

From: David J. Vito (DJV)  
To: C:\DOC\ALLGSTAT.GRP  
Date: Wednesday, October 5, 1994 2:24 pm  
Subject: New Allegation Forms & Ack. Letter

Attached are newly developed Allegation Receipt and Allegation Disposition (Panel) Decision forms. PLEASE USE THESE FORMS (AND PROVIDE THEM TO YOUR STAFF FOR THEIR USE) FROM THIS DAY FORWARD SO WE CAN ALL BE CONSISTENT WITH REGARD TO WHAT INFORMATION IS TO BE GENERATED WHEN WE RECEIVE AND MAKE DECISIONS ON AN ALLEGATION. Also attached is a new Draft Form Acknowledgement Letter to be used for development of future allegation acknowledgement letters. The new forms and draft acknowledgement letter have been included on the S:drive (S:\ENF-ALLG\ALLEGATN\ALG-FORM\\*.\*)). This new information has not been incorporated into the Regional Instruction as yet because we are waiting for the forthcoming massive change to NRC Management Directive 8.8 to be approved before changing the Regional Instruction.

The new forms and draft acknowledgement letter incorporate recent changes derived from various sources, namely, Bill Russell (assessment of apparent safety significance for each allegation), Jim Taylor (up front provision of NRC identity protection policy to alleged), and the Region I Allegation Quality Improvement Team (process streamlining and clarifications). The most notable changes are as follows:

1. The allegation disposition (panel) record form has added a section for assessment of safety significance. While we may intuitively assess safety significance during a panel meeting in the nature of the decisions that are made and the schedules developed for resolution, Bill Russell indicated that NRC has not done a good job in DOCUMENTING why the panel decisions are made in terms of safety significance.

2. The allegation receipt report form has added questions that will help the person receiving the information assess whether the information being received is really an allegation as defined by NRC. The form also asks the person receiving the information whether he/she remembered to inform the alleged of the NRC identity protection policy, as has been directed by a recent (8/22/94) memorandum from Jim Taylor.

3. The new draft acknowledgement letter has added the information about the NRC identity protection policy. Also, Bill Russell disagreed with the Allegation QIT's suggestion regarding use of an abbreviated form acknowledgement letter (i.e., one that refers to the receipt of information without feeding back any specifics about the information that was received). So, the "new" draft acknowledgement letter retains the old format of summarizing the alleged's issues. An amenable alternative to Bill Russell was that we could exclude the allegation summary information from the acknowledgement letter if we attached a copy of the allegation receipt form to the acknowledgement letter. This, of course, would require that the allegation receipt form is LEGIBLE.

As a final note, please remember that the allegation panel process will proceed much more smoothly if you come to the meeting with a suggested course of action INCLUDING filling out an Allegation Disposition (Panel) Record Form with your suggested activities. This direction has been included in the Regional Instruction since before I got the SAC job (10/93) and its implementation is still very sporadic.

CC: WFK, DJH, BRL

Files: S:\ENF-ALLG\ALLEGATN\ALG-FORM\ALGRCP.T.FRM,  
S:\ENF-ALLG\ALLEGATN\ALG-FORM\NEWACK.LTR,  
S:\ENF-ALLG\ALLEGATN\ALG-FORM\PANLDISP.FRM

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

Page 1 of \_\_\_\_

Date/Time

Received: \* \_\_\_\_\_ Allegation No. \_\_\_\_\_  
(leave blank)

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

Name of  
Alleger: \* \_\_\_\_\_ Home Address: \* \_\_\_\_\_

Home Phone: \* \_\_\_\_\_ City/State/Zip: \* \_\_\_\_\_

Alleger's  
Employer: \* \_\_\_\_\_ Alleger's Position/Title: \* \_\_\_\_\_

Facility: \_\_\_\_\_ Docket No. or Materials License No.: \_\_\_\_\_

Was alleger informed of NRC identity protection policy?	Yes _____	No _____
If a licensee employee or contractor,		
did they raise the issue to their management?	Yes _____	No _____
Was confidentiality requested?	Yes _____	No _____
Was confidentiality initially granted?	Yes _____	No _____
Individual Granting Confidentiality: _____		

**Criteria for determining whether the issue is an allegation:**

Is it a declaration, statement, or assertion of impropriety or inadequacy? Yes / No

Is the impropriety or inadequacy associated with NRC regulated activities? Yes / No

Is the validity of the issue unknown? Yes / No

If No to any of the above questions, the issue is not an allegation and should be handled by other appropriate methods (e.g. as a request for information or an OSHA referral).

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

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

Number of Concerns: \_\_\_\_\_

Type of Regulated Activity	(a) _____ Reactor	(d) _____ Safeguards
	(b) _____ Vendor	(e) _____ Other: _____
	(c) _____ Materials	(Specify)

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: _____

\* These sections are not completed for instances of potential wrongdoing identified by NRC staff.

Distribution: SAC OI



SAMPLE ACKNOWLEDGEMENT LETTER TO ALLEGER (DRAFT 10/5/94)

Docket No. \_\_\_\_\_

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

File No. RI-9\_\_-A-\_\_\_\_

\_\_\_\_\_  
ALLEGER'S NAME

\_\_\_\_\_  
ADDRESS

Dear \_\_\_\_\_:

Subject: Concerns You Raised to the NRC Regarding \_\_\_\_\_  
(site name)

This refers to your \_\_\_\_\_ with \_\_\_\_\_,  
(telephone conversation, letter, etc.)

on \_\_\_\_\_, in which you expressed concerns related to \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
We have initiated actions to examine your concern(s) as characterized above and will inform you of our findings.

The NRC notes that in resolving technical issues, the NRC is also protecting the identity of alлегers and intends to take all reasonable efforts to not disclose your identity to any organization, individual outside the NRC, or the public unless you clearly indicate no objection to being identified. However, you should be aware that your identity could be disclosed if disclosure is necessary to ensure public health and safety, if disclosure is necessary to inform Congress or State or Federal agencies in furtherance of NRC responsibilities under law or public trust, or if you have taken actions that are inconsistent with and override the purpose of protecting an allegер's identity.

USE ONLY FOR WRONGDOING

Also, your identity may be disclosed at the NRC's discretion in order to pursue an investigation of issue(s) involving potential wrongdoing, such as the (subject) issue you brought to our attention.

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

**USE THIS PARAGRAPH IF THE ALLEGER WAS DISCRIMINATED AGAINST AND/OR DOL MAY BE AN ALTERNATIVE**

Also, your identity will be disclosed as part of any NRC investigation of (an) issue(s) of potential discrimination against an individual for raising safety issues, such as the concern(s) you raised above.

In addition, the NRC was established to regulate safety issues in the nuclear industry. Regarding the termination of your employment (OR INSERT APPLICABLE ISSUE), the Department of Labor (DOL) has the authority to order backpay, reinstatement or compensatory damages. In order to protect your rights, you must file a written complaint with DOL within 180 days of the occurrence of the discrimination. Any such complaint can be filed with your local DOL office or:

The Office of Administration  
Wage and Hour Division  
Employment Standards Administration  
U.S. Dept. of Labor, Room S3502  
200 Constitution Avenue, N.W.  
Washington, D. C. 20210

Your complaint must describe the firing or discrimination you feel occurred. A copy of the DOL's "Procedures for Handling of Discrimination Complaints Under Federal Employee Protection Statutes" is enclosed for your attention.

**USE THIS PARAGRAPH ONLY FOR ALLEGERS WHERE CONFIDENTIALITY HAS BEEN GRANTED AND WHERE THE ALLEGATION PANEL HAS APPROVED CONFIDENTIALITY PER THE REGIONAL INSTRUCTIONS, BUT FOR WHOM NO CONFIDENTIALITY AGREEMENT HAS BEEN EXECUTED.**

With respect to your request for confidentiality, I assure you that we will attempt to maintain your confidentiality while resolving this matter. Please read the attached Confidentiality Agreement, sign and date and mail it to us in the self-addressed, stamped envelope provided. I would like to point out that licensees can and sometimes do surmise the identity of individuals who provide information to us because of the nature of the information or other factors beyond our control. In such cases, our policy is to neither confirm nor deny the licensee's assumption. (ADD THIS FOR H & I ALLEGATIONS) You should be aware that the NRC normally will not investigate a case of potential discrimination against an individual for raising safety issues if the individual is a confidential source. This type of case cannot be investigated if an allegor's name is kept confidential.

**USE THIS PARAGRAPH IF THE NRC DOES HAVE A SIGNED CONFIDENTIALITY AGREEMENT FROM THE ALLEGER**

With respect to the Confidentiality Agreement you signed, I assure you that we will honor the Agreement. I would like to point out that licensees can and sometimes do surmise the identity of individuals who provide information to us because of the nature of the information or other factors beyond our control. In such cases, our policy is to neither confirm nor deny the licensee's assumption. (ADD THIS FOR H & I ALLEGATIONS) You should be aware that the NRC normally will not investigate a case of potential discrimination against an individual for raising safety issues if the individual is a confidential source. This type of case cannot be investigated if an allegeder's name is kept confidential.

**USE THIS FOR ALL LETTERS**

Also, if a request is filed under the Freedom of Information Act (FOIA) related to your area(s) of concern, the information provided will, to the extent consistent with that act, be purged of names and other potential identifiers.

Further, you should be aware you are not considered a confidential source unless confidentiality has been formally granted in writing.

Should you have any additional questions, or if the NRC can be of further assistance in this matter, please call me collect at (610) 337-5222.

Sincerely,

Senior Allegation Coordinator  
or Appropriate Section Chief

Enclosure: As stated

bcc:

Allegation File No. \_\_\_\_\_

Enforcement Officer, RI (if 1st paragraph is checked)

concurrency  
SAC

Technical Section Chief  
(if appropriate)

AOC



## ALLEGATION DISPOSITION RECORD

Rev. 2 10/5/94

Site: \_\_\_\_\_ Section Chief (AOC): \_\_\_\_\_  
Allegation No.: \_\_\_\_\_ Date Received: \_\_\_\_\_  
Acknowledged: \_\_\_\_\_ Receipt Report to SAC: \_\_\_\_\_  
CONFIDENTIALITY GRANTED: Yes No OI Informed: \_\_\_\_\_

IS THERE A HARASSMENT/DISCRIMINATION ISSUE:	Yes	No
(If yes, complete H&ID section on reverse)		
DOES THE ALLEGATION INVOLVE POTENTIAL WRONGDOING:	Yes	No
DOES THE ALLEGATION HAVE POLITICAL IMPLICATIONS:	Yes	No
DOES THE ALLEGATION REQUIRE RESOURCES TO RESOLVE WHICH CAN NOT BE OBTAINED BY THE AOC:	Yes	No

If yes to any of the above, the allegation needs to go to an Allegation Panel.  
Otherwise, document disposition actions below.

## ALLEGATION PANEL (AP) DECISIONS

Date: \_\_\_\_\_ Previous APs on issue: Yes / No  
Chair - \_\_\_\_\_ Branch Chief - \_\_\_\_\_  
Section Chief (AOC) - \_\_\_\_\_ SAC - \_\_\_\_\_  
(Others) - \_\_\_\_\_ OI Rep. - \_\_\_\_\_

DISPOSITION ACTIONS: (State specific action required for closure (including special concurrences), responsible person, ECD and expected closure documentation)

1) \_\_\_\_\_  
\_\_\_\_\_

Responsible Person: \_\_\_\_\_ ECD: \_\_\_\_\_

Closure Documentation: \_\_\_\_\_ Completed: \_\_\_\_\_

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

Responsible Person: \_\_\_\_\_ ECD: \_\_\_\_\_

Closure Documentation: \_\_\_\_\_ Completed: \_\_\_\_\_

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

Responsible Person: \_\_\_\_\_ ECD: \_\_\_\_\_

Closure Documentation: \_\_\_\_\_ Completed: \_\_\_\_\_

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

Responsible Person: \_\_\_\_\_ ECD: \_\_\_\_\_

Closure Documentation: \_\_\_\_\_ Completed: \_\_\_\_\_

Safety Significance Assessment: \_\_\_\_\_  
\_\_\_\_\_

Options for Resolution:

Licensee Referral (Div. Dir. Concurrence Required / Document NRC Review of Response - Resp. - AOC)

Referral to Another Agency (OSHA, etc. - Resp. - SAC)

Referral to an Agreement State (MD, ME, NH, NY, RI - Resp. - SAC)

Referral to Another NRC Office (OIG, NRR, Other Regions - Resp. - SAC)

Request for Additional Info. (From allegor, licensee, others - Resp. - AOC)

Closeout Letter/Memo (If no further action planned - Resp. - AOC)

Inspection (Resident/Specialist routine or reactive)

Required Actions:

Acknowledgement Letter (Resp. - AOC)

DOL Info. to Allegor (If H&ID and not provided in person - Resp. - AOC)

Closeout Letter/Memo (Upon completion of disposition actions - Resp. - AOC)

IF H&ID INVOLVED:

- |  |     |    |
|--|-----|----|
| 1) has the individual been informed of the DOL process and the need to file a complaint within 180 days                  | Yes | No |
| 2) has the individual filed a complaint with DOL   | Yes | No |
| 3) if the complainant filed directly with DOL, have they been contacted to obtain their technical concerns (Resp. - SAC) | Yes | No |
| 4) is a chilling effect letter warranted:  | Yes | No |

NOTES: \_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Distribution: SAC  
OI  
Responsible Persons  
Panel Attendees