

STATUS OF ALLEGATION PROGRAM

FISCAL YEAR 2000

ANNUAL REPORT

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## EXECUTIVE SUMMARY

In SECY-94-089, "Response to the Report of the Review Team for Reassessment of the NRC's Program for Protecting Allegers Against Retaliation," the staff committed to have the Agency Allegation Advisor (AAA) prepare an annual report for the Executive Director for Operations (EDO) that assesses the conduct of the allegation program in each NRC office and region that routinely handles allegations. This annual report fulfills that commitment. In this report, the staff discusses the status of recommendations for improving the allegation program, reviews allegation data for adverse trends for reactor and materials licensees and vendors, and reviews the resources expended on following up on technical allegations. Because the Office of Investigations prepares an annual report covering the follow-up of allegations involving wrongdoing, this report does not specifically address activities concerning allegations of wrongdoing.

Overall, the implementation of the allegation program has improved in all areas in the last year. The findings from the Fiscal Year (FY) 2000 audits and NRC's performance measures for the allegation program indicate continuing improvements in reviewing, documenting, tracking, and completing evaluations of allegations. The timeliness and quality of communications with allegers also continue to improve. Based on the FY 2000 audit of the allegation program, the allegation program achieved an effectiveness rating of 98.7 percent, compared to a rating of 97 percent in FY 1999. Additionally, no inappropriate disclosures of the identity of allegers occurred in FY 2000, continuing the performance of FY 1999.

After receiving increasing numbers of allegations in FY 1996 and FY 1997, the trend reversed significantly in FY 1998 with a 24 percent drop in the number of allegations received. The declining trend continued in FY 1999, but reversed in FY 2000. FY 2000 saw a 10 percent increase in allegations and 12 percent increase in concerns received compared to FY 1999. Based on anecdotal information from allegers and the types of concerns raised, the staff believes the primary contributors to the increase in the number of allegations and concerns received in FY 2000 were the mergers within the nuclear power industry and the stresses created by shorter refueling outages and plans for consolidating activities at the Portsmouth and Paducah gaseous diffusion plants.

The NRC review team that reassessed the NRC's program for protecting allegers from retaliation made 47 specific recommendations in January 1994 addressing how the agency could improve its program for protecting allegers against retaliation. The staff has completed action on all of the recommendations. Recommendations completed this fiscal year were (1) submitting proposed legislation to revise Section 211 of the Energy Reorganization Act of 1974 to provide more realistic time frames for the Department of Labor's (DOL's) review of discrimination complaints and more immediate remedies when DOL finds discrimination occurred and (2) providing feedback forms to allegers as one method to assess the effectiveness of the allegation program.

In preparing this report, a 5-year history of allegations was reviewed for reactor and material licensees and vendors to identify adverse trends. Given the Commission's continuing emphasis on establishing and maintaining a safety-conscious work environment, the analysis focused on allegations that originated from onsite sources, either from licensee or contractor employees, former employees, or anonymous sources. For reactor licensees, the staff used the criteria

outlined in the October 21, 1997, memorandum to the Commission from the EDO to identify reactor sites warranting additional review. After applying those criteria, the staff identified eleven reactor sites for a more in-depth review: D.C. Cook, Byron, St. Lucie, Braidwood, Susquehanna, Hatch, Callaway, Dresden, Indian Point 2, Comanche Peak, and Sequoyah. Each of these sites is discussed in the report.

Only two materials licensees were the subject of allegations at a level that warranted additional analysis, the Portsmouth and Paducah gaseous diffusion plants. On the basis of FY 2000 allegation statistics, the review did not identify any other materials licensees warranting additional review. Also, the FY 2000 allegation statistics indicate that no additional review is warranted for any vendors or contractors.

Over the last four years, the trend in resources expended on the follow-up of technical allegations has followed the trend in allegations received. The hours expended on allegation follow-up decreased from approximately 67,700 in FY 1997 (approximately 51 full time staff or Full Time Equivalent (FTE)) to 64,050 in FY 1998, representing approximately 49 FTE. This decrease paralleled the decline in the number of allegations received. The number of allegations received continued to decline in FY99 and this was reflected in the resources expended, 47,237 hours or 34.3 FTE. As noted above, the number of allegations received in FY 2000 increased 10 percent. The number of hours expended increased 20 percent to 56,749, or 44.2 FTE. The disproportionate increase in hours expended is discussed in more detail in the report.

In summary, the staff continues to emphasize addressing each allegation fully in a timely manner and the implementation of the allegation program continues to improve. However, continued emphasis must be placed on properly implementing the allegation program in handling each allegation, particularly with regard to protecting the identity of allegers and adequately addressing the issues.

## OVERVIEW OF THE ALLEGATION PROGRAM PERFORMANCE

The Commission established the allegation program to provide a way for individuals working in NRC-regulated activities and members of the public to provide safety and regulatory concerns directly to the NRC. The program includes a mechanism for the staff to track concerns submitted to the NRC to ensure that safety-significant concerns are evaluated and resolved in a timely manner, and that the results of NRC's actions are communicated to the individual who submitted the concerns, when appropriate.

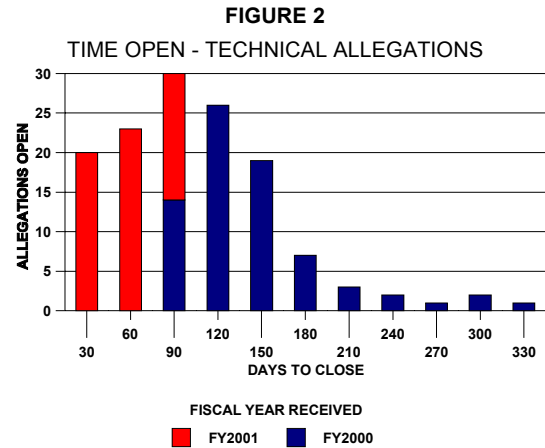
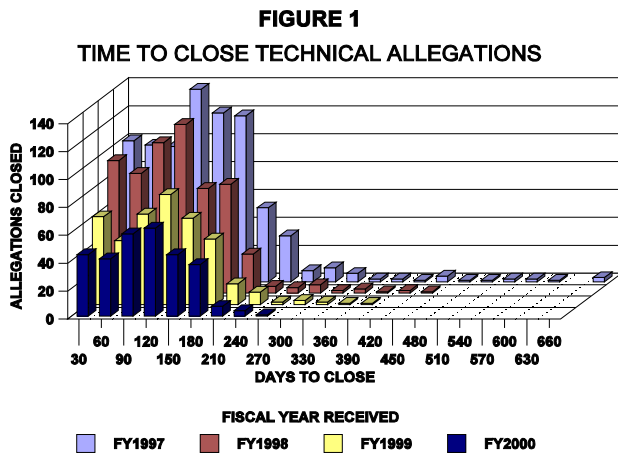
### Summary of Audit Results

The FY 2000 audit results show that, overall, the implementation of the allegation program continues to improve in the areas of timeliness and quality of communications with alleged, documenting concerns and the bases for closing allegations, quality of technical review and resolution, maintaining a status of the resolution of concerns, timeliness of allegation review boards (ARB) meetings, and the timeliness of resolving allegations. The improvements in timeliness noted during the audits are corroborated by the performance indicators. However, management needs to continue to be attentive to the quality of the technical review and avoiding unnecessary delays in resolving individual allegations.

The FY 2000 audits consisted of a review of a sample of closed allegation files and discussions with the Allegation Coordinators and other staff members concerning specific allegations and the allegation process. The selected allegations included technical and wrongdoing issues involving contractors and reactor, materials, and Agreement State licensees. The goal for the sample size was 10 percent of the total number of allegations received during the approximately one-year audit period. The actual sample size varied slightly from the goal, depending on the complexity of the allegations selected for review and the time available for the audit.

A summary of the results of the audits of each region, the Office of Nuclear Reactor Regulation (NRR), and the Office of Nuclear Materials Safety and Safeguards (NMSS) follows. The summary includes a discussion of relevant performance indicators. The performance of each region, NRR, and NMSS in conducting ARB meetings and issuing acknowledgment letters is compared with the performance goals established in the operating plans for FY 2000. ARBs are to be conducted within 30 days of receipt of the allegation. Ninety percent of acknowledgment letters are to be issued within 30 days and 100 percent within 45 days.

Agency performance continued to improve in FY 2000, with all goals met. The goals for closing technical allegations within 180 days and closing wrongdoing allegations within 540 days, on average, were met at 106 days and 344 days respectively. Figure 1, on the next page, shows the distribution of the time it took to close technical allegations, in 30 day intervals. The figure also shows the significant improvement in the time to close that has occurred over the last four fiscal years. To complete the picture, Figure 2 shows the age of technical allegations that are currently open. In some of the regions or offices, the average time to close in FY 2000 was slightly more than in FY 1999. As resources are stretched, the regions and offices are trying to include the followup of allegations in previously scheduled inspections in an attempt to use their resources more efficiently.



The goals of issuing 90 percent of the acknowledgment letters within 30 days and 100 percent within 45 days were met. This is an improvement over FY 1999, when one acknowledgment letter was issued after the 45-day goal. Additionally, the goal of conducting all ARBs within 30 days was met.

In addition to timeliness goals, the staff instituted an effectiveness goal for the allegation program for FY 1999 and beyond. The goal is that staff followup of allegations appropriately captures and responds to each issue raised in 90 percent of the allegations reviewed during the annual audit. For FY 2000, 98.7 percent of the allegations reviewed appropriately captured and responded to each issue in the allegation. During the FY 2000 audits, the staff found that out of the 78 allegations reviewed, one issue in one allegation was not adequately addressed in the closure letter to the alieger. This oversight was noted by the responsible region during a routine quality check and the issue was addressed in a followup letter that was issued prior to the audit. Although the region found and corrected its error, the goal of addressing all the issues in the closure letter was not met.

#### Region I

Region I's implementation of the allegation program was audited in April 2000; 15 allegation files were reviewed. The audit indicated that the region's implementation of the allegation program is very good. The regional staff responded very quickly to allegations with safety significance. These allegations were brought to an ARB and evaluated expeditiously. Allegations were thoroughly reviewed and bases for closure were well documented. This is supported by

Region I achieving 100 percent with respect to the effectiveness goal. For the 15 allegations reviewed, the region had addressed all the concerns. The quality of the correspondence with aliegers was also very good.

The timeliness of acknowledgment letters and initial ARB meetings continued to be very good. During FY 2000, Region I held 147 initial ARB meetings and issued 106 acknowledgment letters. All ARBs were held within 30 days. The region issued 99 percent of the acknowledgment letters within 30 days and 100 percent within 45 days. This is a continuation of the region's performance in FY 1999.

The region's average time to close technical allegations has improved during the last six years, decreasing from 157 days in FY 1994 to 90 days in FY 1999. The average time to close in FY 2000 was 94 days. This compares very favorably with the agency's goal of 180 days. Overall, the region is doing a very good job of responding to allegations.

Based on the audit, the one area in which the region needed to improve its performance was the proper recording of time spent on allegation follow-up. For three of the six allegations for which time charges were reviewed, no time was charged to allegation follow-up. The region conducted an extent of condition review by examining time charged on 16 additional allegations that identified some additional examples. As a result of the audit and the results of the internal review, the region issued additional guidance and conducted additional training on the proper reporting of time spent on allegations. At the end of each ARB, the staff is reminded again to properly report their time.

## Region II

Region II's implementation of the allegation program was audited in March 2000; 11 allegation files were reviewed. The audit indicated that the region's implementation of the allegation program is very good. The regional staff responded very quickly to allegations with safety significance. These allegations were brought to an ARB and evaluated expeditiously. Allegations were thoroughly reviewed and bases for closure were well documented. However, the audit noted that one concern had not been adequately addressed in the closure letter to the alieger. During a routine quality check the region discovered the oversight and sent another letter to the alieger addressing the concern. The second letter was sent two months after the initial letter. As a consequence, Region II received a rating of 91 percent with respect to the effectiveness goal.

During FY 2000 Region II held 161 initial ARB meetings and issued 112 acknowledgment letters. All ARBs were held within 30 days. The region issued 97 percent of the acknowledgment letters within 30 days and 100 percent within 45 days. During FY 1999, all ARBs met within 30 days and the region issued 99 percent of the acknowledgment letters within 30 days and 100 percent within 45 days.

In the last six years, Region II has significantly improved the average time to close technical allegations. From FY 1994 to FY 1999 the region's average has ranged from 203 days to 94 days, respectively. For FY 2000, the region's timeliness was 98 days. This compares very favorably with the agency's goal of 180 days. Overall, the region is doing a very good job responding to allegations.

Based on the audit, the one area in which the region needed to improve its performance was the proper recording of time spent on allegation follow-up. For two of the six allegations for which time charges were reviewed, no time was charged to allegation follow-up. The region provided additional training to the inspectors and reemphasized to the branch chiefs the importance of verifying that inspectors are properly reporting time spent on allegations.

## Region III

Region III's implementation of the allegation program was audited in March 2000; 22 allegation files were reviewed. The audit indicated that the region's implementation of the allegation program is very good. The regional staff responded very quickly to allegations with safety significance. These allegations were brought to an ARB and evaluated expeditiously. Allegations were thoroughly reviewed and bases for closure were well documented. This is supported by Region III achieving 100 percent with respect to the effectiveness goal. For the 22 allegations reviewed, the region had addressed all the concerns. The quality of the correspondence with allegers was also very good. Additionally, the auditors found the staff to be appropriately charging time spent on allegation follow-up.

During FY 2000, Region III held 222 initial ARB meetings and issued 159 acknowledgment letters. All of the ARBs were held and all of the acknowledgment letters were issued within 30 days. This year's performance is a continuation of last year's performance.

During the 5-year period of FY 1994 through FY 1999, the region's average time to close technical allegations oscillated, with a low of 107 days and a high of 125 days. For FY 2000, the average was 120 days, well within the agency's goal of 180 days, on average. The increase from the 107-day average for FY 1999 is largely due to the increase in workload due to the increase in the number of allegations Region III received this fiscal year. Overall, the region is doing a very good job responding to allegations.

## Region IV

Region IV's implementation of the allegation program was audited in April 2000; 20 allegation files were reviewed. The regional staff responded very quickly to allegations with safety significance. These allegations were brought to an ARB and evaluated expeditiously. Allegations were thoroughly reviewed and bases for closure were well documented. This is supported by Region IV achieving 100 percent with respect to the effectiveness goal. For the 20 allegations reviewed, the region had addressed all the concerns. The quality of the correspondence with allegers was also very good. Additionally, the auditors found the staff to be appropriately charging time spent on allegation follow-up.

During FY 2000, Region IV held 178 initial ARB meetings and issued 110 acknowledgment letters. All of the ARBs met within 30 days. The region issued 96 percent of the acknowledgment letters within 30 days and 100 percent within 45 days. This compares well with FY 1999 in which all of the ARBs met within 30 days, 99 percent of the acknowledgment letters were issued within 30 days and 100 percent within 45 days.

The region's average time to close technical allegations has ranged from a low of 81 days in FY94 to a high of 111 days in FY97, with an FY98 average of 103 days. For FY 2000, the average time to close technical allegations was 105 days, an improvement over the 112-day average for FY 1999, and well within the agency's goal of 180 days. Overall, the region is doing a very good job responding to allegations.



## NRR

NRR's implementation of the allegation program was audited in April 2000; 8 allegation files were reviewed. The NRR staff responded well to allegations with safety significance. These allegations were brought to an ARB and evaluated expeditiously. Allegations were thoroughly reviewed and bases for closure were well documented. This is supported by NRR achieving 100 percent with respect to the effectiveness goal. For the eight allegations reviewed, the office had addressed all the concerns. The quality of the correspondence with alлегers was also very good. Additionally, the auditors found the staff to be appropriately charging time spent on allegation follow-up.

During FY 2000, NRR held 55 initial ARB meetings and issued 39 acknowledgment letters. All of the ARBs were held within 30 days. NRR issued 97 percent of the acknowledgment letters within 30 days and 100 percent within 45 days. This compares well with FY 1999 in which all of the ARBs met within 30 days, 96 percent of the acknowledgment letters were issued within 30 days, and 100 percent within 45 days.

NRR's average time to close technical allegations has varied depending on how many older allegations are closed in a given year. The average time to closure has ranged from 346 days in FY95 to 102 days in FY 2000. Overall, NRR is doing a very good job responding to allegations.

## NMSS

NMSS' implementation of the allegation program was audited in March 2000; two allegation files were reviewed. The NRR staff responded well to allegations with safety significance. These allegations were brought to an ARB and evaluated expeditiously. Allegations were thoroughly reviewed and bases for closure were well documented. This is supported by NMSS achieving 100 percent with respect to the effectiveness goal. For the two allegations reviewed, the office had addressed all the concerns. The quality of the correspondence with alлегers was also very good. Additionally, the auditors found the staff to be appropriately charging time spent on allegation follow-up.

During FY 2000, NMSS held 38 initial ARB meetings and issued 24 acknowledgment letters. All initial ARBs met within 30 days and all acknowledgment letters were issued within 30 days. This is a continuation of the office's performance in FY 1999. Additionally, NMSS achieved a rating of 100 percent for the effectiveness goal. NMSS' average time to close technical allegations has ranged from 42 days in FY95 to 174 days in FY98. The average time to close technical allegations for FY 2000 was 95 days. Overall, NMSS is doing a very good job of implementing the allegation program.

## Alleger Feedback on Performance

During FY 2000, the staff closed 733 allegations that included correspondence with an alleger. The staff was contacted 22 times by an alleger after the alleger had received a letter explaining the actions taken by the staff to follow-up on the issues raised and the findings concerning those issues. In each case the staff reviewed information provided by the alleger to determine if any of the information impacted the actions taken and conclusions reached by the staff. With

the exception of two cases that are still under review, the staff determined it had adequately addressed the issues.

The staff is implementing a more independent and comprehensive feedback mechanism. For allegations received after October 1, 2000, the staff is enclosing a feedback form in all letters that inform allegeders of the results of the staff's review. The feedback form will provide more complete and quantitative data on the performance of the allegation program. The use of the survey form was approved for a one-year trial program. At the conclusion of the trial period, the staff will inform the Commission of the feedback and make a recommendation on the value of continuing to provide a feedback form to all allegeders or other options.

#### Protecting the Identity of Allegers

One element of the allegation program that is essential to its credibility is protecting the identity of allegeders to the extent possible. During FY 2000, the staff is not aware of any instances in which it inappropriately disclosed the identity of any allegeders. Given the importance of protecting the identity of allegeders' identities, personal responsibility and accountability continues to be emphasized in training sessions with the staff.

#### Resources Expended on Allegations

Lesson 5 from the River Bend Review Team noted that resource expenditure on the handling of allegations by the headquarters and regional staff needs to be fully documented in the agency's automated data processing systems and that the current level of resources being spent on handling allegations needs to be periodically evaluated. As noted in the section on audit results, there is room for additional improvement in accurately recording time spent on followup of allegations.

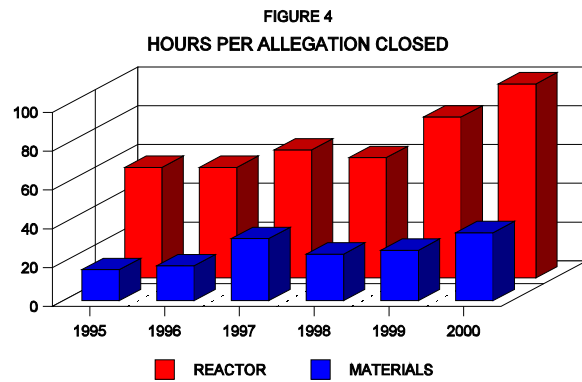
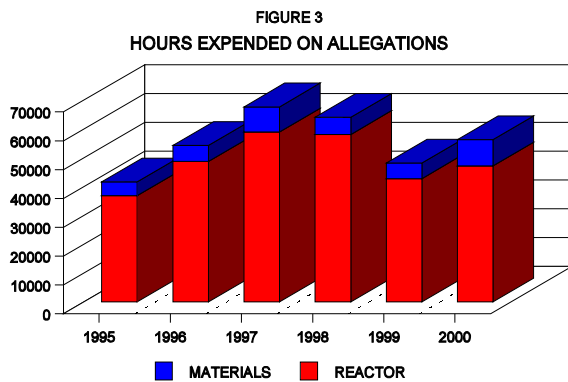
As part of this report, the resources expended on handling allegations were reviewed. Figure 3 below shows the hours expended by the technical staff in handling allegations concerning reactor and materials licensees<sup>1</sup> from FY 1995 through FY 2000. The graph shows a significant increase in the hours expended on technical allegations from FY 1995 through FY 1997, rising from 30,897 hours to 67,668 hours, or 51 FTE. The trend changes in FY 1998 and FY 1999 with decreases to 64,050 hours and 47,232 hours, respectively. The trend reversed in FY 2000 with an increase to 56,749 hours. As noted below, the changes are most heavily influenced by the changes in the hours expended on allegations concerning reactors.

In consideration of trends at the time the FY 1999 budget was developed, NRR increased the resources budgeted for the followup of reactor-related technical allegations in FY 1999 to 45.5 FTE. In developing the operating plan for FY 1999, the staff considered the decline in allegations received in FY 1998 and adjusted the number of FTE allocated for allegation followup to 43.5. The NRC actually expended 34.3 FTE (42,812 hours) following up on reactor-related allegations in FY 1999. For FY 2000, the staff budgeted 44.9 FTE, approximately

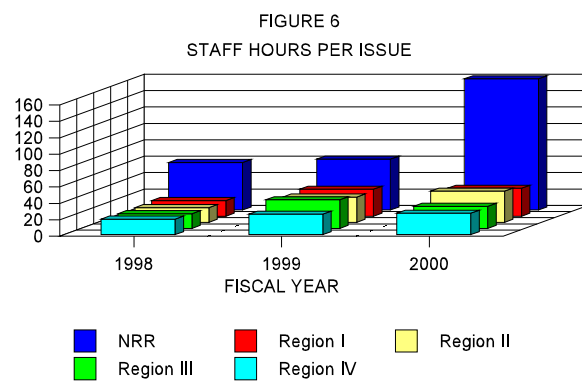
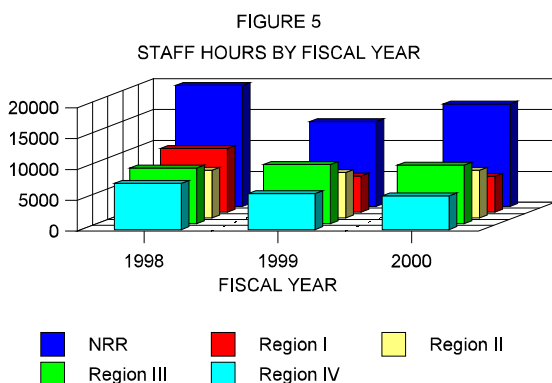
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<sup>1</sup> Hours for materials allegations includes time spent by the regions and NMSS on allegations concerning agreement state licensees. Time spent on issues concerning agreement state licensees is not tracked separately.

56,472 hours, for the followup of reactor-related technical allegations. For FY 2000, the staff expended 47,718 hours for the followup of reactor-related technical allegations.



The reason for the large increase in the number of hours expended on closing reactor-related allegations was explored further by looking at total hours expended and the labor rate<sup>2</sup> for each region and NRR for FY 1998, FY 1999, and FY 2000. Because the number of issues contained in an allegation varies from allegation to allegation, this can have a large impact on the number of hours expended. To account for this, labor rates were calculated on a per issue basis rather than a per allegation basis. Figure 5 displays the total hours expended and Figure 6 displays the labor rates for each region and NRR for FY 1998, FY 1999, and FY 2000.



Historically, NRR's labor rate has been higher than the regions because the issues addressed in NRR are the more complex technical issues involving the design bases and/or licensing bases for nuclear power plants and generic issues that sometimes involve a class of plants,

<sup>2</sup> The labor rate is calculated by dividing the number of hours expended on closing reactor-related issues during the fiscal year by the number of reactor-related issues that are closed in the fiscal year. The hours include the time spent by the technical staff and the allegation coordinators, but does not include the time spent by the Agency Allegation Advisor or the Assistant Agency Allegation Advisor.

e.g., all Westinghouse pressurized water reactors. However, this alone does not totally explain the large increase in the labor rate experienced in FY 2000. NRR management is still exploring the reasons for the increase.

For the materials-related allegations, NMSS increased the budgeted resources for follow-up of materials-related allegations to 5.4 FTE, based on a rising number of allegations received at the time the FY 1999 budget was being developed. The staff actually expended 4 FTE (5420 hours) on allegation follow-up of materials related allegations in FY 1999. For FY 2000, NMSS budgeted 4.6 FTE, approximately 6210 hours, for allegation follow-up. With the increase in materials related allegations in FY 2000, the staff expended 9031 hours on allegation follow-up. With the lead time necessary for preparing budget estimates, the staff's assumptions will continue to lag actual expenditures in volatile areas like allegations due to the difficulty in predicting how many allegations will be received.

The staff continues to emphasize the importance of the accurate recording of the number of hours expended on allegation followup. As the staff becomes increasingly more diligent in properly recording the hours spent on allegation follow-up, the labor rate will increase until the accuracy is close to 100 percent. The audits found examples in which the staff still is not recording all of the hours expended on allegation followup. This indicates the labor rates are likely to increase if the recording of hours expended is more accurate.

#### Program Enhancements

To improve the implementation of the program and to attempt to measure the outcomes of the allegation program, the staff completed the following actions during the year:

- Allegation Guidance Memorandum (AGM) 2000-01 was issued on July 5, 2000. This AGM was issued to add definitions for "discrimination" and "*Prima Facie*" and to clarify guidance on (1) responding to requests for information submitted under the Freedom of Information Act (FOIA), (2) issuing letters to allegers on the status of NRC's review of their issues, (3) standard responses to issues submitted by e-mail, and (4) what to do when an individual submits additional issues.
- The staff completed actions necessary to receive approval from the Office of Management and Budget to issue a survey to allegers that requests their input on the performance of the allegation program. The survey will be used to attempt to measure the outcome of the allegation program for allegations received in FY 2001.

On the basis of the results of the FY 2000 audits and the allegation program performance indicators as of September 30, 2000, the changes made to the allegation program in the last five years continue to have a positive affect on the allegation program.

## STATUS OF IMPLEMENTATION OF RECOMMENDATIONS TO IMPROVE THE ALLEGATION PROGRAM

### Recommendations of Review Team for Reassessment of the NRC's Program for Protecting Allegers Against Retaliation

On January 7, 1994, the review team issued its report, NUREG-1499, "Report of the Review Team for Reassessment of the NRC's Program for Protecting Allegers Against Retaliation." The review team made 47 specific recommendations addressing how the agency could strengthen its program for protecting allegers from retaliation. The staff has completed action on all 47 recommendations. The two recommendations that were completed this fiscal year were II.C-2, support legislative changes to Section 211 of the Energy Reorganization Act of 1974, and II.B-8, develop a standard form to be included with allexer closeout correspondence to solicit feedback on the NRC's handling of a given concern.

- (1) Recommendation II.C-2 stated that the Commission should support legislation to amend Section 211 to produce more realistic timeliness goals for completing steps in the DOL process for investigating and litigating discrimination complaints.

The draft legislation was submitted jointly by DOL and the NRC on March 14, 2000.

- (2) Recommendation II.B-8 stated that NRC should develop a standard form to be enclosed in allexer closeout correspondence to solicit feedback on the NRC's handling of a given concern.

As of October 1, 2000, the staff has initiated a one-year trial program of providing feedback forms in all letters informing the allexer of the result of the staff's review. For allegations received on or after October 1, 2000, the staff will include a survey form in the envelope with the closure letter. At the conclusion of the trial period, the staff will make a recommendation to the Commission on the need to continue providing a feedback form to all allegers or to move to a periodic survey.

### General Accounting Office Recommendations

The General Accounting Office (GAO), in its report "NUCLEAR EMPLOYEE SAFETY CONCERNS – Allegation System Offers Better Protection, but Important Issues Remain," made specific recommendations for improving the timeliness of the DOL's allegation processing, the NRC's ability to monitor the allegation process, and the NRC's knowledge of the work environment at nuclear power plants. At the beginning of FY 2000, two recommendations remained open. The two recommendations that remained open were GAO endorsements of the two recommendations from the NRC review team that are discussed in the section above. These recommendations are now closed.

## TRENDS IN ALLEGATIONS

Review Team Recommendation II.B-14 stated that the NRC should monitor both technical and discrimination allegations to discern trends or sudden increases that might justify the NRC questioning the licensee as to the root causes of such changes or trends. In preparing this

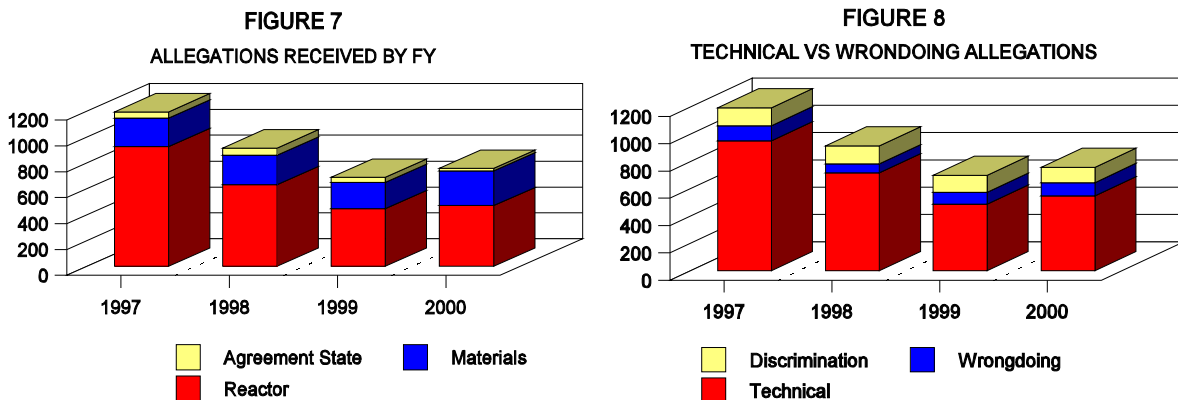
report, a 5-year history of allegations was reviewed for reactor and material licensees and vendors.

With the continuing emphasis on establishing and maintaining a safety-conscious work environment, the staff focused on those allegations that have the potential to provide insights into the environment. To achieve this goal, the staff selected only those allegations submitted by licensee or contractor employees or by former employees or by anonymous sources. The staff is currently performing the analysis twice a year – in the first quarter of the fiscal year to support the annual report and in the third quarter to support the annual assessment meeting. In addition, an analysis for a particular site or licensee may be performed whenever allegations or inspection findings indicate it is warranted. The discussions in the sections on trends concerning reactor and materials licensees and vendors or contractors that follow are based on allegations from onsite sources.

The staff also reviews trends in allegations to identify national trends for reactor and materials allegations, shifts in users of the allegation program, and to assess the impact on the workload in the regions and NRR and NMSS. These trends are discussed in the next section on general trends.

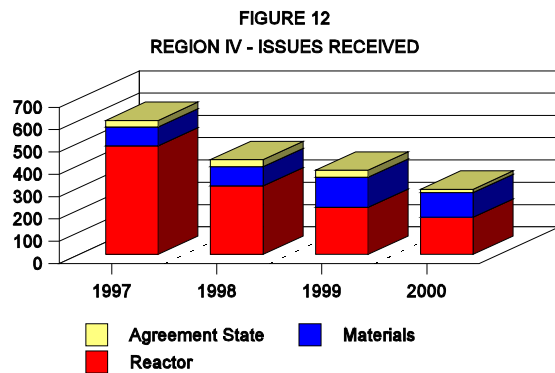
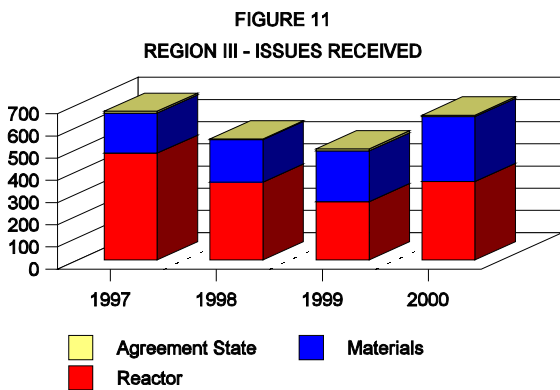
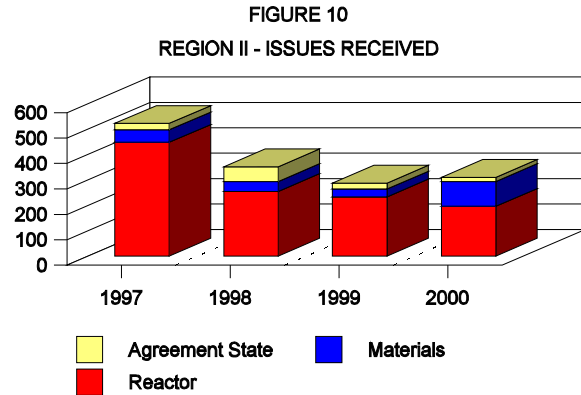
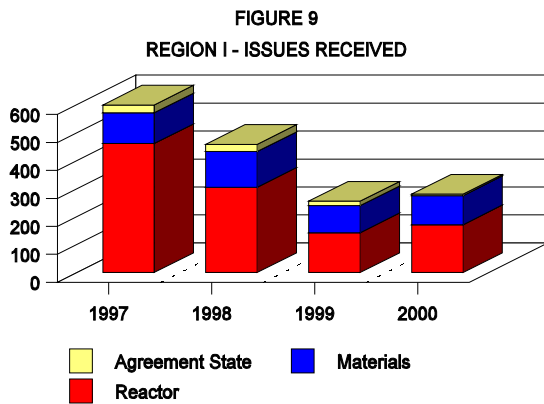
### General Trends

National trends are of interest because they are used in developing budget assumptions, labor rates, and preparing operating plans. As the following graphs indicate, there can be significant changes in the number of allegations received due to internal and external influences. Figures 7 and 8 below show the 4-year national trends. For FY 2000, it is evident from Figure 7 that allegations regarding materials licensees are a larger percentage of the total number of allegations. This increase is almost entirely due to the increase in the number of allegations concerning the Portsmouth and Paducah gaseous diffusion plants. From Figure 8, one can see that the number of allegations involving discrimination or other types of wrongdoing has remained fairly constant as the total number of allegations has declined.

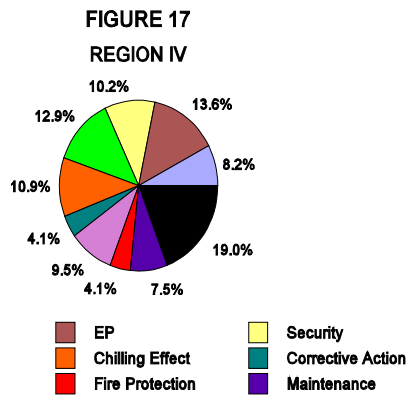
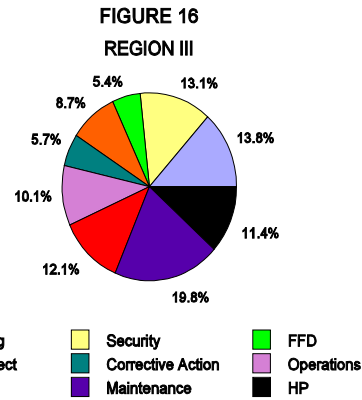
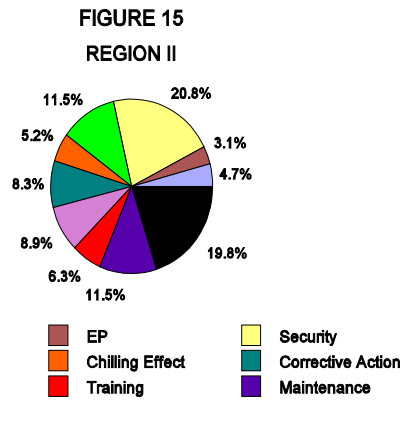
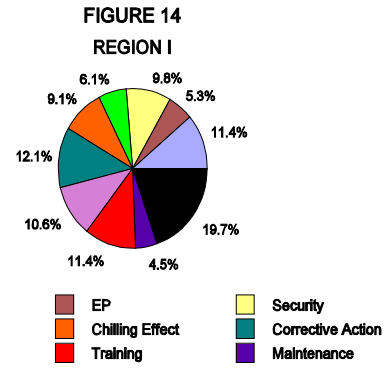
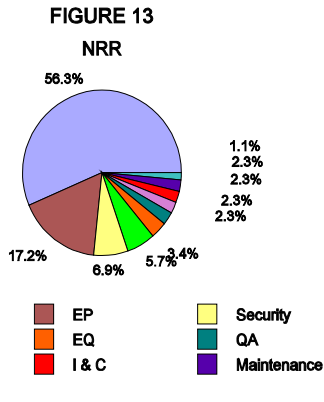


As stated above, the staff also looks for trends in the workload by organization, disciplines or organizations from which allegations originate, and the sources of allegations. The allegation tracking software that was deployed in October 1996 provides for tracking the source category for each allegation and the discipline for each concern. With four years of data available, the staff is analyzing and reporting statistics at the allegation level and at the concern level. The concern level analyses produce a better picture of the allegation workload and allow the staff to track whether individual concerns are substantiated.

Figures 9, 10, 11, and 12 show the shift of allegation workload in the regions. With the NRC's budget prepared two years in advance, budgeted resources may not reflect the actual workload in the organization when you have shifts in workload as you see in allegations.



To provide further insights into the areas in which the NRC is spending resources on reactor-related allegation followup, the following graphs depict the nine or ten areas that represent approximately 80 percent of the issues received in that office or region.

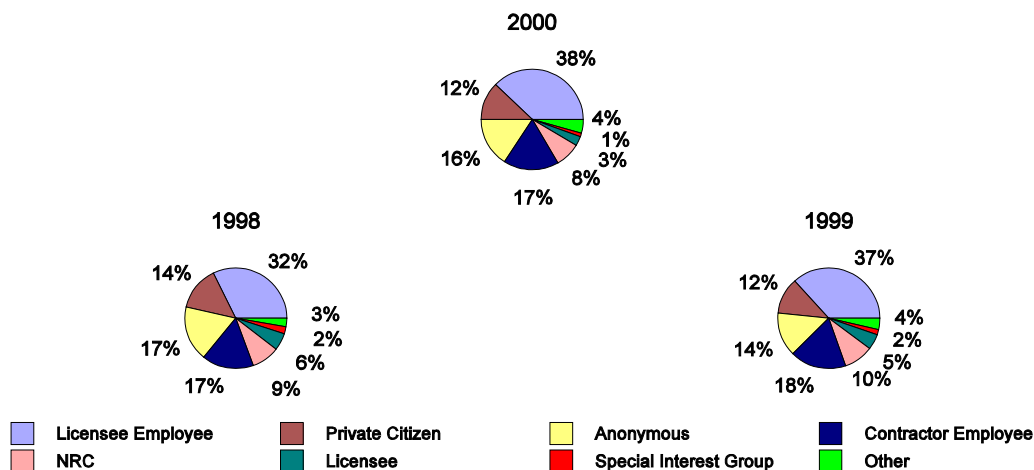


EP - Emergency Preparedness  
 EQ - Environmental Qualification  
 FFD - Fitness For Duty  
 HP - Health Physics  
 I&C - Instrumentation & Control  
 QA - Quality Assurance



Figure 13 provides a breakdown of allegations received by categories of sources for the last three years. What these graphs indicate is that while there may be a shift from one year to the next, there are no large shifts in one direction over the three-year period.

**FIGURE 18  
ALLEGATIONS RECEIVED BY SOURCE CATEGORY**



Two categories deserve some explanation. The source category “NRC” is used for when the NRC staff suspects a violation of requirements is deliberate or due to careless disregard and the Office of Investigations opens an investigation. The category “Licensee” is used for the same kinds of issues that are reported by a licensee to the NRC. An allegation number is used to track the followup on the technical and wrongdoing aspects of the issue.

Allegation Trends at Reactor Licensees

For reactor licensees, statistics on allegations received from October 1995 through September 2000 by operating reactor site are given in the tables in Appendix 1. The tables include allegations received, discrimination allegations received, and allegations substantiated

The NRC received 467 allegations concerning reactor licensees or their contractors in FY 2000, involving 1037 individual concerns. This represents a 5 percent increase in reactor-related allegations received and a 10 percent increase in concerns received, when compared to FY 1999 statistics. The NRC received 445 allegations concerning reactor licensees or their contractors in FY 1999, involving 945 individual concerns.

In determining which reactor sites should receive a more in-depth review, the staff applied the following criteria:

- 1) The number of allegations received exceeds 1.5 times the median value for the industry, but does not exceed two times the median, and there is a 50 percent increase in the number of allegations received over the previous year.

2) The number of allegations received exceeds 2 times the median value, but does not exceed 3 times the median, and there is a 25 percent increase in the number of allegations received over the previous year.

3) The number of allegations received exceeds 3 times the median value.

The eleven reactor sites that met one of these criteria are D.C. Cook (24), Byron (22), St. Lucie (16), Braidwood (16), Susquehanna (13), Hatch (12), Callaway (12), Dresden (9), Indian Point 2 (8), Comanche Peak (7), and Sequoyah (7). D.C. Cook, Byron, St. Lucie, Braidwood, and Susquehanna each exceeded 3 times the industry median of four allegations. Hatch, Callaway, and Dresden exceeded 2 times the median and experienced more than a 25 percent increase in the number of allegations concerning the site. Indian Point 2, Comanche Peak, and Sequoyah exceed 1.5 times the median and experienced more than a 50 percent increase in the number of allegations concerning the site. A more detailed discussion of each of these sites follows.

#### D.C. Cook

During the 5-year period analyzed (FY 1996 through FY 2000), the number of allegations submitted by onsite sources was at or below the median in FY 1996 and FY 1997. The NRC received 12 allegations from onsite sources in FY1998, 17 in FY 1999 and 24 in FY 2000. This trend is consistent with trends exhibited by other plants that have been in extended shutdowns. The number of allegations submitted to the NRC tends to rise as the plant gets closer to startup and the workforce is reduced to a size needed for an operating unit.

The number of discrimination allegations was low at D.C. Cook from FY 1996 through FY 1998. The NRC received one or two discrimination allegations in each of those years. However, in FY 1999 the NRC received six allegations of discrimination and in FY 2000 five allegations of discrimination were received. In May 2000, the NRC issued a Notice of Violation for a discriminatory act that occurred in October 1998. The staff did not issue a civil penalty because of the corrective actions taken by the licensee. The corrective actions included, but were not limited to: (1) promptly settling the complaint before an OSHA investigation; (2) holding meetings with all supervisors; (3) enhancing the employee concerns program (ECP) and publicizing it; (4) strengthening the utility's policy on discrimination; (5) providing training to all managers and supervisors; and (6) taking steps to ensure that contractors understand and abide by the licensee's policy on discrimination.

As of December 1, 2000, six allegations of the discrimination allegations concerning D.C. Cook were still open. One of the open allegations was received in FY 1996 and is open pending a decision by DOL's Administrative Review Board (ARB) concerning an Administrative Law Judge's (ALJ's) decision that discrimination for raising safety concerns was not a factor in the termination of employment of a security guard.

While the number of allegations of discrimination has increased in the last two years, as of December 1, 2000, no additional discrimination concerns have been substantiated. A review of the specific issues raised and the organizations involved indicates there are no discernable trends. There are no indications in the information available from allegations that employees are afraid to raise issues within the company or externally. This conclusion is further supported

by the fact that for slightly more than 50 percent of the allegations received by the NRC, the allegor was willing to have the NRC refer some of the issues to the licensee for review and response. The staff views this as a positive indication of the work environment. The staff will continue to monitor the outcome on the open discrimination allegations and the general allegation trend.

## Byron

During the 5-year period analyzed (FY 1996 through FY 2000), the number of allegations received from onsite sources increased fairly steadily from 3 in FY 1996 to 22 in FY 2000. The number of allegations of discrimination increased significantly in FY 2000, rising from one in FY 1996, one in FY 1998, and one in FY 1999, to five in FY 2000. Although no discrimination allegations have been substantiated in the last three years, as of December 1, 2000, there were four open discrimination allegations.

As a result of allegations received in the later part of FY 1998, the staff asked the licensee to address specific examples of what appeared to be behavior by supervisors and managers at Byron that may discourage employees from raising safety issues. The licensee conducted an assessment of the work environment at Byron and responded to the staff in November 1998. In March 1999, the staff asked for additional information concerning the licensee's assessment of the work environment at Byron and requested that the licensee attend a public meeting to discuss the work environment issues. The licensee responded to the staff in a letter dated May 26, 1999, and on May 27, 1999, met with the staff to discuss the control of overtime and work environment issues.

While the licensee's assessment concluded that some of the specific examples were substantiated, the licensee stated that (1) the work environment at Byron is conducive to raising safety concerns, (2) workers are not hesitant to raise safety issues, (3) there is a strong nuclear safety ethic demonstrated at Byron, and (4) alternate means to raise safety issues are being used. The licensee also described actions taken to improve the work environment, including training for all managers and first line supervisors on establishing and maintaining a safety conscious work environment and individual coaching sessions for some supervisors.

The issue of the number of allegations concerning Byron was raised again with the licensee during a public meeting that was held in Region III on December 10, 1999, to discuss overall performance at all ComEd sites. The issue was also a topic of discussion at a meeting with licensee management on June 27, 2000. During that meeting, the licensee stated based on their internal assessments, employees at Byron are comfortable raising safety concerns.

An area that appears to indicate that employees are more comfortable with the licensee's approach to issues is the increase in the number of times employees are willing to have allegations referred to the licensee for review and resolution. In FY 2000, allegors agreed to refer at least some of the issues to the licensee for review, evaluation, and response 78 percent of the time. Slightly more than 51 percent of the individual issues were referred to the licensee. This compares favorably with the national rate of referral for reactor issues of 48 percent for allegations and 36 percent for individual issues. The staff will continue to monitor the outcome on the open discrimination allegations and the general allegation trend.

## St. Lucie

From FY 1996 through FY 2000, the number of allegations received from onsite sources has steadily declined, 61 in FY 1997, 33 in FY 1998, 31 in FY 1999, and 18 in FY 2000. The number of allegations of discrimination rose to four in FY 2000, compared to one in FY 1999 and two in FY 1998. While the number of claims of discrimination has risen, there has not been a substantiated case of discrimination since 1996. One allegation of discrimination was open as of December 1, 2000.

Although St. Lucie met the criteria for additional review based on exceeding three times the median number of allegations for the industry, the trend in allegations received is declining. A review of the specific issues raised and the organizations involved indicates there are no discernable trends. There are no indications in the information available from allegations that employees are reluctant to raise issues within the company or externally. The staff will continue to monitor the outcome on the open discrimination allegation and the general allegation trend.

## Braidwood

During the 5-year period analyzed (FY 1996 through FY 2000), the number of allegations received from onsite sources oscillated from FY 1996 through FY 1999. The number increased in years there was a refueling outage. This oscillation is common in the industry and is in large part due to the increase in the number of contractors employed during outages. However, in FY 2000, the NRC received 17 allegations from onsite sources, compared to nine in FY 1999. From a review of the issues, a large contributor to the increase in the number of allegations received in FY 2000, was licensee employees' concern with the amount of overtime being worked during outages and the licensee's approach to evaluating whether an employee was too fatigued to work scheduled overtime.

The number of allegations of discrimination remained fairly low throughout the period, with two received in FY 1997, FY 1998, and FY 2000. There has not been a substantiated allegation of discrimination in the last five years. There were no open allegations of discrimination as of December 1, 2000.

Although Braidwood met the criteria for additional review based on exceeding three times the median number of allegations for the industry, there are no indications in the information available from allegations that employees are reluctant to raise issues within the company or externally. The staff will continue to monitor the general allegation trend.

## Susquehanna

During the 5-year period analyzed (FY 1996 through FY 2000), the number of allegations received steadily trended down from 29 in FY 1996 to 7 in FY 1999. However, in FY 2000, the number of allegations received from onsite sources rose to 13. A review of the issues indicates that some employees working in radiation protection felt they were being discouraged from submitting condition reports. As a result of an NRC investigation into some changes made to a condition report by a radiation protection supervisor, the NRC identified a potential violation of

NRC requirements. In a letter dated December 12, 2000, the NRC offered the licensee an opportunity to meet with the staff to address the changes made to the condition report and the impact on the willingness of employees to raise issues. These issues will be pursued through the enforcement process.

The number of allegations of discrimination declined from five in FY 1998 to one in FY 1999 and then rose to two in FY 2000. There has not been a substantiated allegation of discrimination in the last five years and there were no open allegations of discrimination as of December 1, 2000. The NRC staff will review the licensee's view of the work environment in the radiation protection area as part of the enforcement process and will continue to monitor the general allegation trend.

#### Hatch

During the 5-year period analyzed (FY 1996 through FY 2000), the number of allegations received exhibits an oscillating trend. The NRC received 4 in FY 1996, 15 in FY 1997, 8 in FY 1998, 9 in FY 1999, and 13 in FY 2000. A review of the issues submitted did not identify any trends. Both reactors were in refueling outages this fiscal year, which is unusual. This may have contributed to the rise in the number of allegations.

Historically, the number of allegations of discrimination concerning Hatch has been very low. No allegations of discrimination were received in FY 1996 through FY 1998. In FY 1999 and in FY 2000, the NRC received two allegations of discrimination. There has not been a substantiated allegation of discrimination in the last five years. As of December 1, 2000, there were two open allegations of discrimination.

Although Hatch met the criteria for additional review based on exceeding three times the median number of allegations for the industry, there are no indications in the information available from allegations that employees are reluctant to raise issues within the company or externally. The staff will continue to monitor the outcome on the open discrimination allegations and the general allegation trend.

#### Callaway

During the 5-year period analyzed (FY 1996 through FY 2000), the number of allegations received were at or below the industry median in FY 1996 through FY 1999. In FY 2000, the NRC received 12 allegations. A review of the issues submitted did not identify any trends or insights into the reason(s) for the increase in the number of allegations. From December 1999 through July 2000, the NRC received at least one allegation each month. However, no allegations were received in the months of August through November.

The number of allegations of discrimination has also been low. In FY 1996, FY 1997, and FY 1999, the NRC received one allegation of discrimination each year. In FY 2000, two allegations of discrimination were received. There has not been a substantiated allegation of discrimination in the last five years. There were two open allegations of discrimination as of December 1, 2000.

Although Callaway met the criteria for additional review based on exceeding twice the median number of allegations for the industry and exhibiting a 25 percent increase in the number of allegations received by the NRC, there are no indications in the information available from allegations that employees are reluctant to raise issues within the company or externally. The staff will continue to monitor the outcome on the open discrimination allegations and the general allegation trend.

#### Dresden

During the 5-year period analyzed (FY 1996 through FY 2000), the number of allegations received exhibits an oscillating trend. The NRC received 3 allegations in FY 1996, 11 in FY 1997, 11 in FY 1998, 1 in FY 1999, and 8 in FY 2000. A review of the issues received in FY 2000 indicates a majority of the issues received concern activities in the health physics/radiation protection area.

The number of allegations of discrimination has been low throughout the 5-year period analyzed. The NRC received one in FY 1996, one in FY 1997, and two in FY 2000. However, the NRC received three additional allegations of discrimination in November 2000. There has not been a substantiated allegation of discrimination in the last five years concerning activities at the operating units at the Dresden site. However, there were four open allegations of discrimination as of December 1, 2000. All four of the allegations of discrimination result from activities in the health physics/radiation protection area.

In September 2000, the NRC issued a Severity Level III violation for a discriminatory act against a radiation protection technician that worked at Unit 1. However, the discriminatory act occurred in October 1997 and is not considered indicative of the current work environment at Unit 1 or the operating units.

The staff will continue to monitor the work environment at Dresden by monitoring the trend of allegations concerning the health physics/radiation protect area, the outcome of the allegations of discrimination, and the general allegation trend.

#### Indian Point 2

During the 5-year period analyzed (FY 1996 through FY 2000), the number of allegations received exhibits an oscillating trend. The NRC received 6 in FY 1996, 6 in FY 1997, 11 in FY 1998, 3 in FY 1999, and 8 allegations in FY 2000. A review of the issues submitted did not identify any trends or insights into the reason(s) for the increase in the number of allegations. The number of allegations of discrimination remained low at one a year for FY 1996, FY 1998, and FY 1999. In FY 2000, the NRC received four allegations of discrimination. There has not been a substantiated allegation of discrimination in the last five years. However, as of December 1, 2000, there were two open allegations of discrimination.

Although Indian Point 2 met the criteria for additional review based on exceeding one and one half the median number of allegations for the industry and exhibiting more than a 50 percent increase in the number of allegations received by the NRC, there are no indications in the information available from allegations that employees are reluctant to raise issues within the

company or externally. The staff will continue to monitor the outcome on the open discrimination allegations and the general allegation trend.

#### Comanche Peak

During the 5-year period analyzed (FY 1996 through FY 2000), the number of allegations received exhibits an oscillating trend. The NRC received 5 allegations in FY 1996, 10 in FY 1997, 5 in FY 1998, 3 in FY 1999, and 7 in FY 2000. The number of allegations of discrimination has declined through most of the period. The NRC received one allegation of discrimination in FY 1996, 3 in FY 1997, 1 in FY 1998, 1 in FY 1999, and none in FY 2000. There has not been a substantiated allegation of discrimination in the last five years and there are no open allegations of discrimination.

Although Comanche Peak met the criteria for additional review based on exceeding one and one half the median number of allegations for the industry and exhibiting more than a 50 percent increase in the number of allegations received by the NRC, there are no indications in the information available from allegations that employees are reluctant to raise issues within the company or externally. The staff will continue to monitor the general allegation trend.

#### Sequoyah

During the 5-year period analyzed (FY 1996 through FY 2000), the number of allegations received exhibits a slow declining trend for most of the period. The NRC received 19 allegations in FY 1996, 9 in FY 1997, 5 in FY 1998, 4 in FY 1999, and 7 in FY 2000. The number of allegations of discrimination declined from five in FY 1996 to one in FY 1997 and one in FY 1999. No allegations of discrimination were received in FY 2000. As of December 1, 2000, there were no open allegations of discrimination.

On January 13, 1997, the NRC issued a Severity Level 3 Notice of Violation and a \$100,000 civil penalty to the licensee for a discriminatory act that occurred in April 1993. On February 7, 2000, the NRC issued a Severity Level II Notice of Violation to the licensee for a discriminatory act that occurred in mid-1996. Given the current trends in allegations and the date of the discriminatory acts mentioned above, the staff does not believe they are indicative of the current work environment.

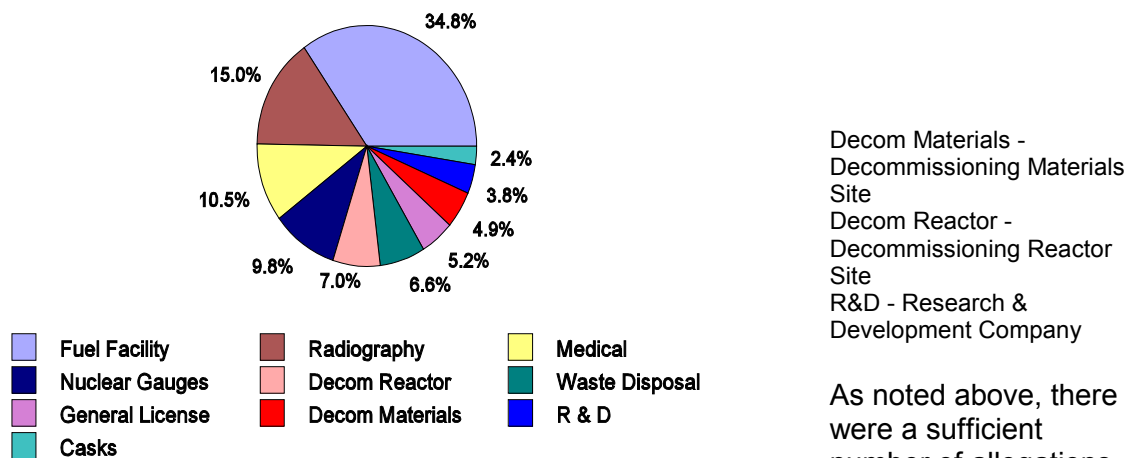
Although Sequoyah met the criteria for additional review based on exceeding one and one half the median number of allegations for the industry and exhibiting more than a 50 percent increase in the number of allegations received by the NRC, there are no indications in the information available from allegations that employees are reluctant to raise issues within the company or externally. The staff will continue to monitor the general allegation trend.

#### Allegation Trends at Materials Licensees

Because of the small number of allegations received concerning individual materials licensees and because of the potential for a licensee or contractor to identify an alleege, tables of statistics on allegations concerning these two categories have not been included this year. With the exception of the Portsmouth and Paducah gaseous diffusion plants, none of the contractors or licensees received a sufficient number of allegations in FY 2000 to discern an

adverse trend or pattern. While there was not a sufficient number of allegations to discern a trend for specific licensees, grouping the allegations by categories of licensees provides some insights into the activities in which the NRC is spending resources. The following graph depicts the number of allegations received by license category and captures approximately 80 percent of the allegations received.

**FIGURE 19**  
**MATERIALS ALLEGATIONS BY ACTIVITY**



Decom Materials -  
Decommissioning Materials  
Site  
Decom Reactor -  
Decommissioning Reactor  
Site  
R&D - Research &  
Development Company

As noted above, there were a sufficient number of allegations received concerning the

Gaseous Diffusion Plants to trend allegations. From FY 1997 through FY 2000, the number of allegations received from onsite sources concerning the Paducah site has increased fairly rapidly, 3 in FY 1997, 9 in FY 1998, 21 in FY 1999, and 30 in FY 2000. The number of allegations of discrimination received from onsite sources concerning the Paducah site has also increased, rising from 0 in FY 1997 to 2 in FY 1998, 5 in FY 1999, and 9 in FY 2000. As of December 1, 2000, there were 29 open allegations of discrimination concerning the Paducah site.

From FY 1997 through FY 2000, the number of allegations received from onsite sources concerning the Portsmouth site has oscillated with 5 received in FY 1997, 12 in FY 1998, 6 in FY 1999 and 22 in FY 2000. The number of allegations of discrimination received concerning the Portsmouth facility has also oscillated with 2 received in FY 1997, 3 in FY 1998, 1 in FY 1999, and 3 in FY 2000. As of December 1, 2000, there has not been a substantiated allegation of discrimination at the Portsmouth site. However, there were seven open allegations of discrimination at the site.

On December 20, 1999, the staff issued a Severity Level II Notice of Violation and an \$88,000 civil penalty to the licensee and a Severity Level II Notice of Violation to the responsible manager for a substantiated allegation of discrimination at the Paducah facility. Although, the licensee denied that it had discriminated against the allegor, the licensee initiated extensive actions to address the issue. The U. S. Enrichment Corporation (USEC) hired a consulting firm



to perform a site-wide survey of the work environment at both facilities. At a subsequent public meeting in June 1998, USEC presented a summary of the results of the survey and committed to address issues identified as needing improvement. During the meeting, USEC requested additional time to develop specific corrective actions and the staff granted USEC's request.

The actions USEC took included (1) improvements to the Employee Concerns Program, (2) training for supervisors and managers in how to deal with employees who raise issues in a constructive manner, (3) training for employees in how to raise issues and their rights and responsibilities, and (4) training for senior management in detecting and preventing retaliation. To assess the effectiveness of these actions, in May 2000, USEC conducted another assessment of the work environment using the same independent consultant. Employee responses to the May 2000 assessment provided very good ratings for nuclear safety culture and safety conscious work environment. Both ratings had improved 5 percent from the previous rating.

Because the work environment appears to be improving and the licensee continues to take action to foster continuing improvement, no additional actions are planned as a result of this review. The staff will continue to closely monitor the work environment, the effectiveness of the corrective actions, and the outcome of the open allegations of discrimination.

#### Allegation Trends at Vendors

Because none of the vendors or contractors received a sufficient number of allegations to discern a trend or pattern, or provide insights into the work environment, more in-depth reviews were not performed. Statistics by contractor or vendor are not given in this report because publishing the number of allegations received has the potential of identifying the allegor.

#### CONCLUSIONS

Overall, the implementation of the allegation program has improved in the last year. The findings from the audits and NRC's performance measures for the allegation program indicate improvements have occurred in receiving, documenting, tracking, and completing evaluations of allegations. The timeliness and quality of communications with allegors have also improved. Although there has been a general improvement in the handling of allegations, the audits continue to identify isolated examples of incomplete communications with allegors. However, the number of occurrences has been reduced.

As noted in the previous discussions of specific licensees, the analysis of allegations has provided insights into the work environment at several facilities. The staff continues to take a deliberately measured approach in addressing work environment issues with licensees. To date, licensees have been responsive to this approach and have taken action to address the staff's concerns. As this report indicates, the staff continues to monitor work environment issues at several facilities.

## RECOMMENDATIONS

The staff has no recommendations for program changes at this time. However, the staff is considering no longer using the screening criteria of one and one half the median number of allegations with a 50 percent increase. The median number of allegations for reactor licensees has declined to the point that this criteria may not be useful. Additionally, the staff is considering substantial revisions to this report because several of the reasons for issuing it are no longer valid. The staff will be discussing revisions with stakeholders who have an interest in the report and will make a recommendation to the Executive Director for Operations by June 29, 2001.

## APPENDIX 1

### ALLEGATIONS STATISTICS – OPERATING REACTORS

NUMBER OF ALLEGATIONS RECEIVED IN FISCAL YEAR  
ONSITE SOURCES ONLY

| Site                  | 1996 | 1997 | 1998 | 1999 | 2000 |
|-----------------------|------|------|------|------|------|
| ARKANSAS 1 & 2        | 2    | 2    | 3    | 2    | 5    |
| BEAVER VALLEY 1 & 2   | 2    | 6    | 3    | 1    | 5    |
| BRAIDWOOD 1 & 2       | 3    | 9    | 6    | 9    | 17   |
| BROWNS FERRY 2 & 3    | 10   | 12   | 8    | 6    | 3    |
| BRUNSWICK 1 & 2       | 4    | 18   | 17   | 1    |      |
| BYRON 1 & 2           | 2    | 6    | 14   | 17   | 22   |
| CALLAWAY              | 4    | 5    | 3    | 2    | 12   |
| CALVERT CLIFFS 1 & 2  | 7    | 4    | 3    | 5    | 4    |
| CATAWBA 1 & 2         | 4    | 3    | 5    | 3    |      |
| CLINTON               | 9    | 22   | 13   | 10   | 9    |
| COLUMBIA PLANT        | 12   | 15   | 8    | 4    | 1    |
| COMANCHE PEAK 1 & 2   | 5    | 10   | 5    | 3    | 7    |
| COOK 1 & 2            | 2    | 3    | 12   | 15   | 24   |
| COOPER                | 9    | 7    | 3    | 3    | 1    |
| CRYSTAL RIVER         | 15   | 17   | 7    | 2    | 5    |
| DAVIS-BESSE           | 3    | 4    | 2    | 2    | 1    |
| DIABLO CANYON 1 & 2   | 20   | 13   | 14   | 6    | 7    |
| DRESDEN 2 & 3         | 3    | 11   | 11   | 1    | 8    |
| DUANE ARNOLD          |      |      | 1    | 1    | 4    |
| FARLEY 1 & 2          | 3    | 2    | 2    | 5    | 7    |
| FERMI                 | 7    | 7    | 6    | 1    | 4    |
| FITZPATRICK           | 3    | 4    | 5    | 1    | 6    |
| FORT CALHOUN          | 2    | 4    | 5    | 1    |      |
| GINNA                 | 2    |      |      | 1    | 2    |
| GRAND GULF            | 7    | 2    | 5    | 2    | 2    |
| HARRIS 1 & 2          | 2    | 2    | 7    | 3    | 2    |
| HATCH 1 & 2           | 4    | 15   | 8    | 5    | 13   |
| INDIAN POINT 2        | 6    | 6    | 11   | 3    | 8    |
| INDIAN POINT 3        | 4    | 16   | 6    | 8    | 8    |
| KEWAUNEE              |      |      |      | 1    |      |
| LASALLE 1 & 2         | 7    | 7    | 9    | 9    | 3    |
| LIMERICK 1 & 2        | 3    | 7    | 4    | 1    | 2    |
| MCGUIRE 1 & 2         | 4    | 1    | 1    |      | 1    |
| MILLSTONE 2 & 3       | 41   | 37   | 32   | 22   | 11   |
| MONTICELLO            | 6    | 1    |      | 2    | 2    |
| NINE MILE POINT 1 & 2 | 7    | 8    | 15   | 8    | 7    |
| NORTH ANNA 1 & 2      | 5    |      |      |      | 3    |
| OCONEE 1, 2, & 3      | 7    | 2    | 6    | 4    | 2    |
| OYSTER CREEK          | 4    | 5    | 7    | 9    | 2    |
| PALISADES             | 2    | 3    | 1    |      |      |
| PALO VERDE 1, 2, & 3  | 14   | 17   | 5    | 6    | 2    |
| PEACH BOTTOM 2 & 3    | 4    | 6    | 1    | 1    | 4    |
| PERRY                 | 7    | 8    | 2    | 6    | 4    |

|                      |    |    |    |    |    |
|----------------------|----|----|----|----|----|
| PILGRIM              | 3  | 2  | 3  | 4  | 3  |
| POINT BEACH 1 & 2    | 1  | 9  | 5  | 4  | 5  |
| PRAIRIE ISLAND 1 & 2 | 3  | 2  | 1  | 4  |    |
| QUAD CITIES 1 & 2    | 6  | 7  | 10 | 7  | 6  |
| RIVER BEND           | 14 | 6  | 1  | 6  | 5  |
| ROBINSON             | 1  | 1  | 1  | 1  |    |
| SALEM/HOPE CREEK     | 41 | 21 | 11 | 1  | 1  |
| SAN ONOFRE 2 & 3     | 15 | 32 | 7  | 13 | 12 |
| SEABROOK             | 2  | 3  | 5  | 3  | 3  |
| SEQUOYAH 1 & 2       | 19 | 9  | 5  | 4  | 7  |
| SOUTH TEXAS 1 & 2    | 15 | 13 | 12 | 13 | 11 |
| ST LUCIE 1 & 2       | 42 | 61 | 33 | 31 | 18 |
| SUMMER               | 8  |    | 2  |    | 4  |
| SURRY 1 & 2          | 3  | 1  |    | 1  | 3  |
| SUSQUEHANNA 1 & 2    | 29 | 19 | 15 | 7  | 13 |
| THREE MILE ISLAND    |    | 4  |    |    |    |
| TURKEY POINT 3 & 4   | 17 | 17 | 15 | 9  | 11 |
| VERMONT YANKEE       | 1  | 4  | 7  | 2  | 1  |
| VOGTLE 1 & 2         | 5  | 10 | 3  | 3  |    |
| WATERFORD            | 24 | 9  | 4  | 4  | 1  |
| WATTS BAR            | 28 | 17 | 4  | 6  | 5  |
| WOLF CREEK           | 10 | 13 | 10 | 5  | 6  |

NUMBER OF DISCRIMINATION ALLEGATIONS RECEIVED IN  
FISCAL YEAR  
ONSITE SOURCES ONLY

| Site                  | 1996 | 1997 | 1998 | 1999 | 2000 |
|-----------------------|------|------|------|------|------|
| ARKANSAS 1 & 2        | 1    |      |      |      | 1    |
| BEAVER VALLEY 1 & 2   | 1    | 1    | 1    |      |      |
| BRAIDWOOD 1 & 2       |      | 2    | 2    |      | 2    |
| BROWNS FERRY 2 & 3    | 3    | 2    | 1    | 3    |      |
| BRUNSWICK 1 & 2       | 2    | 4    |      | 1    |      |
| BYRON 1 & 2           | 1    |      | 1    | 1    | 5    |
| CALLAWAY              | 1    | 1    |      | 1    | 2    |
| CALVERT CLIFFS 1 & 2  | 3    |      |      | 2    |      |
| CLINTON               | 2    | 6    | 5    | 2    | 3    |
| COLUMBIA PLANT        | 3    | 3    | 1    | 1    |      |
| COMANCHE PEAK 1 & 2   | 1    | 3    | 1    | 1    |      |
| COOK 1 & 2            | 1    | 2    | 1    | 6    | 5    |
| COOPER                |      | 2    |      |      |      |
| CRYSTAL RIVER         | 5    |      |      |      | 1    |
| DAVIS-BESSE           | 1    | 1    |      |      |      |
| DIABLO CANYON 1 & 2   | 4    | 1    | 5    | 3    |      |
| DRESDEN 2 & 3         | 1    | 1    |      |      | 2    |
| DUANE ARNOLD          |      |      | 1    |      |      |
| FERMI                 | 4    |      | 1    |      |      |
| FITZPATRICK           |      | 1    |      |      | 1    |
| FORT CALHOUN          | 1    | 1    |      |      |      |
| GRAND GULF            | 1    |      | 1    | 1    |      |
| HARRIS 1 & 2          |      |      | 1    | 1    |      |
| HATCH 1 & 2           |      |      |      | 2    | 2    |
| INDIAN POINT 2        | 1    |      | 1    | 1    | 4    |
| INDIAN POINT 3        | 1    | 2    | 1    | 1    | 1    |
| LASALLE 1 & 2         | 4    | 1    | 2    | 5    | 1    |
| LIMERICK 1 & 2        |      | 3    |      |      | 1    |
| MCGUIRE 1 & 2         |      |      | 1    |      | 1    |
| MILLSTONE 2 & 3       | 16   | 10   | 7    | 11   | 4    |
| MONTICELLO            |      |      |      |      | 1    |
| NINE MILE POINT 1 & 2 | 1    |      | 2    | 3    | 1    |
| NORTH ANNA 1 & 2      | 1    |      |      |      |      |
| OCONEE 1, 2, & 3      | 1    | 1    |      |      |      |
| OYSTER CREEK          | 1    | 1    | 1    | 3    |      |
| PALISADES             |      | 1    |      |      |      |
| PALO VERDE 1, 2, & 3  | 2    | 1    | 2    | 2    |      |
| PEACH BOTTOM 2 & 3    | 1    | 1    |      |      |      |
| PERRY                 | 4    | 3    |      | 1    | 2    |
| PILGRIM               |      | 2    |      | 1    |      |
| POINT BEACH 1 & 2     | 1    | 3    | 2    | 2    | 2    |
| QUAD CITIES 1 & 2     | 2    | 1    | 3    | 1    | 1    |

|                    |    |   |   |   |   |
|--------------------|----|---|---|---|---|
| RIVER BEND         | 2  | 2 |   | 2 | 1 |
| SALEM/HOPE CREEK   | 11 | 3 | 3 |   |   |
| SAN ONOFRE 2 & 3   | 4  | 9 | 4 | 2 | 1 |
| SEABROOK           |    |   | 1 |   | 2 |
| SEQUOYAH 1 & 2     | 5  | 1 |   | 1 |   |
| SOUTH TEXAS 1 & 2  | 5  | 3 | 1 | 9 | 4 |
| ST LUCIE 1 & 2     | 3  |   | 2 | 1 | 4 |
| SUMMER             | 1  |   |   |   | 1 |
| SUSQUEHANNA 1 & 2  |    | 1 | 5 | 1 | 2 |
| THREE MILE ISLAND  |    | 1 |   |   |   |
| TURKEY POINT 3 & 4 | 2  | 1 | 1 | 1 | 1 |
| VERMONT YANKEE     |    |   | 1 | 1 |   |
| VOGTLE 1 & 2       |    | 1 |   |   |   |
| WATERFORD          | 9  | 2 | 1 | 2 |   |
| WATTS BAR          | 5  | 6 |   | 1 | 2 |
| WOLF CREEK         |    | 3 |   | 1 | 1 |

NUMBER OF SUBSTANTIATED ALLEGATIONS  
COUNTED IN FISCAL YEAR RECEIVED

| Site                  | 1996 | 1997 | 1998 | 1999 | 2000 |
|-----------------------|------|------|------|------|------|
| ARKANSAS 1 & 2        | 1    | 4    | 2    |      |      |
| BEAVER VALLEY 1 & 2   |      | 1    |      | 1    |      |
| BRAIDWOOD 1 & 2       | 3    |      | 3    | 2    | 2    |
| BROWNS FERRY 2 & 3    | 6    |      | 1    |      | 1    |
| BRUNSWICK 1 & 2       | 3    | 1    | 1    |      |      |
| BYRON 1 & 2           | 2    | 1    | 6    | 9    | 10   |
| CALLAWAY              | 2    | 2    | 1    | 1    | 2    |
| CALVERT CLIFFS 1 & 2  | 1    |      |      |      |      |
| CATAWBA 1 & 2         | 2    | 1    |      |      |      |
| CLINTON               | 5    | 4    | 2    | 1    | 1    |
| COLUMBIA PLANT        | 4    | 3    | 3    |      |      |
| COMANCHE PEAK 1 & 2   | 5    | 4    |      | 1    | 1    |
| COOK 1 & 2            | 1    | 1    | 3    | 3    | 5    |
| COOPER                | 10   | 3    | 3    | 1    | 1    |
| CRYSTAL RIVER         | 10   | 1    |      |      | 2    |
| DAVIS-BESSE           | 3    |      |      |      |      |
| DIABLO CANYON 1 & 2   | 6    | 3    | 2    | 2    | 1    |
| DRESDEN 2 & 3         | 4    |      | 3    |      | 2    |
| DUANE ARNOLD          | 1    |      |      |      | 2    |
| FARLEY 1 & 2          | 1    | 1    | 1    | 1    | 3    |
| FERMI                 | 4    | 1    | 3    | 1    |      |
| FITZPATRICK           |      |      |      |      |      |
| FORT CALHOUN          | 2    | 1    | 1    |      | 2    |
| GINNA                 | 2    |      |      |      |      |
| GRAND GULF            | 2    | 2    |      |      |      |
| HARRIS 1 & 2          |      |      | 1    |      |      |
| HATCH 1 & 2           | 4    | 1    |      | 2    | 1    |
| INDIAN POINT 2        | 3    |      | 4    |      | 3    |
| INDIAN POINT 3        | 1    | 1    |      | 2    |      |
| KEWAUNEE              | 1    |      |      | 1    |      |
| LASALLE 1 & 2         | 2    |      | 4    | 2    |      |
| LIMERICK 1 & 2        | 3    |      |      |      |      |
| MCGUIRE 1 & 2         | 1    |      |      |      |      |
| MILLSTONE 2 & 3       | 13   |      | 1    | 4    |      |
| MONTICELLO            |      |      |      | 1    | 1    |
| NINE MILE POINT 1 & 2 | 2    |      |      |      | 1    |
| NORTH ANNA 1 & 2      | 2    |      |      |      | 1    |
| OCONEE 1, 2, & 3      | 2    |      | 1    |      |      |
| OYSTER CREEK          | 2    | 1    |      | 2    |      |
| PALISADES             | 1    | 2    |      |      |      |
| PALO VERDE 1, 2, & 3  | 9    | 5    |      | 1    |      |
| PEACH BOTTOM 2 & 3    | 3    |      |      |      | 1    |
| PERRY                 | 4    | 1    |      | 3    |      |



|                      |    |    |   |   |   |
|----------------------|----|----|---|---|---|
| PILGRIM              | 1  |    | 1 |   | 2 |
| POINT BEACH 1 & 2    | 3  | 3  | 3 | 1 | 1 |
| PRAIRIE ISLAND 1 & 2 | 1  |    |   | 1 |   |
| QUAD CITIES 1 & 2    | 5  |    |   | 1 |   |
| RIVER BEND           | 7  | 4  | 2 | 1 | 1 |
| ROBINSON             | 1  |    | 1 |   |   |
| SALEM/HOPE CREEK     | 13 | 3  |   |   | 1 |
| SAN ONOFRE 2 & 3     | 10 | 3  | 2 | 7 | 3 |
| SEABROOK             | 1  | 1  | 1 |   |   |
| SEQUOYAH 1 & 2       | 11 | 1  |   | 1 | 3 |
| SOUTH TEXAS 1 & 2    | 7  | 2  | 2 |   | 2 |
| ST LUCIE 1 & 2       | 27 | 12 | 1 | 5 | 2 |
| SUMMER               | 6  |    |   |   |   |
| SURRY 1 & 2          | 1  |    |   |   |   |
| SUSQUEHANNA 1 & 2    | 14 | 6  | 2 |   | 3 |
| TURKEY POINT 3 & 4   | 6  | 1  | 3 | 1 | 1 |
| VERMONT YANKEE       | 1  |    | 2 |   |   |
| VOGTLE 1 & 2         | 3  | 2  |   | 1 |   |
| WATERFORD            | 12 | 2  |   |   |   |
| WATTS BAR            | 12 |    |   | 2 | 2 |
| WOLF CREEK           | 4  | 2  | 3 |   |   |

## APPENDIX 2

### DESCRIPTION OF THE ALLEGATION PROCESS

## DESCRIPTION OF THE ALLEGATION PROCESS

All of the regions and offices generally follow the same basic process in receiving, processing, and evaluating allegations. The Allegation Coordinator is the focal point for receiving, processing, and closing allegations and communicating with alлегers. All incoming written allegations are forwarded to the Allegation Coordinator and calls to the toll-free safety hotline are directed automatically to the regional Allegation Coordinators according to the geographical location of the caller, i.e., an alлегer's call is directed to the region that covers the alлегer's location.

The Allegation Coordinator reviews the incoming allegations to determine whether the issues involve reactor, material, or vendor issues and the immediacy of safety issues. An Allegation Review Board (ARB) is scheduled on the basis of this review. The Allegation Coordinator prepares the material for the ARBs, guides the ARB members on implementing the allegation process, and keeps the minutes for the ARB meetings. ARBs normally meet once a week and allegations are usually discussed within 2 weeks of receipt. Following the ARB meeting, the Allegation Coordinator notes the directions to the staff in the allegation tracking system. The responsible division director or a designee chairs the ARB. Other ARB participants include technical staff and managers and, in cases involving wrongdoing, the regional counsel and a representative from the Office of Investigations (OI) field office. Letters acknowledging receipt of the allegation are usually sent to alлегers after the ARB meets.

The assignment of allegations for evaluation and closure varies slightly between the regions and offices. Generally, the technical staff evaluates technical allegations and sends a copy of an inspection report or a memorandum to the Allegation Coordinator with the result of the evaluation. The Allegation Coordinator reviews the information and, if all of the issues have been sufficiently addressed, prepares a closure letter to the alлегer based on the information provided. If the issues have not been addressed, the allegation and the evaluation are usually discussed at a subsequent ARB meeting to determine what additional actions are necessary to complete the evaluation and close the allegation.

For wrongdoing issues for which OI completes an investigation and determines whether the allegation was substantiated, the report of investigation serves as a basis for responding to the alлегer. The responsible technical division will review the OI report and will either provide input to or prepare a draft closure letter to the alлегer. If OI does not complete the investigation to the point at which OI can determine if wrongdoing occurred, the Allegation Coordinator prepares a closure letter informing the alлегer that because of limited resources and the relative safety significance of the issue, the investigation was terminated without reaching a conclusion about whether wrongdoing occurred.