

U.S. NUCLEAR REGULATORY COMMISSION

REGION II

Docket Nos: 50-413, 50-414
License Nos: NPF-35, NPF-52

Report Nos.: 50-413/96-17, 50-414/96-17

Licensee: Duke Power Company

Facility: Catawba Nuclear Station, Units 1 and 2

Location: 422 South Church Street
Charlotte, NC 28242

Dates: September 30 - October 4, 1996

Inspectors: W. W. Stansberry, Safeguards Specialist

Approved by: P. Fredrickson, Chief, Special Inspection Branch
Division of Reactor Safety

Enclosure

EXECUTIVE SUMMARY

Catawba Nuclear Station, Units 1 and 2
NRC Inspection Report 50-413/96-17, 50-414/96-17

This safeguards inspection included aspects of licensee plant support. The report covers a week period of an unannounced routine inspection by a regional safeguards specialist inspector.

Plant Support

- The random review of plans, records, reports, and interviews with appropriate individuals verified that changes did not appear to decrease the effectiveness of the Physical Security Plan (PSP). There were no violations of regulatory requirements found in this area (S3.1).
- The inspector found that licensee management provided appropriate and adequate support for the Physical Security Program. This was based on the review of the PSP, records and interviews with management, support, and security personnel. There were no violations of regulatory requirements found in this area (S6.1).
- Evaluation of the effectiveness of management control noted areas that indicate non-human errors, hardware/mechanical, problems are being effectively controlled and managed. The licensee was not as successful in eliminating or decrease human errors. Root cause analysis on the LER's and SELs was a strength. There were no violations of regulatory requirements found in this area (S6.2).
- Licensee-conducted audits were thorough, complete, and effective in terms of uncovering weaknesses in the security system, procedures, and practices. The last audit report concluded that the security program was effective and recommended appropriate action to improve the effectiveness of the security program; and the licensee had acted appropriately in response to recommendations made in the audit report. The inspector determined that the audit items were reviewed, appropriately assigned, analyzed and prioritized for corrective action. The corrective actions taken were technically adequate and performed in a timely manner. There were no violations of regulatory requirements found in this area (S7.1).
- The licensee's problem evaluation, root cause analysis and corrective actions of Problem Investigation Process report No. 1-C96-1837 were found to be appropriate and adequate as far as security requirements are concerned. There were no violations found of security regulatory requirements, PSP commitments and/or security procedures (S8.1).

REPORT DETAILS

IV. Plant Support

S3 Security and Safeguards Procedures and Documentation

S3.1 Security Program Plans

a. Inspection Scope (81700)

The inspector reviewed appropriate chapters of the licensee's Physical Security Plan (PSP), Revision 04, dated April 18, 1996 and the Security Personnel Training and Qualification Plan, Revision 02, dated April 18, 1996.

b. Observations and Findings

Review of the changes, Revisions 1 through 4 to the PSP reported or submitted for approval verified their compliance to the requirements of 10 CFR 50.54(p) or 50.90. Most of the changes were grammatical, and position/title changes. Necessary coordinating changes were also incorporated for the merged PSP that resulted in a consolidated PSP for each of the three Duke Power nuclear power plants.

c. Conclusions

The random review of plans, records, reports, and interviews with appropriate individuals verified that changes did not appear to decrease the effectiveness of the PSP. There were no violations of regulatory requirements found in this area.

S6 Security Organization and Administration

S6.1 Management Support

a. Inspection Scope (81700)

The inspector evaluated the degree of the licensee's management support to the Physical Security Program. Based on the requirements contained in the PSP, the inspector reviewed the Licensee's Event Reports (LERs) and the Safeguards Event Log (SEL) entries. This review was to determine if the licensee appropriately assigned, analyzed and set priorities for corrective action for the reports and log entries, and whether the corrective action taken was technically adequate and timely.

b. Observations and Findings

The licensee had an onsite physical protection system and security organization. Their objective was to provide assurance against an unreasonable risk to public health and safety. The security organization and physical protection system were designed to protect against the design basis threat of radiological sabotage as stated in 10 CFR 73.1(a). A proprietary security force provided site security for the licensee. At least one full-time manager of the security organization was always onsite. This individual had the authority to direct the physical protection activities of the organization. The management system included a mechanism for establishing, maintaining, and enforcing written security procedures. These procedures documented the structure of the security organization, and detailed the duties of security force and other individuals responsible for security. Licensee's management system provided for written approval of procedures and revisions thereto by the individual who had general responsibility for security functions. Licensee management exhibited an awareness and favorable attitude toward physical protection requirements.

One LER was reviewed (LER 413/93-S01) concerning uncontrolled safeguards information. An employee accessed SAFEGUARDS INFORMATION (SGI) drawings from a computer on-line access system which was not SGI secured. All SGI files stored on non-safeguard tapes were located, secured and evaluated to determine what SGI had been uncontrolled. The root cause was attributed to policy guidance/management expectations not being well defined or understood. A contributing cause was that self-checking not being applied to ensure intended action was correct. Corrective actions included deleting safeguards documents from the system, identifying uncontrolled SGI files and destroying or securing the information located in the file, communicating the problem to site security teams and enhancing their awareness of critical areas involved, and formation of a quality improvement team to evaluate the SGI program.

The review of the SELs as of July 1996 indicated the following:

EVENTS	4th Quarter '95	1st Quarter '96	2nd Quarter '96
Human Errors	47 (51%)	14 (31%)	61 (62%)
Hardware Systems	48 (49%)	31 (69%)	38 (38%)
Other Events	0	0	0
TOTALS	95 (100%)	45 (100%)	99 (100%)

The overall tracking since 1st Quarter 1993 has been down. Each quarter had an excellent Trending Summary that was provided to site management.

There had not been any security force turnover since 1987. There were no compensatory measures in effect at the time of the inspection. Review of previous compensatory measures indicated that they lasted no more than 24 hours. Review of the outstanding security work-orders showed the following:

- 5 High Priority (#1) orders (outage related)
- 7 Medium Priority (#2)
- 11 Low Priority (#3)

TOTAL = 23 outstanding security work-orders. (15 of the 23 are work-orders that involve regulatory requirements)

c. Conclusions

The inspector found that the licensee provided appropriate and adequate support for the Physical Security Program. This was based on the review of the PSP, records and interviews with management, support, and security personnel. LER 413/93-S0-1 was closed during this inspection. There were no violations of regulatory requirements found in this area.

S6.2 Effectiveness of Management Control

a. Inspection Scope (81700)

The inspector evaluated the adequacy of the licensee's controls for identifying, resolving and preventing problems by reviewing such areas as corrective action systems, root cause analyses, and self assessment in the area of physical security. Also, this inspection was to determine whether there are strengths or weaknesses in the licensee's controls for the identification and resolution of the reviewed issues that could enhance or degrade plant operations or safety.

b. Observations and Findings

To determine the adequacy of the above, the inspector reviewed the Licensee's Event Reports (LERs) and the Safeguards Event Log (SEL) entries. This review was to determine if the licensee appropriately assigned, analyzed and set priorities for corrective action for the reports and log entries, and whether the corrective action taken was technically adequate and timely.

The review of the LERs and SELs indicated a significant decrease in reportable events since 1993. SELs have continuously declined except for increases during outages. Equipment failures have declined faster than human errors.

The root cause analyses, corrective actions and self assessment, as mentioned in paragraph S6.1 above and in paragraph S8.1 below, were reviewed and found appropriate and adequate.

c. Conclusions

Evaluation of the effectiveness of management control of the above noted areas indicate that non-human errors, hardware/mechanical, problems are being effectively controlled and managed. The licensee was not as successful in eliminating or decreasing human errors. Root cause analyses on the LER's and SELs were a strength. There were no violations of regulatory requirements found in this area.

S7 Quality Assurance in Security and Safeguards Activities

S7.1 Audits and Corrective Actions

a. Inspection Scope (81700)

Based on the commitments of the PSP, the inspector evaluated the licensee's audit program and corrective action system. This also verified compliance with the requirement for an annual audit of the security and contingency programs. During the inspection, a small representative sample of the problems identified by audits, was evaluated by the inspector to determine whether review and analysis were appropriately assigned, analyzed and prioritized for corrective action and whether the corrective action taken was technically adequate and performed in a timely manner.

b. Observations and Findings

The licensee's program commitments included auditing its security program, including the Safeguards Contingency Plan, at least every twelve months. The audit included a review of routine and contingency security procedures and practices. This review evaluated the effectiveness of the physical protection system testing and maintenance program. The Nuclear Assessment and Issues Division, Regulatory Audit Group prepared report SA-96-05(CN)(RA)(SEC) dated June 5, 1996. This audit was conducted during the period of May 13-16, 1996. The report was sent to the Site Vice-President and corporate management. Reports of audits were available for inspection at the plant for a period of three years. There was one Finding and one Recommendation. The audit conclusion was, "Overall, the security program at the Catawba Nuclear Site is adequately and effectively implemented."

c. Conclusions

Licensee-conducted audits were thorough, complete, and effective in terms of uncovering weaknesses in the security system, procedures, and practices. The audit report concluded that the security program was effective and recommended appropriate action to improve the effectiveness of the security program; and the licensee had acted appropriately in response to recommendations made in the audit report. The inspector determined that all the above items were reviewed, appropriately assigned, analyzed, and prioritized for corrective action. The corrective actions taken were technically adequate and performed in a timely manner. There were no violations of regulatory requirements found in this area.

S8 Miscellaneous Security and Safeguards Issues

S8.1 Problem Investigation Process (PIP) Report 1-C96-1837

a. Inspection Scope (81700)

During this inspection PIP 1-C96-1837 was reviewed to ensure that no regulatory requirements, PSP commitments and/or security procedures were violated.

b. Observations and Findings

On July 19, 1996, a contractor employee escorted his spouse, with a security visitors escort required badge, into the protected area to a Radiation Control Area (RCA) during a plant tour. A radiation technician observed the spouse without appropriate dosimetry and recognized the unauthorized access into the Radiation Control Area. While in the protected area the escorted spouse was with her designated escort.

The licensee's Problem Evaluation found that unauthorized entry was made into the RCA and that there was inadequate vendor Radiation Protection (RP) practices. Root Cause Analysis attributed this event to the vendor (escort) failing to transpose his knowledge as a radiation worker to his duties as an escort. There was no indication that there was intent to circumvent the station's radiological or security programs. Corrective actions were as follows:

- Immediate: Vendor was counseled.
- Intermediate: The visitor access program and RP programs will be linked to ensure the proper understanding of RP requirements for visitors.
- Long term: Management review the current philosophy associated with visitor access to the station.

c. Conclusions

The licensee's problem evaluation, root cause analysis and corrective actions reviewed were found to be appropriate and adequate as far as security requirements are concerned. There were no violation of security regulatory requirements, PSP commitments and/or security procedures

S8.2 Follow-up (9204)

- (CLOSED) LER 50-413/93-S01. Unsecured Safeguards Information (SGI) found on a mainframe on-line drawing retrieval system. The licensee's problem evaluation, root cause analysis and corrective actions were found to be adequate.
- (CLOSED) VIO 50-413,414/93-35-01. This was the cited violation of the above LER.

- (CLOSED) VIO 50-413,414/93-35-02. Failure to control SGI at various times.
- The above items were part of a Escalated Enforcement Action involving a Civil Penalty. It involved all three Duke Power Company nuclear facilities.

V. MANAGEMENT MEETING

X1 Exit Meeting Summary

The inspector presented the inspection results to licensee management at the conclusion of the inspection on October 3, 1996. The licensee acknowledged the findings presented. Although reviewed during this inspection, proprietary information is not contained in this report. Dissenting comments were not received from the licensee.

PARTIAL LIST OF PERSONS CONTACTED

Licensee

Byers, W., Security Manager
 Emmons, B., Organizational Effectiveness Manager
 Kitlan, M., Regulatory Compliance Manager
 Lowery, J., Compliance Specialist
 McCollum, W., Catawba Site Vice-President
 Nicholson, K., Compliance Specialist
 Patrick, M., Safety Assurance Manager

NRC

Balmain, P., Resident Inspector

INSPECTION PROCEDURES USED

IP 81700: Physical Security Program for Power Reactors
 IP 92904: Followup - Plant Support

ITEMS OPENED, CLOSED, AND DISCUSSED

<u>Closed</u>	LER 413/93-S01	Uncontrolled Safeguards Information found by the licensee on a computer access system.
<u>Closed</u>	VIO 93-35-01	This is the violation to the above LER.
<u>Closed</u>	VIO 93-35-02	Failure to control SGI.