

Allegation No.: RI-2003-A-0018
Site/Facility: Hope Creek
ARB Date: 2/5/03

Branch Chief (AOC): Meyer
Acknowledged: N/A
Confidentiality Granted: N/A

Issue discussed: During a December 2002 SSDI, the NRC staff suspects that PSEG managers may have made statements that indicated that certain EDG surveillance testing had been completed, when in fact, it had not been completed in accordance with the Technical Inspection. These statements would have constituted a violation of 10 CFR 50.9 which requires licensees to provide complete and accurate information to the NRC. This information was material because it was needed by NRC to verify that certain EDG surveillance testing had been completed satisfactorily to prove EDG operability.

Alleger contacted prior to referral to licensee (if applicable)? NA

ALLEGATION REVIEW BOARD DECISIONS

Attendees: Chair - Rogge Branch Chief (AOC) - Meyer SAC - Vito
OI Rep. - Wilson, Teator RI Counsel - Fewell
Others - Holody, Pindale, Barber, Crlenjak

DISPOSITION ACTIONS: (List actions for processing and closure. Note responsible person(s), form of action closure document(s), and estimated completion dates.)

- 1) OI open a case on potential wrongdoing (1-2003-014). DRP/DRS to provide technical assistance as needed.

Responsible Person: Wilson
Closure Documentation: _____

ECD: TBD
Completed: _____

- 2) DRP to provide draft NOV and provide to OI and SAC.

Responsible Person: Meyer
Closure Documentation: _____

ECD: 2/7/03
Completed: _____

SAFETY SIGNIFICANCE ASSESSMENT: The risk significance of this concern appears low since the required testing has already been completed.

PRIORITY OF OI INVESTIGATION: HIGH - upper management knowledge

If potential discrimination or wrongdoing and OI is not opening a case, provide rationale here (e.g., no prima facie, lack of specific indication of wrongdoing):
Rationale used to defer OI discrimination case (DOL case in progress):

ENFORCEMENT STATUTE OF LIMITATIONS CONSIDERATION (only applies to wrongdoing matters (including discrimination issues) that are under investigation by OI, DOL, or DOJ):

What is the potential violation and regulatory requirement? _____

When did the potential violation occur? _____
(Assign action to determine date, if unknown)

Once date of potential violation is established, SAC will assign AMS action to have another ARB at four (4) years from that date, to discuss enforcement statute of limitations issues.

ARB MINUTES ARE REVIEWED AND APPROVED AT THE ARB

129
6'

NOTES: (Include other pertinent comments. Also include considerations related to licensee referral, if appropriate. Identify any potential generic issues)

OI will initiate an investigation to determine whether the licensee's failure to shut down the facility (on 12/14/02) after not completing the required TS surveillance requirement within 24 hours, was a deliberate violation. The basis for suspecting that the failure to shutdown may have involved wrongdoing includes the fact the NRC clearly informed the licensee on 12/13/02 that they had to complete TS 4.8.1.1.2.h.14(a-c), and the licensee had not completed (c) yet continued to operate until 12/18-19/02.

Distribution: Panel Attendees, Regional Counsel, OI, Responsible Individuals (original to SAC)