proper tour (enter area, check for smoke and fire, ensure entry/exit cardreader transactions are obtained)

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Attachment A

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The following results have been compiled after a review of Ten Percent of all Technical Specification Fire Doors and Appendix "A" Fire Door inspection logs and FW Tour logs from Dec 1, 1993 through Feb. 28, 1994. The review was conducted by comparing verifiable computer cardreader transactions against the hard copy logs of tour points to validate if the individual documenting the check was in the area.

A Total of 135 Technical Specification Fire Door and Appendix "A" Fire Door Tours were reviewed. Of those, no discrepancies were identified.

A total of 1,232 FW Tours and 4,674 individual tour points were reviewed. Of those 6 concerns, 10 procedure violations and 2 Technical Specification Violations were identified. The categories below outline those results.

CONCERNS

[REDACTED] 1/31/94

1800 tour of the Unit 1 CD Diesel Generator Room. Tour was documented as being complete by [REDACTED]. Computer transaction logs indicate [REDACTED] was not in the area at the time check were documented as being complete. Computer transaction logs do show [REDACTED] in the area who was qualified to make the check. Concern is poor documentation practices exist. 76

[REDACTED] 2/16/94

0530 and 0600 tours of the Technical Support Center. Tours documented as complete by [REDACTED]. Computer transaction logs indicate [REDACTED] was not in the area at the time the checks were documented as being made. Computer transaction logs indicate FW [REDACTED] and [REDACTED] were in the area at the time the checks were required. Same documentation concern as noted above. 76

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[REDACTED] 2/9/94

0930 tour of the Unit 2 605' Gap Seal 374 G-69 (Divers Room) Tour was documented as complete by [REDACTED]. Computer Transaction logs indicate [REDACTED] was not in the area at the time the check was documented as made. Computer transaction logs do show [REDACTED] in the area during the period in question who was qualified to make the tour. It is unknown if [REDACTED] coordinated the check with [REDACTED]. If the tour was completed by [REDACTED] at the request of [REDACTED] or Supervision, poor documentation practices exist. 76

[REDACTED] 2/9/94

1330 tour of the Unit 2 591' UPS Battery Room. Tour was documented as complete by [REDACTED]. Computer transaction logs indicate [REDACTED] was not in the area at the time the check was documented as made. Computer transaction logs do show [REDACTED] in the area who was qualified to make the check. Same documentation concern as noted above. 76

[REDACTED] 2/23/94

1300 tour of the Unit 1 4-KV Switchgear Room. Tour was documented as complete by [REDACTED]. Computer Transaction logs indicated [REDACTED] was not in the area at the time check was documented as made. Computer transaction logs do show [REDACTED] in the area who was qualified to make the check. Same documentation concern as noted above. During an interview with [REDACTED] no explanation for the missed tour point could be identified. 76

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[REDACTED] 2/23/94

1400, 1430 and 1500 tours of the Technical Support Center. Tours were documented as complete by [REDACTED]. Computer transaction logs indicated [REDACTED] was not in the area at the time checks were documented as made. Computer transaction logs do show [REDACTED] and [REDACTED] in the area who were qualified to make the checks. Same documentation concern as noted above.

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PROCEDURE VIOLATIONS

The following are violations of 12 SHP 2270 Fire.011. Section 5.0, paragraph 5.1, effective date of issue 3/26/92.

[REDACTED] 1/14/94

0030 tour of the Unit 1 Essential Service Feedwater Pump Room. Tour was documented as complete by [REDACTED]. Computer transaction logs indicate [REDACTED] was not in the area at the time the check was documented as being made. Computer transaction logs further indicate there was no violation of Technical Specifications as tour had been completed within the one hour requirement. During an interview with [REDACTED] no explanation for the missed tour point could be identified.

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() 1/25/94

0200 tour of the Unit 2 4-KV Switchgear Room. Tour was documented as complete by . Computer transaction logs indicate was at the 4-KV Room Turbine door entry point at 0200 hours. However, in reviewing computer transaction logs, it appears the proper entry was not made to perform the required check. The check requires a tour of all the affected areas within the 4-KV Room. 76

Computer transaction logs indicate no entries to the area from 0129 to 0242 hours thereby exceeding one hour Technical Specifications requirement 3.7.10. However, a 25% grace is provided in the Technical Specification bases 3/4.0 (4.0.2) which grants a maximum allowable extension not to exceed 25% of the specified surveillance interval. The time frame involved was 1 hour and 13 minutes. therefore, no violation of Technical Specifications occurred.

() 1/31/94

1830 tour of the UPS Battery Room. Tour was documented as complete by . Computer transaction logs at 1839 hours indicate was at the area but, may not have had the proper access level to enter the room (computer procedure violations were recorded). Therefore, the check was not properly made. Check not required by Technical Specifications. 76

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([REDACTED]) 1/31/93

1530 tour of the UPS Battery Room. Tour was documented as complete by [REDACTED]. Computer transaction logs indicate [REDACTED] was not in the area at the time the check was documented as complete. However, [REDACTED] was verified as being in the area of the UPS Battery Inverter Room at the correct time. Computer transaction logs further indicate [REDACTED] made his next tour between 1600 and 1630 at the UPS Battery Room and the UPS Battery Inverter Room. The UPS Battery Inverter Room was not listed as a required check on the tour sheet. This indicates [REDACTED] was not sure of the proper tour point. Thereby checking both areas on the second tour to ensure the point was covered. ✓

During a interview with [REDACTED] it was confirmed the check had not been made. Only after a Security Officer questioned [REDACTED] did he realize the error. [REDACTED] stated his supervisor was notified of the incident. However, he was unaware of any or follow up action which may have been taken regarding the notification. Check not required by Technical Specifications. 7C

([REDACTED]) 2/9/94

0230 and 0300 tours of the Technical Support Center. Tour was documented as completed by [REDACTED]. Computer transaction logs indicate [REDACTED] was not in the area at the time checks were documented as being made. Checks not required by Technical Specifications. ✓

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[REDACTED] 2/9/94

1030 and 1100 tours of the UPS Battery Room. Tours were documented as complete by [REDACTED]. Computer transaction logs indicate [REDACTED] was not in the area at the time checks were documented as being made. Checks not required by Technical Specifications. K

[REDACTED] 2/9/94

1530 tour of the UPS Battery Room. Tour documented as complete by [REDACTED]. Computer transaction logs indicate [REDACTED] was not in the area at the time checks were documented as being made. Check not required by Technical Specifications. K

[REDACTED] 2/16/94

0230, 0300, 0330 and 0400 tours of the Technical Support Center. Computer transaction logs indicate [REDACTED] was not in the area at the time the checks were documented as being made. Computer transaction logs do indicate [REDACTED] as being in the area at the time the 0230 tour was required. No other personnel were identified as being in the area during the 0300, 0330 and 0400 time frame. Check not required by Technical Specifications. K

[REDACTED] 2/23/94

1830 and 1900 tour of the Technical Support Center. Tours were documented as complete by [REDACTED]. Computer transactions logs indicate [REDACTED] was not in the area at the time checks were documented as being made. Checks not required by Technical Specifications. K

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[REDACTED] 2/23/94

0830 tour of the Technical Support Center. Tour was documented as complete by [REDACTED] Computer transaction logs indicate an entry at the door but no exit. Check not required by Technical Specifications. 76

TECHNICAL SPECIFICATION VIOLATION

[REDACTED] 2/23/94

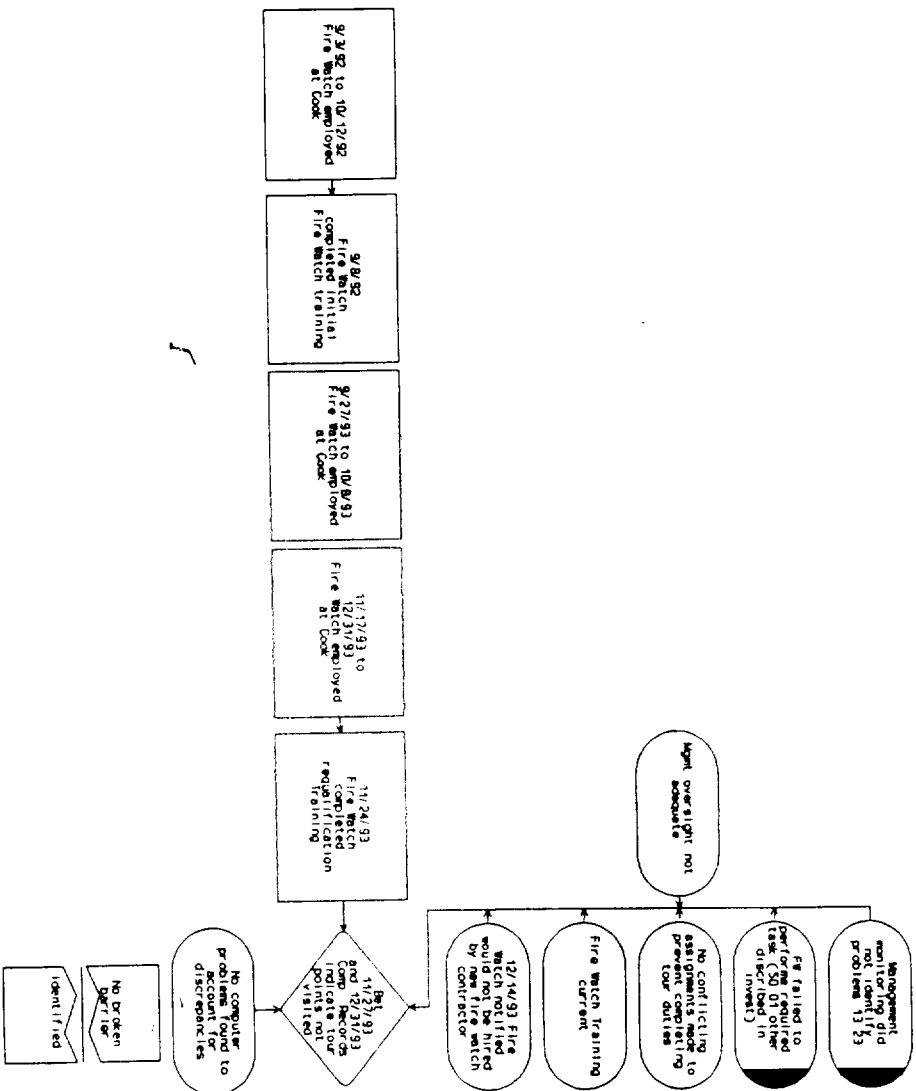
2230 and 2300 tours of the Unit 1 CD Diesel Generator Room. Tours were documented as complete by [REDACTED] Computer transaction logs indicate [REDACTED] was not in the area at the time checks were documented as being made. Computer transaction logs show no other personnel in the area from 2215 to 2337 thereby exceeding Technical Specification 3.7.10 by 22 minutes and the Tech Spec Bases 3/4.0 (4.0.2) by 7 minutes. 76

[REDACTED] 12/31/94

0030 and 0100 tour of the Essential Service FeedWater Pump Room. Tour was documented as being complete by [REDACTED] Computer transaction logs indicate [REDACTED] was not in the area at the time checks were documented as complete. Computer transaction logs further indicate no other personnel in the area from 0008 to 0136 thereby exceeding the Technical Specification 3.7.10 by 28 minutes and the Tech Spec Bases 3/4.0 (4.0.2) by 13 minutes. • 76

All individuals identified within this attachment, with the exception of those who have been noted as being interviewed, are no longer employed at Cook Plant. No attempt was made to contact terminated employees with the exception of [REDACTED] who was interviewed in regards to the original Tech. Spec. violations listed in this Condition Report. 76

C/R 94-0969



Condition Report Number 94-0969

Part F (Commitments)

LER No.	Mode	Concur	Dept./Sec.	Due Date	Complt. Date
	<i>N/A</i>		<i>PRO</i>	<i>6-9-94</i>	<i>6-9-94</i>
Job Order No.	Mode	Concur	Dept./Sec.	Due Date	Complt. Date
<i>N/A</i>				<i>;</i>	
Procedure No.	Mode	Concur	Dept./Sec.	Due Date	Complt. Date
<i>REVISE 12 SHP 2270 FIRE-011</i>			<i>PRO</i>	<i>7-15-94³²⁹ 9-30-94</i>	<i>9-3-94</i>
Drawing No.	Mode	Concur	Dept./Sec.	Due Date	Complt. Date
<i>N/A</i>					
Design Change No.	Mode	Concur	Dept./Sec.	Due Date	Complt. Date
<i>N/A</i>					
Specification No.	Mode	Concur	Dept./Sec.	Due Date	Complt. Date
<i>N/A</i>					
Purchase Order No.	Mode	Concur	Dept./Sec.	Due Date	Complt. Date
<i>N/A</i>					
AEP: NRC No.	Mode	Concur	Dept./Sec.	Due Date	Complt. Date
<i>N/A</i>					
Other	Mode	Concur	Dept./Sec.	Due Date	Complt. Date
<i>Develop AND IMPLEMENT OT LESSON PLAN.</i>	<i>N/A</i>		<i>PRO</i>	<i>7-31-94</i>	<i>6-15-94</i>
<i>IMPLEMENT Computerized TOUR program</i>	<i>N/A</i>		<i>PRO</i>	<i>12-31-94</i>	
<i>Evaluate SEAL I.D. SYSTEM</i>	<i>N/A</i>		<i>PRO</i>	<i>7-31-94</i>	<i>7-28-94</i>

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Part G (Investigation Approval)

- | | | | |
|---|--|------------------------------|--|
| <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 1. Investigation is Sufficient To Determine Root Cause |
| <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 2. Corrective Actions Taken To Remedy Symptoms of Problem |
| <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 3. Preventive Actions Taken To Preclude Recurrence of Cause |
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> N/A | 4. Investigation Reveals Potential Outside Agency Notification Required (10CFR21, INPO, Network, etc.) |
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> N/A | 5. Operability Determination Indicates Inoperable Component |
| <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 6. Investigation Adequately Addresses Regulatory Significance And Safety Impact |
| <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 7. Trending/Tracking Data Correctly Reflects Root Cause |
| <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 8. Concurrence Obtained For All Open Items |
| <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A | 9. CR Forms Are Filled Out Properly |

Department Superintendent/Section Manager [Redacted]

Date 6/7/94

Final Reportability (AEPSC Only) _____

Date _____

Final Disposition Approval [Signature]

Date 6/8/94

Part H - QA/NSDRC/Verification (Audit/Surveillance Findings)

Disposition Approved

☐ Yes ☐ No (New CR No. _____) Reviewer _____ Date _____

Corrective/Preventive Action Complete

☐ Yes ☐ No (New CR No. _____) Reviewer _____ Date _____

Part I (PNSRC Review)

Approved ☒ Yes ☐ No

PNSRC Meeting # 2795 Date 6-9-94

Comments _____

Approved ☐ Yes ☐ No

PNSRC Meeting # _____ Date _____

Comments _____

Approved ☐ Yes ☐ No

PNSRC Meeting # _____ Date _____

Comments _____

1. The first part of the document is a letter from the President of the United States to the Congress, dated January 1, 1861. It is a very important document, as it sets out the policy of the new administration.

2. The second part of the document is a report from the Secretary of the Treasury, dated January 1, 1861. It contains a detailed account of the financial state of the country at the beginning of the year.

3. The third part of the document is a report from the Secretary of the Interior, dated January 1, 1861. It contains a detailed account of the state of the public lands and the progress of the various departments under his control.

4. The fourth part of the document is a report from the Secretary of the Navy, dated January 1, 1861. It contains a detailed account of the state of the navy and the progress of the various departments under his control.



Date August 1, 1994
Subject Condition Reports 94-912 and 94-969 commitment extension request

From S.R. Gane 529
To [REDACTED] 8/1/94
PNSRC 2804

Condition Reports 94-912 and 94-969 both contain a committed action to revise 12 SHP 2270.FIRE.011 as a part of the preventive actions. Due to work load and re-assignment of duties/responsibilities within the Plant Protection Department the committed date of 7/15/94 can not(was not) be met. It is requested the new commitment date for both Condition Reports be extended to 9/30/94.

Interim actions have been in place and this extension will not adversely impact the overall event.

No previous extensions have been requested/granted for either of these Condition Reports.

It is noted both Condition Reports resulted in Licensee Event Reports, however, neither LER identifies specific dates or commitments for the revision of 12 SHP 2270.FIRE.011.