

U. S. NUCLEAR REGULATORY COMMISSION
REGION I

License/Docket/Report Nos.: DPR-61/50-213/93-23
DPR-21/50-245/93-30
DPR-65/50-336/93-25
NPF-49/50-423/93-27

Licensee: Northeast Nuclear Energy Company
P. O. Box 270
Hartford, Connecticut 06141-0270

Facility Names: Millstone Nuclear Power Station Units 1, 2, and 3
Haddam Neck Nuclear Power Plant

Inspection At: Waterford, Connecticut
East Haddam, Connecticut

Inspection Conducted: November 15-18 and December 9, 1993

Inspectors: E. B. King, Jr., for 12/17/93
E. B. King, Physical Security Inspector date
W. J. Raymond, Senior Resident Inspector

Approved by: E. C. McCabe, Jr. 12/17/93
E. C. McCabe, Chief, Safeguards Section date
Division of Radiation Safety and
Safeguards

SCOPE

FFD Program, Policies, and Procedures; FFD Organization and Management Control;
Training; Chemical Testing and FFD Audit.

RESULTS

Generally, 10 CFR 26 (the Rule) was being met. Management's involvement and support of the program was apparent in assignment of a special task force to rewrite the existing FFD manual. However, failing to establish and implement written procedures designed to meet the Rule and failing to properly investigate and report unsatisfactory laboratory performance testing results were found to violate the Rule. Additionally, weaknesses were identified in management controls and in the random selection program.

DETAILS

1.0 Key Persons Contacted

1.1 Licensee

- *D. Welch, Director, Safety and Health
- *J. LaPlatney, Nuclear Services Director, Connecticut Yankee (CY)
- *R. Factora, Unit Services Director, Millstone Station
- *D. Heritage, Manager, Occupational Health
- *G. Hallberg, Manager-System Security
- *T. Weekley, Security Manager, Millstone Station
- *R. Ahlstrand, Director-Internal Audit and Security
- *R. Ciurylo, Corporate Information Security
- *T. Cleary, Licensing Engineer
- *R. Paliuca, Engineer-Assessment and Staff Services
- *M. Nericcio, Occupational Health Administrator, CY
- *C. Marien, Occupational Health Administrator, Millstone Station
- *J. Johnson, Occupational Health Administrator, Corporate
- *E. Annio, Senior Analyst, CY

1.2 U. S. Nuclear Regulatory Commission

- P. Swetland, Senior Resident Inspector, Millstone Station
- P. Habighorst, Resident Inspector, CY

* Present at the exit interview

The inspectors also interviewed other licensee and contractor personnel.

2.0 Fitness-For Duty (FFD) Program, Policies and Procedures

2.1 FFD Program

The inspectors evaluated the licensee's FFD program using Inspection Procedure 81502: Fitness-for-Duty Program. Based on interviews with FFD program staff and selected supervisors, observations and documentation reviews, the inspectors concluded that management, at all levels, is committed to the goal of the Rule: a work place free of drugs and alcohol and their effects. However, the inspectors also concluded that program weaknesses need immediate attention to ensure continued program effectiveness. These weaknesses in policies and procedures, chemical testing, and management control are further addressed in this report.

2.2 Policies and Procedures

The inspectors determined based on discussions with licensee management that the FFD manual was being rewritten due to repetitive discrepancies identified during the 1991 and 1992 annual Quality Service Audits. At a May 12, 1993 meeting between the inspectors and key FFD staff, the licensee had committed to having the manual rewritten and approved by the end of 1993. However, it appears that the licensee will not be able to satisfy that commitment. Based on discussions with licensee management, a revised commitment for completion of the revision of the manual by April 1, 1994, will be submitted to the NRC in the near future. On November 1, 1993, the licensee assigned a special task force with the responsibility of rewriting the manual. The task force included a procedure writer and key FFD staff and met daily to ensure the contents of the rewrite satisfied the intent of the Rule. The inspectors were informed by licensee management that, during the review of the manual, weaknesses were identified and indicated that some of the licensee's policies do not fully satisfy the intent of the Rule. The licensee committed to inform the NRC of their findings and to report the corrective actions taken to resolve the weaknesses.

The inspectors determined that the licensee's FFD program did not include written procedures for testing for drugs and alcohol, including procedures for protecting the employee and the integrity of the specimen, or the quality controls used to assure the test results are valid and attributable to the correct individual, as required by 10 CFR 26.20 (c). Additionally, the licensee failed to provide collection site persons with detailed, clearly illustrated, written instructions on the collection of specimens. These conditions appear to violate 10 CFR 26.20(c) and Appendix A, Section 2.2(3) thereto. (VIO 50-213/93-23-01, 50-245/93-30-01, 50-336/93-25-01, 50-423/93-27-01)

3.0 FFD Organization and Management Control

Since initial inspection of the licensee's FFD program in September 1990, corporate staffing had been increased to enhance program effectiveness. However, inspector review of the FFD organizational flow chart and discussions with corporate and site FFD personnel concluded that there was not a definitive line of communication from the sites to corporate to effectively enable site staff to obtain guidance and direction. Additionally, the inspectors were unable to obtain current job descriptions for the Occupational Health Administrators assigned on-site to administer the program, further demonstrating a lack of management control. It appeared that there was confusion about the reporting of concerns and the responsibility of each key player.

In discussions with corporate management, the inspectors were informed that steps would be taken to resolve the concerns and that within 14 days written corrective actions would be submitted to the NRC for review with a commitment date for the resolution of the concern. The inspectors identified this matter as a programmatic weakness requiring management attention. As committed, the licensee provided the

inspectors with a written response describing the schedule for resolution of the programmatic weakness regarding the reporting of concerns and the responsibility of each key player. The response was dated December 2, 1993, and was reviewed December 9, 1993. This will be further reviewed by the NRC. (IFI 50-213/93-23-02, 50-245/93-30-02, 50-336/93-25-02, 50-423/93-27-02)

4.0 Training

On November 16, 1993, the inspectors met with the licensee's training staff to review FFD-related lesson plans and training records, and to discuss program development and implementation. Based on that review and discussions, the inspectors determined that the licensee had a mechanism in place to inform the training department of changes to FFD policies and that the changes were incorporated, as applicable, in the training FFD lesson plans.

The inspectors' review of training records indicated that the licensee had an effective tracking program which ensured that required training for licensee and contractor employees was being received in a timely manner. Additionally, the inspectors determined by a review of training records that individuals promoted to a supervisory position were receiving required training within three months after the initial supervisory assignment. It was apparent that the licensee had expended considerable effort to ensure the effectiveness of the training. No deficiencies were noted.

5.0 Chemical Testing

The inspectors determined by discussions with licensee FFD supervisory personnel, observations at the collection facilities, and a review of collection site records that the licensee's chemical testing program satisfied 10 CFR 26.24(a). This determination was based on the testing being performed in a random unannounced manner, with mechanisms in place for follow-up and for-cause testing, and the random test rate encompassing all of the workforce.

On November 16, 1993, the inspectors met with the Occupational Health Administrators at the Haddam Neck Nuclear Power Plant to discuss security of the computerized random selection program. During a previous inspection in May 1993, the inspectors identified as a program weakness, the failure to ensure that only individuals with a need-to-know could gain access to the program. It was determined that the weakness was due to the lack of an effective password protection feature. At that time the licensee committed to implement interim and final corrective actions to resolve the random selection program concerns, and projected the final corrective actions to be completed by June 1993. Based on discussions with the collection site staff and observations of attempts to circumvent the security of the random selection program, the inspectors determined the protective measures implemented by the licensee were adequate. However, the inspectors discussed an administrative

weakness involving the random selection program concerning the manner in which the selection pools are updated. The inspectors determined by a review of several random selection generated lists, that terminated individuals' names were not being deleted from the assigned selection pools in a timely manner. Although there is a mechanism in place to delete terminated employees from the selection pools, the inspectors identified individuals on the generated lists that had been terminated for over 3 weeks. The licensee stated that they would review the concern and, if needed, develop and implement corrective actions. This matter will be reviewed further by the NRC. (IFI 50-213/93-23-03, 50-245/93-30-03, 50-336/93-25-03, 40-423/93-27-03).

During discussions with licensee management, the inspectors found that the licensee had failed to report unsatisfactory performance testing of blind specimens by the licensee's contracted Health and Human Services (HHS) laboratory within 30 days of the receipt of the investigative findings and corrective actions taken by the HHS laboratory, as required under 10 CFR 26, Appendix A, Section 2.8(e)(4). In December 1992, the licensee was notified by the laboratory of false negative test results. Six weeks later, the licensee responded, in a letter dated January 15, 1993, by requesting the laboratory to investigate the unsatisfactory performance testing results. In a letter dated September 30, 1993, nine months later, the HHS laboratory reported its investigative findings and commented on the issues associated with the false negatives test results. While the licensee's use of the laboratory was found acceptable, the licensee had not evaluated the laboratory's findings and was therefore found not to have accomplished its investigative responsibilities. Also, the licensee had failed to send the signed and dated investigation to the NRC as a report of unsatisfactory performance. That had prevented the NRC from ensuring notification of the findings to the Department of Health and Human Services. In regard to this failure, the licensee stated that, based on discussions with other utilities and with information received through FFD seminars, they had concluded that there was no requirement to report false negative test results. The inspectors informed the licensee that, based on the Rule, the report should be made.

Licensee failure to evaluate the laboratory's findings and report the investigation findings to the NRC were found to be an apparent violation of 10 CFR 26 requirements for investigating and reporting unsatisfactory performance testing results. (VIO 50-213/93-23-04, 50-245/93-30-04, 50-336/93-25-04, 50-423/93-27-04).

6.0 Audits

The inspectors reviewed the licensee's annual Quality Services Department (QSD) audit report for 1993, Audit #A-30223, which was performed September 20 - October 5, 1993. The audit reported four findings and three recommendations. One of the findings addressed the issue of the licensee's failure to evaluate and report unsatisfactory performance testing of blind specimens. Inspector review concluded

that the audit was comprehensive in scope. Additionally, the licensee performed an independent evaluation of the FFD computer system from September 28 - October 28, 1993, to address concerns identified to licensee management by the medical units. The licensee's evaluation identified and supported most of the concerns, and directed licensee management to aggressively pursue effective corrective actions. The inspectors determined based on audit reviews and discussions with licensee management that the audit program as designed was effective in identifying programmatic weaknesses and that the findings were being reported to the appropriate levels of management. No discrepancies were noted.

7.0 Exit Interview

The inspectors met with the licensee representatives identified in Detail 1.0 of this report at the conclusion of the inspection on November 18, 1993. At that time, the purpose and scope of the inspection were discussed with licensee management, and the findings were presented. The licensee acknowledged the inspection findings.

IFS Data Entry Form Reactor Inspections

Reactor/Vendor Inspection (IFS Option 1)
Items Opened (Y/N): 4

Reviewed By: [Signature]
Date: 12/17/93

Site: Haddam Neck

Report Transmittal Date: 1/1
Lead Inspector: EOR Responsible Org. Code: 1415 Report End Date: 11/18/93 Region: 1

	Report NBR	Docket NBR
A	<u>93-23</u>	<u>50-213</u>
B	_____	_____
C	_____	_____

Update? (Y/N): N Opened IR Number: 93-23
***Sequence NBR: 01 Item Type: VIQ **Severity: IV **Supplement: 7

	Status	*UPD I/R	*Proj. Closeout	*Actual Closeout
A	<u>0</u>	_____	<u>05/30/94</u>	<u>1/1</u>
B	_____	_____	<u>1/1</u>	<u>1/1</u>
C	_____	_____	<u>1/1</u>	<u>1/1</u>

Title: Failure to establish and implement written FFQ procedures (55 character width)
Closeout Org: _____ *Closeout EMP: _____ *Contact EMP: _____ *Procedure: _____ *Functl Area: _____
Code _____ *Cause CD: _____ **EA Number: _____ **NOV/NCC Issue Date: 1/1

Text: Written license procedures were not established nor implemented for protecting the employee and the integrity of the specimen, nor were quality controls used to assure test results are valid and attributable to the correct individual in written procedures, nor were collection site persons provided with written instructions on the collection of specimens.

Update? (Y/N): N Opened IR Number: 93-23
***Sequence NBR: 04 Item Type: VIQ **Severity: IV **Supplement: 7

	Status	*UPD I/R	*Proj. Closeout	*Actual Closeout
A	<u>0</u>	_____	<u>05/30/94</u>	<u>1/1</u>
B	_____	_____	<u>1/1</u>	<u>1/1</u>
C	_____	_____	<u>1/1</u>	<u>1/1</u>

Title: Failure to report unsatisfactory laboratory performance (55 character width)
Closeout Org: _____ *Closeout EMP: _____ *Contact EMP: _____ *Procedure: _____ *Functl Area: _____
Code _____ *Cause CD: _____ **EA Number: _____ **NOV/NCC Issue Date: 1/1

Text: The licensee failed to investigate or refer to AHTS the investigation unsatisfactory performance test results nor evaluate these findings received from the laboratory and failed to submit the documented investigation record to the NRC as a report

* Optional Fields
** Severity, Supplement, and NOV/NCC only applicable for Violations; EA Number only applicable for Escalated Enforcement Items.
*** Sequence NBR is not applicable for docket related/P21, LER, or non-docket related items.

Status = Open, Closed, Not applicable

ITEMS CONTINUED? (Y/N): Y

IFS DATA INPUT FORM - Brief Instructions

SPECIFY CATEGORY (Check only one)

Since IFS supports various items tracking it is important to indicate the type of information being reported. Therefore, a "x" should be placed next to the field for the appropriate item being entered on the form (i.e., Reactor/Vendor, Materials, Docket Related/Part 21, LER, or Non-Docket Related).

DATE ENTRIES

All dates are entered in the MMDDYY (e.g., 05/12/91) format.

REPORT NUMBERS

All Report Numbers are entered as five digit numeric (e.g., 91001) values.

DOCKET NUMBER & LICENSE NUMBER

For reactor/vendor and materials inspections, docket related/Part 21 and LER items, the appropriate 8 digit numeric number is entered. For material inspections, either the license number or the docket number must be given. License numbers are entered exactly as they appear on the licenses, including hyphens and leading zeros.

UPDATE

The Update selection is used to indicate that the item being entered is an update to a previously recorded item. If Update is selected, also enter the appropriate document number that originally opened the item: Inspection Report Number (Opened I/R), LER number, Part 21 Log number, or IFS number.

SEQUENCE NUMBER

For reactor/vendor and material inspections, a sequence number is required for each item identified in the report. For reactor/vendor inspections a sequence number is entered when a "Y" was entered for "OPENED ITEMS (Y/N)". Similarly, a sequence number is required for material inspections if "N" was provided in the "CLEAR (Y/N)" field. Enter an unique sequence number for each open item included in the report. Sequence numbers are only applicable for reactor/vendor and material inspections.

STATUS

For each docket listed on the report, indicate the appropriate status code. Appropriate values are O - Open, C - Closed, W - Withdrawn, and N - Not Applicable. It is required that "STATUS" be filled in for each docket. This field is applicable for all items.

ITEM TYPE

Enter the four digit code to indicate the inspection/investigation findings. Item type is applicable for all items. The following item types are permitted:

Item Type	Description
EEI	Escalated Enforcement Item
DEV	Deviation
IFI	Inspection Follow-up
URI	Unresolved Issue
VIQ	Violation

SUPPLEMENT

A maximum of 2 supplement codes may be entered for reactor/vendor and materials items. At least 1 is required if item type is EEI or VIQ.

Supplement Code	Description
1	Reactor Operations
2	Facility Construction
3	Safeguards
4	Health Physics 10 CFR Part 20
5	Transportation
6	Fuel Cycle And Materials Operations
7	Miscellaneous Matters
8	Emergency Preparedness

FUNCTL AREAS

For reactor/vendor inspections, docket related/Part 21 or LER items, enter the SALP functional area codes. A maximum of two functional area codes are permitted. Use the list furnished below to obtain the appropriate functional area codes.

Funcnl Area Code	Description
* OPS	Plant Operations
* RADCON	Radiological Controls
* MS	Maintenance/Surveillance
* EP	Emergency Preparedness
* SEC	Security
* ETS-O	Engineering/Technical Support
AUX	Auxiliary Systems
CONT	Containment, Major Structures, and Major Steel Supports
ELEC	Electrical Equipment and Cables
ETS-C	Engineering/Technical Support
INST	Instrumentation
MECHC	Mechanical Components
N/A	Not Applicable
OTHR-C	Other Special Area for Construction / Pre-operational Testing
OTHR-O	Other Special Area for Operations / Startup Testing
PIPE	Piping Systems and Support
SAOU-C	Safety Assessment / Quality Verification
* SAOU-O	Safety Assessment / Quality Verification
SF	Soils and Foundations

CAUSE CODE

Enter the two digit code describing the cause. A maximum of two cause codes are permitted. Shown below is a listing of the valid cause codes and what they represent.

Cause Code	Meaning
10	Related to Procedure Instruction, Drawing
11	Lack of Procedure
12	Inadequate Procedure
20	Engineering or Design Deficiency
21	Inadequate Testing
30	Personnel Error
31	Cognitive Error (Personnel Knowledgeable - Just An Error)
32	Communication Error
33	Potential Wrongdoing
34	Personnel Error Due to Lack of or Inadequate Training
40	Supervision / Management Control
41	Inadequate Resources - Equipment or Staffing
50	Equipment Failure
51	Aging
52	Random Equipment Failure
53	External (Tornado, Lightning)
60	Other

IFS Data Entry Form - Reactors Inspection (continued)

Update? (Y/N): N Opened IR Number: 93-23

***Sequence NBR: 02 Item Type: IFI **Severity: N/A **Supplement: _____

	Status	*UPD I/R	*Proj. Closeout	*Actual Closeout
A	<u>0</u>	_____	<u>05/30/94</u>	_____
B	_____	_____	____/____/____	____/____/____
C	_____	_____	____/____/____	____/____/____

Title: Poor communication between site + Corporate FPD (55 character width) start

Closeout Org: _____ *Closeout EMP: _____ *Contact EMP: _____ *Procedure: _____ *Functl Area: _____
 Code _____ *Cause CD: _____ **EA Number: _____ **NOV/NNC Issue Date: _____

Text: Confusion about the reporting of concerns and the responsibility of each key player, issue determined to be a programmatic weakness.

Update? (Y/N): N Opened IR Number: 93-23

***Sequence NBR: 03 Item Type: IFI **Severity: N/A **Supplement: _____

	Status	*UPD I/R	*Proj. Closeout	*Actual Closeout
A	<u>0</u>	_____	<u>05/30/94</u>	_____
B	_____	_____	____/____/____	____/____/____
C	_____	_____	____/____/____	____/____/____

Title: Updating of random selection pools (55 character width)

Closeout Org: _____ *Closeout EMP: _____ *Contact EMP: _____ *Procedure: _____ *Functl Area: _____
 Code _____ *Cause CD: _____ **EA Number: _____ **NOV/NNC Issue Date: _____

Text: Weaknesses exist in the manner in which the selection pools are updated

Update? (Y/N): _____ Opened IR Number: _____

***Sequence NBR: _____ Item Type: _____ **Severity: _____ **Supplement: _____

	Status	*UPD I/R	*Proj. Closeout	*Actual Closeout
A	_____	_____	____/____/____	____/____/____
B	_____	_____	____/____/____	____/____/____
C	_____	_____	____/____/____	____/____/____

Title: _____ (55 character width)

Closeout Org: _____ *Closeout EMP: _____ *Contact EMP: _____ *Procedure: _____ *Functl Area: _____
 Code _____ *Cause CD: _____ **EA Number: _____ **NOV/NNC Issue Date: _____

Text: _____

IFS Data Entry Form Reactor Inspections

Reactor/Vendor Inspection (IFS Option 1)
Items Opened (Y/N): _____

Reviewed By: KS
Date: 12/17/93

Site: Millsstone Units 1, 2, + 3

Report Transmittal Date: 1/1
Lead Inspector: EOK Responsible Org. Code: 1415 Report End Date: 11/18/93 Region: 1

	Report NBR	Docket NBR
A	<u>93-30</u>	<u>50-245</u>
B	<u>93-25</u>	<u>50-336</u>
C	<u>93-27</u>	<u>50-423</u>

Update? (Y/N): N (Opened IR) Number: 93-30, 93-25, 93-27

***Sequence NBR: 01 Item Type: UIO **Severity: IV **Supplement: 7

	Status	*UPD I/R	*Proj. Closeout	*Actual Closeout
A	<u>0</u>	_____	<u>05/130/94</u>	<u>1/1</u>
B	<u>0</u>	_____	<u>05/130/94</u>	<u>1/1</u>
C	<u>0</u>	_____	<u>05/130/94</u>	<u>1/1</u>

Title: Failure to establish and implement written PPI procedures (55 character width)
Closeout Org: _____ *Closeout EMP: _____ *Contact EMP: _____ *Procedure: _____ *Functl Area: _____
Code _____ *Cause CD: _____ **EA Number: _____ **NOV/NNC Issue Date: 1/1

Text: Written license procedures were not established nor implemented for protecting the employee and the integrity of the specimen, nor were quality controls used to assure test results are valid and attributable to the correct individual in written procedures nor were collection site permits provided with written instruction on the collection of specimen)

Update? (Y/N): N (Opened IR) Number: 93-30, 93-25, 93-27

***Sequence NBR: 02 Item Type: UIO **Severity: IV **Supplement: 7

	Status	*UPD I/R	*Proj. Closeout	*Actual Closeout
A	<u>0</u>	_____	<u>05/130/94</u>	<u>1/1</u>
B	<u>0</u>	_____	<u>05/130/94</u>	<u>1/1</u>
C	<u>0</u>	_____	<u>05/130/94</u>	<u>1/1</u>

Title: Failure to report unsatisfactory laboratory performance (55 character width)
Closeout Org: _____ *Closeout EMP: _____ *Contact EMP: _____ *Procedure: _____ *Functl Area: _____
Code _____ *Cause CD: _____ **EA Number: _____ **NOV/NNC Issue Date: 1/1

Text: The licensee failed to investigate or refer to DHS the investigation unsatisfactory performance test results nor evaluate these findings received from the laboratory, and failed to submit the documented investigation record to the NRC as a report

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3	Safeguards
4	Health Physics 10 CFR Part 20
5	Transportation
6	Fuel Cycle And Materials Operations
7	Miscellaneous Matters
8	Emergency Preparedness

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* EP	Emergency Preparedness
* SEC	Security
* ETS-O	Engineering/Technical Support
AUX	Auxiliary Systems
CONT	Containment, Major Structures, and Major Steel Supports
ELEC	Electrical Equipment and Cables
ETS-C	Engineering/Technical Support
INST	Instrumentation
MECHC	Mechanical Components
N/A	Not Applicable
OTHR-C	Other Special Area for Construction / Pre-operational Testing
OTHR-O	Other Special Area for Operations / Startup Testing
PIPE	Piping Systems and Support
SAQU-C	Safety Assessment / Quality Verification
* SAQU-O	Safety Assessment / Quality Verification
SF	Soils and Foundations

CAUSE CODE

Enter the two digit code describing the cause. A maximum of two cause codes are permitted. Shown below is a listing of the valid cause codes and what they represent.

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11	Lack of Procedure
12	Inadequate Procedure
20	Engineering or Design Deficiency
21	Inadequate Testing
30	Personnel Error
31	Cognitive Error (Personnel Knowledgeable - Just An Error)
32	Communication Error
33	Potential Wrongdoing
34	Personnel Error Due to Lack of or Inadequate Training
40	Supervision / Management Control
41	Inadequate Resources - Equipment or Staffing
50	Equipment Failure
51	Aging
52	Random Equipment Failure
53	External (Tornado, Lightning)
60	Other

IFS Data Entry Form - Reactors Inspection (continued)

Update? (Y/N): N (Opened IR) Number: 93-30, 93-25, 93-27

***Sequence NBR: 02 Item Type: IFI **Severity: N/A **Supplement: —

	Status	*UPD I/R	*Proj. Closeout	*Actual Closeout
A	<u>0</u>	_____	<u>05/30/94</u>	_____
B	<u>0</u>	_____	<u>05/30/94</u>	_____
C	<u>0</u>	_____	<u>05/30/94</u>	_____

Title: Poor communication between site and Corporate FRD staff (55 character width)

Closeout Org: _____ *Closeout EMP: _____ *Contact EMP: _____ *Procedure: _____ *Functl Area: _____
Code _____ *Cause CD: _____ **EA Number: _____ **NOV/NNC Issue Date: _____

Text: Confusion about the reporting of concerns and the responsibility of each key player, issue determined to be a programmatic weakness

Update? (Y/N): N (Opened IR) Number: 93-30, 93-25, 93-27

***Sequence NBR: 03 Item Type: IFI **Severity: N/A **Supplement: —

	Status	*UPD I/R	*Proj. Closeout	*Actual Closeout
A	<u>0</u>	_____	<u>05/30/94</u>	_____
B	<u>0</u>	_____	<u>05/30/94</u>	_____
C	<u>0</u>	_____	<u>05/30/94</u>	_____

Title: Updating of random selection pools (55 character width)

Closeout Org: _____ *Closeout EMP: _____ *Contact EMP: _____ *Procedure: _____ *Functl Area: _____
Code _____ *Cause CD: _____ **EA Number: _____ **NOV/NNC Issue Date: _____

Text: Weaknesses exist in the manner in which the selection pools are updated

Update? (Y/N): _____ Opened IR Number: _____

***Sequence NBR: _____ Item Type: _____ **Severity: _____ **Supplement: _____

	Status	*UPD I/R	*Proj. Closeout	*Actual Closeout
A	_____	_____	_____	_____
B	_____	_____	_____	_____
C	_____	_____	_____	_____

Title: _____ (55 character width)

Closeout Org: _____ *Closeout EMP: _____ *Contact EMP: _____ *Procedure: _____ *Functl Area: _____
Code _____ *Cause CD: _____ **EA Number: _____ **NOV/NNC Issue Date: _____

Text: _____

