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H. B. Barron
Vice President

June 20, 2002

Document Control Desk
U.S. Nuclear Regulatory Commission
Washington, D.C. 20555

Re: McGuire Nuclear Station Unit 1 Docket No. 50-369
McGuire Nuclear Station Unit 2 Docket No. 50-370
Changes to Emergency Plan Implementing Procedures

Attached to this letter are a revised Emergency Plan Implementing Procedure (EPIP) Index and a notice of revision to two (2) Emergency Plan Implementing Procedures. These procedure revisions were evaluated pursuant to the requirements of 10 CFR 50.54 (q). These changes do not constitute a reduction in the effectiveness of the emergency plan and the plan continues to meet the requirements of 10 CFR 50.47 (b) and 10 CFR 50 Appendix E. Duke implemented these changes on June 3, 2002. A copy of these changes is also being sent to the NRC Office of Nuclear Material Safety and Safeguards as per 10 CFR 72.44 (f). Revision bars within the procedures indicate the revisions. The following procedure index changes and procedure revisions have been implemented:

EPIP Index Page 1	Dated 6/3/2002
EPIP Index Page 2	Dated 6/3/2002
EPIP Index Page 3	Dated 6/3/2002

REVISION to the following procedures:

RP/0/A/5700/012	Dated 6/3/2002, Rev 020
RP/0/A/5700/020	Dated 6/3/2002, Rev 012

There are no new regulatory commitments in this document. Duke is also supplying two copies of this submittal to the Regional Administrator of Region II. Questions on this document should be directed to Kevin Murray at (704) 875-4672.

Very truly yours,

H. B. Barron

Attachments

A045

U.S. Nuclear Regulatory Commission
June 20, 2002
Page 2

xc: (w/attachment)
Mr. Luis Reyes,
Regional Administrator
U.S. Nuclear Regulatory Commission
Region II
61 Forsyth St., SW, Suite 23T85
Atlanta, Georgia 30303

(w/attachment)
Mr. Martin J. Virgilio, Director
Office of Nuclear Material Safety and Safeguards
Mail Stop T-8A23
Washington, D.C. 20555-0001

(w/o attachment)

R. E. Martin, USNRC
U.S. Nuclear Regulatory Commission
Office of Nuclear Reactor Regulation
Washington, D.C. 20555

NRC Resident Inspector
McGuire Nuclear Station

E.M. Kuhr (EC050)

M.T. Cash, Manager NRIA (EC050)

Electronic Licensing Library (EC050)

EP File 111

DUKE

McGUIRE NUCLEAR SITE

EMERGENCY PLAN IMPLEMENTING PROCEDURES

APPROVED: Gary M. Barker for Bryan Dolan
SAFETY ASSURANCE MANAGER

DATE APPROVED June 3, 2002

EPIP Index Page 1
EPIP Index Page 2
EPIP Index Page 3

Dated 6/3/2002
Dated 6/3/2002
Dated 6/3/2002

RP/0/A/5700/012
RP/0/A/5700/020

Dated 6/3/2002, Rev 020
Dated 6/3/2002, Rev 012

EMERGENCY PLAN IMPLEMENTING PROCEDURES INDEX

<u>PROCEDURE #</u>	<u>TITLE</u>	<u>REVISION NUMBER</u>
RP/0/A/5700/000	Classification of Emergency	Rev. 008
RP/0/A/5700/001	Notification of Unusual Event	Rev. 016
RP/0/A/5700/002	Alert	Rev. 016
RP/0/A/5700/003	Site Area Emergency	Rev. 016
RP/0/A/5700/004	General Emergency	Rev. 016
RP/0/A/5700/005	Care and Transportation of Contaminated Injured Individual(s) From Site to Offsite Medical Facility	DELETE
RP/0/A/5700/006	Natural Disasters	Rev. 009
RP/0/A/5700/007	Earthquake	Rev. 007
RP/0/A/5700/008	Release of Toxic or Flammable Gases	Rev. 004
RP/0/A/5700/009	Collisions/Explosions	Rev. 002
RP/0/A/5700/010	NRC Immediate Notification Requirements	Rev. 013
RP/0/A/5700/011	Conducting a Site Assembly, Site Evacuation or Containment Evacuation	Rev. 005
RP/0/A/5700/012	Activation of the Technical Support Center (TSC)	Rev. 020
RP/0/A/5700/013	Activation of the Emergency Operations Facility (EOF)	DELETE
RP/0/A/5700/14	Emergency Telephone Directory	DELETE
RP/0/A/5700/015	Notifications to the State and Counties from the EOF	DELETE
RP/0/A/5700/16	EOF Commodities and Facilities Procedure	DELETE
RP/0/A/5700/17	Emergency Data Transmittal System Access	DELETE
RP/0/A/5700/018	Notifications to the State and Counties from the TSC	Rev. 011
RP/0/A/5700/019	Core Damage Assessment	Rev. 004
RP/0/A/5700/020	Activation of the Operations Support Center (OSC)	Rev. 012
RP/0/A/5700/21	EOF Access Control	DELETE
RP/0/A/5700/022	Spill Response Procedure	Rev. 009
RP/0/A/5700/024	Recovery and Reentry Procedure	Rev. 002
RP/0/A/5700/026	Operations/Engineering Technical Evaluations in the Technical Support Center (TSC)	Rev. 002
RP/0/B/5700/023	Community Relations Emergency Response Plan	Rev. 002
OP/0/B/6200/090	PALSS Operation for Accident Sampling	DELETED

EMERGENCY PLAN IMPLEMENTING PROCEDURES INDEX

<u>PROCEDURE #</u>	<u>TITLE</u>	<u>REVISION NUMBER</u>
HP/0/B/1009/002	Alternative Method for Determining Dose Rate Within the Reactor Building	Rev. 002
HP/0/B/1009/003	Recovery Plan	Rev. 004
HP/0/B/1009/05	Initial Evaluation of Protective Action Guides Due to Abnormal Plant Conditions	DELETED
HP/0/B/1009/006	Procedure for Quantifying High Level Radioactivity Releases During Accident Conditions	Rev. 006
HP/0/B/1009/010	Releases of Radioactive Effluents Exceeding Selected Licensee Commitments	Rev. 006
HP/1/B/1009/015	Unit 1 Nuclear Post-Accident Containment Air Sampling System Operating Procedure	DELETED
HP/2/B/1009/015	Unit 2 Nuclear Post-Accident Containment Air Sampling System Operating Procedure	DELETED
HP/0/B/1009/016	Distribution of Potassium Iodide Tablets in the Event of a Radioiodine Release	Rev. 003
HP/0/B/1009/020	Manual Procedure for Offsite Dose Projections	DELETED
HP/0/B/1009/021	Estimating Food Chain Doses Under Post-Accident Conditions	Rev. 001
HP/0/B/1009/022	Accident and Emergency Response	Rev. 003
HP/0/B/1009/023	Environmental Monitoring for Emergency Conditions	Rev. 004
HP/0/B/1009/024	Personnel Monitoring for Emergency Conditions	Rev. 002
HP/0/B/1009/029	Initial Response On-Shift Dose Assessment	Rev. 006
SH/0/B/2005/001	Emergency Response Offsite Dose Projections	Rev. 001
SH/0/B/2005/002	Protocol for the Field Monitoring Coordinator During Emergency Conditions	Rev. 002
SR/0/B/2000/01	Standard Procedure for Public Affairs Response to the Emergency Operations Facility	Rev. 003
SR/0/B/2000/002	Standard Procedure for EOF Commodities and Facilities	Rev. 002
SR/0/B/2000/003	Activation of the Emergency Operations Facility	Rev. 009
SR/0/B/2000/004	Notification to States and Counties from the Emergency Operations Facility	Rev. 005

EMERGENCY PLAN IMPLEMENTING PROCEDURES INDEX

<u>PROCEDURE #</u>	<u>TITLE</u>	<u>REVISION NUMBER</u>
McGuire Site Directive 280	Site Assembly/Accountability and Evacuation/Containment Evacuation	DELETED
EP Group Manual	Section 1.1 Emergency Organization	Rev. 017
MNS RP Manual:	Section 18.1 Accident and Emergency Response	DELETED
	Section 18.2 Environmental Monitoring for Emergency Conditions	DELETED
	Section 18.3 Personnel Monitoring for Emergency Conditions	DELETED
	Section 18.4 Planned Emergency Exposure	DELETED
PT/O/A/4600/088	Functional Check of Emergency Vehicle and Equipment	Rev. 007

Duke Power Company
PROCEDURE PROCESS RECORD

PREPARATION

(2) Station MCGUIRE NUCLEAR STATION

(3) Procedure Title Activation of the Technical Support Center (TSC)

(4) Prepared By [Signature] Date 4/10/02

(5) Requires NSD 228 Applicability Determination?

- Yes (New procedure or revision with major changes)
- No (Revision with minor changes)
- No (To incorporate previously approved changes)

(6) Reviewed By Alan L. Beaver (QR) Date 4/25/02

Cross-Disciplinary Review By _____ (QR)	NA <u>ALB</u>	Date <u>4/25/02</u>
Reactivity Mgmt. Review By _____ (QR)	NA <u>ALB</u>	Date <u>4/25/02</u>
Mgmt. Involvement Review By _____ (Ops Supt.)	NA <u>ALB</u>	Date <u>4/25/02</u>

(7) Additional Reviews

Reviewed By _____ Date _____

Reviewed By _____ Date _____

(8) Temporary Approval (*if necessary*)

By _____ (OSM/QR) Date _____

By _____ (QR) Date _____

(9) Approved By K. L. Murray Date 6-3-02

PERFORMANCE (*Compare with Control Copy every 14 calendar days while work is being performed.*)

(10) Compared with Control Copy _____ Date _____

Compared with Control Copy _____ Date _____

Compared with Control Copy _____ Date _____

(11) Date(s) Performed _____

Work Order Number (WO#) _____

COMPLETION

(12) Procedure Completion Verification

- Yes NA Check lists and/or blanks initialed, signed, dated, or filled in NA, as appropriate?
- Yes NA Required enclosures attached?
- Yes NA Data sheets attached, completed, dated, and signed?
- Yes NA Charts, graphs, etc. attached dated, identified, and marked?
- Yes NA Procedure requirements met?

Verified By _____ Date _____

(13) Procedure Completion Approved _____ Date _____

(14) Remarks (*Attach additional pages, if necessary*)

Duke Power Company
McGuire Nuclear Station

Activation of the Technical Support Center (TSC)

Reference Use

Procedure No.

RP/0/A/5700/012

Revision No.

020

Electronic Reference No.

MC0048MF

Activation of the Technical Support Center (TSC)

1. Symptoms

Conditions exist where events are in progress or have occurred which indicate a potential degradation of the level of safety of the plant and activation of the Emergency Response Organization (ERO) has been initiated.

2. Immediate Actions

None

3. Subsequent Actions

NOTE: This procedure is not intended to be followed in a step-by step sequence. Sections of the procedure are to be implemented as the applicable action becomes necessary.

- 3.1 The TSC is required to be activated for an ALERT, SITE AREA EMERGENCY, or GENERAL EMERGENCY declaration. It may also be activated for an UNUSUAL EVENT if deemed necessary by the Operations Shift Manager/Emergency Coordinator.
- 3.2 The TSC must be activated within ONE (1) HOUR AND 15 MINUTES (75 MINUTES) of an ALERT, SITE AREA EMERGENCY, or GENERAL EMERGENCY declaration. This time frame must be met anytime it is deemed necessary to activate the TSC.
- 3.3 Upon notification to activate, the Station Manager or designee shall report and notify Operations Shift Manager in the Control Room of arrival.
 - 3.3.1 Personnel in the Emergency Response Organization (ERO) assigned to the TSC shall report to the facility upon notification to activate.
 - 3.3.2 The initial responders shall be responsible for the completion of their appropriate group enclosures and reviewing their Operational Responsibilities where provided.
- 3.4 Each represented group is responsible for ensuring their appropriate initial checklist is completed.

- 3.5 The following definitions are applicable to the Emergency Notification Form for "Plant Condition": {PIP 0-M97-4210 NRC-1}
- **Improving:** Emergency conditions are improving in the direction of a lower classification or termination of the event.
 - **Stable:** The emergency situation is under control. Emergency core cooling systems, equipment, plant, etc., are operating as designed.
 - **Degrading:** Given current and projected plant conditions/equipment status, recovery efforts are not expected to prevent entry into a higher emergency classification or the need to upgrade offsite Protective Action Recommendations.
- 3.6 Upon termination of the drill/emergency, the Emergency Coordinator/designee shall assume responsibility for ensuring the proper resolutions to all completed copies of the McGuire Operations Configuration Control Card(s) prior to the TSC/OSC being deactivated. The Emergency Coordinator/designee shall have overall responsibility for ensuring all cards are properly resolved or items logged prior to plant turn-over to the Operations Shift Manager. Once the items/cards have been properly resolved, the TSC/OSC may be deactivated. All completed cards shall be filed by Emergency Planning with other drill/emergency paperwork.

4. Enclosures

- 4.1 Emergency Coordinator TSC Activation Checklist
- 4.2 Assistant Emergency Coordinator TSC Activation Checklist
- 4.3 Radiation Protection Manager TSC Activation Checklist
- 4.4 Offsite Dose Assessor TSC Activation Checklist
- 4.5 Offsite Agency Communicator TSC Activation Checklist
- 4.6 NRC Communicator TSC Activation Checklist
- 4.7 Reactor Engineer TSC Activation Checklist
- 4.8 Operations Manager in the TSC Activation Checklist
- 4.9 Operations Procedure Support TSC Activation Checklist
- 4.10 System Engineering Manager TSC Activation Checklist
- 4.11 Emergency Planner TSC Activation Checklist
- 4.12 Status Coordinator TSC Activation Checklist

- 4.13 IAE Communications TSC Activation Checklist
- 4.14 Operations Manager in the Control Room Activation Checklist
- 4.15 Data Coordinator TSC Activation Checklist
- 4.16 Site Assembly Coordinator TSC Activation Checklist
- 4.17 Emergency Coordinator / Emergency Operations Facility Director Turnover Checklist
- 4.18 Emergency Classification Termination Criteria
- 4.19 Fitness For Duty Questionnaire
- 4.20 Site Evacuation Coordinator TSC Activation Checklist

Enclosure 4.1

**EMERGENCY COORDINATOR
TSC ACTIVATION CHECKLIST**

RP/0/A/5700/012

Page 1 of 6

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

—— **SIGN** in on the TSC staffing board and put on position badge.

—— **SIGN** the TSC attendance sheet for a drill.

NOTE: The TSC Status Coordinator will maintain the official TSC log. The following step may be N/A'd.

—— **ESTABLISH** a log of activities.

—— **NOTIFY** the Operations Shift Manager in the Control Room of arrival.

NOTE: If a classification change is recognized during turnover, the turnover should not be completed until after the Control Room declares and transmits the notification to the offsite agencies. {PIP-M-00-00541}

—— **IF** nearing the 75 minute activation requirement and an upgrade in emergency classification is recognized, **THEN** suspend turnover and allow the activated facility to declare and transmit the upgrade. {PIP-M-00-00541}

—— **RECEIVE** turnover from the Control Room as soon as practical utilizing Enclosure 4.17.

EMERGENCY COORDINATOR
TSC ACTIVATION CHECKLIST

_____ **ASSURE**, prior to declaring TSC activated:

_____ 1. The following TSC positions as a minimum are filled and prepared to assume their function:

- Emergency Coordinator
- Offsite Dose Assessor
- Offsite Agency Communicator (2)
- NRC Communicator
- Reactor Engineer.

OR

2. Less than the above listed minimum TSC positions are filled

AND

_____ The 75 minute activation requirement is near

AND

_____ An extra person(s) is available whom the EC believes is capable of filling a missing position(s)

AND

_____ An appropriate log entry is made. {PIP-M-00-00541}.

_____ **IF** a site assembly is in progress, or is conducted, **THEN** swipe your ID badge in the reader located in the TSC for personnel accountability

_____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}

_____ **CONDUCT** a Time Out prior to activating the TSC.

_____ **DECLARE** the TSC activated and announce the following via the TSC/OSC public address system: "This is _____. I am the Emergency Coordinator. The TSC is officially activated as of _____. The plant status is as follows:

OR

"This is _____. I am the Emergency Coordinator. The TSC is officially activated as of _____. I will give an update in _____ minutes.

EMERGENCY COORDINATOR
TSC ACTIVATION CHECKLIST

— **ANNOUNCE** over the TSC/OSC public address system the following:

“Anyone who is reporting to this facility outside of your normal work hours and has consumed alcohol within the past five (5) hours, notify either the Emergency Coordinator in the TSC or the OSC Coordinator in the OSC.”

NOTE: The following step should be repeated following each shift turnover.

— **ANNOUNCE** to TSC a reminder to complete a “Work Hour Extension Form” if applicable. {PIP 0-M98-2099}.

— **ANNOUNCE** to TSC to synchronize all time pieces to the satellite time display. {PIP-0-M-5381}

— **TURN OFF** the plant page volume in TSC.

— **DISCUSS** with the Radiation Protection Manager any radiological release or offsite radiological concerns.

— **ANNOUNCE** over the TSC/OSC Public Address System the following if a release has occurred:

- Assume areas are contaminated until surveyed by RP.
- No eating or drinking until the TSC and OSC are cleared by RP.

— **EVALUATE** with TSC personnel and the Radiation Protection Manager the need to conduct evacuation at this time based on the following criteria.

- Alert- determine by actual plant conditions
- Site Area Emergency- consider evacuation/relocation of non-essential personnel.
- General Emergency- evacuate all non-essential personnel
- Notify EOF anytime personnel are relocated onsite or evacuated from the premises.

— **REQUEST** all TSC and OSC Managers to have **FAXED** to the **OSC** the name, social security number and RP badge number of any person(s) who may be left onsite after evacuation of non-essential personnel but are located in an area other than the OSC.

EMERGENCY COORDINATOR
TSC ACTIVATION CHECKLIST

NOTE: If changes to the Initial Protective Action Recommendations are recognized and approved by the Emergency Coordinator, these changes shall be transmitted to the off site agencies within 15 minutes. {PIP-M-00-02138}

_____ **UPON** declaration of a General Emergency the Emergency Coordinator shall **IMMEDIATELY RECOMMEND** to offsite authorities the following:

IF containment radiation levels exceed the levels on Enclosure 4.4, page 5 of 6, Guidance for Determination of Gap Activity, **THEN:**

_____ Evacuate the 5-mile radius **AND** 10 miles downwind as shown on Enclosure 4.4, top of page 4 of 6, Protective Action Zones Determination, using wind direction.

AND

_____ Shelter remaining zones as shown on Enclosure 4.4, top of page 4 of 6, Protective Action Zones Determination, using wind direction.

IF containment radiation levels **DO NOT** exceed the levels on Enclosure 4.4, page 5 of 6, Guidance for Determination of Gap Activity, **THEN** perform one of the following:

IF wind speed is less than or equal to 5 MPH **THEN:**

_____ Evacuate zones L, B, M, C, N, A, D, O, R

AND

_____ Shelter zones E, F, G, H, I, J, K, P, Q, S.

OR

IF wind speed is greater than 5 MPH **THEN:**

_____ Evacuate the 2-mile radius **AND** 5 miles downwind as shown on Enclosure 4.4, bottom of page 4 of 6, Protective Action Zones Determination, using wind direction

AND

_____ Shelter remaining zones as shown on Enclosure 4.4, bottom of page 4 of 6, Protective Action Zones Determination, using wind direction

EMERGENCY COORDINATOR
TSC ACTIVATION CHECKLIST

- **DIRECT** the Assistant Emergency Coordinator to FAX the turnover checklist (Enclosure 4.17) to the EOF Director (if time and situation permit). {PIP-0-M97-4112}

NOTE: If a classification change is recognized during turnover, the turnover should not be completed until after the TSC declares and transmits the notification to the offsite agencies. {PIP-M-00-00541}

- **CONDUCT** turnover to the EOF Director (EOFD) utilizing Enclosure 4.17.

NOTE: Provide periodic updates to the EOFD concerning plant status and request EOFD to provide assessment and field monitoring data on a periodic basis.

- **REQUEST** the NRC Communicator to notify the NRC the EOF is activated.
- **ANNOUNCE** to the TSC and OSC the EOF is activated.
- **ENSURE ALL** completed copies of the McGuire Operations Configuration Control Cards are properly resolved prior to deactivation of the TSC/OSC.

IF the TSC becomes environmentally uninhabitable due to radiological or other conditions and the Control Room remains secure (habitable), **THEN:**

- **SELECT** individuals to move inside the Control Room.
- **INSTRUCT** all other TSC personnel to go to the EOF.

IF the Control Room also becomes uninhabitable due to radiological or other conditions, **THEN:**

- **INSTRUCT** TSC personnel to report to the Simulator at the Training and Technology Center or EOF.

- **CONDUCT** a "Time-out", approximately every thirty (30) minutes, with the TSC staff to obtain current plant status. Ensure the OSC is aware of when "Time-outs" will take place.
- **ENSURE** all unnecessary communications are put on hold during "Time-outs".{PIP 0-M95-0160}
- **ESTABLISH** priorities.
- **ANNOUNCE**, following time out, to the TSC and OSC the emergency classification, plant status, and priorities via the TSC/OSC public address system.

EMERGENCY COORDINATOR
TSC ACTIVATION CHECKLIST

- _____ **ESTABLISH** a Recovery Organization **PER** (RP/0/A/5700/024, Recovery and Reentry Procedure) once the Emergency has been terminated. Applicable primarily for Site Area Emergency and General Emergency classifications. Refer to Enclosure 4.18 for Termination Criteria.

- _____ **SERVE** as Lead Decision Maker upon entry into Severe Accident Management Guidelines (SAMG).

- _____ **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

ASSISTANT EMERGENCY COORDINATOR
TSC ACTIVATION CHECKLIST

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

- _____ **SIGN** in on the TSC staffing board and put on position badge.
- _____ **SIGN** the TSC attendance sheet for a drill.
- _____ **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.
- _____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}

NOTE: The TSC Status Coordinator will maintain the official TSC log. The following step may be N/A'd.

- _____ **ESTABLISH** a log of activities.
- _____ **OBTAIN** time out forms from the procedure cabinet.
- _____ **ASSIST** the Emergency Coordinator in gathering information to facilitate the activation of the Technical Support Center.
- _____ **FAX** turnover checklist (Enclosure 4.17) to the EOF Director when directed by the Emergency Coordinator. {PIP-0-M97-4112}
- _____ **ACT** as a receiver of information when the Emergency Coordinator is unavailable and relay the information to the Emergency Coordinator in a timely manner.
- _____ **PROACTIVELY** seek information when the Emergency Coordinator is in a reactive mode.
- _____ **MAKE** face-to-face confirmation of information provided when the Emergency Coordinator is unavailable.
- _____ **ASSIST** in making decisions on emergency classifications, mitigation strategies, contingency plans and protective actions for plant personnel and the general public.
- _____ **ASSIST** Emergency Coordinator as a Decision Maker upon entry into Severe Accident Management Guidelines (SAMG).
- _____ **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

RADIATION PROTECTION MANAGER
TSC ACTIVATION CHECKLIST

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

- _____ **SIGN** in on the TSC staffing board and put on position badge.
- _____ **SIGN** the TSC attendance sheet for a drill.
- _____ **ENSURE** all Radiation Protection personnel reporting to the TSC also sign the attendance sheet for a drill.
- _____ **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.
- _____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- _____ **ESTABLISH** a log of activities.
- _____ **ESTABLISH** communications with RP personnel in the OSC, Shift Lab and EOF using the cell phone, dial 4980. (Let it ring until you hear a beep. This connects you to the bridge line.).
- _____ **COMMUNICATE** through Emergency Coordinator that dosimetry is required and a dose card shall be filled out if necessary (drill SRWP is 33). {PIP 0-M94-1495}
- _____ **DISCUSS** the following with Emergency Coordinator:
 - 1) Any release in progress including dose rates (especially at the site boundary)
 - 2) Field Team status/data
 - 3) Onsite radiological concerns
- _____ **ESTABLISH** contamination control in the TSC, OSC and Control Room as necessary.
 1. **COMMUNICATE** through the Emergency Coordinator that frisking of hands and feet is required prior to entry. {PIP 0-M94-1495}
 2. **ESTABLISH** smear survey frequency with OSC RP Supervisor (i.e., every 30 minutes).

**RADIATION PROTECTION MANAGER
TSC ACTIVATION CHECKLIST**

_____ **EVALUATE** the need to administer Potassium Iodide to emergency workers on site and to Field Monitoring teams in accordance with HP/0/B/1009/016.

_____ **MAKE** a log entry describing the Potassium Iodide evaluation and subsequent decisions. {PIP M-99-5031}.

_____ **EVALUATE** with the Emergency Coordinator the need to:

- 1) Move any Assembly Points in the release path (include Site Evacuation Coordinator)
- 2) Conduct site and/or area evacuation (include Site Evacuation Coordinator)
- 3) Recommend protective actions for emergency workers
- 4) Recommend protective actions for the public.

RADIATION PROTECTION MANAGER
TSC ACTIVATION CHECKLIST

NOTE: IF changes to the Initial Protective Action Recommendations are recognized and approved by the Emergency Coordinator, these changes shall be transmitted to the off site agencies within 15 minutes. {PIP-M-00-02138}

_____ UPON declaration of a General Emergency the Emergency Coordinator shall **IMMEDIATELY RECOMMEND** to offsite authorities the following:

IF containment radiation levels exceed the levels on Enclosure 4.4, page 5 of 6, Guidance for Determination of Gap Activity, **THEN:**

_____ Evacuate the 5-mile radius **AND** 10 miles downwind as shown on Enclosure 4.4, top of page 4 of 6, Protective Action Zones Determination, using wind direction.

AND

_____ Shelter remaining zones as shown on Enclosure 4.4, top of page 4 of 6, Protective Action Zones Determination, using wind direction.

IF containment radiation levels **DO NOT** exceed the levels on Enclosure 4.4, page 5 of 6, Guidance for Determination of Gap Activity, **THEN** perform one of the following:

IF wind speed is less than or equal to 5 MPH **THEN:**

_____ Evacuate zones L, B, M, C, N, A, D, O, R

AND

_____ Shelter zones E, F, G, H, I, J, K, P, Q, S.

OR

IF wind speed is greater than 5 MPH **THEN:**

_____ Evacuate the 2-mile radius **AND** 5 miles downwind as shown on Enclosure 4.4 bottom of page 4 of 6, Protective Action Zones Determination, using wind direction

AND

_____ Shelter remaining zones as shown on Enclosure 4.4, bottom of page 4 of 6, Protective Action Zones Determination, using wind direction.

RADIATION PROTECTION MANAGER
TSC ACTIVATION CHECKLIST

_____ **IF** SAMGs are implemented **AND** offsite releases approach, or exceed, 1Rem TEDE or 5 Rem Thyroid CDE, **THEN** notify the TSC Lead SAMG Evaluator. {PIP-M-99-5381}.

NOTE: For assistance in determining dose rates inside the plant during a SAMG event, contact NGO Nuclear Radiological Engineering Group. {PIP-M-00-1572}

_____ **IF** a situation, which is immediately hazardous to life or valuable property, exists, **THEN** evaluate potential dose rates by one of the following methods:

1. Contact RP shift at Ext. 4282
2. Assess area monitors

AND

Ensure a Request for Emergency Exposure is completed in the OSC prior to dispatch of emergency workers.

_____ **REVIEW** RP/0/A/5700/000 (Classification of Emergency) criteria (EMFs, offsite dose, etc.) for emergency classification changes and discuss with OPS Procedure Support position.

_____ **ENSURE** all TSC personnel are wearing dosimetry and using dose cards (SRWP 33).

_____ **ENSURE** responders are aware of the need for frisking prior to entry into the TSC as conditions dictate.

_____ **PREPARE** for 24 hour coverage as necessary.

_____ **DETERMINE** if persons with special radiological exposure limits need to be evacuated (e.g. declared pregnant women, people with radio-pharmaceutical limitations).

_____ **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

OFFSITE DOSE ASSESSOR
TSC ACTIVATION CHECKLIST

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

- _____ **SIGN** in on the TSC staffing board and put on position badge.
- _____ **SIGN** the TSC attendance sheet for a drill.
- _____ **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.
- _____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- _____ **ESTABLISH** a log of activities.
- _____ **TURN ON** dose assessment and data acquisition computers and acquire necessary information. If data acquisition programs are unavailable, information may be obtained from SDS or the Control Room (EMF and Met data).
- _____ **OBTAIN** copies of the following procedures:
 - RP/0/A/5700/000 (Classification Of Emergency)
 - SH/0/B/2005/001 (Emergency Response Offsite Dose Projections).
- _____ **IF** a loss of power, LAN, printer, etc., occurs, **THEN** perform Dose Calculations via the Lap Top Computer **PER** instructions on page 6 of 6 of this enclosure.
- _____ **PERFORM** offsite dose projections and determine protective action recommendations. Dose projections shall be run at least every 30 minutes or as directed by the RPM.

Enclosure 4.4
OFFSITE DOSE ASSESSOR
TSC ACTIVATION CHECKLIST

RP/0/A/5700/012
Page 2 of 6

NOTE: If changes to the Initial Protective Action Recommendations are recognized and approved by the Emergency Coordinator, these changes shall be transmitted to the off site agencies within 15 minutes. {PIP-M-00-02138}

_____ **UPON** declaration of a General Emergency, **IMMEDIATELY RECOMMEND** to offsite authorities the following:

IF containment radiation levels exceed the levels on Enclosure 4.4, page 5 of 6, Guidance for Determination of Gap Activity, **THEN**:

_____ Evacuate the 5-mile radius **AND** 10 miles downwind as shown on Enclosure 4.4, top of page 4 of 6, Protective Action Zones determination, using wind direction.

AND

_____ Shelter remaining zones as shown on Enclosure 4.4, top of page 4 of 6, Protective Action Zones Determination, using wind direction.

IF containment radiation levels **DO NOT** exceed the levels on Enclosure 4.4, page 5 of 6, Guidance for Determination of Gap Activity, **THEN** perform one of the following:

IF wind speed is less than or equal to 5 MPH **THEN**:

_____ Evacuate zones L, B, M, C, N, A, D, O, R

AND

_____ Shelter zones E, F, G, H, I, J, K, P, Q, S.

OR

IF wind speed is greater than 5 MPH **THEN**:

_____ Evacuate the 2-mile radius **AND** 5 miles downwind as shown on Enclosure 4.4, bottom of page 4 of 6, Protective Action Zones Determination, using wind direction

AND

_____ Shelter remaining zones as shown on Enclosure 4.4, bottom of page 4 of 6, Protective Action Zones Determination, using wind direction.

OFFSITE DOSE ASSESSOR
TSC ACTIVATION CHECKLIST

NOTE: Be aware of the effects of loss of power on critical EMFs.

- _____ **VERIFY** operability and validity of EMFs through the Shift Lab.
- _____ **VERIFY** effluent discharge alignment with Shift Lab, RPM, or RP Support as necessary.
- _____ **VERIFY** the status of on-shift Dose Assessment with the shift lab and accept the responsibility for dose assessment.

IF the TSC is not activated and the EC has not received turnover from the Control Room, **THEN**:

- _____ Establish contact with and inform the OSM that the Duty dose Assessors in the TSC have assumed responsibility for Dose Assessment.

AND

- _____ Provide off-site dose calculations and resultant protective action recommendations for radioactive material release to the OSM until the TSC is activated.
- _____ **ESTABLISH** communications with dose assessment personnel at the EOF. Compare information, projections and strategies with the EOF. Turn over dose assessment for offsite communication purposes to EOF Dose Assessors as soon as the EOF becomes officially activated.
- _____ **CHECK** operability of the HPN telephone by listening for a dial tone. If no dial tone is heard, notify the IAE Communications Specialist to pursue repairs. {PIP-M-99-3800}.
- _____ **RETAIN** all computer printouts or manually calculated enclosures.
- _____ **TURN ON** the EMFs (54A and 54B) in the TSC from the OAC computer room by pressing the start button on each EMF control.
- _____ **ENSURE** EMF22 (TSC Area Monitor) is functional.

NOTE: If a safety injection has occurred, the TSC air intakes sampled by EMF-54A and 54B will open and the filter train is placed in service. One of the air intakes must be reopened if both EMFs are in trip 2. {PIP 0-M97-4278}

- _____ **IF** EMF54A and 54B exceed the trip 2 setpoint, **THEN** raise the trip 2 setpoint on the lowest reading EMF to reopen the air intake.
- _____ **ENSURE** EMF54A and B are secured after drill/event is terminated.
- _____ **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

OFFSITE DOSE ASSESSOR
TSC ACTIVATION CHECKLIST

Protective Action Zones Determination

For Containment Radiation Levels Exceeding GAP Activity

Wind Direction (deg from N) Chart Recorder 1EEBCR9100 Point # 8 Average Upper Wind Direction {PIP 0-M98-3522}	Evacuate 5 Mile Radius-10 Mile Downwind	Shelter
0 - 22.5	L,B,M,C,N,A,D,O,R,E,S,F	G,H,I,J,K,P,Q
22.6 - 45.0	L,B,M,C,N,A,D,O,R,E,Q,S	F,G,H,I,J,K,P
45.1 - 67.5	L,B,M,C,N,A,D,O,R,E,Q,S	F,G,H,I,J,K,P
67.6 - 90.0	L,B,M,C,N,A,D,O,R,P,Q,S	E,F,G,H,I,J,K
90.1 - 112.5	L,B,M,C,N,A,D,O,R,K,P,Q,S	E,F,G,H,I,J
112.6 - 135.0	L,B,M,C,N,A,D,O,R,I,K,P,Q,S	E,F,G,H,J
135.1 - 157.5	L,B,M,C,N,A,D,O,R,I,K,P,Q	E,F,G,H,J,S
157.6 - 180.0	L,B,M,C,N,A,D,O,R,I,J,K,P	E,F,G,H,Q,S
180.1 - 202.5	L,B,M,C,N,A,D,O,R,G,H,I,J,K,P	E,F,Q,S
202.6 - 225.0	L,B,M,C,N,A,D,O,R,G,H,I,J,K,P	E,F,Q,S
225.1 - 247.5	L,B,M,C,N,A,D,O,R,F,G,H,I,J	E,K,P,Q,S
247.6 - 270.0	L,B,M,C,N,A,D,O,R,F,G,H,I,J	E,K,P,Q,S
270.1 - 292.5	L,B,M,C,N,A,D,O,R,E,F,G,H,J	I,K,P,Q,S
292.6 - 315.0	L,B,M,C,N,A,D,O,R,E,F,G	H,I,J,K,P,Q,S
315.1 - 337.5	L,B,M,C,N,A,D,O,R,E,F,G	H,I,J,K,P,Q,S
337.6 - 359.9	L,B,M,C,N,A,D,O,R,E,F,S	G,H,I,J,K,P,Q

Wind Speed Greater than 5 Miles per Hour

Wind Direction (deg from N) Chart Recorder 1EEBCR9100 Point # 8 Average Upper Wind Direction {PIP 0-M98-3522}	Evacuate 2 Mile Radius-5 Mile Downwind	Shelter
0 - 22.5	L,B,M,C,D,O,R	A,E,F,G,H,I,J,K,N,P,Q,S
22.6 - 45.0	L,B,M,C,D,O,R	A,E,F,G,H,I,J,K,N,P,Q,S
45.1 - 67.5	L,B,M,C,D,O,R	A,E,F,G,H,I,J,K,N,P,Q,S
67.6 - 90.0	L,B,M,C,D,O,R,N	A,E,F,G,H,I,J,K,P,Q,S
90.1 - 112.5	L,B,M,C,O,R,N	A,D,E,F,G,H,I,J,K,P,Q,S
112.6 - 135.0	L,B,M,C,O,N,R,A	D,E,F,G,H,I,J,K,P,Q,S
135.1 - 157.5	L,B,M,C,O,A,N	D,E,F,G,H,I,J,K,P,Q,R,S
157.6 - 180.0	L,B,M,C,A,N	D,E,F,G,H,I,J,K,O,P,Q,R,S
180.1 - 202.5	L,B,M,C,A,N	D,E,F,G,H,I,J,K,O,P,Q,R,S
202.6 - 225.0	L,B,M,C,A,N,D	E,F,G,H,I,J,K,O,P,Q,R,S
225.1 - 247.5	L,B,M,C,A,D	E,F,G,H,I,J,K,N,O,P,Q,R,S
247.6 - 270.0	L,B,M,C,A,D	E,F,G,H,I,J,K,N,O,P,Q,R,S
270.1 - 292.5	L,B,M,C,A,D	E,F,G,H,I,J,K,N,O,P,Q,R,S
292.6 - 315.0	L,B,M,C,A,D	E,F,G,H,I,J,K,N,O,P,Q,R,S
315.1 - 337.5	L,B,M,C,D,R	A,E,F,G,H,I,J,K,N,O,P,Q,S
337.6 - 359.9	L,B,M,C,D,R	A,E,F,G,H,I,J,K,N,O,P,Q,S

OFFSITE DOSE ASSESSOR
TSC ACTIVATION CHECKLIST

GUIDANCE FOR OFFSITE PROTECTIVE ACTIONS

GUIDANCE FOR DETERMINATION OF GAP ACTIVITY

NOTE: Fission product inventory inside containment is greater than gap activity if the containment radiation level exceeds the levels in the table below.

— IF the OAC is available, call up the following computer points based on need

<u>Unit 1 OAC</u>		<u>Unit 2 OAC</u>	
M1A0829	1EMF51A	M2A0829	2EMF51A
M1A0835	1EMF51B	M2A0835	2EMF51B

<u>Time After Shutdown (Hours)</u>	<u>Containment Monitor Reading (R/HR) EMF51A or 51B</u>
0	2,340
0-2	864
2-4	624
4-8	450
> 8	265

OFFSITE DOSE ASSESSOR
TSC ACTIVATION CHECKLIST**Operation of Backup Laptop Computer**

NOTE: This computer shall be used only when no other dose assessment computers are functional.

- In the TSC Dose Assessment area, open the wall cabinet containing the Raddose Back-up Computer. The key for the wall cabinet is in the Dose Assessment cabinet.
- Remove the laptop and place on the desk under the cabinet. Do not attempt to remove the attached security cable.
- Connect the laptop to the LAN (yellow cable to the right side of the computer).
- Turn on the computer by pushing the power switch (on the left side) forward.
 - The computer will display the following message:
"Starting Windows 95
Windows cannot determine what configuration your computer is in.
Select one of the following:"
 - **IF** the LAN is available, enter "2" for Lan connected.
 - **IF** the LAN is NOT available, disconnect the yellow lan connection from the right side of the computer and enter "1" for not Lan connected.
- When prompted, enter your user ID and personal domain password.
- Select the **Raddose-V** icon.
- Go to step 4.4 in HP/0/B/1009/029. Perform step 4.5 through 4.14. After performing the specified steps, proceed to the next step here.
- At the Report Menu, select Display Green Form.
- Review items 10 through 15 on the screen.
- Transfer information from screen to blank Emergency Notification Form (blank sheets located in dose assessment area cabinet) and deliver to the OSM/EC. Communicate the information by phone if physical delivery is not possible. Click on SAVE.
- Perform steps 4.15.4 through 4.20 in HP/0/B/1009/029 as necessary.
- When does assessment is completed, turn off the back-up computer, disconnect the modem line and place the computer back in the cabinet. Lock the cabinet and return key to dose assessment cabinet.

OFFSITE AGENCY COMMUNICATOR
TSC ACTIVATION CHECKLIST

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

- _____ **SIGN** in on the TSC staffing board and put on position badge.
- _____ **SIGN** the TSC attendance sheet for a drill.
- _____ **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.
- _____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- _____ **ESTABLISH** a log of activities.

NOTE: ANY information sent to the EOF other than **ENF FORMS** (TSC/EOF Turnover Sheet, SAMG Strategy Sheets, etc) should be faxed to Fax Machine in EOF Director Area. Fax number 382 - 1825. {PIP 0-M98-2065}

- _____ **OBTAIN** a copy of RP/0/A/5700/018, (Notifications to the State and Counties from the Technical Support Center), from the procedures cabinet.
- _____ **EXECUTE** RP/0/A/5700/018, (Notifications to the State and Counties from the Technical Support Center).
- _____ **INFORM** Emergency Coordinator of status of offsite communications (e.g., next message due).
- _____ **PREPARE** for 24 hour coverage as necessary.
- _____ **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of emergency facility.

NRC COMMUNICATOR
TSC ACTIVATION CHECKLIST

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

- **SIGN** in on the TSC staffing board and put on position badge.
- **SIGN** the TSC attendance sheet for a drill.
- **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.
- **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- **ESTABLISH** a log of activities.
- **OBTAIN** a copy of the current classification procedure from the procedure cabinet:
 - Notification Of Unusual Event, RP/0/A/5700/001
 - Alert, RP/0/A/5700/002
 - Site Area Emergency, RP/0/A/5700/003
 - General Emergency, RP/0/A/5700/004.

NOTE: The only turnover from the Control Room the TSC NRC Communicator takes is responsibility for communications to the NRC. {PIP 0-M94-1496}

- **WHEN** the TSC is activated, **THEN** pickup and monitor the NRC ENS telephone (Located on NRC Communicator's table). {PIP-M-99-3800}
- **IF** the Control Room Communicator is on line with the NRC, inform the parties that the TSC is activated and you are ready to assume continuous communication requirements.
- **IF** continuous communication with the NRC is not established, notify the Control Room Communicator that you are available to perform this function, if required. {PIP-M-99-3800}

NRC COMMUNICATOR
TSC ACTIVATION CHECKLIST

- **IF** not previously established, **THEN** establish continuous communications upon request by the NRC. {PIP-M-99-3800}
- **INFORM** NRC of TSC/EOF activations and plant status as requested.
- **PROVIDE** for 24 hour coverage as necessary.
- **INFORM** the NRC when the TSC is deactivated. This requires an additional call using ENS when the NRC does not require continuous communications be maintained.
- **CONTACT** Regulatory Compliance Duty Person if the NRC is going to arrive on site.
- **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

Enclosure 4.7
REACTOR ENGINEER
TSC ACTIVATION CHECKLIST

RP/0/A/5700/012
Page 1 of 2

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

- _____ **SIGN** in on the TSC staffing board and put on position badge.
- _____ **SIGN** the TSC attendance sheet for a drill.
- _____ **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.
- _____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- _____ **ESTABLISH** a log of activities.
- _____ **OBTAIN** a copy of RP/0/A/5700/019 (Core Damage Assessment) from the procedure cabinet.
- _____ **OBTAIN** a copy of affected Unit(s) Data Book. {PIP 0-M98-3522}
- _____ **MONITOR** core conditions as appropriate using either APD, SDS or the OAC Critical Points and Steam Tables as follows:

NOTE: If the OAC is not available, core conditions may need to be obtained from the Operations Manager in the TSC who is in contact with the Control Room.

1. Core Subcooling.
2. Reactor Vessel Water Level (RVLIS).
3. Power level if Reactor not tripped.
4. Ask the Operations Liaison to verify all rods at bottom on Reactor Tripped.
5. Source Range Trends following Reactor Trip.
6. Compare each loop T-hot, T-cold and T-avg.
7. What is the most recent boron concentration, and has there been any safety injection.
8. Reactor coolant pumps On/Off Natural or Forced circulation.
9. Pressurizer Level.
10. Containment EMFs.
11. Injection flow and letdown flow (NC inventory).
12. Containment Pressure.
13. Current burnup and previous 2 cycles EFPD.
14. The number of failed rods and DEI prior to transient.
15. Fuel Pool Temperature (Phase A or Phase B Isolation).

REACTOR ENGINEER
TSC ACTIVATION CHECKLIST

— **REVIEW** the previous parameters with an immediate focus on the trends of the following:

1. State of criticality and shutdown margin.
2. Core voiding.
3. Core uncover.
4. Challenge to the fuel pellet fission product barrier.
5. Challenge to the cladding fission product barrier.
6. Challenge to the NCS pressure boundary.
7. NC cooldown rate.
8. Fuel Pool Heatup.

On a Safety Injection Signal the Auxiliary Building KC cooled loads are isolated by a phase A containment isolation signal. This includes KC cooling of the KF heat exchangers. A conservative estimate of the time for the spent fuel pool to reach saturation without forced cooling is approximately 10 hours. Within approximately 6 hours following a loss of forced cooling of the spent fuel pool, contact Accident Assessment (Nuclear Engineering General Office) in the EOF for a recommendation regarding initiating KC cooling to KF or alternate means of supplying fuel pool cooling.

— **PREPARE** for 24-hour staffing as necessary.

— **ASSIST** Operations Procedure Support as an Evaluator upon entry into Severe Accident Management Guidelines (SAMG).

— **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the Emergency facility.

OPERATIONS MANAGER IN THE TSC
TSC ACTIVATION CHECKLIST

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

- **SIGN** in on the TSC staffing board and put on position badge.
- **SIGN** the TSC attendance sheet for a drill.
- **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.
- **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- **ESTABLISH** a log of activities.
- **ESTABLISH** communications with the Control Room, OSC and EOF using the cell phone by dialing 4500 (let it ring until you hear a beep).

NOTE: If a Security event occurs while the TSC is activated, the OPS Manager in the TSC will serve as the focal point for the coordination of activities between the OSC, TSC and Security. The information and actions decided upon should be handled through the normal communication channels with the TSC Emergency Coordinator.

- **IF** a Security event occurs (i.e. bomb threat, sabotage, etc.) or additional communications are needed with Security personnel, have the OSC Security Officer request the SAS Security Officer to dial into the OPS bridge line (4500).
- **NOTIFY** the Control Room crew, via the Operations Manager in the Control Room, of any event classification changes. {PIP-M-00-2138}

OPERATIONS MANAGER IN THE TSC
TSC ACTIVATION CHECKLIST

- _____ **IF** a loss of OAC occurs, or if for some reason SDS data becomes unavailable in the TSC, select a data taker from the control room crew or some other resource. **Instruct** the data taker to complete the six page "Loss of OAC Data Collection" checklist kept on file in the TSC procedure file cabinet. (The TSC Emergency Planner also has electronic access to this checklist via "Emgplan on Mnsf2"/"Forms"/"Loss of OAC Data Collection.doc".) **Specify** to the data taker how frequently this checklist needs to be completed and forwarded to the OPS Manager in the TSC. FAX number 875-4722 in the TSC Site Assembly/Evacuation Coordinators' office may be used if deemed necessary for transmittal. **Provide** copies of the completed checklist to the TSC staff as needed. {PIP M-99-5381}
- _____ **PROVIDE** main communication link between the TSC and Control Room.
- _____ **PROVIDE** accurate and current status information to Emergency Coordinator and during time-outs.
- _____ **ASSIST** in making decisions on emergency classifications, mitigation strategies, and contingency plans.
- _____ **SUPPORT** Control Room personnel by providing resources and consultation as required.
- _____ **EVALUATE** and prioritize requests for information from the TSC staff, EOF staff, NRC and others.
- _____ **EVALUATE** and consult with Control Room personnel on suggested mitigation strategies.
- _____ **COORDINATE** with the Operations Liaison requested priorities of activities in the plant.
- _____ **HAS** the authority to override normal controls on activities directed by the OSC.
- _____ **ASSIST** Emergency Coordinator as a Decision Maker upon entry into Severe Accident Management Guidelines (SAMG).
- _____ **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the Emergency Facility.

OPERATIONS PROCEDURE SUPPORT
TSC ACTIVATION CHECKLIST

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

- **SIGN** in on the TSC staffing board and put on position badge.
- **SIGN** the TSC attendance sheet for a drill.
- **IF** a site ssembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.
- **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- **ESTABLISH** a log of activities.
- **OBTAIN** a copy of RP/0/A/5700/000 (Classification of Emergency), from the procedures cabinet.
- **OBTAIN** a copy of the current classification procedure from the procedure cabinet:
 - Notification Of Unusual Event, RP/0/A/5700/001
 - Alert, RP/0/A/5700/002
 - Site Area Emergency, RP/0/A/5700/003
 - General Emergency, RP/0/A/5700/004.
- **OBTAIN** a copy of RP/0/A/5700/026 [Operations/Engineering Technical Evaluations In The Technical Support Center (TSC)] from the procedure cabinet and begin system/plant parameter evaluation.

NOTE: The following step provides a listen only connection - leave headset switch in the mute position (position is taped).

- **ESTABLISH** communications with OPS bridge line using the cell phone by dialing 4500. (Let it ring until you hear a beep.)

OPERATIONS PROCEDURE SUPPORT
TSC ACTIVATION CHECKLIST

- _____ **ENSURE** correct emergency classifications are made by following the current plant status and procedures in use.
- _____ **PROVIDE** back-up service to Control Room personnel ensuring the correct procedural flowpath is followed.
- _____ **ADVISE** Emergency Coordinator on the anticipated course of the event.
- _____ **PREPARE** Control Room personnel of possible difficult points in the procedures by a look ahead.
- _____ **CONSULT** the EOF for possible solutions if procedural adequacy becomes a concern.
- _____ **PROVIDE** information to Offsite Agency Communicator and the NRC Communicator as requested regarding changes in plant conditions.
- _____ **PREPARE** for 24 hour coverage as necessary.
- _____ **SERVE** as Lead Evaluator upon entry into Severe Accident Management Guidelines (SAMG). This duty shall include providing leadership and guidance to the other available SAMG Evaluators specifically concerning what they should be doing. {PIP-M-99-5381}.
- _____ **PROVIDE** completed paperwork to Emergency Planning upon deactivation of the Emergency facility.

SYSTEM ENGINEERING MANAGER
TSC ACTIVATION CHECKLIST

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

- **SIGN** in on the TSC staffing board and put on position badge.
- **SIGN** the TSC attendance sheet for a drill.
- **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.
- **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- **ESTABLISH** a log of activities.
- **ENSURE** PC is on and displaying plant status.
- **ESTABLISH** communications with the following and provide the SEM phone number:
 - TSC Engineering Support, Ext. 4917
 - EOF Accident Assessment, 382-0762
 - OSC Equipment Engineering, Ext. 4971.

NOTE: The following step provides a listen only connection. Leave head set switch in the "mute" position.

- **ESTABLISH** communication with the OPS bridge line, using the cell phone by dialing 4500. (Let it ring until you hear a beep.)
- **OBTAIN** a copy of RP/0/A/5700/026 [Operations/Engineering Technical Evaluations In The Technical Support Center (TSC)] from the procedure cabinet and begin system/plant parameter evaluation.
- **VERIFY** Engineering Support Group is connected to the Operations headset network (listen only) after the Operations Manager in the TSC ties in the OSC and EOF.

SYSTEM ENGINEERING MANAGER
TSC ACTIVATION CHECKLIST

- _____ **COORDINATE** accident mitigation strategy and engineering support through effective communications with the Engineering Support Group, Accident Assessment in the EOF, and the OSC.
- _____ **CONTACT** the on-duty EP Support Leader and request appropriate duty personnel MSE/CEN when outside of normal hours.
- _____ **CONTINUALLY** communicate with TSC personnel, identifying areas needing Engineering support.
- _____ **REPORT** all accident mitigation strategies to the Emergency Coordinator.
- _____ **ASSIST** Operations Procedure Support as an Evaluator upon entry into Severe Accident Management Guidelines (SAMG).
- _____ **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

EMERGENCY PLANNER
TSC ACTIVATION CHECKLIST

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

- **SIGN** in on the TSC staffing board and put on position badge.
- **SIGN** the TSC attendance sheet for a drill.
- **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.
- **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- **ESTABLISH** a log of activities.
- **ASSIST** the Emergency Coordinator as required to achieve a timely turnover to the EOF. {PIP 0-M98-3522}
- **ESTABLISH** communications with EOF Emergency Planner using the cell phone by dialing 8-831-4010, or another available bridge line.
- **APPRISE** Emergency Coordinator of TSC/OSC announcements.
- **IF** Emergency Planning support is needed in the OSC, **THEN** contact additional Emergency Planning personnel and request they respond to the OSC.
- **SUPPORT** Emergency Coordinator activity (e.g., keep in procedure).
- **PROVIDE** support for the activation and operation of the TSC.
- **PROVIDE** necessary NRC/State/County interface.
- **ASSIST** Off-site Agency Communicators in preparation of emergency notifications as needed.
- **SHARE** copy of NRC Notification forms, and Emergency Notification forms with the Status Coordinator. {PIP-0-M-99-0911}
- **PROVIDE** support to other members of the TSC as requested.
- **PREPARE** for 24 hour coverage as necessary.
- **COMPLETE** the 24 Hour TSC Position Staffing Log. (Page 3 of 3 of this enclosure)

EMERGENCY PLANNER
TSC ACTIVATION CHECKLIST

- _____ **MONITOR** the Public Affairs telephone (4520) in TSC and place off hook if requested.
- _____ **COLLECT** all completed paperwork upon deactivation of the emergency facility.
- _____ **PERFORM** Enclosure 13.1 of PT/0/A/4600/091 (TSC/OSC Inventory and TSC Manuals) at the completion of the drill or event
- _____ **CONTACT** the EP Manager to ensure that the appropriate critiques are held with the Offsite Agencies. {PIP-G-00-00209}
- _____ **ASSIGN** an individual from Emergency Planning staff to follow up with an LER or written summary to the State and County authorities within 30 days

Person assigned responsibility:

EMERGENCY PLANNER
TSC ACTIVATION CHECKLIST

24 HOUR TSC POSITION STAFFING LOG

Position	Primary		Relief	
	Name (Last, First, MI)	*Shift Schedule	Name (Last, First, MI)	*Shift Schedule
Emergency Coordinator				
Assistant Emergency Coordinator				
Operations Manager in the TSC				
Operations Manager in the Control Room				
Operations Procedure Support				
System Engineering Manager				
Reactor Engineer				
Radiation Protection Manager				
Status Coordinator				
Status Coordinator				
Emergency Planner				
NRC Communicator				
Site Assembly Coordinator				
Site Evacuation Coordinator				
Data Coordinator				
IAE Communications				
Offsite Agency Communicator				
Offsite Agency Communicator				
Offsite Dose Assessor				
Offsite Dose Assessor				

*List hours of coverage; i.e. 0800-2000, or 8am-8pm.

STATUS COORDINATOR
TSC ACTIVATION CHECKLIST

{PIP 0-M94-1491}

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

- _____ **SIGN** in on the TSC staffing board and put on position badge.
- _____ **SIGN** the TSC attendance sheet for drills.
- _____ **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.
- _____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- _____ **OBTAIN** the remote control for the overhead projector and the electronic message board from the TSC supply cabinet.

NOTE: The overhead projector takes several minutes to warm up

- _____ **TURN** main switch of remote control to **ON** position (located on right side of remote).
- _____ **POINT** remote to overhead projector and depress power on button.

NOTE: The following allows the plant status sheet to be viewed in the OSC.

- _____ **LOG ON** the Status Coordinator Computer using your ID and password.
- _____ **ENSURE** computer time is in sync with TSC satellite display.
- _____ **DOUBLE CLICK** on the Plant Status.doc Icon.
- _____ **MINIMIZE** the Plant Status.doc.
- _____ **START** Net Meeting by double clicking on the OSC Status Board Icon. {M-01-4276}

WHEN Net Meeting starts and displays, **THEN:**

- _____ **SELECT** the tools pull down menu.
- _____ **SELECT** "Sharing".

STATUS COORDINATOR
TSC ACTIVATION CHECKLIST

- _____ **SELECT** "Plant Status.doc" - Microsoft under "Sharing Programs".
- _____ **CLICK** on the "Share" button.
- _____ **CLOSE** the "Sharing Program".
- _____ **MINIMIZE** Net Meeting.
- _____ **MAXIMIZE** Plant Status.doc.
- _____ **SAVE** as current date activation.doc (e.g. 22498 activation.doc).
- _____ **PRINTOUT** plant status sheets after each significant change and prior to announced timeouts.
- _____ **IN** the absence of the Emergency Planner, answer the Public Affairs telephone (ext. 4520), and lay off hook if required.
- _____ **INPUT** classification information on the electronic message board using the remote control as follows:
 1. To turn "**ON**": Press **Shift and Program** simultaneously.
 2. To select programmed messages:
 - a. **Unusual Event** Press **Program** then **Run** then "**1**" then **RUN**.
 - b. **Alert** Press **Program** then **Run** then "**2**" then **RUN**.
 - c. **Site Area Emergency** Press **Program** then **Run** then "**3**" then **RUN**.
 - d. **General Emergency** Press **Program** then **Run** then "**4**" then **RUN**.
 3. To Turn "**OFF**": Press **Shift and Program** simultaneously.
- _____ **ENTER** plant/equipment status as appropriate on electronic document.

STATUS COORDINATOR
TSC ACTIVATION CHECKLIST

NOTE: The Emergency Planner is provided copies of all NRC Notification forms and Emergency Notification forms. These may be useful in maintaining the TSC log. {PIP-0-M-99-0911}

—— **ESTABLISH** a log to serve as official log for TSC as follows:

- Log on to "Auto log" using your logon ID and password.
- All significant activities should be recorded.
- All TSC EC decisions should be recorded.
- Record the time of entry
- List entries in chronological order and include enough detail to reconstruct event series at a later date.

STATUS COORDINATOR
TSC ACTIVATION CHECKLIST

—— **LOG** entries should include but are not limited to the following examples:

- Emergency Coordinator and any change in Emergency Coordinator
- Time at which the TSC is activated.
- Present emergency classification, changes in classification, time of declaration
- Plant Conditions (Unit 1 and 2):
 - Core Cooling information (i.e., Time To Boiling, etc.)
 - Safety Systems Degraded:
 - Power Supply Status:
 - Fission Product Barrier Degradation
 - Radiation Releases
- Procedures in effect and any transition to another procedure.
- Actions taken that are not a part of an approved procedure.
- Any abnormal or unexpected plant response.
- Major equipment manipulations.
- Major mitigation actions taken.
- Site assembly or evacuation of all or any part of the plant.
- Personnel Injuries
- Recovery Action(s) in Progress
- Expected time of next Time-Out.

—— **ENSURE** the status board is maintained with current information:

- 3 or 4 highest priority “recovery actions” set by the Emergency Coordinator.
- relevant plant status information captured under “Equipment Status.”

—— **TRACK** established priorities.

—— **PREPARE** for 24-hour coverage.

—— **PRINT** copy of TSC Autolog.

**STATUS COORDINATOR
TSC ACTIVATION CHECKLIST**

- **SHUTDOWN** computer, monitor and remote control.
- **RETURN** remote controls to supply cabinet.
- **PROVIDE** all completed paperwork (Activation checklist and status board printouts) to Emergency Planning upon deactivation of the emergency facility.

IAE COMMUNICATIONS
TSC ACTIVATION CHECKLIST

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

- **SIGN** in on the TSC staffing board and put on position badge.
- **SIGN** the TSC attendance sheet for a drill.
- **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.
- **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- **ESTABLISH** a log of activities.
- **ENSURE** all necessary equipment needed to support the TSC is operable.
 - Video Conferencing
 - Phones
 - Faxes
 - Headsets
 - Page System.
- **IF** IAE Communications support is needed in the OSC, **THEN** contact additional IAE Communications personnel and request they respond to the OSC.
- **PREPARE** for 24 hour coverage as necessary.
- **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

OPERATIONS MANAGER IN THE
CONTROL ROOM
TSC ACTIVATION CHECKLIST

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

- _____ **SIGN** in on the TSC Staffing board and put on position badge. (N/A for drills)
- _____ **SIGN** the TSC attendance sheet for a drill.
- _____ **RECEIVE** a verbal report from the OSM detailing plant status, emergency class, and shift staffing level.
- _____ **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the Control Room for personnel accountability. (N/A for drills.)
- _____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869} (N/A for drills.)
- _____ **ESTABLISH** a log of activities.
- _____ **ESTABLISH** communications with the TSC, OSC and EOF using the cell phone by dialing 4500. (Let it ring until you hear a beep.) (Each time a party connects, a beep will be heard.)
- _____ **EXPEDITE** time critical tasks for the OSM by clear communication to the OSC via the OPS Liaison. The OSM is responsible for designating time critical tasks originating from the Control Room. Once a task originating from the Control Room is designated time critical, the OSM, or designee, shall direct the OPS Manager in the Control Room to request the OSC OPS Liaison to immediately make available an operator (or team) from the OSC contingent for prompt dispatch into the plant via hand held radio. Completion of OSC Task Work Sheet paperwork shall not delay time critical task dispatches. Such time critical dispatches shall receive prior verbal approval from the OSC Coordinator. Time critical task dispatches originating from the Control Room shall remain under direct control of the Control Room crew until the subject task is complete and the person (or team) has returned to the OSC and completed debriefing. {PIP 0-M96-1576} {PIP 0-M98-3522}

OPERATIONS MANAGER IN THE
CONTROL ROOM
TSC ACTIVATION CHECKLIST

- _____ **PROVIDE** main communication link from the Control Room or Simulator to the TSC, OSC and EOF.
- _____ **PROVIDE** accurate and current task status information to the OSM as needed for non-time critical tasks.
- _____ **ASSIST** in making decisions on emergency classifications, mitigation strategies and contingency plans.
- _____ **SUPPORT** Control Room personnel by directing resources and providing consultation as required.
- _____ **EVALUATE** and prioritize for the Control Room requests for information from TSC, OSC, EOF, NRC and others.
- _____ **EVALUATE** and consult with Control Room personnel on suggested mitigation strategies.
- _____ **COORDINATE** with the Operations Liaison requested priorities of activities in the plant.
- _____ **OVERRIDE** normal controls on activities directed by the OSC as necessary.
- _____ **AFTER** the shift NLOs have been dispatched to the OSC, inform the OSM of your responsibility to make NLOs available to the Control Room for time critical tasks as needed.
- _____ **NOTIFY** the TSC OPS Procedure Support position of all Emergency Procedure transitions.
{PIP 0-M97-4112}
- _____ **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

Enclosure 4.15
DATA COORDINATOR
TSC ACTIVATION CHECKLIST

RP/0/A/5700/012
Page 1 of 2

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

- **SIGN** in on the TSC staffing board and put on position badge.
- **SIGN** the TSC attendance sheet for a drill.
- **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the TSC for personnel accountability.
- **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- **ESTABLISH** a log of activities.
- **ACCESS** SDS in the TSC.

NOTE: **ERDS is not activated for drills unless directed to do so by Emergency Planning. {PIP-M-00-561}.**

ERDS can only be activated / deactivated from designated computer terminals with SDS access. These are located in the Shift Work Manager's Office, the Data Coordinators' room in the TSC and all within the Control Room horse shoe area.

ERDS is **NOT** activated for a Notification of Unusual Event. {PIP-0-M-99-2929}

- **IF** the Emergency Response Data System (ERDS) is not activated, **THEN** activate ERDS as follows:
 - Ensure SDS is running on the selected terminal.
 - Click on MAIN.
 - Click on GENERAL.
 - Click on ERDS.
 - Click on ACTIVATE.
- Record the date and time ERDS was activated in the log section of the Data Coordinator notebook located at the OAC terminals in the TSC.

Enclosure 4.15
DATA COORDINATOR
TSC ACTIVATION CHECKLIST

RP/0/A/5700/012
Page 2 of 2

- _____ **INFORM** the OSM that ERDS was activated.
- _____ **IF** ERDS failed to activate after five (5) attempts, **THEN** have the NRC Communicator notify the NRC via ENS or other available means. {PIP-M-99-5381}.
- _____ **TERMINATE** ERDS once the event is over by clicking on Terminate.
- _____ **PROVIDE** support in the area of Computer Services and data acquisition.
- _____ **PROVIDE** computer support for both software and hardware applications of data review in the TSC and the transfer of data to offsite locations.
- _____ **PREPARE** for 24-hour coverage as necessary.
- _____ **PROVIDE** all completed paperwork to Emergency Planning upon deactivation of the emergency facility.

SITE ASSEMBLY COORDINATOR
TSC ACTIVATION CHECKLIST

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

- **SIGN** in on the TSC staffing board and put on position badge.
- **SIGN** the TSC attendance sheet for a drill.
- **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the badge reader located in the TSC for personnel accountability.
- **CONTACT** your site assembly point, report your location upon activation of the site assembly alarm. { PIP 0-M96-1869 }
- **ESTABLISH** a log of activities.
- **ESTABLISH** and maintain communications with the SAS by calling Ext. 2191 to obtain status of the site assembly.

NOTE: Extension 4458 and 4977 are forwarded to Security at 4550 when the TSC is not activated.

- **CLEAR** the forward feature from extension 4458 and 4977 (located in the Site Assembly Coordinator office) by following the instructions located on the desk..
- **RECORD** site assembly start time _____ (announced from Control Room or available through the Operations Manager in the TSC.)

NOTE: Approximately 20 minutes into the site assembly, the assembly locations will contact the Site Assembly Coordinator with names and badge numbers of personnel who were unable to swipe at the assembly locations.

- **WHEN** Security provides a printout of unaccounted personnel, **THEN CHECK OFF** personnel who could not swipe at their assembly point (request this from security about 20 to 25 minutes into the site assembly).

SITE ASSEMBLY COORDINATOR
TSC ACTIVATION CHECKLIST

NOTE: During Drills, the number of personnel at each assembly point should be determined if time permits. This information is necessary in the event of an evacuation.

- _____ **CONTACT** the various assembly points to determine the approximate number of personnel at each location.
- _____ **RECORD** the approximate number of personnel at each assembly point on the board located in the Site Assembly Coordinators office.

NOTE: During a TSC "time out" a Site Assembly or Evacuation Coordinator **SHALL** report to the designated location at the Emergency Coordinator's Table to provide status/updates. {PIP-0-M98-2065}

RECORD site assembly completion time _____.

- _____ **REQUEST** the OPS Manager in the TSC have the Control Room to STOP site assembly alarms and announcements.
- _____ **DISCUSS** standing down from site assembly with the Emergency Coordinator. If okay to stand down, **REQUEST** Ops Manager in the TSC have the Control Room to give the stand down from site assembly. If **NOT** okay to stand down from site assembly, Site Evacuation coordinator will make announcements as directed by Enclosure 4.20.

NOTE: The following message will be communicated to the site at the conclusion of site assembly by the control room.

_____ **IF** requested to do so by the control room, **ANNOUNCE** the stand down message below:

Drill Message for standing down from Site Assembly: Dial 710; at the beep, dial 80, begin speaking

"Attention all station personnel. This is a drill message. This is a drill message. You have been assembled as part of an emergency exercise. If this were an actual emergency, you would be asked to remain assembled waiting on further information, or given instructions to leave the site in accordance with our site evacuation plan. You may now return to your normal work assignments. Thank you for your participation.

SITE ASSEMBLY COORDINATOR
TSC ACTIVATION CHECKLIST

- _____ **AFTER** the drill message for standing down from site assembly is announced, **EVALUATE** the need to initiate search and rescue of missing personnel and discuss with Emergency Coordinator.
- _____ **POST** periodic site assembly updates on site assembly/evacuation board as needed.
- _____ **PROVIDE** periodic updates to the Emergency Coordinator, as needed and during time outs, concerning site assembly status.
- _____ **PREPARE** for 24-hour coverage for your position as necessary.

NOTE: If the Site Assembly portion of the Emergency / Drill is complete. The Site Assembly Coordinator should assist the Site Evacuation Coordinator with Emergency/ Drill message updates and evacuation coordination.

- _____ **WHEN** the TSC is deactivated, then **FORWARD** extension 4458 and 4977 to Security at extension 4550.
- _____ **REPLACE** the signs on the extension 4458 and 4977 warning personnel about using the two extensions.
- _____ **PROVIDE** all completed paperwork to the Emergency Planner upon deactivation of the emergency facility.

SITE ASSEMBLY COORDINATOR
TSC ACTIVATION CHECKLIST

SITE PAGING SYSTEM
INDIVIDUAL PAGING NUMBERS

NOTE: 710 covers all of these areas.

711, then speak	MOC
712 , then speak	Garage
713 , then speak	Medical
714 , then speak	NAB
715 , then speak	MTF
718 , then speak	Cowans Ford
719 , then speak	Plant
720 , then speak	Island Training Center
721 , then speak	Island Environmental Center
722 , then speak	Island Tech Services Center
723 , then speak	Island Energy Explorium

**Emergency Coordinator/Emergency
Operations Facility Director Turnover
Checklist**

UNIT(S) AFFECTED:

U1 _____

U2 _____

{PIP-M-99-3800}

GENERAL	DATE: _____	POWER LEVEL	NCS TEMP	NCS PRESS
	TIME: _____	U-1 _____	_____	_____
		U-2 _____	_____	_____

EMERGENCY CLASSIFICATION	NOUE DECLARED AT: _____	TSC ACTIVATED AT: _____
	ALERT DECLARED AT: _____	EOF ACTIVATED AT: _____
	SAE DECLARED AT: _____	
	G.E. DECLARED AT: _____	
	REASON FOR EMER CLASS: _____	

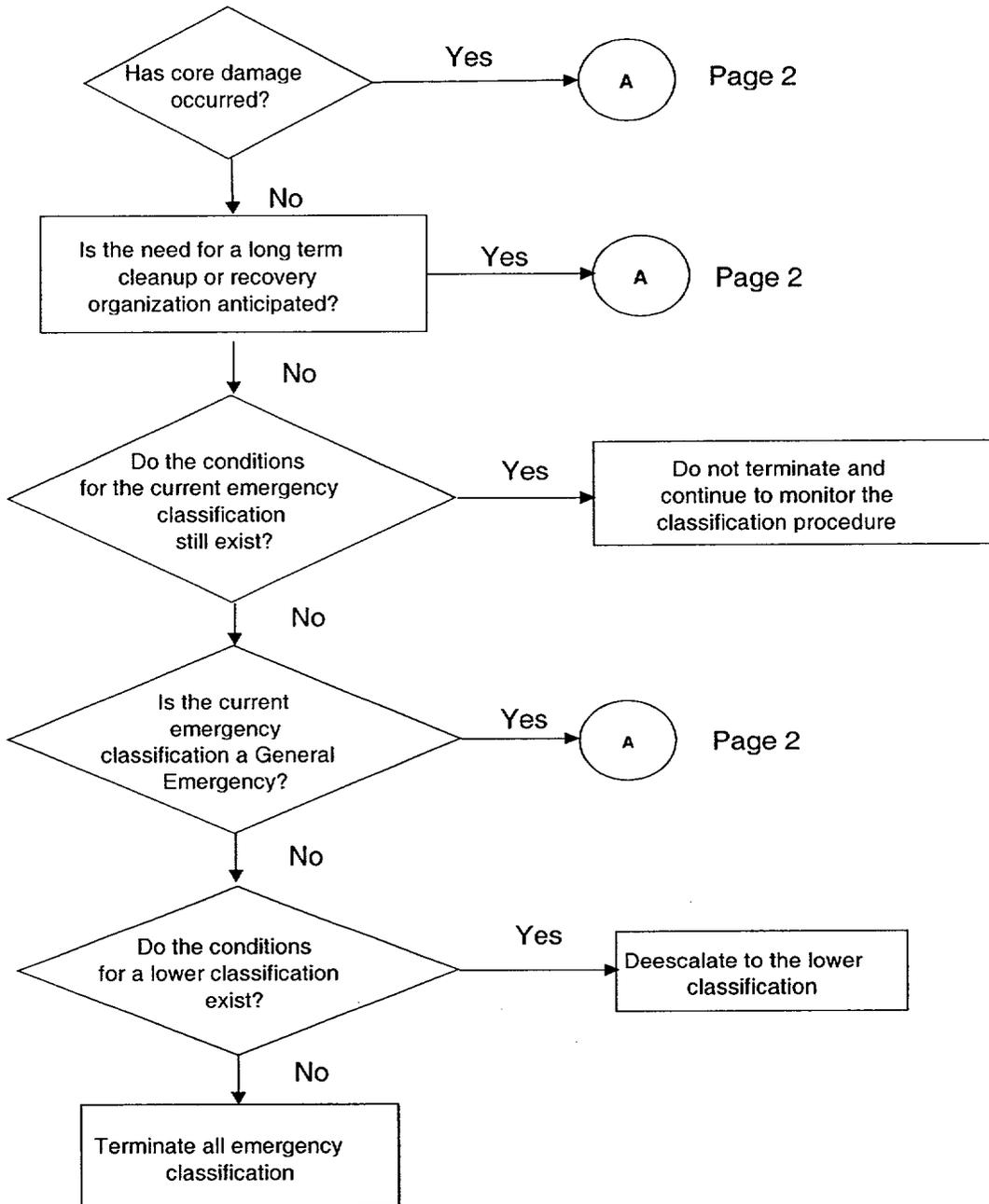
ASSEMBLY ACTIVATION		YES	NO	TIME	LOCATION OR COMMENTS
	SITE ASSEMBLY	_____	_____	_____	_____
	SITE EVAC. (NON-ESSEN.)	_____	_____	_____	_____
	SITE EVAC. (ESSENTIAL)	_____	_____	_____	_____
	OTHER OFFSITE AGENCY INVOLVEMENT	_____	_____	_____	_____
	MEDICAL	_____	_____	_____	_____
	FIRE	_____	_____	_____	_____
	POLICE	_____	_____	_____	_____

RADIOLOGICAL	FIELD MON. TEAMS	NUMBER ASSEM. _____	NUMBER DEPLOYED _____
		ZONES EVAC _____	ZONES SHELTERED _____
	PARS:	_____	_____
		YES _____	NO _____
	RELEASE IN PROGRESS	_____	_____
	RELEASE PATHWAY	_____	
	CONTAINMENT PRESSURE	_____	PSIG _____
	WIND DIRECTION _____	WIND SPEED _____	

OFFSITE COMMUNICATION	LAST MESSAGE SENT:	NUMBER _____	TIME _____
	NEXT MESSAGE DUE:	_____	_____
	NOTE: EOF COMMUNICATION	CHECKS SHOULD BE COMPLETED PRIOR TO ACTIVATING THE EOF.	

OTHER NOTES RELATED TO THE ACCIDENT/EVENT/PLANT EQUIPMENT FAILED OR OUT OF SERVICE

Emergency Classification Termination
Criteria



Emergency Classification Termination
Criteria

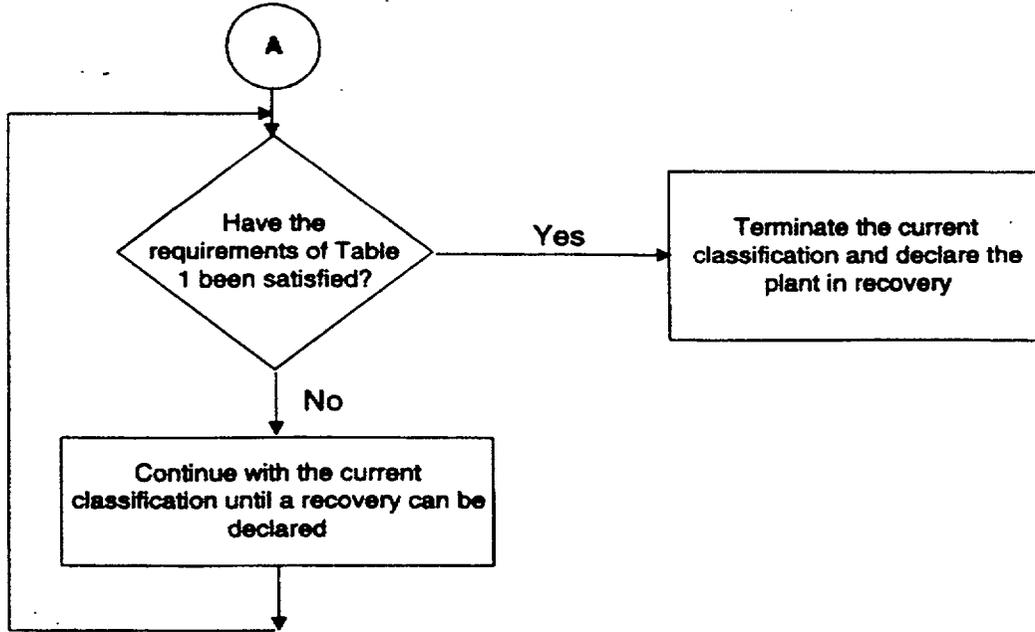


Table 1

Recovery Conditions

___ No new evacuation or sheltering protective actions are anticipated

___ Containment pressure is less than design pressure

___ Decay heat rejection to the ultimate heat sink has been established and either:

- Injection and heat removal have redundancy available (2 trains of injection/DHR or a train of DHR and S/G cooling)

OR

- No additional fission product release or fission product barrier challenges would be expected for at least 2 hours following interruption of injection. {PIP 0-M96-1645}

___ The risks from recriticality are acceptably low

___ Radiation Protection is monitoring access to radiologically hazardous areas

___ Offsite conditions do not limit plant access

___ The News Manager, NRC officials, and State representatives have been consulted to determine the effects of termination on their activities

___ The recovery organization is ready to assume control of recovery operations Go to RP/0/A/5700/024, (Recovery and Reentry)

Enclosure 4.19
Fitness for Duty Questionnaire

RP/0/A/5700/012
Page 1 of 1

Print Name: _____ Employee ID #: _____

Sign Name: _____ ERO Position: _____

HAVE YOU CONSUMED ALCOHOL IN THE LAST FIVE (5) HOURS?

MARK THE APPROPRIATE BOX

No

If No, stop here and fold this form and drop it in the box provided.

YES

If your answer is Yes, take this form to a member of management for observation.

OBSERVATION DETERMINATION

What did you have? _____

How much did you have? _____

Can you perform your function unimpaired? YES NO

In my opinion, observation of this individual indicates the individual is capable of performing his/her ERO function.

Signature of Management Observer

Date

Fold the form and drop it in the box provided.

SITE EVACUATION COORDINATOR
TSC ACTIVATION CHECKLIST

INITIAL

NOTE: You are only required to complete Enclosure 4.19 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

- **SIGN** in on the TSC staffing board and put on position badge.
- **SIGN** the TSC attendance sheet for a drill.
- **IF** a site assembly is in progress or is conducted **SWIPE** your ID badge in the badge reader located in the TSC for personnel accountability.
- **CONTACT** your site assembly point, report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- **ESTABLISH** a log of activities.
- **DISCUSS** with the Site Assembly Coordinator the status of the site assembly in preparation for emergency/drill message updates and possible site evacuation.

SITE EVACUATION COORDINATOR
TSC ACTIVATION CHECKLIST

NOTE: If the Site Assembly portion of the Emergency / Drill is complete. The Site Assembly Coordinator should assist the Site Evacuation Coordinator with Emergency/ Drill message updates and evacuation coordination.

_____ **IF** site assembly is still in progress **ANNOUNCE** the following Initial communication over the P.A. for the appropriate situation by dialing 710, at the beep, dial 80 and begin speaking:

For an Actual Emergency: "Attention all site personnel. This is an emergency message. This is an emergency message. At the present time, we have a _____"(emergency classification). *(Report general information of the event/information of importance. Obtain this information from the Offsite agency communicator).* _____

All personnel inside the protected area shall remain at your site assembly location. All personnel outside of the protected area shall remain in your work area until you receive further instructions. Information will be provided to you as conditions change."

For a Drill: "Attention all site personnel. This is a drill message. This is a drill message. At the present time, we have a _____"(emergency classification). *(Report general information of the event/information of importance. Obtain this information from the Offsite Agency Communicator.):*

All personnel inside the protected area shall remain at your site assembly location. All personnel outside of the protected area may continue normal work activity. If this were an actual emergency, personnel outside the protected area would be instructed to remain at your work location."

_____ **RECORD** time of announcement _____.

SITE EVACUATION COORDINATOR
TSC ACTIVATION CHECKLIST

NOTE: An additional worksheet for Emergency/Drill Message Updates is on page 7 of 7.

—— **OBTAIN** off site notification information from the Off-site Agency Communicator *each time* an off-site notification is made and prepare an Emergency/ Drill Message Update as follows:

NOTE: If it is determined that an announcement should be made to the plant outside of the normal offsite agency communication, get the Emergency/ Assistant Emergency Coordinator's approval prior to the announcement. Use the message format as follows. After the notification is made, provide a copy of the announcement to the Offsite Agency Communicators.

Emergency Message/Drill Message Update: Dial 710; at the beep, dial 80, begin speaking

—— “Attention all site personnel. This is a/an emergency/drill message. This is a/an emergency drill message.” (*General Information of the event/information of importance. Obtain this information from the Off-site Agency Communicator.*):

—— **RECORD** time of announcement _____.

Emergency Message/Drill Message Update: Dial 710; at the beep, dial 80, begin speaking

“Attention all site personnel. This is a/an emergency/drill message. This is a/an emergency drill message.” (*General Information of the event/information of importance. Obtain this information from the Off-site Agency Communicator.*):

—— **RECORD** time of announcement _____.

SITE EVACUATION COORDINATOR
TSC ACTIVATION CHECKLIST

— **EVALUATE** with the Radiation Protection Manager, the Emergency Coordinator and other TSC personnel the need to conduct a site evacuation or relocation of on-site personnel based on the following Event Classification criteria:

Alert- determine by actual plant conditions.

Site Area Emergency- consider evacuation/relocation of non-essential personnel.

General Emergency- evacuate all non-essential personnel.

NOTE: The following information may be provided to the EOF via the Offsite Agency Communicators. {PIP-0-M-99-0911}

— **NOTIFY** EOF anytime personnel are relocated onsite or evacuated from the premises. {PIP-01-4276}

NOTE: Evacuations planned inside the Protected Area should be made by contacting Security in the OSC with instructions. Evacuations outside the protected area should be made by contacting Security in the OSC and instructing them to coordinate activities with C&F representatives in the OSC. **When giving evacuation instructions be sure to identify the area for evacuees to relocate to** (using best judgement, advice from RP Manager, Emergency Coordinator and the Emergency Planner).

— **EVALUATE** with the Radiation Protection Manager, Emergency Planner and Emergency Coordinator the following:

Recommendations on the need, path and transportation options for relocation of on-site personnel.

Recommendations on need, path and transportation options for evacuation of non-essential personnel off-site (Training Center lobby / Cowans Ford Dam or offsite / home.)

Recommendations on need to restrict vehicle (site transportation shuttle, etc.) movement on site. {PIP 0-M97-2871}

SITE EVACUATION COORDINATOR
TSC ACTIVATION CHECKLIST

NOTE: During a TSC "time out" a Site Assembly or Evacuation Coordinator **SHALL** report to the designated location at the Emergency Coordinator's Table to provide status/updates. {PIP-0-M98-2065}

_____ **PROVIDE** periodic updates to Emergency Coordinator as needed and during time outs on site evacuation or on site relocation of personnel.

NOTE: OSC and EOF Site Services personnel will arrange for alternate transportation.

_____ **PREPARE** for turnover of site personnel (TSC, OSC and other essential personnel).

The following items should be discussed with RP Manager and Emergency Planner several hours in advance of anticipated turnover time.

- Are parking lots and personal vehicles contaminated
- Will buses or other alternate transportation be needed to transport personnel to and from the site.
- Will pickup/drop off points outside the EPZ need to be established.

_____ **IF** the decision is made to evacuate personnel from the site, **THEN INFORM** Off-site Agency Communicators to notify appropriate offsite agencies:

- Approximate number of people to be evacuated _____.
- Evacuation destination:
 - Home
 - Technical Training Center
 - Cowan's Ford
 - Other's _____

SITE EVACUATION COORDINATOR
TSC ACTIVATION CHECKLIST

NOTE: Security may need to notify the Mecklenburg Police (911) requesting them to assist in traffic control, if deemed necessary by the Emergency Coordinator or Security Shift Supervisor.

- _____ **IF** the decision is made to evacuate, **NOTIFY** Security to assist with traffic control as needed.
- _____ **IF** evacuation of non-essential personnel is planned, **REQUEST** Managers, during a time out, to identify and inform their own essential personnel to remain, as all others will be evacuated.
- _____ **IF** the decision is made to evacuate, **NOTIFY** the chosen Evacuation-Relocation site of the expected arrival of personnel.
- _____ Technical Training Center - 379-3210 This is a cellular telephone carried by an industrial security guard who roams the site seven days a week, 24 hours a day,
- _____ Powerhouse at Cowans Ford Dam. This phone rings throughout the dam site. This location is staffed Monday through Friday, 10 hours per day. The assess code to the Cowans Ford Dam is 3308.

NOTE: Inform Control Room that you have already contacted Security and the Evacuation site with information about the evacuation of personnel.

- _____ **IF** the decision is made to evacuate, **DIRECT** the Control Room to evacuate the site per (RP/0/A/5700/011) by calling the Control Room SRO at extension 4138 (then select option 3) and giving the following evacuation route information for non-essential personnel:

Non-essential personnel should:

A. Proceed to _____
(Training Center lobby / Cowans Ford Dam / Home / Other)
- _____ **RECORD** the time the site evacuation begins _____ Ends _____
- _____ **PREPARE** for 24 hour coverage for your position as necessary.
- _____ **POST** updates to the site assembly / evacuation board located in the Site Assembly Coordinators office as needed.
- _____ **PROVIDE** completed paperwork to the Emergency Planner upon deactivation of the emergency facility.

SITE EVACUATION COORDINATOR
TSC ACTIVATION CHECKLIST

ADDITIONAL WORKSHEET FOR EMERGENCY/DRILL MESSAGE UPDATES

Emergency Message/Drill Message Update: Dial 710; at the beep, dial 80, begin speaking

“Attention all site personnel. This is a/an emergency/drill message. This is a/an emergency drill message.” *(General Information of the event/information of importance. Obtain this information from the Off-site Agency Communicator.):*

RECORD time of announcement _____. Initial _____

Emergency Message/Drill Message Update: Dial 710; at the beep, dial 80, begin speaking

“Attention all site personnel. This is a/an emergency/drill message. This is a/an emergency drill message.” *(General Information of the event/information of importance. Obtain this information from the Off-site Agency Communicator.):*

RECORD time of announcement _____. Initial _____

Emergency Message/Drill Message Update: Dial 710; at the beep, dial 80, begin speaking

“Attention all site personnel. This is a/an emergency/drill message. This is a/an emergency drill message.” *(General Information of the event/information of importance. Obtain this information from the Off-site Agency Communicator.):*

RECORD time of announcement _____. Initial _____

Duke Power Company
PROCEDURE PROCESS RECORD

PREPARATION

(2) Station MCGUIRE NUCLEAR STATION

(3) Procedure Title Activation of the Operations Support Center (OSC)

(4) Prepared By [Signature] Date 4/10/02

(5) Requires NSD 228 Applicability Determination?

- Yes (New procedure or revision with major changes)
- No (Revision with minor changes)
- No (To incorporate previously approved changes)

(6) Reviewed By Alan L. Beaver (QR) Date 4/25/02
 Cross-Disciplinary Review By _____ (QR) NA ALB Date 4/25/02
 Reactivity Mgmt. Review By _____ (QR) NA ALB Date 4/25/02
 Mgmt. Involvement Review By _____ (Ops Supt.) NA ALB Date 4/25/02

(7) Additional Reviews

Reviewed By _____ Date _____
 Reviewed By _____ Date _____

(8) Temporary Approval (*if necessary*)

By _____ (OSM/QR) Date _____
 By _____ (QR) Date _____

(9) Approved By R. L. Murray Date 6-3-02

PERFORMANCE (*Compare with Control Copy every 14 calendar days while work is being performed.*)

(10) Compared with Control Copy _____ Date _____
 Compared with Control Copy _____ Date _____
 Compared with Control Copy _____ Date _____

(11) Date(s) Performed _____
 Work Order Number (WO#) _____

COMPLETION

(12) Procedure Completion Verification

- Yes NA Check lists and/or blanks initialed, signed, dated, or filled in NA, as appropriate?
- Yes NA Required enclosures attached?
- Yes NA Data sheets attached, completed, dated, and signed?
- Yes NA Charts, graphs, etc. attached dated, identified, and marked?
- Yes NA Procedure requirements met?

Verified By _____ Date _____

(13) Procedure Completion Approved _____ Date _____

(14) Remarks (*Attach additional pages, if necessary*)

Duke Power Company
Station Name

Activation of the Operations Support Center (OSC)

Reference Use

Procedure No.

RP/0/A/5700/020

Revision No.

012

Electronic Reference No.

MC0048MN

Activation of the Operations Support Center (OSC)

NOTE: This procedure is in response to PIP No. 0-M94-0431.

1. Symptoms

Conditions exist where events are in progress or have occurred which indicate a potential degradation of the level of safety of the plant and activation of the Emergency Response Organization (ERO) has been initiated.

2. Immediate Actions

None

3. Subsequent Actions

NOTE: This procedure is not intended to be followed in a step-by-step sequence. Sections of the procedure are to be implemented as the applicable action becomes necessary.

- 3.1 The OSC is required to be activated for an ALERT, SITE AREA EMERGENCY, or GENERAL EMERGENCY declaration. It may also be activated for an UNUSUAL EVENT if deemed necessary by the Operations Shift Manager/Emergency Coordinator.
- 3.2 **Every possible effort should be made to ensure the OSC is activated within ONE (1) HOUR AND 15 MINUTES of declaration of an ALERT, SITE AREA EMERGENCY or GENERAL EMERGENCY.** This time frame must be met anytime it is deemed necessary to activate the OSC.
- 3.3 Upon notification to activate, the OSC Coordinator shall report and assume responsibility for the proper activation, operation and deactivation of the OSC.
 - 3.3.1 Personnel in the Emergency Response Organization (ERO) assigned to the OSC shall report upon notification to activate.
 - 3.3.2 The initial responders shall be responsible for the completion of the appropriate enclosures. The appropriate group checklist shall be completed and Operational Responsibilities reviewed. These enclosures should be used as guides to help direct emergency activities.
 - 3.3.3 The OSC Coordinator may call upon any of the available plant staff in order to ensure the necessary operation of the OSC.
- 3.4 Each represented group is responsible for ensuring their appropriate checklists are completed.

- 3.5 Enclosure 4.17 (McGuire Operations Configuration Control Card) shall be filled out any time a team is directed to go outside the normal procedure process/scope while performing a task.
- 3.5.1 Upon OSC activation, the Operations SRO shall debrief the NLOs as they report to the OSC and ensure an Enclosure 4.17 is filled out for any component operated outside of normal procedure which may have affected plant configuration prior to OSC activation. IF emergency tasks as directed by the OSC must be completed prior to the NLOs filling out Enclosure 4.17, THEN the NLOs shall fill out Enclosure 4.17 (for any components they operated outside of normal procedure which may have affected plant configuration prior to OSC activation) before the OSC is deactivated.
- 3.5.2 Upon OSC activation, each team/person dispatched from the OSC shall have a copy of Enclosure 4.17 if the task entails operating a component outside of normal procedure which may affect plant configuration. In an emergency situation where the person/team is already performing work in the field, the team's manager/supervisor shall be responsible for the completion of Enclosure 4.17. At the end of their shift, or when a sheet is filled, or when the drill/emergency is terminated, the sheet shall be given to the OSC Status Coordinator for logging and filing.
- 3.5.3 Upon termination of the drill/emergency, the Emergency Coordinator/designee shall assume responsibility for ensuring the proper resolutions to all completed copies of Enclosure 4.17 prior to the TSC/OSC being deactivated. The Emergency Coordinator/designee shall have overall responsibility for ensuring all enclosures are properly resolved or items logged prior to plant turn-over to the Operations Shift Manager. Once the items/enclosures have been properly resolved, the TSC/OSC may be deactivated. All completed enclosures shall be filed by Emergency Planning with other drill/emergency paperwork.
- 3.6 The OSC shall not be deactivated until approval is given by the Emergency Coordinator.

NOTE: Time critical tasks are those defined by procedure. Emergency dispatches are those tasks deemed to be performed in a timely manner. These tasks should be handled in the same manner. {PIP-M-01-3325}

- 3.7 No time critical task (or emergency dispatch) shall exit the OSC to perform the specified work without prior cognizance and verbal approval of the OSC Coordinator. The OSC Status Coordinator shall document such tasks/dispatches in his/her log, noting verbal approval from the OSC Coordinator. {PIP-0-M98-3522}

4. Enclosures

- 4.1 OSC Coordinator OSC Activation Checklist.
- 4.2 OSC Radiation Protection Supervisor OSC Activation Checklist.
- 4.3 OSC Operations Senior Reactor Operator OSC Activation Checklist.
- 4.4 OSC Chemistry Supervisor OSC Activation Checklist.
- 4.5 OSC Safety Representative OSC Activation Checklist.
- 4.6 OSC Security Representative OSC Activation Checklist.
- 4.7 OSC Nuclear Supply Chain Manager OSC Activation Checklist.
- 4.8 OSC Operations Liaison OSC Activation Checklist.
- 4.9 Mechanical Maintenance Manager OSC Activation Checklist.
- 4.10 IAE Manager OSC Activation Checklist.
- 4.11 Equipment Engineer OSC Activation Checklist.
- 4.12 OSC Status Coordinator OSC Activation Checklist.
- 4.13 OSC IAE Communication OSC Activation Checklist.
- 4.14 Emergency Planner OSC Activation Checklist.
- 4.15 Minimum Staffing Levels for the Operations Support Center (OSC).
- 4.16 Fitness for Duty Questionnaire.
- 4.17 McGuire Operations Configuration Control Card.
- 4.18 OSC Pre-Activation Task List.
- 4.19 OSC Task Work Sheet.
- 4.20 Assistant OSC Coordinator OSC Activation Checklist.

OSC COORDINATOR ACTIVATION
CHECKLIST

NOTE: You are only required to complete Enclosure 4.16, Fitness for Duty Questionnaire, when reporting to the facility outside of your normal work hours.

INITIALS

- _____ **SIGN** in on the OSC staffing board and put on position badge.
- _____ **SIGN** the Attendance Sheet for a drill. {PIP-0-M-2593}
- _____ **IF** a site assembly is in progress or is conducted **SWIPE** your ID badge in the badge reader located in the OSC for personnel accountability.
- _____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- _____ **ANNOUNCE** that everyone in the OSC needs to sign the roster.
- _____ **ANNOUNCE** for participants who were called outside of their normal work hours to complete Enclosure 4.16 (Fitness For Duty Questionnaire).
- _____ **ESTABLISH** a log of activities, or delegate this responsibility to the Assistant OSC Coordinator.
- _____ **OBTAIN** an update of the current emergency condition of the plant from the Emergency Coordinator.

NOTE: Repair and Recovery teams should not be dispatched from the OSC without completion of an OSC TASK WORKSHEET. However, during a time critical situation, the team may be dispatched and the task sheet filled out and submitted to the OSC Coordinator as soon as possible. Such time critical dispatches shall receive prior verbal approval from the OSC Coordinator. {PIP-0-M98-3522}

- _____ **IF** any OSC activity is designated as a time critical task (or emergency dispatch), the OSC Coordinator shall give verbal approval prior to actual dispatch. Request the OSC Status Coordinator to make a log entry to document this time critical task (or emergency dispatch), noting verbal approval from the OSC Coordinator. {PIP-0-M98-3522}
- _____ **EMPHASIZE** Enclosure 4.19 (OSC Task Work Sheet) needs to be completed for each task.
- _____ **ANNOUNCE** to the OSC to synchronize clocks with the satellite time display {PIP-0-M-5381}.
- _____ **REQUEST** personnel synchronize their watches with the OSC clock or use the OSC clock for official time.

OSC COORDINATOR ACTIVATION
CHECKLIST

_____ **ENSURE** any needed additional support is obtained to help the OSC as necessary. This includes anyone who is needed to mitigate the incident. The Emergency Coordinator can authorize personnel onsite who have not been GET trained.

NOTE: The following step should be repeated following each shift turnover

_____ **ANNOUNCE** to OSC a reminder to complete a "Work Hour Extension Form", if applicable. {PIP-0-M98-2099}

_____ **BRIEF** OSC on plant and radiological conditions and expected actions that will be taken.

_____ **BRIEF** the OSC regarding the staffing requirements/needs and initial information received.

_____ **INFORM** the TSC of encountered plant conditions and the status of any emergency actions already in progress.

NOTE: The OSC may be declared activated prior to the TSC being activated provided the following positions are staffed and communications between parties established:

- OPS Manager in the TSC
- OPS Manager in the Control Room (Simulator during drills)
- Either the OPS Liaison **OR** OPS SRO in the OSC. {PIP-0-M98-2065}

_____ **CONFIRM** with OSC Status Coordinator that minimum staffing positions in the OSC are filled and prepared to assume their function.

NOTE: If minimum staffing levels are not met within the required time frame the OSC Coordinator should activate the OSC noting the positions that are not filled.

_____ **DECLARE** the OSC activated and announce via PA "This is _____, I am the OSC Coordinator. The OSC is officially activated as of _____". The plant status is as follows:

OR

"This is _____. I am the OSC Coordinator. The OSC is officially activated as of _____. I will give an update in _____ minutes.

OSC COORDINATOR ACTIVATION
CHECKLIST

- **INFORM** the Emergency Coordinator in the TSC that the OSC is activated.
- **REQUEST** the required sections listed below to complete Enclosure 4.18 (Pre-Activation Task List) and turn in to the OSC Status Coordinator.
- | | | |
|-------------|----------------|---------------|
| - RP | - Mech. Maint. | - C&F |
| - Chemistry | - IAE | - Engineering |
| - Security | - Safety | - OPS SRO. |
- **DETERMINE** the location and function of persons/Repair and Recovery teams that may be currently working in the field to ensure they are properly tracked.
- **ENSURE** the OSC is maintained in a professional manner. Request all groups to minimize noise and congestion.
- **ESTABLISH** shift rotations if the duration is expected to exceed 12 hours.
- **EMPHASIZE** a radio needs to be taken to each job site.
- **VERIFY** Vital to Operations (VTO) and one line drawings are available.
- **ENSURE** Enclosure 4.17 (McGuire Operations Configuration Control Card) is completed if the task is performed outside normal operating procedures which may affect plant configuration (i.e., open/close valves, breakers, etc.).
- **RECEIVE** a briefing of the emergency conditions, radiological conditions, equipment and plant status from available sources.
- **ENSURE** adequate number of personnel and resources are provided to perform tasks requested by the control room/TSC.
- **ENSURE** Repair and Recovery teams are formed, properly briefed, dispatched and their status monitored.
- **ENSURE** emergency Repair and Recovery team activities are performed in accordance with approved procedures. Any deviation from license condition and/or NRC regulations are to be approved and documented by the Emergency Coordinator prior to being implemented.
- **ENSURE** accountability of OSC personnel is maintained throughout the emergency and OSC personnel are informed of event status and corrective actions.
- **ENSURE** team activities are prioritized and in agreement with TSC established priorities.

Enclosure 4.1

**OSC COORDINATOR ACTIVATION
CHECKLIST**

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- _____ **ENSURE** the OSC is habitable. If the OSC must be evacuated for any reason, ensure it is performed in a timely and professional manner. Be sure to alert personnel in the OSC of the evacuation route and hazards which may be encountered while moving to an alternate OSC.

- _____ **PROVIDE** adequate turnover when a shift change occurs.

- _____ **ENSURE** any team dispatched from the OSC is properly briefed on tasks to be performed and communication is established. Utilize Enclosure 4.19 (OSC TASK WORK SHEET) to conduct briefings.

- _____ **ENSURE** all original paperwork (enclosures, staffing forms, logs, etc.) is submitted to the OSC Status Coordinator upon termination of the emergency/drill.

OSC RADIATION PROTECTION
SUPERVISOR OSC ACTIVATION
CHECKLIST

NOTE: You are only required to complete Enclosure 4.16, Fitness for Duty Questionnaire, when reporting to the facility outside of your normal work hours.

INITIALS

- _____ **SIGN** in on the OSC Staffing Board and put on position badge.
- _____ **SIGN** the Attendance Sheet for a drill, and **ENSURE** all Radiation Protection personnel reporting to the OSC also sign in as appropriate. {PIP-0-M-99-2593}
- _____ **IF** a site assembly is in progress or is conducted **SWIPE** your ID badge in the badge reader located in the OSC for personnel accountability.
- _____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- _____ **ENSURE** Enclosure 4.2, page 4 of 5 (Staffing Levels for Radiation Protection in the OSC) has been completed.
- _____ **ESTABLISH** a log of activities.
- _____ **COMPLETE** Enclosure 4.18 (Pre-Activation Task List) and submit to the OSC Status Coordinator.
- _____ **ESTABLISH** communications with RP personnel in the TSC, Shift Lab and EOF using the cell phone. Dial 4980. (Let it ring until you hear a beep. This connects you to the bridge line.)
- _____ **IDENTIFY AND MAINTAIN** accountability of RP personnel on shift that do not report to the OSC during activation. {PIP-0-M-98-3946}
- _____ **ENSURE** habitability surveys are performed as necessary in the OSC, TSC, and Control Room.
- _____ **OBTAIN** and manually activate (as time permits) electronic dosimeters for use by the Field Monitoring team (FMT) members. Otherwise, instruct the FMT members to obtain and activate EDs on the way to prepare the emergency vehicles. {PIP 0-M97-2339}

OSC RADIATION PROTECTION
SUPERVISOR OSC ACTIVATION
CHECKLIST

- **MAINTAIN** records in the OSC of all persons ONSITE (TSC/OSC/CR and any other area where people may be located) once all non-essential personnel have been evacuated. Records should include:
 1. Respiratory qualifications.
 2. Use of radioprotective drug.
 3. Need for protective clothing.
 4. Location.
- **REQUEST** all TSC and OSC Managers to have FAXED to the OSC the name, social security number and RP badge number of any person(s) who may be left onsite after evacuation of non-essential personnel but are located in an area other than the OSC.
- **IF** a situation which is immediately hazardous to life or valuable property exists, **THEN** evaluate potential dose rates by one of the following methods:
 1. Contact RP shift at Ext. 4282.
 2. Assess area monitors.
- **COMPLETE** Enclosure 4.2, page 5 of 5, Request for Emergency Exposure, prior to dispatch of emergency workers if emergency situation precludes documentation.
- **CALL** extra personnel as necessary.
- **ENSURE** Enclosure 4.17 (McGuire Operations Configuration Control Card) is completed if the task is performed outside normal operating procedures which may affect plant configuration (i.e., open/close valves, breakers, etc.).
- **PROVIDE** and coordinate Radiation Protection resources as necessary.
- **ENSURE** all Radiation Protection teams are properly dispatched through the OSC and all the necessary paperwork is filled out.

OSC RADIATION PROTECTION
SUPERVISOR OSC ACTIVATION
CHECKLIST

NOTE: Repair and Recovery teams should not be dispatched from the OSC without completion of an OSC TASK WORK SHEET. However, during a time critical situation, the team may be dispatched and the task sheet filled out and submitted to the OSC Coordinator as soon as possible. Such time critical dispatches shall receive prior verbal approval from the OSC Coordinator. {PIP-0-M98-3522}

_____ **ENSURE** emergency Repair and Recovery team activities are performed in accordance with approved procedures. Any deviation from license condition and/or NRC regulations are to be approved and documented by the Emergency Coordinator prior to being implemented.

_____ **REMINDE** OSC Responders they are required to complete Enclosure 4.16 (Fitness For Duty Questionnaire) when reporting outside their normal work schedule.

_____ **ENSURE** emergency Repair and Recovery teams have adequate R.P. coverage.

_____ **ENSURE** all necessary personnel in the OSC and TSC have dosimetry.

_____ **BRIEF** the OSC Coordinator and OSC Staff of radiological conditions on-site and recall teams as necessary from the field based on those changing conditions.

_____ **PROVIDE** immediate radiological information to OSC staff as conditions change.

_____ **BRIEF** the Radiation Protection Manager on resources and radiological conditions as needed.

_____ **PROVIDE** assistance to the OSC Coordinator as necessary.

_____ **ENSURE** all the necessary precautions of the Radiation Protection Manual Emergency Procedures are adhered to (i.e., administer Potassium Iodine tablets as required).

_____ **REQUEST** RP Manager to determine if persons with special radiological exposure limits need to be evacuated (e.g., declared pregnant women, people with radio-pharmaceutical limitations).

_____ **ENSURE** any team dispatched from the OSC is properly briefed on tasks to be performed and communication is established. Utilize Enclosure 4.19 (OSC TASK WORK SHEET) to conduct briefings.

_____ **ENSURE** the OSC Coordinator/Assistant OSC Coordinator is kept aware of the need for frisking prior to entry into the OSC and makes these announcements as necessary.

_____ **PROVIDE** adequate turnover when a shift change occurs.

_____ **ENSURE** all RP teams/personnel are accounted for during and after the emergency/drill.

_____ **PREPARE** for 24-hour coverage as necessary.

Enclosure 4.2

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**OSC RADIATION PROTECTION
SUPERVISOR OSC ACTIVATION
CHECKLIST**

- _____ **IF** any RP Emergency Kit (TSC, CR, OSC, EOF, etc.) is opened, **THEN** notify the appropriate RP staff representative. {PIP-M-99-534}

- _____ **ENSURE** all original paperwork (enclosures, staffing forms, logs, etc.) is submitted to the OSC Status Coordinator upon termination of the emergency/drill.

OSC RADIATION PROTECTION SUPERVISION
OSC ACTIVATION CHECKLIST
Staffing Levels for Radiation Protection in the OSC

Time Event Declared: _____

Responders	Function Performed			
	Off-Site Surveys (Field Monitoring)	On-Site (Out of plant)	In-plant surveys	RP Coverage for Repair/Corrective Actions, Access Control, Search & Rescue, Radiochemistry, Cont. Injury Medical Response, Person. Monitor., Dosimetry, Firefighting
Shift	0	0	0	(3) Name _____ Time _____ _____ _____
45 Minute	0	(1) Name _____ Time _____ _____	(1) Name _____ Time _____ _____	0
75 Minute	(4) Name _____ Time _____ _____ _____ _____	(1) Name _____ Time _____ _____	(1) Name _____ Time _____ _____	(6) Name _____ Time _____ _____ _____ _____ _____ _____
TOTALS	4	2	2	9

Grand Total of 17 people

All the above positions **HAVE/HAVE NOT** been filled within the allotted time frame to activate the Operations Support Center.

Signature Title Date

Submit completed form to the OSC Status Coordinator.

Enclosure 4.2

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**OSC RADIATION PROTECTION
SUPERVISION OSC ACTIVATION
CHECKLIST
Request for Emergency Exposure (a)**

<u>Activity</u>	<u>Total Effective Dose Equivalent (TEDE)</u>	<u>Lens of Eye</u>	<u>Other Organs (b)</u>
All	5 rem	15 rem	50 rem
Protecting Valuable Property	10 rem	30 rem	100 rem
Lifesaving or Protection of Large Populations	25 rem	75 rem	250 rem
Lifesaving or Protection of Large Populations (c)	> 25 rem	> 75 rem	> 250 rem

(a) Excludes declared pregnant women.

(b) Includes skin and body extremities.

(c) Only on a volunteer basis to persons fully aware of the risks involved. All factors being equal, select volunteers above the age of 45 and those who normally encounter little exposure.

RP Badge No.	Name	Age	Employer	Signature of Individual

My signature indicates my acknowledgment that I have been informed that I may be exposed to the levels of radiation indicated above. I have been fully briefed on the task to be accomplished and on the risks of this exposure.

I, _____ acknowledge this planned Emergency Exposure _____.
(RPM or designee, signature or note of verbal authorization) Date/Time

I, _____ approve this planned Emergency Exposure at _____.
(Emergency Coordinator or EOF Director, signature or note of verbal authorization) Date/Time

Subsequent Radiation Protection Action:

- Determine need for medical evaluation
- Initiate reporting requirements per 10CFR20
- Copy to Individual's Exposure History File.

OSC OPERATIONS SENIOR REACTOR OPERATOR
OSC ACTIVATION CHECKLISTINITIALS

NOTE: You are only required to complete Enclosure 4.16, Fitness for Duty Questionnaire, when reporting to the facility outside of your normal work hours.

- _____ **SIGN** in on the OSC staffing board and put on position badge.
- _____ **SIGN** the Attendance Sheet for a drill, and **ENSURE** Operations personnel reporting to the OSC sign in as appropriate. {PIP-0-M-99-2593}
- _____ **ENSURE** Enclosure 4.3, page 4 of 4 (Staffing Levels for Operations in the OSC) has been completed.
- _____ **IF** a site assembly is in progress or is conducted **SWIPE** your ID badge in the badge reader located in the OSC for personnel accountability.
- _____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- _____ **COMPLETE** Enclosure 4.18 (Pre-Activation Task List) and submit to the OSC Status Coordinator.
- _____ **IF** the OPS Liaison is not available, **THEN** notify the Control Room via the OPS Manager in the Control Room to dispatch NLOs to the OSC. {PIP – 0M98-2065}
- _____ **ESTABLISH** a log of activities.

NOTE: The following step provides a listen only connection. Leave headset switch in the "mute" position.

- _____ **ESTABLISH** communication with OPS Bridge line using the cell phone. Dial 4500. (Let it ring until you hear a beep).
- _____ **DEBRIEF** NLOs on task they may have performed in the field.
- _____ **IF** desired, **THEN** maintain the OPS Status Board. {PIP-0-M-98-2605}

OSC OPERATIONS SENIOR REACTOR OPERATOR
OSC ACTIVATION CHECKLIST

NOTE: Completion of the Task Work Sheet should not delay critical dispatch.

IF time critical tasks are designated by the OSM, **THEN** expedite tasks by:

- _____ 1. Verbal approval from the OSC Coordinator prior to dispatch. {PIP-0-M98-3522}
- _____ 2. Clear communication to an OSC team or individual to contact the Control Room via hand held radio for immediate dispatch.
- _____ 3. Inform the OSC Status Coordinator to log the time critical dispatch, noting prior OSC Coordinator verbal approval. {PIP-0-M98-3522}
- _____ 4. Completion of OSC Task Work Sheet after departure.
- _____ **ENSURE** Enclosure 4.17 (McGuire Operations Configuration Control Card) is completed if the task is performed outside normal operating procedures which may affect plant configuration (i.e., open/close valves, breakers, etc.).
- _____ **CALL** extra personnel as necessary.
- _____ **PROVIDE** plant operations advice to support the OSC Coordinator.
- _____ **PROVIDE** operational advice to support the entire OSC, including any teams that may be dispatched into the field for work.
- _____ **ENSURE** any operations personnel dispatched into the field has the appropriate paperwork filled out and carries Enclosure 4.17 (McGuire Operations Configuration Control Card) as necessary.

OSC OPERATIONS SENIOR REACTOR OPERATOR
OSC ACTIVATION CHECKLIST

NOTE: Repair and Recovery teams should not be dispatched from the OSC without completion of an OSC TASK WORKSHEET. However, during a time critical situation, the team may be dispatched and the task sheet filled out and submitted to the OSC Coordinator as soon as possible without delaying team dispatch. Such time critical dispatches shall receive prior verbal approval from the OSC Coordinator.

_____ **EXPEDITE** time critical tasks for the OSM by clear communication to an OSC team or individual to report to the Control Room crew via hand held radio for immediate dispatch. The OSM is responsible for designating time critical tasks originating from the Control Room. Once a task originating from the Control Room is designated time critical, the OSM or designee shall direct the OPS Manager in the Control Room to request the OSC OPS Liaison to immediately make available an operator (or team) from the OSC contingent for prompt dispatch into the plant via hand held radio. The OPS Liaison may direct the OPS SRO in the OSC to perform this request or he/she may do it personally. Prior to actual dispatch from the OSC, the OSC Coordinator shall be informed of the time critical dispatch and give verbal approval. In any case, the OPS SRO is responsible for completion of the OSC Task Work Sheet paperwork without delaying time critical dispatches (dispatch person/team first, complete paperwork after departure). Time critical task dispatches originating from the Control Room shall remain under direct control of the Control Room crew until the subject task is completed and the person (or team) has returned to the OSC and completed debriefing. {PIP 0-M96-1576} {PIP-0-M98-3522}

_____ **ENSURE** emergency Repair and Recovery team activities are performed in accordance with approved procedures. Any deviation from license condition and/or NRC regulations are to be approved and documented by the Emergency Coordinator prior to being implemented.

_____ **ENSURE** adequate support is available for emergency response.

_____ **KEEP** the OSC Coordinator updated on conditions in the plant and notify them immediately should any of those conditions change.

_____ **ENSURE** any team dispatched from the OSC is properly briefed on task to be performed and communications are established. Utilize Enclosure 4.19 (OSC TASK WORK SHEET) to conduct briefings.

_____ **ENSURE** all Operations teams/personnel in the field are accounted for during and after an emergency/drill.

_____ **PROVIDE** adequate turnover when a shift change occurs.

_____ **PREPARE** for 24-hour coverage as necessary.

_____ **ENSURE** all original paperwork (enclosures, staffing forms, logs, etc.) is submitted to the OSC Status Coordinator upon termination of the emergency/drill.

OSC OPERATIONS SENIOR REACTOR OPERATOR
 OSC ACTIVATION CHECKLIST
 Staffing Levels for Operations in the OSC

Time Event Declared: _____

Place name and note time of arrival on the lines provided in the table below:

	Function Performed								
Responders	Assessment of Operational Aspects (NLOs)			Fire-Fighting			Fire-Fighting		
Shift	(2)	Name	Time	(5)*	Name	Time	(3)**	Name	Time
	_____	_____	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____	_____	_____
45 Minute	0			0			0		
75 Minute	0			0			0		
TOTALS	2			5			3		

* Required Fire Brigade per Selected Licensee Commitments (5)

**Station administrative requirement, may have collateral duties.

All the above positions **HAVE/HAVE NOT** been filled within the allotted time frame to activate the Operations Support Center.

Signature

Title

Date/Time

Submit completed form to the OSC Status Coordinator.

Enclosure 4.4

**OSC CHEMISTRY SUPERVISOR
OSC ACTIVATION CHECKLIST**

RP/0/A/5700/020
Page 1 of 3

NOTE: You are only required to complete Enclosure 4.16, Fitness for Duty Questionnaire, when reporting to the facility outside of your normal work hours.

INITIALS

- _____ **SIGN** in on the OSC staffing board and put on position badge.
- _____ **SIGN** the Attendance Sheet for a drill, and **ENSURE** all Chemistry personnel reporting to the OSC also sign in as appropriate. {PIP-0-M-99-2593}
- _____ **IF** a site assembly is in progress or is conducted **SWIPE** your ID badge in the badge reader located in the OSC for personnel accountability.
- _____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- _____ **ENSURE** a PALs operator is available.
- _____ **ENSURE** a minimum of 1 radwaste operator and 1 chemist is available.
- _____ **ENSURE** Enclosure 4.4, page 3 of 3 (Staffing Levels for Chemistry in the OSC) has been completed.
- _____ **COMPLETE** Enclosure 4.18 (Pre-Activation Task List) and submit to the OSC Status Coordinator.
- _____ **ESTABLISH** a log of activities.
- _____ **CONTACT** Radwaste operator to ensure their awareness of the ERO activation. {PIP-M-01-3711}
- _____ **PROVIDE** and coordinate the necessary Chemistry personnel needed to support the OSC.
- _____ **PROVIDE** the necessary Chemistry information needed for emergency Repair and Recovery teams.
- _____ **DISPATCH** personnel to obtain the necessary samples when requested utilizing the OSC TASK WORK SHEET.

OSC CHEMISTRY SUPERVISOR
OSC ACTIVATION CHECKLIST

NOTE: Repair and Recovery teams should not be dispatched from the OSC without completion of an OSC TASK WORK SHEET. However, during a time critical situation, the team may be dispatched and the task sheet filled out and submitted to the OSC Coordinator as soon as possible. Such time critical dispatches shall receive prior verbal approval from the OSC Coordinator. {PIP-0-M98-3522}

- _____ **ENSURE** emergency Repair and Recovery team activities are performed in accordance with approved procedures. Any deviation from license condition and/or NRC regulations are to be approved and documented by the Emergency Coordinator prior to being implemented.
- _____ **PROVIDE** turnover when a shift change occurs.
- _____ **ESTABLISH** communications with the Corporate Office Chemistry Section.
- _____ **CALL** extra personnel and/or prepare for 24 hour coverage.
- _____ **IDENTIFY AND MAINTAIN** accountability of Chemistry personnel on shift that do not report to the OSC during activation. {PIP-0-M-98-3946}
- _____ **ENSURE** all Chemistry teams/personnel are accounted for during and after an emergency/drill.
- _____ **ENSURE** Enclosure 4.17 (McGuire Operations Configuration Control Card) is completed if the task is performed outside normal operating procedures which may affect plant configuration (i.e., open/close valves, breakers, etc.).
- _____ **ENSURE** the proper paperwork is completed when teams are dispatched into the field including Enclosure 4.17 (McGuire Operations Configuration Control Card).
- _____ **ENSURE** any team dispatched from the OSC is properly briefed on task to be performed and communications are established. Utilize Enclosure 4.19 (OSC TASK WORK SHEET) to conduct briefings.
- _____ **ENSURE** all original paperwork (enclosures, staffing forms, logs, etc.) is submitted to the OSC Status Coordinator upon termination of the emergency/drill.

Enclosure 4.4

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OSC CHEMISTRY SUPERVISOR OSC
ACTIVATION CHECKLIST
Staffing Levels for Chemistry in the OSC

Time Event Declared: _____

Place name and note time of arrival on the lines provided in the table below:

Responders	Function Performed	
	Chemistry Technician	Radwaste Operator
Shift	(1) Name _____ Time _____	0
45 Minute	0	0
75 Minute	0	(1) Name _____ Time _____
TOTALS	1	1

GRAND TOTAL OF 2 PEOPLE

All the above positions **HAVE/HAVE NOT** been filled within the allotted time frame to activate the Operations Support Center.

Signature

Title

Date/Time

Submit completed form to the OSC Status Coordinator.

OSC SAFETY REPRESENTATIVE
OSC ACTIVATION CHECKLIST

NOTE: You are only required to complete Enclosure 4.16, Fitness for Duty Questionnaire, when reporting to the facility outside of your normal work hours.

INITIALS

- _____ **SIGN** in on the OSC Staffing board and put on position badge.
- _____ **SIGN** the OSC Attendance Sheet for a drill, and **ENSURE** all Safety personnel reporting to the OSC also sign in as appropriate. {PIP-0-M-99-2593}
- _____ **IF** a site assembly is in progress or is conducted **SWIPE** your ID badge in the badge reader located in the OSC for personnel accountability.
- _____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- _____ **COMPLETE** Enclosure 4.18 (Pre-Activation Task List) and submit to the OSC Status Coordinator.
- _____ **ESTABLISH** a log of activities.
- _____ **CALL** extra personnel as necessary.
- _____ **ENSURE** the OSC Coordinator/OSC staff are aware of any safety hazards that could affect emergency response activities.
- _____ **MONITOR** OSC for CO₂ after 7 days of activation. Evaluate need to open fresh air damper on 0MVWAH0236 and evaluate need to open outside doors and use temporary fans. {PIP 0-M95-1548}
- _____ **ASSIST** Repair and Recovery teams in preparing applicable portions of safety forms as necessary.
- _____ **ENSURE** Enclosure 4.19 (OSC TASK WORK SHEET) is completed for any safety team dispatched from the OSC.

NOTE: Repair and Recovery teams should not be dispatched from the OSC without completion of an OSC TASK WORK SHEET. However, during a time critical situation, the team may be dispatched and the task sheet filled out and submitted to the OSC Coordinator as soon as possible. Such time critical dispatches shall receive prior verbal approval from the OSC Coordinator. {PIP-0-M98-3522}

- _____ **ENSURE** emergency Repair and Recovery team activities are performed in accordance with approved procedures. Any deviation from license condition and/or NRC regulations are to be approved and documented by the Emergency Coordinator prior to being implemented.

OSC SAFETY REPRESENTATIVE
OSC ACTIVATION CHECKLIST

- _____ **ASSIST** Repair and Recovery teams in the briefing process as needed. Ensure teams are made aware of necessary safety precautions needed to complete their assignments (i.e., heat stress, confined space permits etc.).
- _____ **ENSURE** safety hazard information obtained from returning teams flows back into the OSC in a timely manner. Incorporate significant information into the team briefings as necessary.
- _____ **ENSURE** all Safety teams/personnel are accounted for during and after an emergency/drill.
- _____ **PROVIDE** adequate turnover when a shift change occurs.
- _____ **PREPARE** for 24-hour coverage as necessary.
- _____ **ENSURE** any team dispatched from the OSC is properly briefed on tasks to be performed and communications are established. Utilize the OSC TASK WORK SHEET to conduct briefings.
- _____ **ENSURE** all original paperwork (enclosures, staffing forms, logs, etc.) is submitted to the OSC Status Coordinator upon termination of the emergency/drill.

OSC SECURITY REPRESENTATIVE
OSC ACTIVATION CHECKLIST

NOTE: You are only required to complete Enclosure 4.16, Fitness for Duty Questionnaire, when reporting to the facility outside of your normal work hours.

INITIALS

- _____ **ENSURE** VTO drawings are delivered to the OSC.
- _____ **SIGN** in on the OSC staffing board and put on position badge.
- _____ **SIGN** the OSC Attendance Sheet for a drill, and **ENSURE** all Security personnel reporting to the OSC also sign in as appropriate. {PIP-0-M-99-2593}
- _____ **CONTACT** Security Shift Supervisor to report your location and telephone number.
- _____ **CONTACT** CAS/SAS to ascertain current manpower assignments for completion of the pre-activation task list.
- _____ **ENSURE** Enclosure 4.6, page 3 of 3 (Staffing Levels for Security in the OSC) has been completed and submit to the OSC Status Coordinator.
- _____ **COMPLETE** Enclosure 4.18 (Pre-Activation Task List) and submit to the OSC Status Coordinator.

NOTE: If a Security event occurs while the TSC/OSC is activated, the OPS Manager in the TSC will serve as the focal point for the coordination of activities between the OSC, TSC and Security

- _____ **IF** requested by Operations to coordinate activities with the TSC and OSC personnel, **THEN**
 - _____ • Contact the Security Shift Supervisor to dial into the OPS bridge line at ext. 4500.
 - _____ • Dial into the OPS bridge line at ext. 4500.
- _____ **IDENTIFY AND MAINTAIN** accountability of Security personnel on shift that do not report to the OSC during activation. {PIP-0-M-98-3946}
- _____ **INFORM** the OSC Coordinator of security officer locations on the site so they may be pulled-back/evacuated should it become necessary. Should it become necessary to suspend or remove a patrol, **ENSURE** the proper notifications are made to terminate the patrol until approval is given to reinstate the patrol.
- _____ **ENSURE** Security personnel required by OSC dispatch participate in pre and post job briefings.
- _____ **ESTABLISH** a log of activities.

OSC SECURITY REPRESENTATIVE
OSC ACTIVATION CHECKLIST

- _____ **CALL** extra personnel as necessary.
- _____ **ENSURE** upon completion of the emergency/drill VTO drawings are **RETURNED** to the Operations Shift Office.
- _____ **ENSURE** the OSC Coordinator/staff are aware of security hazards that could affect emergency Repair and Recovery activities.
- _____ **PROVIDE** assistance to Repair and Recovery teams as necessary.
- _____ **ENSURE** Enclosure 4.19 (OSC TASK WORK SHEET) is completed for any Security team dispatched from the OSC.

NOTE: Repair and Recovery teams should not be dispatched from the OSC without completion of an OSC TASK WORK SHEET. However, during a time critical situation, the team may be dispatched and the task sheet filled out and submitted to the OSC Coordinator as soon as possible. Such time critical dispatches shall receive prior verbal approval from the OSC Coordinator. {PIP-0-M98-3522}

- _____ **ENSURE** all Security teams/personnel are accounted for during and after an emergency/drill.
- _____ **PROVIDE** adequate turnover when a shift change occurs.
- _____ **DETERMINE** the availability of MERT members if needed.
- _____ **INFORM** Security personnel of the overall radiological conditions of the plant as indicated by Radiation Protection.
- _____ **PREPARE** for 24-hour coverage as necessary.
- _____ **ENSURE** any team dispatched from the OSC is properly briefed on tasks to be performed and communications are established. Utilize Enclosure 4.19 (OSC TASK WORK SHEET) to conduct briefings.
- _____ **ENSURE** all original paperwork (enclosures, staffing forms, logs, etc.) is submitted to the OSC Status Coordinator upon termination of the emergency/drill.

Enclosure 4.6

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**OSC SECURITY OSC ACTIVATION
CHECKLIST**

Page 3 of 3

Staffing Levels for Security in the OSC

Time Event Declared: _____

Place name and note time of arrival on the lines provided in the table below:

Responders	Function Performed	
	Security, Personnel Accountability	Rescue Operations and First Aid MERT
Shift	All per Security Plan	(2) Name _____ Time _____ _____
45 Minute	0	0
75 Minute	0	0
TOTALS		2

All the above positions **HAVE/HAVE NOT** been filled within the allotted time frame to activate the Operations Support Center.

Signature Title Date/Time

Immediately submit completed form to the OSC Status Coordinator.

OSC NUCLEAR SUPPLY CHAIN MANAGER
OSC ACTIVATION CHECKLIST

NOTE: You are only required to complete Enclosure 4.16, Fitness for Duty Questionnaire, when reporting to the facility outside of your normal work hours.

INITIALS

- **SIGN** in on the OSC staffing board and put on position badge.
- **SIGN** the OSC Attendance Sheet for a drill, and **ENSURE** all Nuclear Supply Chain or Site Services personnel reporting to the OSC also sign in as appropriate. {PIP-0-M-99-2593}
- **IF** a site assembly is in progress or is conducted **SWIPE** your ID badge in the badge reader located in the OSC for personnel accountability.
- **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- **COMPLETE** Enclosure 4.18 (Pre-Activation Task List) and submit to OSC Status Coordinator.
- **ESTABLISH** a log of activities.
- **CALL** extra personnel as necessary.
- **ENSURE** Enclosure 4.7, page 3 of 3 (Staffing Levels for Nuclear Supply Chain Personnel in the OSC) has been completed and submit to the OSC Status Coordinator. {PIP-M-01-3711}
- **ESTABLISH** communications with EOF Services as necessary at 8-382-0726 or 0727 or 0728.
- **CONTACT** Emergency Planner in the TSC (8-831-4010) to determine food/meals for TSC/OSC/Control Room.
- **MAKE** arrangements to provide heavy equipment/transportation support as requested.
- **PROVIDE** coordination between the warehouses and the OSC.
- **PROVIDE** material as expeditiously as possible for emergency response activities.
- **ENSURE** any Nuclear Supply Chain or Site Services team dispatched from the OSC is properly briefed on task to be performed and communications are established using Enclosure 4.19 (OSC Task Work Sheet).
- **ENSURE** emergency Repair and Recovery team activities are performed in accordance with approved procedures. Any deviation from license condition and/or NRC regulations are to be approved and documented by the Emergency Coordinator prior to being implemented.

**OSC NUCLEAR SUPPLY CHAIN MANAGER
OSC ACTIVATION CHECKLIST**

- **PROVIDE** facilities support as requested.
- **PROVIDE** adequate turnover when a shift change occurs.
- **PREPARE** for 24-hour coverage and call out additional personnel as necessary.
- **ENSURE** all Nuclear Supply Chain and Site Services personnel are accounted for during and after the emergency drill. {PIP-M-01-3325}
- **ENSURE** all original paperwork (enclosures, staffing forms, logs, etc.) is submitted to the OSC Status Coordinator upon termination of the emergency/drill.

OSC NUCLEAR SUPPLY CHAIN MANAGER
OSC ACTIVATION CHECKLIST

Staffing Levels For Nuclear Supply Chain Personnel

Time Event Declared: _____

Please place name and note time of arrival on the lines provided in the table below:

RESPONDERS NAME	TIME
TOTAL:	

Signature

Title

Date/Time

OSC OPERATIONS LIAISON
OSC ACTIVATION CHECKLIST

NOTE: You are only required to complete Enclosure 4.16, Fitness for Duty Questionnaire, when reporting to the facility outside of your normal work hours.

INITIALS

- _____ **SIGN** in on the OSC staffing board and put on position badge.
- _____ **SIGN** the OSC Attendance Sheet for a drill, and **ENSURE** Operations personnel reporting to the OSC also sign in as appropriate. {PIP-0-M-99-2593}
- _____ **IF** a site assembly is in progress or is conducted **SWIPE** your ID badge in the badge reader located in the OSC for personnel accountability.
- _____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- _____ **ESTABLISH** communications with the Control Room, TSC and EOF using the cell phone. Dial 4500. (Let it ring until you hear a beep. This connects you with the bridge line.)

NOTE: This should only take place after the SRO position has been filled.

- _____ **NOTIFY** the Control Room via the OPS Manager in the Control Room to dispatch NLOs to the OSC.

NOTE:

1. Time critical tasks may be delegated to the OPS SRO in the OSC.
2. Completion of the Task Work Sheet should not delay time critical dispatch.

IF time critical tasks are designated by the OSM, **THEN** expedite tasks by {PIP-0-M96-1576} {PIP-0-M98-3522}:

- _____ 1. Verbal approval from the OSC Coordinator prior to dispatch.
- _____ 2. Clear communication to an OSC team or individual to contact the Control Room via hand held radio for immediate dispatch.
- _____ 3. Inform the OSC Status Coordinator to log the time critical dispatch, noting prior OSC Coordinator verbal approval.
- _____ 4. The OPS SRO is responsible for completion of OSC Task Work Sheet after departure.
- _____ **ESTABLISH** a log of activities.
- _____ **CALL** extra personnel as necessary.

OSC OPERATIONS LIAISON
OSC ACTIVATION CHECKLIST

_____ **SERVE** as the Operations communication interface between the OSC, Control Room, TSC Operations Manager and EOF accident assessment.

_____ **PROVIDE** plant operations advice to support the dispatch of Repair and Recovery teams into the field.

NOTE: Repair and Recovery teams should not be dispatched from the OSC without completion of an OSC TASK WORK SHEET. However, during a time critical situation, the team may be dispatched and the task sheet filled out and submitted to the OSC Coordinator as soon as possible without delaying team dispatch. Such time critical dispatches shall receive prior approval from the OSC Coordinator.

_____ **EXPEDITE** time critical tasks for the OSM by clear communication to an OSC team or individual to report to the Control Room crew via hand held radio for immediate dispatch. The OSM is responsible for designating time critical tasks originating from the Control Room. Once a task originating from the Control Room is designated time critical, the OSM or designee shall direct the OPS Manager in the Control Room to request the OSC OPS Liaison to immediately make available an operator (or team) from the OSC contingent for prompt dispatch into the plant via hand held radio. The OPS Liaison may direct the OPS SRO in the OSC to perform this request or he/she may do it personally. Prior to actual dispatch from the OSC, the OSC Coordinator shall be informed of the time critical dispatch and give verbal approval. In any case, the OPS SRO is responsible for completion of the OSC Task Work Sheet paperwork without delaying time critical dispatches (dispatch person/team first, complete paperwork after departure). Time critical task dispatches originating from the Control Room shall remain under direct control of the Control Room crew until the subject task is completed and the person (or team) has returned to the OSC and completed debriefing. {PIP 0-M96-1576} {PIP-0-M98-3522}

_____ **ENSURE** emergency Repair and Recovery team activities are performed in accordance with approved procedures. Any deviation from license condition and/or NRC regulations are to be approved and documented by the Emergency Coordinator prior to being implemented.

_____ **KEEP** the OSC Coordinator updated on conditions in the plant.

_____ **PROVIDE** adequate turnover when a shift change occurs.

_____ **PREPARE** for 24-hour coverage as necessary.

_____ **ENSURE** any team dispatched from the OSC is properly briefed on tasks to be performed and communications are established. Utilize the Enclosure 4.19 (OSC TASK WORK SHEET) to conduct briefings.

_____ **ENSURE** all original paperwork (enclosures, staffing forms, logs, etc.) is submitted to the OSC Status Coordinator upon termination of the emergency/drill.

MECHANICAL MAINTENANCE MANAGER
OSC ACTIVATION CHECKLIST

NOTE: You are only required to complete Enclosure 4.16, Fitness for Duty Questionnaire, when reporting to the facility outside of your normal work hours.

INITIALS

- **SIGN** in on the OSC staffing board and put on position badge.
- **SIGN** the OSC Attendance Sheet for a drill, and **ENSURE** all Mechanical Maintenance personnel reporting to the OSC also sign in as appropriate. {PIP-0-M-99-2593}
- **IF** a site assembly is in progress or is conducted **SWIPE** your ID badge in the badge reader located in the OSC for personnel accountability.
- **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- **ENSURE** Enclosure 4.9, page 3 of 3 (Staffing Levels for Mechanical Maintenance in the OSC) has been completed.
- **COMPLETE** Enclosure 4.18 (Pre-Activation Task List) and submit to the OSC Status Coordinator.
- **ESTABLISH** a log of activities.
- **ENSURE** adequate mechanical maintenance support/staff is available for emergency response.
- **LOCATE** all mechanical persons/teams that may be currently working in the field and ensure they are tracked on the appropriate boards.
- **CALL** extra personnel as necessary.
- **ENSURE** Enclosure 4.17 (McGuire Operations Configuration Control Card) is completed if the task is performed outside normal operating procedures which may affect plant configuration (i.e., open/close valves, breakers, etc.).
- **PROVIDE** and coordinate Mechanical Maintenance resources as necessary.
- **ENSURE** all Mechanical Maintenance teams are properly dispatched through the OSC and all the necessary paperwork is filled out including Enclosure 4.17 (McGuire Operations Configuration Control Card) as necessary.

MECHANICAL MAINTENANCE MANAGER
OSC ACTIVATION CHECKLIST

NOTE: Repair and Recovery teams should not be dispatched from the OSC without completion of an OSC TASK WORK SHEET. However, during a time critical situation, the team may be dispatched and the task sheet filled out and submitted to the OSC Coordinator as soon as possible. Such time critical dispatches shall receive prior verbal approval from the OSC Coordinator.

_____ **ENSURE** emergency Repair and Recovery team activities are performed in accordance with approved procedures. Also ensure that any deviations from license conditions and/or NRC regulations are approved and documented by the Emergency Coordinator prior to being implemented. {PIP-0-M98-3522}

_____ **ENSURE** emergency Repair and Recovery teams have adequate RP coverage.

_____ **ENSURE** any team dispatched from the OSC is properly briefed on the task to be performed and communications are established. Utilize Enclosure 4.19 (OSC TASK WORK SHEET) to conduct briefings.

_____ **ENSURE** an OSC TASK WORK SHEET is completed for any mechanical team being dispatched from the OSC.

_____ **ENSURE** the OSC Coordinator/staff is kept informed of the current status of plant equipment and is immediately notified of any changes that may affect the plant or plant personnel.

_____ **PROVIDE** adequate turnover when a shift change occurs.

_____ **ENSURE** all Mechanical Maintenance teams/personnel are accounted for during and after the emergency/drill.

_____ **PREPARE** for 24-hour coverage as necessary.

_____ **ENSURE** all original paperwork (enclosures, staffing forms, logs, etc.) is submitted to the OSC Status Coordinator upon termination of the emergency/drill.

Enclosure 4.9

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**OSC MECHANICAL MAINTENANCE
 SUPERVISOR OSC ACTIVATION
 CHECKLIST**
 Staffing Levels for Mechanical Maintenance in
 the OSC

Time Event Declared: _____

Place name and note time of arrival on the lines provided in the table below:

Responders	Function Performed	
	Technical Support	Repair and Corrective Actions
Shift	0	(1) Name _____ Time _____
45 Minute	0	0
75 Minute	(1)* Name _____ Time _____	(1) Name _____ Time _____
TOTALS	1	2

GRAND TOTAL OF 3 PEOPLE

(*) Engineer or Supervisor/Manager under current organization.

All the above positions **HAVE/HAVE NOT** been filled within the allotted time frame to activate the Operations Support Center.

 Signature Title Date/Time

Submit completed form to the OSC Status Coordinator.

Enclosure 4.10
IAE MANAGER
OSC ACTIVATION CHECKLIST

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NOTE: You are only required to complete Enclosure 4.16, Fitness for Duty Questionnaire, when reporting to the facility outside of your normal work hours.

INITIALS

- _____ **SIGN** in on the OSC staffing board and put on position badge.
- _____ **SIGN** the OSC Attendant Sheet for a drill, and **ENSURE** all IAE personnel reporting to the OSC also sign in as appropriate. {PIP-0-M-99-2593}
- _____ **IF** a site assembly is in progress or is conducted **SWIPE** your ID badge in the badge reader located in the OSC for personnel accountability.
- _____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- _____ **ENSURE** Enclosure 4.10, page 3 of 3 (Staffing Levels for IAE in the OSC) has been completed.
- _____ **COMPLETE** Enclosure 4.18 (Pre-Activation Task List) and submit to the OSC Status Coordinator.
- _____ **ENSURE** OSC PA System Controllers (located on column beside briefing area) are set at "Normal".
- _____ **ESTABLISH** a log of activities.
- _____ **ENSURE** adequate IAE support/staff is available for emergency response.
- _____ **LOCATE** all IAE persons/teams that may be currently working in the field and ensure they are tracked on the appropriate boards.
- _____ **CALL** extra personnel as necessary.
- _____ **ENSURE** Enclosure 4.17 (McGuire Operations Configuration Control Card) is completed if the task is performed outside normal operating procedures which may affect plant configuration (i.e., open/close valves, breakers, etc.).
- _____ **PROVIDE** and coordinate IAE resources as necessary.
- _____ **ENSURE** all IAE teams are properly dispatched through the OSC and all the necessary paperwork is filled out including Enclosure 4.17 (McGuire Operations Configuration Control Card) as necessary.

IAE MANAGER
OSC ACTIVATION CHECKLIST

NOTE: Repair and Recovery teams should not be dispatched from the OSC without completion of an OSC TASK WORK SHEET. However, during a time critical situation, the team may be dispatched and the task sheet filled out and submitted to the OSC Coordinator as soon as possible. Such time critical dispatches shall receive prior verbal approval from the OSC Coordinator. {PIP-0-M98-3522}

- _____ **ENSURE** emergency Repair and Recovery team activities are performed in accordance with approved procedures. Any deviation from license condition and/or NRC regulations are to be approved and documented by the Emergency Coordinator prior to being implemented.
- _____ **ENSURE** emergency Repair and Recovery teams have adequate RP coverage.
- _____ **ENSURE** any team dispatched from the OSC is properly briefed on the task to be performed and communications are established. Utilize the Enclosure 4.19 (OSC TASK WORK SHEET) to conduct briefings.
- _____ **ENSURE** the OSC Coordinator/staff is kept informed of the current status of plant equipment and is immediately notified of any changes that may affect the plant or plant personnel.
- _____ **PROVIDE** adequate turnover when a shift change occurs.
- _____ **ENSURE** all IAE teams/personnel are accounted for during and after an emergency/drill.
- _____ **PREPARE** for 24-hour coverage as necessary.
- _____ **ENSURE** all original paperwork (enclosures, staffing forms, logs, etc.) is submitted to the OSC Status Coordinator upon termination of the emergency/drill.

OSC IAE MANAGER OSC ACTIVATION
CHECKLIST
Staffing Levels for IAE in the OSC

Time Event Declared: _____

Place name and note time of arrival on the lines provided in the table below:

Responders	Function Performed	
	Technical Support	Repair and Corrective Actions
Shift	0	(2) Name _____ Time _____ _____
45 Minute	0	0
75 Minute	(1)* Name _____ Time _____	(2) Name _____ Time _____ _____
TOTALS	1	4

GRAND TOTAL OF 5 PEOPLE

(*) Engineering or Supervisor/Manager under current organization.

All the above positions **HAVE/HAVE NOT** been filled within the allotted time frame to activate the Operations Support Center.

Signature Title Date/Time

Submit completed form to the OSC Status Coordinator.

EQUIPMENT ENGINEER
OSC ACTIVATION CHECKLIST

NOTE: You are only required to complete Enclosure 4.16, Fitness for Duty Questionnaire, when reporting to the facility outside of your normal work hours.

INITIALS

- _____ **SIGN** in on the OSC staffing board and put on position badge.
- _____ **SIGN** the OSC Attendance Sheet for a drill, and **ENSURE** Engineering personnel reporting to the OSC also sign in as appropriate. (PIP-0-M-99-2593)
- _____ **IF** a site assembly is in progress or is conducted **SWIPE** your ID badge in the badge reader located in the OSC for personnel accountability.
- _____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- _____ **COMPLETE** Enclosure 4.18 (Pre-Activation Task List) and submit to the OSC Status Coordinator.
- _____ **ESTABLISH** a log of activities.
- _____ **ENSURE** adequate Engineering support/staff is available for emergency response.
- _____ **ENSURE** Enclosure 4.11, page 3 of 3 (Staffing Levels for Engineering Support in the OSC) has been completed and submitted to the OSC Status Coordinator {PIP-M-01-3711}.
- _____ **IDENTIFY AND MAINTAIN** accountability of all Engineering personnel onsite not reporting to the OSC during activation. {PIP-0-M-98-3946}
- _____ **CALL** extra personnel as deemed necessary.
- _____ **PROVIDE** and coordinate Engineering resources as necessary.
- _____ **ENSURE** all engineering teams are properly dispatched through the OSC and all the necessary paperwork is filled out.

NOTE: Repair and Recovery teams should not be dispatched from the OSC without completion of an OSC TASK WORK SHEET. However, during a time critical situation, the team may be dispatched and the task sheet filled out and submitted to the OSC Coordinator as soon as possible. Such time critical dispatches shall receive prior verbal approval from the OSC Coordinator. {PIP-0-M98-3522}

_____ **ENSURE** emergency Repair and Recovery team activities are performed in accordance with approved procedures. Any deviation from license condition and/or NRC regulations are to be approved and documented by the Emergency Coordinator prior to being implemented.

EQUIPMENT ENGINEER
OSC ACTIVATION CHECKLIST

- _____ **ENSURE** emergency Repair and Recovery teams have adequate RP coverage.
- _____ **ENSURE** any team dispatched from the OSC is properly briefed on the task to be performed and communications are established. Utilize the Enclosure 4.19 (OSC TASK WORK SHEET) to conduct briefings.
- _____ **ENSURE** the OSC Coordinator/staff is kept informed of the current status of plant equipment and is immediately notified of any changes that may affect the plant or plant personnel.
- _____ **PROVIDE** adequate turnover when a shift change occurs.
- _____ **ENSURE** all Engineering teams/personnel are accounted for during and after an emergency/drill.
- _____ **PREPARE** for 24-hour coverage as necessary.
- _____ **ENSURE** all original paperwork (enclosures, staffing forms, logs, etc.) is submitted to the OSC Status Coordinator upon termination of the emergency/drill.

EQUIPMENT ENGINEER
OSC ACTIVATION CHECKLIST

Staffing Levels For Engineering Support Personnel

Time Event Declared: _____

Please place name and note time of arrival on the lines provided in the table below:

RESPONDERS NAME	TIME
TOTAL:	

Signature

Title

Date/Time

OSC STATUS COORDINATOR
OSC ACTIVATION CHECKLIST

NOTE: You are only required to complete Enclosure 4.16, Fitness for Duty Questionnaire, when reporting to the facility outside of your normal work hours.

INITIALS

- _____ **SIGN** in on the OSC staffing board and put on position badge.
- _____ **SIGN** the OSC Attendance Sheet for a drill. {PIP-0-M-2593}.
- _____ **IF** a site assembly is in progress or is conducted **SWIPE** your ID badge in the badge reader located in the OSC for personnel accountability.
- _____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}

NOTE: The following step allows the TSC Plant Status Board to display when the TSC Status Coordinator logs on his/her computer.

Set up to display TSC Plant Status as follows: {PIP-M-01-4276}

- _____ Power on the overhead projector.
- _____ Log on the desktop flat screen PC using your logon ID and password.
- _____ Double click on the desktop net meeting icon.
- _____ On "Net Meeting" select the "Call" pull down menu and select "automatically accept calls".
- _____ **ENSURE** Enclosure 4.15 (Minimum Staffing for the Operations Support Center (OSC)) is completed, and the OSC Coordinator/Assistant OSC Coordinator is informed to declare the OSC activated within the **1 hour 15 minute time frame**.
- _____ **ENSURE** all positions (except those marked N/A), complete Enclosure 4.18 (Pre-Activation Task List).
- _____ **ESTABLISH** a log of activities.
- _____ **COMPLETE** the 24 hour OSC Position Staffing Log, page 3 of 3 of this enclosure.
- _____ **IF** any OSC activity is designated as a time critical task (or emergency dispatch), the OSC Coordinator shall give verbal approval prior to actual dispatch. Make a log entry for documentation, noting verbal approval by the OSC Coordinator. {PIP-0-M98-3522}
- _____ **ENSURE** classification posting is current by changing it as the classification changes.

OSC STATUS COORDINATOR
OSC ACTIVATION CHECKLIST

- _____ **CALL** extra personnel as necessary.
- _____ **ENSURE** a Pre-Activation Task List is received from each represented group.
- _____ **MAINTAIN** a log of activities and communications as deemed necessary by the OSC Coordinator or Assistant OSC Coordinator.
- _____ **ENSURE** Enclosure 4.19 (OSC TASK WORK SHEETS) are made available for the emergency Repair and Recovery teams/personnel as needed.

NOTE: Repair and Recovery teams should not be dispatched from the OSC without completion of an OSC TASK WORK SHEET. However, during a time critical situation, the team may be dispatched and the task sheet filled out and submitted to the OSC Coordinator as soon as possible without delaying team dispatch. Such time critical dispatches shall receive prior verbal approval from the OSC Coordinator. {PIP-0-M98-3522}

- _____ **ENSURE** the OSC Task Status Board is maintained with the most current information possible.
- _____ **ENSURE** the OSC Task Work Sheets are completed with the appropriate information prior to being logged on the board.
- _____ **PREPARE** for 24-hour coverage as necessary.
- _____ **ENSURE** all original paperwork (enclosures, staffing forms, logs, etc.) is obtained upon termination of the emergency/drill.
- _____ **ENSURE** all original paperwork is returned to the Emergency Planner in the TSC IF the OSC Emergency Planner position was not staffed.

OSC STATUS COORDINATOR
OSC ACTIVATION CHECKLIST

24 HOUR OSC POSITION STAFFING LOG

Position	Primary		Relief	
	Name (Last, first initial)	*Shift Schedule	Name (Last, first initial)	*Shift Schedule
OSC Coordinator				
Assistant OSC Coordinator				
Operations SRO				
Operations Liaison				
Chemistry Supervisor				
Equipment Engineer				
Safety				
Radiation Protection Supervisor				
Security				
Status Coordinator				
Emergency Planner				
Nuclear Supply Chain Manager				
Mechanical Maintenance Manager				
IAE Manager				
IAE Communications				

*List hours of coverage; i.e. 0800-2000, or 8am-8pm.

OSC IAE COMMUNICATION
OSC ACTIVATION CHECKLIST

NOTE: You are only required to complete Enclosure 4.16, Fitness for Duty Questionnaire, when reporting to the facility outside of your normal work hours.

NOTE: This position is staffed on an as needed basis only.

INITIALS

- **SIGN** in on the OSC staffing board and put on position badge.
- **SIGN** the OSC Attendance Sheet for a drill, and **ENSURE** all IAE Communication personnel reporting to the OSC also sign in as appropriate. {PIP-0-M-99-2593}
- **IF** a site assembly is in progress or is conducted **SWIPE** your ID badge in the badge reader located in the OSC for personnel accountability.
- **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- **ESTABLISH** a log of activities.
- **CALL** out extra personnel as necessary.
- **ENSURE** all the necessary equipment needed to support the OSC is operable (i.e., video conferencing, radios, phone, fax, headsets, page systems, etc.).
- **PREPARE** for 24 hour coverage as necessary.
- **ENSURE** all original paperwork (enclosures, staffing forms, logs, etc.) is submitted to the OSC Status Coordinator upon termination of the emergency/drill.

EMERGENCY PLANNER
OSC ACTIVATION CHECKLIST

NOTE: You are only required to complete Enclosure 4.16, Fitness for Duty Questionnaire, when reporting to the facility outside of your normal work hours.

NOTE: This position is staffed on an as needed basis only.

INITIALS

- **SIGN** in on the OSC staffing board and put on position badge.
- **SIGN** the OSC attendance sheet for a drill. {PIP-0-M-99-2593}
- **IF** a site assembly is in progress or is conducted, **SWIPE** your ID badge in the badge reader located in the OSC for personnel accountability.
- **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP 0-M96-1869}
- **OBTAIN** a copy of RP/0/A/5700/020, Activation of the Operations Support Center (OSC) for reference to help facilitate the activation and operation of the OSC.
- **ESTABLISH** a log of activities.
- **PROVIDE** support for the operation of the OSC.
- **PROVIDE** Emergency Planning support to the groups represented in the OSC.
- **PROVIDE** support to the OSC Coordinator as requested.
- **PROVIDE** support to the OSC Coordinator in review of positions not filled, and help locate/determine qualified replacements.
- **REFERENCE** Emergency Planning Group Manual Section 1.1 (E.P.1.1) as necessary.
- **COLLECT** all original paperwork (enclosures, staffing forms, logs, etc.) from the OSC Status Coordinator upon termination of the emergency/drill.
- **PERFORM** Enclosure 13.1 of PT/0/A/4600/091 (TSC/OSC Inventory and TSC Manuals) at the completion of the drill or event.

**Minimum Staffing For
The Operations Support Center (OSC)**

Required Positions in the OSC	Pre-Activation Task List Completed	Staffing Levels Met		
		Yes	No	Position not Accounted For
Radiation Protection				
Chemistry				
Security				
Mechanical Maintenance				
IAE				

Desired Positions in the OSC To Activate	Pre-Activation Task List Completed	Staffing Levels Met	
		Yes	No
OSC Coordinator	N/A		
Assistant OSC Coordinator	N/A		
Safety			
Nuclear Supply Chain Manager			
IAE Communications (As Needed)	N/A		
Emergency Planning (As Needed)	N/A		
Engineering			
OSC Status Coordinator	N/A		
Operations SRO			
OPS Liaison	N/A		

Enclosure 4.16
Fitness for Duty Questionnaire

RP/0/A/5700/020
Page 1 of 1

Print Name: _____ Employee ID #: _____
Sign Name: _____ ERO Position: _____

HAVE YOU CONSUMED ALCOHOL IN THE LAST FIVE (5) HOURS?

MARK THE APPROPRIATE BOX

No

If No, stop here and fold this form and drop it in the box provided.

YES

If your answer is Yes, take this form to a member of management for observation.

OBSERVATION DETERMINATION

What did you have? _____

How much did you have? _____

Can you perform your function unimpaired? YES NO

In my opinion, observation of this individual indicates the individual is capable of performing his/her ERO function.

Signature Of Management Observer

Date

Fold the form and drop it in the box provided.

McGuire Operations Configuration Control
Card

{PIP 2-M94-0679}

McGUIRE OPERATIONS CONFIGURATION CONTROL CARD								
NAME:						DATE:		
COMPONENT	POSITION REQUESTED	AS FOUND POSITION	POSITION PLACED IN			RETURN TO AS FOUND POSITION		COVERED BY PAPER WORK
			POSITION	INIT	IV	INIT	IV	INIT

COMPONENT	POSITION REQUESTED	AS FOUND POSITION	POSITION PLACED IN			RETURN TO AS FOUND POSITION		COVERED BY PAPER WORK
			POSITION	INIT	IV	INIT	IV	INIT

THIS CARD APPLIES TO THE FOLLOWING

- 1 Track components in plant manually positioned by EP/AP's
- 2 Track components positioned per OMP 7-1 Step 7.2.3.3 and needs approval of licensed operator on shift

OSC Pre-Activation Task List

Total Number of Available Team Members: _____ Group _____ Date _____

Description of Task Already in Progress	Room or Location	Estimated Job Start Time	Estimated Job Completion Time	Number or Name of People from Group at Job Site	Contact can be Made Easily in case of Emergency Yes or No
1)					
2)					
3)					

Submit completed sheet to OSC Status Coordinator.

Task/Description _____

Location/Room: _____

Unit(s): _____

TASK LEADER

Time Out: _____
 Time In: _____
 Team Leader: _____

Team Members/
 Work Group _____

Notify immediately after task
 Is completed (Circle one) C/R Rad. Prot. OPS SRO Mech. IAE CHM SEC
 4137/38 4978 4975 4958 4957 4960 4956

Gen. Tasks Checklist

- 1. Level 1 Safety Assessment
- 2. Dose Extensions Req'd.?
- 3. Special Path Mapped?
- 4. Respirators/Anti-C's?
- 5. Door Key Req'd.?
- 6. Shielding Necessary?
- 7. Breathing Air Available?
- 8. Supply Personnel Notified?
- 9. Power Available?
- 10. Sufficient Lighting?
- 11. Control Room Notified?
- 12. Mobile Equipment Req'd.?
- 13. Ladder/Scaffold Req'd.?

RP INFORMATION

S/RWP: _____ RP Coverage Assigned: Yes No

RP Supervisor Approval _____

OSC STATUS COORDINATOR

Date: _____ Team Name: _____
 Task #: _____

OSC COORDINATOR DISPATCH APPROVAL: _____

(Approval not required prior to dispatch for time critical task.)

TEAM LEADER FOR PERSONS PERFORMING WORK

Work performed/field feed-back: _____

Configuration Control Card Used: Yes No

White - Team Leader

Canary - OSC Status Coordinator

Pink - Task Leader

ASSISTANT OSC COORDINATOR
OSC ACTIVATION CHECKLIST**INITIALS**

NOTE: You are only required to complete Enclosure 4.16 (Fitness for Duty Questionnaire) when reporting to the facility outside of your normal work hours.

- _____ **SIGN** in on the OSC staffing board and put on position badge.
- _____ **SIGN** the OSC attendance sheet for a drill.
- _____ **IF** a site assembly is in progress, or is conducted, **SWIPE** your ID badge in the reader located in the OSC for personnel accountability.
- _____ **CONTACT** your site assembly point and report your location upon activation of the site assembly alarm. {PIP-M-0-M96-1869}
- _____ **ESTABLISH** a log of activities as directed by OSC Coordinator.
- _____ **ASSIST** the OSC Coordinator in gathering information to facilitate the activation of the Operations Support Center.
- _____ **ASSIST** the OSC Coordinator in all aspects of Emergency Response.
- _____ **ACT** as a receiver of information when the OSC Coordinator is unavailable and relay the information to the OSC Coordinator in a timely manner.
- _____ **PROACTIVELY** seek information when the OSC Coordinator is in a reactive mode.
- _____ **MAKE** face-to-face confirmation of information provided when the OSC Coordinator is unavailable.
- _____ **SERVE** as the OSC Coordinator when needed.
- _____ **ASSIST** in making decisions on mitigation strategies, contingency plans and protective actions for plant personnel.
- _____ **ENSURE** all completed paperwork(enclosures, staffing forms, logs, etc) is submitted to the OSC Status Coordinator upon termination of the emergency/drill..