

50-387/388

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~~TO: FLAIM\*LAUREL B~~ 09/26/2002  
LOCATION: DOCUMENT CONTROL DESK  
FROM: NUCLEAR RECORDS DOCUMENT CONTROL CENTER  
(NUCSA-2)

THE FOLLOWING CHANGES HAVE OCCURRED TO THE HARDCOPY OR ELECTRONIC MANUAL ASSIGNED TO YOU:

207 - 207 - SITE SUPPORT MANAGER: EMERGENCY PLAN-  
POSITION SPECIFIC PROCEDURE

REMOVE MANUAL TABLE OF CONTENTS DATE: 09/19/2002

ADD MANUAL TABLE OF CONTENTS DATE: 09/25/2002

CATEGORY: PROCEDURES TYPE: EP  
ID: EP-PS-207  
ADD: PCAF 2002-1591 REV: N/A

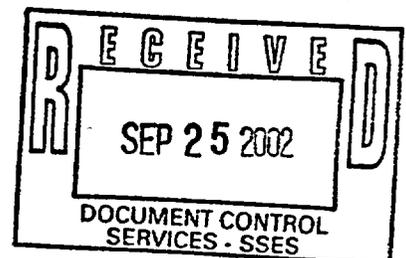
UPDATES FOR HARD COPY MANUALS WILL  
WITHIN 5 DAYS IN ACCORDANCE WITH  
PROCEDURES. PLEASE MAKE ALL CHANGES  
ACKNOWLEDGE COMPLETE IN YOUR NIMS  
RECEIPT OF HARD COPY. FOR ELECTRONIC  
ELECTRONICALLY REVIEW THE APPROPRIATE DOCUMENTS AND  
ACKNOWLEDGE COMPLETE IN YOUR NIMS INBOX.

**NOTE: Additional Tab  
Changes Attached**

A045

## PROCEDURE CHANGE PROCESS FORM

1. PCAF NO. <u>2002-1591</u>	2. PAGE 1 OF <u>28</u>	3. PROC. NO. <u>EP-PS-207</u> REV. <u>10</u>
4. FORMS REVISED - <u>B R 16</u> , - <u>   </u> R <u>   </u>		
5. PROCEDURE TITLE EOF SUPPORT SUPERVISOR-Emergency-Plan-Position-Specific Instruction		
6. REQUESTED CHANGE PERIODIC REVIEW <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES INCORPORATE PCAFS <input type="checkbox"/> NO <input type="checkbox"/> YES # <u>   </u> # <u>   </u> # <u>   </u> # <u>   </u> REVISION <input type="checkbox"/> PCAF <input checked="" type="checkbox"/> DELETION <input type="checkbox"/> (CHECK ONE ONLY)		
7. SUMMARY OF / REASON FOR CHANGE  Tab B, Task 3, added note stating: "The Recovery Manager can delegate ENR approval responsibility to another qualified RM located in the facility."  <div style="text-align: right;">Continued <input type="checkbox"/></div>		
8. DETERMINE COMMITTEE REVIEW REQUIREMENTS (Refer to Section 6.1.4) PORC REVIEW REQ'D? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES		9. PORC MTG# <u>NA</u>
<b>BLOCKS 11 THRU 16 ARE ON PAGE 2 OF FORM</b>		
17. <u>William Tabor</u> / <u>3665</u> / <u>9-25-02</u> PREPARER                  ETN                  DATE (Print or Type)	18. COMMUNICATION OF CHANGE REQUIRED? <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES    (TYPE) <u>e-mail to all EOFSM's</u>	
19. <u>Jeffrey Alwood</u> RESPONSIBLE SUPERVISOR <u>9/25/02</u> DATE	SIGNATURE ATTESTS THAT RESPONSIBLE SUPERVISOR HAS CONDUCTED QADR AND TECHNICAL REVIEW UNLESS OTHERWISE DOCUMENTED IN BLOCK 16 OR ATTACHED REVIEW FORMS. CROSS DISCIPLINE REVIEW (IF REQUIRED) HAS BEEN COMPLETED BY SIGNATURE IN BLOCK 16 OR ATTACHED REVIEW FORMS.	
20. <u>Jeffrey Alwood</u> FUM APPROVAL <u>9/25/02</u> DATE		
21. RESPONSIBLE APPROVER <u>NA</u> INITIALS                  DATE		ENTER N/A IF FUM HAS APPROVAL AUTHORITY



## PROCEDURE CHANGE PROCESS FORM

1. PCAF NO. 2002-1591 | 2. PAGE 2 OF 28 | 3. PROC. NO. EP-PS-207 REV. 10

11. This question documents the outcome of the 50.59 and 72.48 Review required by NDAP-QA-0726. Either 11a, b, c or d must be checked "YES" and the appropriate form attached or referenced.
- a. This change is an Administrative Correction for which 50.59 and 72.48 are not applicable.  YES  N/A
- b. This change is a change to any surveillance, maintenance or administrative procedure for which 50.59 and 72.48 are not applicable.  YES  N/A
- c. This change is bounded by a 50.59/72.48 Screen/Evaluation, therefore, no new 50.59/72.48 Evaluation is required.  YES  N/A  
Screen/Evaluation No. \_\_\_\_\_
- d. 50.59 and/or 72.48 are applicable to this change and a 50.59/72.48 Screen/Evaluation is attached.  YES  N/A
12. This change is consistent with the FSAR or an FSAR change is required.  YES  
Change Request No. \_\_\_\_\_
13. Should this change be reviewed for potential effects on Training Needs or Material?  YES  NO  
If YES, enter an Action Item @ NIMS/Action/Gen Work Mech/PICN
14. Is a Surveillance Procedure Review Checklist required per NDAP-QA-0722?  YES  NO
15. Is a Special, Infrequent or Complex Test/Evolution Analysis Form required per NDAP-QA-0320? (SICT/E form does not need to be attached.)  YES  NO

16. Reviews may be documented below or by attaching Document Review Forms NDAP-QA-0101-1.

REVIEW	REVIEWED BY WITH NO COMMENTS	DATE
QADR	_____	_____
TECHNICAL REVIEW	_____	_____
REACTOR ENGINEERING/NUCLEAR FUELS *	_____	_____
IST **	_____	_____
OPERATIONS	_____	_____
NUCLEAR SYSTEMS ENGINEERING	_____	_____
NUCLEAR MODIFICATIONS	_____	_____
MAINTENANCE	_____	_____
HEALTH PHYSICS	_____	_____
NUCLEAR TECHNOLOGY	_____	_____
CHEMISTRY	_____	_____
OTHER <u>10 CFR 50.545g</u>	<u>William Adu</u>	<u>9-25-02</u>

\* Required for changes that affect, or have potential for affecting core reactivity, nuclear fuel, core power level indication or impact the thermal power heat balance. <sup>(58)</sup>

\*\* Required for changes to Section XI Inservice Test Acceptance Criteria.

**MAJOR TASK:**

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Manage external communications from the EOF.

**SPECIFIC TASKS:**

**HOW:**

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1. Assume responsibility for the "Emergency Notification Report" until arrival of the EOF Communicator.

**NOTE:**

Blank ENR Forms are available at the EOF Communicator's work area.

- 1a. Write the Control number in the upper right corner.

(1) The control number should include the EOF followed by a sequential number. (Example: EOF-1)

- 1b. Check appropriate block under title, (is or is not a drill).

- 1c. Fill in your name, call back telephone number and the military time.

- 1d. Check the emergency classification.

- 1e. Write in unit involved, the time and date current classification was declared.

- 1f. Check if Initial, Escalation or No Change in classification status.

- 1g. Under "BRIEF NON-TECHNICAL DESCRIPTION OF THE EVENT", write:

(1) EAL number only for a change in classification.

**NOTE:**

Use the EAL number obtained from the "Emergency Action Level Offsite Reference Manual."

**SPECIFIC TASKS:**

**HOW:**

**HELP**

**"Emergency Action Level Offsite  
 Reference Manual"**

- (2) **"No Change" for Static Update.**
- (3) **"Information provided by the  
 Recovery Manager" for  
 Significant Event(s).**

1h. Check one of the **"NON-ROUTINE  
 RADIOLOGICAL RELEASE IN  
 PROGRESS"** information blocks.

**NOTE:**

**Verify release data with the Dose  
 Assessment Supervisor of Staffer.  
Do not provide a Protective Action  
 Recommendation.**

1i. Fill in the average wind speed and  
 direction using data obtained from the  
 ten meter primary meteorological tower.

**NOTE:**

**Primary meteorological tower data  
 available on PICSY, (E-Plan Menu,  
 Met Vent Display).**

1j. Check appropriate block for **"This is or  
 is not a drill."**

2. Edit the Emergency Notification  
 Report.

2a. Ensure the form is clear and easy to  
 understand.

2b. Avoid use of abbreviations and  
 acronyms.

2c. Ensure the Protective Action  
 Recommendation **is not** included on the  
 form.

**SPECIFIC TASKS:**

**HOW:**

3. Obtain approval of the Emergency Notification Report.

- 3a. Review the completed form with the Recovery Manager.
- 3b. Assure agreement on technical content.
- 3c. Obtain signature approval, filling in the time and date of his approval.

**NOTE:**

The Recovery Manager can delegate ENR approval responsibility to another qualified RM located in the facility.

He can also delegate approval responsibility to the EOF Support Supervisor except for a change in classification.

4. Ensure the "Emergency Notification Report" is distributed.

4a. Use the following schedule for distribution of the "Emergency Notification Report."

\* **UPGRADE/DOWNGRADE:**

Complete and transmit the ENR within fifteen minutes of classification or reclassification.

\* **STATIC UPDATES::**

Complete and transmit the ENR every hour on the half hour. (0730, 0830, 0930, etc.)

**NOTE:**

When the initial notifications regarding classifications are completed during the first half of an hour, the static update is not required until the next hour on the half hour.

PCAF

**SPECIFIC TASKS:**

**HOW:**

\* **SIGNIFICANT EVENTS:**

Complete and transmit the ENR when:

- (1) Recovery Manager has assumed command and control from the Emergency Director.
- (2) Site accountability is completed.
- (3) Evacuation of non-essential personnel is completed.
- (4) When directed by the Recovery Manager.
- (5) When the emergency event is terminated.

4b. Distribution of the three part ENR form:

- (1) **White and pink copy to the Administrative Assistant for distribution:**
  - \* White copy sent to TSC and MOC via fax.
  - \* Pink copy posted outside the Site Support Office.
- (2) **Yellow copy to EOF Communicator.**

5. Ensure required notifications are made on time

**HELP**

**Notification Matrix  
See TAB 9**

**SPECIFIC TASKS:**

**HOW:**

6. Complete the "PROTECTIVE ACTION DECISION DOCUMENTATION FORM" when a Protective Action Recommendation is determined by the Recovery Manager.

6a. Obtain the correct form from the Site Support Office, EOF Communicator's work area.

(1) Attachment A for "Airborne Release"

(2) Attachment B for "Liquid Release"

**HELP**

**Emergency Forms  
 See TAB 8**

6b. Write the time and date of the PAR decision and obtain the Recovery Manager's signature.

6c. Write in the time PEMA was notified and by whom.

6d. Write in the time the NRC was notified and by whom.

6e. Deliver the completed form to the EOF Communicator.

**NOTE:**

The EOF Communicator can be delegated to maintain this form.

7. Ensure the completed "Protective Action Recommendation Form" is distributed.

7a. The "Protective Action Recommendation Form" is:

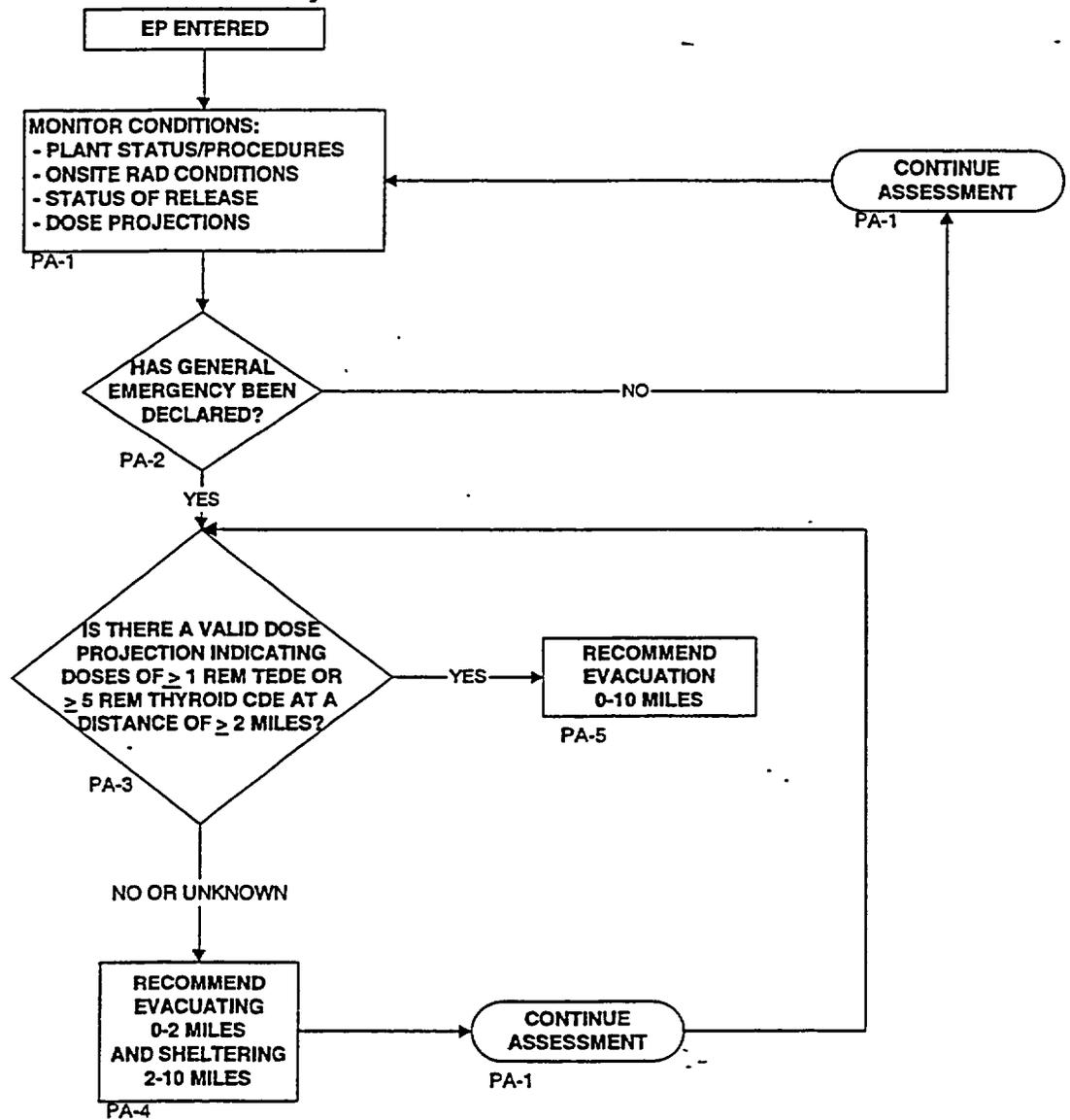
(1) Generated by the Radiological Liaison.

(2) Distributed by the Administrative Assistant to the TSC and MOC via telecopy unit located in the Site Support Office.

**SPECIFIC TASKS:**

**HOW:**

- 
- |  |   |
|--|---|
| 8. Check with the MOC to ensure needed information on the emergency is being obtained. | 8a. Respond to MOC questions.   |
| 9. Ensure the EOF Communicator is providing the ENR and PAR forms to the NRC.          | 9a. Transmitted via the Emergency Notification System (ENS), telephone.   |
| 10. Maintain a history of all released information.                                    | 10a. Specifically, ensure a history log is maintained of when and to whom the "Emergency Notification Report" and "Protective Action Recommendation" forms were released. |



**NOTES:**

1. PA-4 CAN BE USED TO REFER TO SECTION 4.1 OF THE PROCEDURE FOR MORE DETAILED INFORMATION ON THE ACTION TO BE TAKEN.
2. DOSE PROJECTIONS DO NOT INCLUDE DOSE ALREADY RECEIVED
3. TEDE - WHOLE BODY (TEDE) IS THE SUM OF EFFECTIVE DOSE EQUIVALENT RESULTING FROM EXPOSURE TO EXTERNAL SOURCES. THE COMMITTED EFFECTIVE DOSE EQUIVALENT (CEDE) FROM ALL SIGNIFICANT INHALATION PATHWAYS AND THE DOSE DUE TO GROUND DEPOSITION.
4. CDE - COMMITTED DOSE EQUIVALENT TO THE CHILD THYROID

PAR Decision at:

\_\_\_\_\_/\_\_\_\_\_  
(Time) (Date)

By:

\_\_\_\_\_

PEMA notified at:

\_\_\_\_\_  
(Time)

By:

\_\_\_\_\_

NRC notified at:

\_\_\_\_\_  
(Time)

RADIONUCLIDE	Isotopic Limit (uCi/ml)
Ag-110m	1.1E-6
As-76	7.2E-7
Ba-140	1.1E-6
Ce-141	3.6E-6
Co-58	1.1E-4
Co-60	1.2E-6
Cr-51	7.2E-5
Cs-134	2.4E-4
Cs-137	2.4E-6
Fe-55	2.4E-5
Fe-59	2.4E-6
H-3	2.4E-4
I-129	1.2E-8
I-131	3.6E-8
La-140	7.2E-7
Mn-54	3.6E-6
Mo-99	7.2E-6
Na-22	4.8E-6
Nb-95	3.6E-6
Ni-59	3.6E-6
Ni-63	6.0E-7
P-32	3.6E-7
Ru-103	2.4E-6
Ru-106	3.6E-7
Sb-124	7.2E-7
Sb-125	3.6E-6
Sr-89	2.4E-7
Sr-90	9.6E-6
Tc-99m	1.1E-5
Y-90	7.2E-7
Zn-65	3.6E-6
Zr-95	2.4E-6

**ENTRY:**  
INDICATIONS OF A POTENTIAL LIQUID RELEASE  
- UNISOLABLE RADWASTE TANK RELEASE  
- LEAK TO COOLING TOWER BASIN  
- LEAK TO SPRAY POND

PL-1

ENSURE CHEM/ESD TAKES AND ANALYZES SAMPLES

PL-2

IS RELEASE > OR = TECH REQUIREMENTS (AT RELEASE POINT)?

PL-3

NO ACTION REQUIRED

CONTINUE MONITORING

Yes

RAD PERSONNEL NOTIFY DANVILLE AND BRP THAT A RELEASE HAS OCCURRED

PL-4

CHEM/FTD EVALUATES RELEASE vs PAG

PL-5

DOES RELEASE EXCEED ANY OF THE TABLE LIMITS OR DOES THE SUM OF FRACTIONS EXCEED 1.0 AT DANVILLE?

PL-6

RAD PERSONNEL NOTIFY DANVILLE THAT NO PAR IS REQUIRED

PL-8

Yes

RAD PERSONNEL NOTIFY DEP/BRP FOR DANVILLE TO DIVERT DRINKING WATER SUPPLY & ESTIMATED TIME OF ARRIVAL OF RELEASE AT DANVILLE

PL-7

**NOTES:**

1. PL-# CAN BE USED TO REFER TO SECTION 4.2 OF THE PROCEDURE FOR MORE DETAILED INFORMATION ON THE ACTION TO BE TAKEN.
2. CALLS TO DANVILLE ARE COURTESY INFORMATION CALLS ONLY. PROTECTIVE ACTION RECOMMENDATION CALLS MUST BE MADE BY DEP/BRP.

PAR Decision at: \_\_\_\_\_ / \_\_\_\_\_  
(Time) (Date)

By: \_\_\_\_\_

PEMA notified at: \_\_\_\_\_  
(Time)

By: \_\_\_\_\_

NRC notified at: \_\_\_\_\_  
(Time)