

# ACCELERATED DISTRIBUTION DEMONSTRATION SYSTEM

## REGULATORY INFORMATION DISTRIBUTION SYSTEM (RIDS)

ACCESSION NBR:9007240200 DOC.DATE: 90/07/20 NOTARIZED: NO DOCKET #  
 FACIL:STN-50-528 Palo Verde Nuclear Station, Unit 1, Arizona Publi 05000528  
 AUTH.NAME AUTHOR AFFILIATION  
 BRADISH,T.R. Arizona Public Service Co. (formerly Arizona Nuclear Power  
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 RECIP.NAME RECIPIENT AFFILIATION

SUBJECT: LER 90-009-00:on 900620,failure to satisfy medical  
 requirement for operator license.

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 TITLE: 50.73/50.9 Licensee Event Report (LER), Incident Rpt, etc.

NOTES:

05000528

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EXTERNAL:	EG&G BRYCE,J.H	3 3	L ST LOBBY WARD	1 1
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Arizona Public Service Company  
PALO VERDE NUCLEAR GENERATING STATION  
P.O. BOX 52034 • PHOENIX, ARIZONA 85072-2034

JAMES M. LEVINE  
VICE PRESIDENT  
NUCLEAR PRODUCTION

192-00680-JML/TRB/KR  
July 19, 1990

U. S. Nuclear Regulatory Commission  
Document Control Desk  
Washington, DC 20555

Dear Sirs:

Subject: Palo Verde Nuclear Generating Station (PVNGS)  
Unit 1  
Docket No. STN 50-528 (License No. NPF-41)  
Licensee Event Report 90-009-00  
File: 90-020-404

Attached please find Licensee Event Report (LER) No. 90-009-00 prepared and submitted pursuant to 10CFR50.73. In accordance with 10CFR50.73(d), we are herewith forwarding a copy of the LER to the Regional Administrator of the Region V office.

If you have any questions, please contact T. R. Bradish, Compliance Manager at (602) 393-2521.

Very truly yours,



JML/TRB/KR/dmn

Attachment

cc: W. F. Conway (all with attachment)  
J. B. Martin  
D. H. Coe  
T. L. Chan  
A. C. Gehr  
A. H. Gutterman  
INPO Records Center

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## LICENSEE EVENT REPORT (LER)

ESTIMATED BURDEN PER RESPONSE TO COMPLY WITH THIS INFORMATION COLLECTION REQUEST: 50.0 HRS. FORWARD COMMENTS REGARDING BURDEN ESTIMATE TO THE RECORDS AND REPORTS MANAGEMENT BRANCH (P-530), U.S. NUCLEAR REGULATORY COMMISSION, WASHINGTON, DC 20555, AND TO THE PAPERWORK REDUCTION PROJECT (3150-0104), OFFICE OF MANAGEMENT AND BUDGET, WASHINGTON, DC 20503.

FACILITY NAME (1)  
Palo Verde Unit 1

DOCKET NUMBER (2)  
0 5 0 0 0 5 2 8

PAGE (3)  
1 OF 06

TITLE (4)  
Failure to Satisfy Medical Requirement For Operator's License

EVENT DATE (5)			LER NUMBER (6)			REPORT DATE (7)			OTHER FACILITIES INVOLVED (8)	
MONTH	DAY	YEAR	YEAR	SEQUENTIAL NUMBER	REVISION NUMBER	MONTH	DAY	YEAR	FACILITY NAMES	DOCKET NUMBER(S)
06	20	90	90	009	000	07	20	90	Palo Verde Unit 2	0 5 0 0 0 5 2 9
									Palo Verde Unit 3	0 5 0 0 0 5 3 0

OPERATING MODE (9) 3

POWER LEVEL (10) 0 0 0

THIS REPORT IS SUBMITTED PURSUANT TO THE REQUIREMENTS OF 10 CFR §: (Check one or more of the following) (11)

20.402(b)	20.405(c)	50.73(a)(2)(iv)	73.71(b)
20.405(a)(1)(i)	50.36(c)(1)	50.73(a)(2)(v)	73.71(c)
20.405(a)(1)(ii)	50.36(c)(2)	50.73(a)(2)(vii)	OTHER (Specify in Abstract below and in Text, NRC Form 366A)
20.405(a)(1)(iii)	X 50.73(a)(2)(i)	50.73(a)(2)(viii)(A)	
20.405(a)(1)(iv)	50.73(a)(2)(ii)	50.73(a)(2)(viii)(B)	
20.405(a)(1)(v)	50.73(a)(2)(iii)	50.73(a)(2)(ix)	

## LICENSEE CONTACT FOR THIS LER (12)

NAME  
T. R. Bradish, Compliance Manager

TELEPHONE NUMBER  
AREA CODE 6 0 2 3 9 3 - 2 5 2 1

## COMPLETE ONE LINE FOR EACH COMPONENT FAILURE DESCRIBED IN THIS REPORT (13)

CAUSE	SYSTEM	COMPONENT	MANUFACTURER	REPORTABLE TO NRC	CAUSE	SYSTEM	COMPONENT	MANUFACTURER	REPORTABLE TO NRC

## SUPPLEMENTAL REPORT EXPECTED (14)

YES (If yes, complete EXPECTED SUBMISSION DATE) ☐ NO ☒

EXPECTED SUBMISSION DATE (15)

MONTH	DAY	YEAR

## ABSTRACT (Limit to 1400 spaces, i.e., approximately fifteen single-space typewritten lines) (16)

On June 20, 1990, at approximately 1530 MST, Palo Verde Unit 1 was in Mode 3 (HOT STANDBY), Palo Verde Unit 2 was in Mode 5 (COLD SHUTDOWN), and Palo Verde Unit 3 was in Mode 1 (POWER OPERATION) when review of the reactor operator license holders' biennial medical examination documentation identified that several license holders had not received biennial medical reexaminations in accordance with 10CFR55.21 and some medical examinations did not exactly follow the guidance contained in ANSI/ANS-3.4-1983, "Medical Certification and Monitoring of Personnel Requiring Operator Licenses for Nuclear Power Plants."

The root cause of the event is that an adequate tracking system for reactor operator biennial medical reexamination did not exist. In addition, Medical Department personnel performing medical examinations did not exactly follow the guidance of ANSI/ANS-3.4-1983. As corrective action, the affected reactor operators were removed from licensed activities and received medical reexaminations prior to resuming licensed activities. Also, administrative procedures are being developed to delineate the requirements necessary in order to fully comply with 10CFR55.21 and 55.25.

There have been no previous similar events reported pursuant to 10CFR50.73.



LICENSEE EVENT REPORT (LER)  
TEXT CONTINUATION

ESTIMATED BURDEN PER RESPONSE TO COMPLY WITH THIS INFORMATION COLLECTION REQUEST: 600 HRS. FORWARD COMMENTS REGARDING BURDEN ESTIMATE TO THE RECORDS AND REPORTS MANAGEMENT BRANCH (P-530), U.S. NUCLEAR REGULATORY COMMISSION, WASHINGTON, DC 20555, AND TO THE PAPERWORK REDUCTION PROJECT (3150-0104), OFFICE OF MANAGEMENT AND BUDGET, WASHINGTON, DC 20503.

FACILITY NAME (1)	DOCKET NUMBER (2)	LER NUMBER (6)			PAGE (3)		
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Palo Verde Unit 1	0 5 0 0 0 5 2 8	9 0	— 0 0 9	— 0 0	0 2	OF 0 6	

TEXT (If more space is required, use additional NRC Form 366A's) (17)

## I. DESCRIPTION OF WHAT OCCURRED:

## A. Initial Conditions:

On June 20, 1990, at approximately 1530 MST, Palo Verde Unit 1 was in Mode 3 (HOT STANDBY) at normal operating temperature and pressure; Palo Verde Unit 2 was in Mode 5 (COLD SHUTDOWN) with Reactor Coolant System (RCS)(AB) at approximately 145 degrees Fahrenheit and approximately 95 pounds per square inch-absolute, and Palo Verde Unit 3 was in Mode 1 (POWER OPERATION) at approximately 100 percent power.

## B. Reportable Event Description (Including Dates and Approximate Times of Major Occurrences):

Event Classification: Condition prohibited by the PVNGS Technical Specification Section 6.0, "Administrative Controls."

On June 20, 1990, a review of the reactor operator license holders' biennial medical examination documentation identified that several license holders (utility, licensed) had not received biennial medical reexaminations in accordance with 10CFR55.21 and some medical examinations did not exactly follow the guidance contained in ANSI/ANS-3.4-1983, "Medical Certification and Monitoring of Personnel Requiring Operator Licenses for Nuclear Power Plants." Subsequently, an independent investigation of this event was conducted in accordance with the PVNGS Incident Investigation Program. As part of the investigation, the Medical Department personnel (utility, non-licensed) reviewed each current license holder's medical file back to 1987 to ensure that each license holder had received a medical examination conforming to the regulations in 10 CFR55.21, 55.23, and 55.27. The results of the investigation were as follows:

Thirty-nine (39) license holders, who were determined to have current medical examinations, were found to have not been in conformance with 10CFR55.21 [i.e., the interval between previous medical examinations exceeded the two year (biennial) requirement] at some time since 1987.

Nine (9) license holders' were found not to be in conformance with 10CFR55.21 as they had exceeded the two year (biennial) medical examination requirement.

Six (6) license holders, who were determined to have current medical examinations, were found to have not been in





LICENSEE EVENT REPORT (LER)  
TEXT CONTINUATION

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DOCKET NUMBER (2)

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TEXT (If more space is required, use additional NRC Form 366A's) (17)

conformance with 10CFR55.33 upon initial license issuance. The medical examinations conducted as part of their initial application were found to be incomplete as they did not include all requirements of ANSI/ANS-3.4-1983.

Two (2) licensed holders were found not to be in conformance with 10CFR55.33 as they did not have a currently valid medical examination and were not yet due to receive their first biennial medical examination following license issuance. The medical examinations conducted as part of their initial application were found to be incomplete as they did not include all requirements of ANSI/ANS-3.4-1983.

One (1) license holder did not meet the requirements of 10CFR55.33(a)(1).

- C. Status of structures, systems, or components that were inoperable at the start of the event that contributed to the event:

Not applicable - no structures, systems, or components were inoperable at the start of the event which contributed to this event.

- D. Cause of each component or system failure, if known:

Not applicable - no component or system failures were involved.

- E. Failure mode, mechanism, and effect of each failed component, if known:

Not applicable - no component failures were involved.

- F. For failures of components with multiple functions, list of systems or secondary functions that were also affected:

Not applicable - no component failures were involved.

- G. For a failure that rendered a train of a safety system inoperable, estimated time elapsed from the discovery of the failure until the train was returned to service:

Not applicable - no failures were involved which rendered a train of a safety system inoperable.



LICENSEE EVENT REPORT (LER)  
TEXT CONTINUATION

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TEXT (If more space is required, use additional NRC Form 366A's) (17)

## H. Method of discovery of each component or system failure or procedural error:

Not applicable - there have been no component or system failures or procedural errors identified.

## I. Cause of event

An independent investigation of this event has been conducted in accordance with the PVNGS Incident Investigation Program. As part of the investigation, a determination of the cause of the event was performed. The investigation determined that the root causes are as follows:

No integrated program existed that assigned the responsibility or accountability (to a single person or group) to maintain license holders' medical requirements current. In addition, an adequate system did not exist to track the status of the license holders' biennial medical reexaminations. Therefore, forty-eight (48) license holders exceeded the two year medical examination requirement specified in 10CFR55.21 (SALP Cause Code D: Defective Procedures).

The Medical Department personnel performing the medical examinations did not exactly follow the guidance contained in ANSI/ANS-3.4-1983. The nurse (utility, non-licensed) believed that the APS physician (contractor, non-licensed) was able to waive certain portions of the medical examination. The physician was not familiar with the guidance provided in ANSI/ANS-3.4-1983 (SALP Cause Code A: Personnel Error). Therefore, eight (8) license holders received incomplete initial medical examinations.

The APS physician was not familiar with the reporting requirements specified in 10CFR55.25 when the reactor operator notified the physician of a medical condition that may have caused the reactor operator to not meet the requirements of 10CFR55.21 (SALP Cause Code A).

No unusual characteristics of the work location (e.g., noise, heat, poor lighting) directly contributed to this event.

## J. Safety System Response:

Not applicable - there were no safety system responses and none were necessary.



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TEXT (If more space is required, use additional NRC Form 366A's) (17)

## K. Failed Component Information:

Not applicable - no component failures were involved.

## II. ASSESSMENT OF THE SAFETY CONSEQUENCES AND IMPLICATIONS OF THIS EVENT:

No adverse safety consequences or implications resulted from this event. 10CFR55.33(a)(1) states that the Commission will approve an initial application for a license, if it finds that the applicants "medical conditions and general health will not adversely affect the performance of assigned operator job duties or cause operational errors endangering public health and safety." PVNGS does not rely solely on the biennial medical examination to ensure that a license holder meets the requirements of 10CFR55.21. In accordance with the continual behavior observation program, the supervisor is responsible for monitoring the individuals who he or she supervise and for reporting to the Fitness for Duty Administrator any observations of behavior which indicates that a person may not be fit for duty for any reason (e.g., stress, fatigue, injury or illness). In addition, each employee at APS shall report to his or her immediate supervisor any instance of actual or suspected behavior which may indicate that a person is not fit for duty. As required by the fitness for duty program, the one reactor operator undergoing treatment with a substance prescribed by a licensed physician reported this to his supervisor. The supervisor notified the Medical Department. At the time of notification, the APS physician did not believe that the reported condition would result in operator incapacitation. However, some restrictions (e.g., no stair climbing, no operation of power tools, no driving on site, and no working alone in the control room) were to be in effect for the duration of the medication. No unusual behavior has been reported in this time frame related to the license holders described in Section I.B. Thus, this event represents no impact to the health and safety of the public.

## III. CORRECTIVE ACTION:

## A. Immediate:

After identifying the license holders who were not administratively qualified, the Medical Department personnel immediately contacted the appropriate supervisors. Each of the affected license holders was restricted from performing licensed activities until the appropriate medical examination could be administered.

The Medical Department notified the Licensing Department of the reactor operator who did not meet the requirements of 10CFR55.21. APS is preparing a report in accordance with 10CFR55.25 to notify



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the Commission within 30 days of learning of the diagnosis and take appropriate steps to make his medical condition a condition of his license.

An independent investigation of this event has been conducted in accordance with the PVNGS Incident Investigation Program.

B. Action to Prevent Recurrence:

Medical personnel have been counselled on the importance that the license holders receive a medical examination that conforms to the requirements specified in 10CFR55.21.

A formal program to track the status of the license holders' biennial medical reexaminations and to ensure that license holders receive the biennial medical reexamination is being initiated by the Training Department. The program is expected to be implemented by August 1, 1990.

Administrative procedures are being developed to delineate the requirements necessary in order to fully comply with 10CFR55.21 and 55.25 and to identify the responsible organizations. The procedures are expected to be completed by August 1, 1990.

In the interim, the Training Manager shall be assigned the responsibility to track the status of the license holders' biennial medical reexaminations and to ensure that the license holders remain administratively qualified.

As described in Sections I.B and III.A, an initial review of current license holders' medical files was performed by Medical Department personnel. Each license holder who was found to not be administratively qualified has since received the appropriate medical examination. To substantiate the initial review, APS is performing an independent audit of current license holders' medical files to ensure that each license holder has received a medical examination conforming to the regulations in 10CFR55.21, 55.23, and 55.27. The audit is expected to be completed by August 1, 1990.

IV. PREVIOUS SIMILAR EVENTS:

There have been no previous similar events reported pursuant to 10CFR50.73.

