

# UNITED STATES NUCLEAR REGULATORY COMMISSION

REGION IV 1600 EAST LAMAR BOULEVARD ARLINGTON, TEXAS 76011-4511

September 13, 2023

Fadi Diya, Senior Vice President and Chief Nuclear Officer Ameren Missouri 8315 County Road 459 Steedman, MO 65077

SUBJECT: CALLAWAY PLANT - SECURITY BASELINE INSPECTION REPORT

05000483/2023401

#### Dear Fadi Diya:

On August 21, 2023, the U.S. Nuclear Regulatory Commission (NRC) completed an inspection at Callaway Plant and discussed the results of this inspection with B. Brown, Security Manager, and other members of your staff. The results of this inspection are documented in the enclosed report.

One finding of very low security significance (Green) is documented in this report. This finding involved a violation of NRC requirements. We are treating this violation as a non-cited violation (NCV) consistent with Section 2.3.2 of the Enforcement Policy.

A licensee-identified violation which was determined to be of very low security significance is documented in this report. We are treating this violation as an NCV consistent with Section 2.3.2 of the Enforcement Policy.

If you contest the violations or the significance or severity of the violations documented in this inspection report, you should provide a response within 30 days of the date of this inspection report, with the basis for your denial, to the U.S. Nuclear Regulatory Commission, ATTN: Document Control Desk, Washington, DC 20555-0001; with copies to the Regional Administrator, Region IV; the Director, Office of Enforcement; the Director, Office of Nuclear Security and Incident Response; and the NRC Resident Inspector at Callaway Plant.

The following cross cutting aspect was assigned to a finding using Inspection Manual Chapter 0310 "Aspects Within Cross Cutting Areas:" [P.6] - Self-Assessment.

If you disagree with a cross-cutting aspect assignment in this report, you should provide a response within 30 days of the date of this inspection report, with the basis for your disagreement, to the U.S. Nuclear Regulatory Commission, ATTN: Document Control Desk, Washington, DC 20555-0001; with copies to the Regional Administrator, Region IV; the Director, Office of Nuclear Security and Incident Response; and the NRC Resident Inspector at Callaway Plant.

F. Diya 2

This letter, its enclosure, and your response (if any) will be made available for public inspection and copying at <a href="http://www.nrc.gov/reading-rm/adams.html">http://www.nrc.gov/reading-rm/adams.html</a> and at the NRC Public Document Room in accordance with Title 10 of the *Code of Federal Regulations* 2.390, "Public Inspections, Exemptions, Requests for Withholding."

Sincerely,

Ray Kellar Signed by Kellar, Ray on 09/13/23

Ray L. Kellar, P.E., Chief Physical Security Branch Division of Radiological Safety & Security

Docket No. 05000483 License No. NPF-30

Enclosure: As stated

cc w/ encl: Distribution via LISTSERV

F. Diya 3

CALLAWAY PLANT – SECURITY BASELINE INSPECTION REPORT 05000483/2023401 DATED SEPTEMBER 13, 2023

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# U.S. NUCLEAR REGULATORY COMMISSION Inspection Report

Docket Number: 05000483

License Number: NPF-30

Report Number: 05000483/2023401

Enterprise Identifier: I-2023-401-0008

Licensee: Ameren

Facility: Callaway Plant

Location: Missouri

Inspection Dates: August 14, 2023, to August 21, 2023

Inspectors: D. Holman, Sr Physical Security Inspector

Approved By: Ray L. Kellar, P.E., Chief

Physical Security Branch

Division of Radiological Safety & Security

## SUMMARY

The U.S. Nuclear Regulatory Commission (NRC) continued monitoring the licensee's performance by conducting a security baseline inspection at Callaway Plant, in accordance with the Reactor Oversight Process. The Reactor Oversight Process is the NRC's program for overseeing the safe operation of commercial nuclear power reactors. Refer to <a href="https://www.nrc.gov/reactors/operating/oversight.html">https://www.nrc.gov/reactors/operating/oversight.html</a> for more information. A licensee-identified non-cited violation is documented in report section: 71130.08.

## **List of Findings and Violations**

Failure to establish policies and procedures that implement 10 CFR Part 26			
Cornerstone	Significance	Cross-Cutting	Report
		Aspect	Section
Security	Green	[P.6] - Self-	71130.08
	NCV 05000483/2023401-01	Assessment	
	Open/Closed		

The inspector identified two examples of one non-cited violation (NCV) of 26.27(a) for failure to establish, implement, and maintain written policies and procedures to meet the general performance objectives and applicable requirements of this part.

## **Additional Tracking Items**

None.

#### **INSPECTION SCOPES**

Inspections were conducted using the appropriate portions of the inspection procedures (IPs) in effect at the beginning of the inspection unless otherwise noted. Currently approved IPs with their attached revision histories are located on the public website at <a href="http://www.nrc.gov/reading-rm/doc-collections/insp-manual/inspection-procedure/index.html">http://www.nrc.gov/reading-rm/doc-collections/insp-manual/inspection-procedure/index.html</a>. Samples were declared complete when the IP requirements most appropriate to the inspection activity were met consistent with Inspection Manual Chapter (IMC) 2201, "Security Inspection Program for Commercial Nuclear Power Reactors." The inspectors reviewed selected procedures and records, observed activities, and interviewed personnel to assess licensee performance and compliance with Commission rules and regulations, license conditions, site procedures, and standards.

#### **SAFEGUARDS**

## 71130.08 - Fitness For Duty Program

The inspector evaluated the fitness for duty program by completing the following nominal range of inspection elements:

## Fitness For Duty Program (1 Sample)

- (1) Tier I: All Requirements
  - Tier II: All Requirements (except questionnaires/interviews associated with 02.07 and 02.08)
  - Tier III: All Requirements (except 02.13d, 02.14a/b/c)

#### **INSPECTION RESULTS**

Failure to establish policies and procedures that implement 10 CFR Part 26				
Cornerstone	Significance	Cross-Cutting	Report	
		Aspect	Section	
Security	Green	[P.6] - Self-	71130.08	
	NCV 05000483/2023401-01	Assessment		
	Open/Closed			

The inspector identified two examples of one NCV of 10 CFR 26.27(a) for failure to establish, implement, and maintain written policies and procedures to meet the general performance objectives and applicable requirements of this part.

<u>Description</u>: While reviewing policies and procedures on July 31, 2023, the inspector identified two examples of one NCV of 10 CFR 26.27(a) in which a licensee policy or procedure did not meet applicable requirements of 10 CFR Part 26.

First Example. While reviewing FFD Policy, POL0044, revision 010, the inspector noted section 3.18, states, "Misuse of over-the-counter drugs, prescription drugs, abuse of alcohol or legal drugs is considered a fitness for duty violation. If it is determined by the Medical Review Officer (MRO) that misuse or abuse is occurring, the individual's unescorted access will be revoked pending an investigation. A determination of fitness will be required and disciplinary action may be taken."

The inspector noted that 10 CFR 26.185(j)(3) states, "If the MRO determines that the donor

has used another individual's prescription medication and clinical evidence of drug abuse is found, the MRO shall report to the licensee the donor has violated the FFD policy." This section established the legal drugs under consideration are prescription medications and that the prescription does not belong to the donor.

The inspector further noted that 10 CFR 26.75(e)(1) established the licensee's required minimum sanction response to a first violation of the FFD policy involving a confirmed positive drug or alcohol test result must, as minimum, result in immediate unfavorable termination of the individual's authorization for at least 14 days from the date of the unfavorable termination. Therefore, the FFD Policy, section 3.18 does not implement applicable requirements of 10 CFR 26.75(e)(1) because revoking an individuals unescorted access pending an investigation that may result in disciplinary action after the MRO has determined a drug abuse related FFD policy violation does not meet NRC required minimum sanctions.

Second Example. While reviewing procedure XPD-PD-00005, revision 008, section 4.4.9.c., the inspector noted it states, "MRO, if it is determined the donor has used another individual's prescription medication, including a medication containing opiates, and no clinical evidence of abuse is found, IMMEDIATELY REPORT to AA/FFD Management the donor has misused prescription medication." The inspector recalled FFD Policy, POL0044, revision 010, section 3.18, states, in part, "misuse of over-the-counter drugs, prescription drugs ... is considered a fitness for duty violation." This is relevant because 10 CFR 26.185(c) states, in part, "If the MRO determines that a positive ... test result or other occurrence is an FFD policy violation, the MRO shall immediately notify the licensee's ... designated representative." Therefore, the inspector determined procedure XPD-PD-00005, revision 008, section 4.4.9. did not implement applicable requirements of 10 CFR 26.185(c) because it did not instruct the MRO to notify the licensee that a policy violation had occurred.

Corrective Actions: The FFD manager immediately notified the staff of the deficient language to ensure it was not improperly acted on until permanent corrective actions could be made. The licensee stated both documents would be revised to align with 10 CFR Part 26.

Corrective Action References: CR 202305573

## Performance Assessment:

Performance Deficiency: The failure to establish, implement, and maintain written policies and procedures to meet the general performance objectives and applicable requirements of 10 CFR Part 26 is a performance deficiency. It is a performance deficiency because it was within the licensee's ability to foresee and correct.

Screening: The inspector determined the performance deficiency was more than minor because it was associated with the Access Authorization attribute of the Security cornerstone and adversely affected the cornerstone objective to provide assurance that the licensee's security system and material control and accountability program use a defense-in-depth approach and can protect against (1) the design basis threat of radiological sabotage from external and internal threats, and (2) the theft or loss of radiological materials. It is more than minor because it could have resulted in a donor determined to have committed an FFD policy violation by the MRO being disciplined and returned to unescorted access authorization which would be contrary to the minimum sanctions required by 10 CFR 26.75 for policy violation sanctions involving confirmed positive drug tests.

Significance: The inspector assessed the significance of the finding using IMC 0609 Appendix E, Part I, "Baseline Security SDP for Power." The inspector determined the cumulative total for the finding is one (1) point. This was calculated by factoring the impact area (Vital Area) against Tier II, Inspection Procedure element 71130.08-02.05d/e. Because the calculated point total did not exceed the range for a Green determination (0 to 6 points), the inspector determined the finding to be of very low security significance.

Cross-Cutting Aspect: P.6 - Self-Assessment: The organization routinely conducts self-critical and objective assessments of its programs and practices. The licensee's self-assessment and audit programs should have been able to detect these language mismatches with 10 CFR Part 26.

## **Enforcement:**

Violation: Title 10 CFR 26.27(a) states, "Each licensee and other entity shall establish, implement, and maintain written policies and procedures to meet the general performance objectives and applicable requirements of this part."

Contrary to the above, the licensee failed to establish, implement, and maintain written policies and procedures to meet the general performance objectives and applicable requirements of this part. Specifically in the first example, FFD Policy, POL0044, revision 010, section 3.18, prescribed management actions following a FFD policy violation related to abuse of legal drugs that did not meet the applicable minimum management actions required in 10 CFR 26.75(c)(1) following a first violation of the FFD policy involving a confirmed positive drug test. Specifically in the second example, procedure XPD-PD-00005, revision 008, section 4.4.9.c, did not require the MRO to notify the licensee that a FFD policy violation had occurred if the MRO determined the donor had misused a prescription medication. Not requiring the MRO to notify the licensee that a FFD policy violation had occurred related to misuse of prescription medication did not meet applicable requirements in 10 CFR 26.185(c).

Enforcement Action: This violation is being treated as a non-cited violation, consistent with Section 2.3.2 of the Enforcement Policy.

### Licensee-Identified Non-Cited Violation

71130.08

This violation of very low safety significance was identified by the licensee, has been entered into the licensee's corrective action program and is being treated as a non-cited violation, consistent with Section 2.3.2 of the Enforcement Policy.

Violation: While reviewing CR 202207911 the inspector became aware that a trained FFD notifier called an individual who had been selected for random drug and alcohol testing thinking the individual was working at home. In reality, the individual was working remotely out of state, but because the notifier did not ask where the individual was, the notifier told the individual that they had been selected for a random collection when the individual was not available for testing. This inadvertently provided prior notification to the selected individual that they had been selected. Due to geographic separation, the FFD collection staff was unable to collect samples from the individual until 14 days after the individual became aware of the impending drug and alcohol test. This was a violation of 10 CFR 26.31(d)(2)(v) because an individual who was off site and not reasonably available was not tested at the earliest and practical opportunity without prior notification to the individual.

Significance/Severity: Green. When processed through the Baseline Security Significance Determination Process for Power Reactors, this issue screened out as zero points, Green.

Corrective Action References: CR 202207911 (Z170.0007)

#### **EXIT MEETINGS AND DEBRIEFS**

The inspectors verified no proprietary information was retained or documented in this report.

• On August 21, 2023, the inspectors presented the security baseline inspection results to B. Brown, Security Manager, and other members of the licensee staff.

## **DOCUMENTS REVIEWED**

Inspection Procedure	Туре	Designation	Description or Title	Revision or Date
71130.08	Corrective Action Documents	202102630, 202202395, 202202410, 202202396, 202207911, 202303885, 202304667, 202201942, 202207865, 202205100, 202201155, 202200867	Condition Report	Date
71130.08	Corrective Action Documents Resulting from Inspection	202207911, 202305561, 202305573	Condition Report	
71130.08	Miscellaneous	CA1943	Drug and Alcohol Test Notification	Revision 003
71130.08	Miscellaneous	CA3086	Notifier Instructions for Random Selections	Revision 002
71130.08	Miscellaneous	POL0044	Fitness For Duty Policy	Revision 010
71130.08	Procedures	APA-ZZ-00542	Event Review and Post Transient Evaluation	Revision 025
71130.08	Procedures	APA-ZZ-00906	Behavioral Observation Program	Revision 032
71130.08	Procedures	APA-ZZ00908	Fitness For Duty Program	Revision 040
71130.08	Procedures	XDP-PD-00001	General Administration of Drug/Alcohol Testing	Revision 036
71130.08	Procedures	XDP-PD-00005	Medical Review Officer/Substance Abuse Expert	Revision 008
71130.08	Procedures	XPD-PD-00004	Operation, Maintenance, and Quality Control of The Intoxilyzer 8000	Revision 014